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The contributions of physician assistants and nurse practitioners in primary health care

After a half-century of development, the physician assistant and nurse practitioner are not only enmeshed in American culture but also deployed in 15 other countries. Their contributions to the delivery of primary health care is not only growing but serving as critical players able to backfill where scarce medical care delivery systems are present. The *raison d'etre* for their development was the shortage of generalists and the demands for health care services in underserved communities. What has emerged is a cadre of approximately 250,000 clinically active PAs and NPs that are providing a wide range of services within the full spectrum of North American communities – from Manitoba to The Virgin Islands. How they are utilized in primary health care and to what extent will be presented. Their economic and social contributions will be illustrated along with the benefits to physicians, medical teams, and the social stability of small communities. Growing evidence reveals that the presence of PAs/NPs in small and medium medical groups helps improve access, lower liability exposure, and malpractice rates, and reduce the likelihood of primary care physician burnout. The economics of PA/NP employment in primary care service delivery is only now being understood as significant. It is not enough to know that their wages are less than half of a family medicine physician, but their annual productivity matches that of a family medicine physician.

Biography

Roderick S Hooker is a health policy consultant with an interest in organizational efficiency. He spent two decades with Kaiser Permanente as a health services researcher, as a PA and then moved to the University of Texas and the Department of Veterans Affairs in Dallas, Texas. Following the VA he became a Senior Director with The Lewin Group in Washington, DC, a health policy-consulting firm. At Lewin much of his work focused on modeling the supply and demand of various health professionals: PAs, nurses, physicians, and others. He is a cofounder of the International Health Workforce Collaborative that meets biennially to discuss medical organizational economics. Over the past decade, he served as a consultant to the Ministry of Health in Ontario and New Brunswick. A similar consultancy was in Queensland and Scotland developing their PA corps. He is currently retired and lives in Southwest Washington State.

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