

# 21<sup>st</sup> Century Health Care Workforce

NAM Vital Directions for Health and Health Care  
Symposium: The North Carolina Experience

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## Three points in 6 minutes (or less)

1. Unrealistic to think physician workforce, alone, can provide the care needed by millions of Americans, particularly vulnerable populations in rural areas of NC and throughout the southeast
2. It is imperative to use the current (and future) health workforce wisely
3. Lifting restrictions on nurse practitioners in NC would be a significant step to *increase access*
  - Would demonstrate North Carolina's leadership which other states in the region could emulate

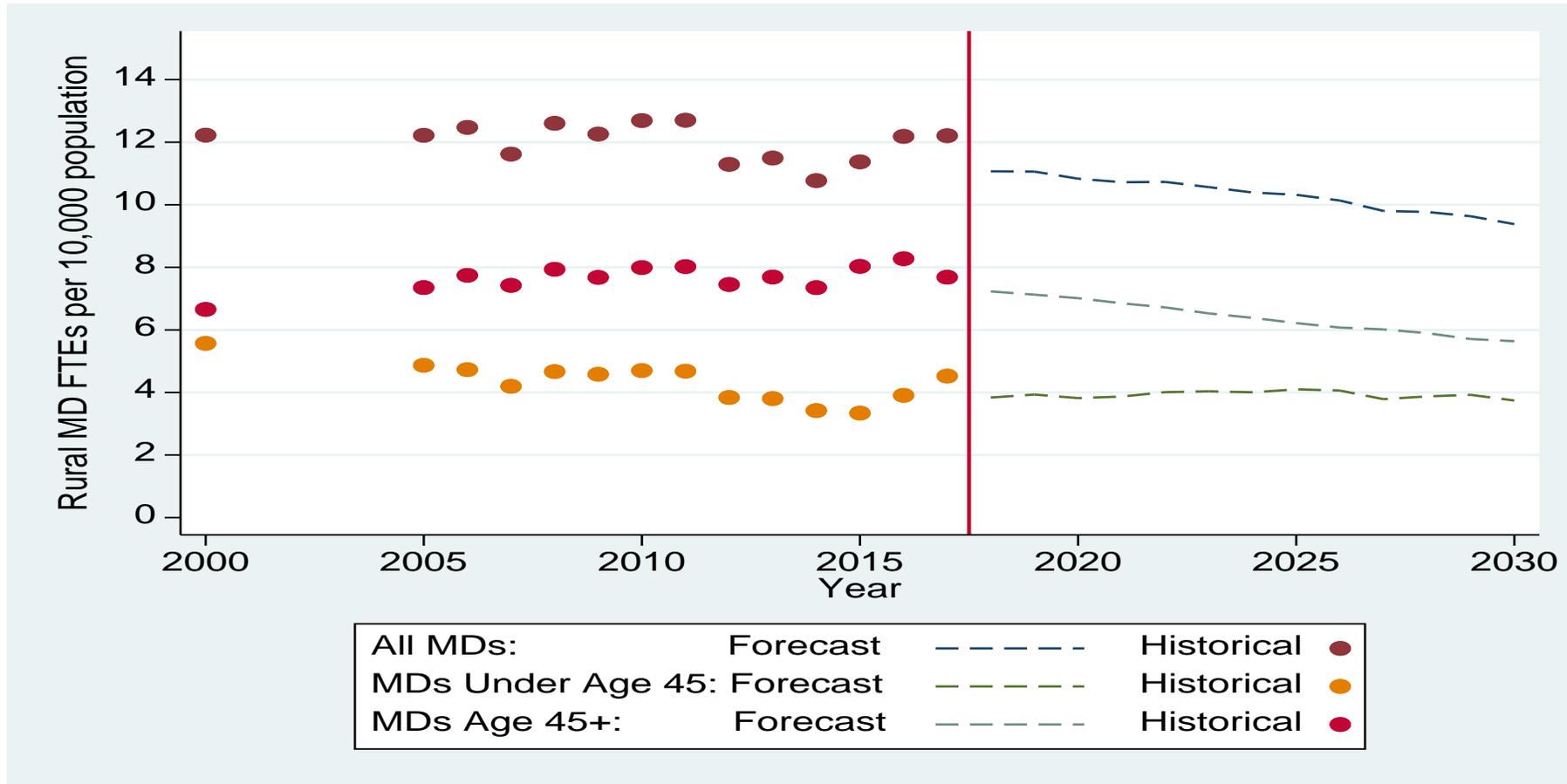
1. The physician workforce, alone, is unable to address the primary care needs of the nation, particularly for vulnerable populations living in rural areas

- In 2019, 78 million people have inadequate access to primary care, 7,181 health professional shortage areas in the US<sup>1</sup>
- 66% of HPSAs for primary care (62% mental health) located in rural or partially rural areas<sup>1</sup>
- By 2032, shortages of up to 55,200 primary care physicians and 66,800 non-primary care physicians<sup>2</sup>

<sup>1</sup> Health Resources and Services Administration. Designated health professional shortage areas. 2019. <https://data.hrsa.gov/topics/health-workforce/shortage-areas>

<sup>2</sup> Association of American Medical Colleges. IHS Markit. 2019 update. April 2019 The complexities of physician supply and demand: Projections from 2017 to 2032. [https://aamc-black.global.ssl.fastly.net/production/media/filer\\_public/85/d7/85d7b689-f417-4ef0-97fb-ecc129836829/aamc\\_2018\\_workforce\\_projections\\_update\\_april\\_11\\_2018.pdf](https://aamc-black.global.ssl.fastly.net/production/media/filer_public/85/d7/85d7b689-f417-4ef0-97fb-ecc129836829/aamc_2018_workforce_projections_update_april_11_2018.pdf)

Number of physicians per 10,000 population in rural areas is projected to decrease 23% through 2030



Skinner, L., Staiger, D., Auerbach, D., Buerhaus, P. Implications of an Aging Rural Physician Workforce. *The New England Journal of Medicine*. (July 25, 2019); 381(4): 299-301

## 2. Imperative to use the current (and future) health workforce wisely: Projections of MDs, NPs and PAs through 2030

	2001	2010	2016	2030 (Projected)	Ave growth rate 2016 to 2030 (Projected)
Physicians	711,357	862,698	920,397	1,076,360	1.1%
NPs	64,800	91,697	157,025	396,546	6.8%
PAs	44,282	88,097	102,084	183,991	4.3%
NPs & PAs per 100 MDs	15.3	20.8	28.2	53.9	

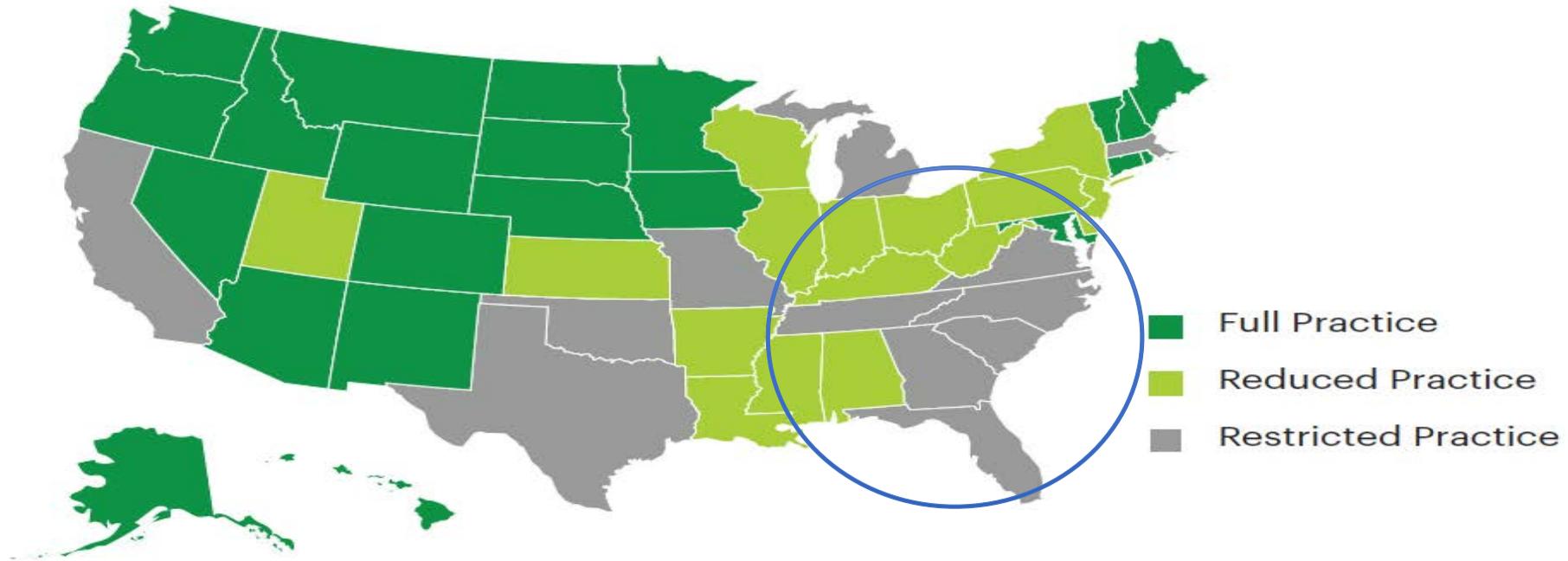
Auerbach, D., Staiger, D., Buerhaus, P. Growing ranks of advanced practice clinicians — Implications for the physician workforce. *The New England Journal of Medicine*. June 21, 2018. 378;25:2358-2360.

## Using resources wisely: Growing evidence shows

- Primary care nurse practitioners (PCNPs) are more likely than physicians to practice in rural areas – precisely where there are more uninsured and increasingly fewer physicians
- PCNPs are more likely than physicians to take care of vulnerable populations – women, non-whites, American Indians, poor, disabled, and dual eligibles
- PCNPs cost Medicare less than PCMDs, yet quality of care is comparable or better, including vulnerable populations
- State-level scope of practice restrictions placed on NPs do not protect people from low quality clinicians, but *decreases access to care*

3. Lifting restrictions on NP scope of practice would be a significant step to increase access to care in NC

### Nurse Practitioners' Scope of Practice Laws

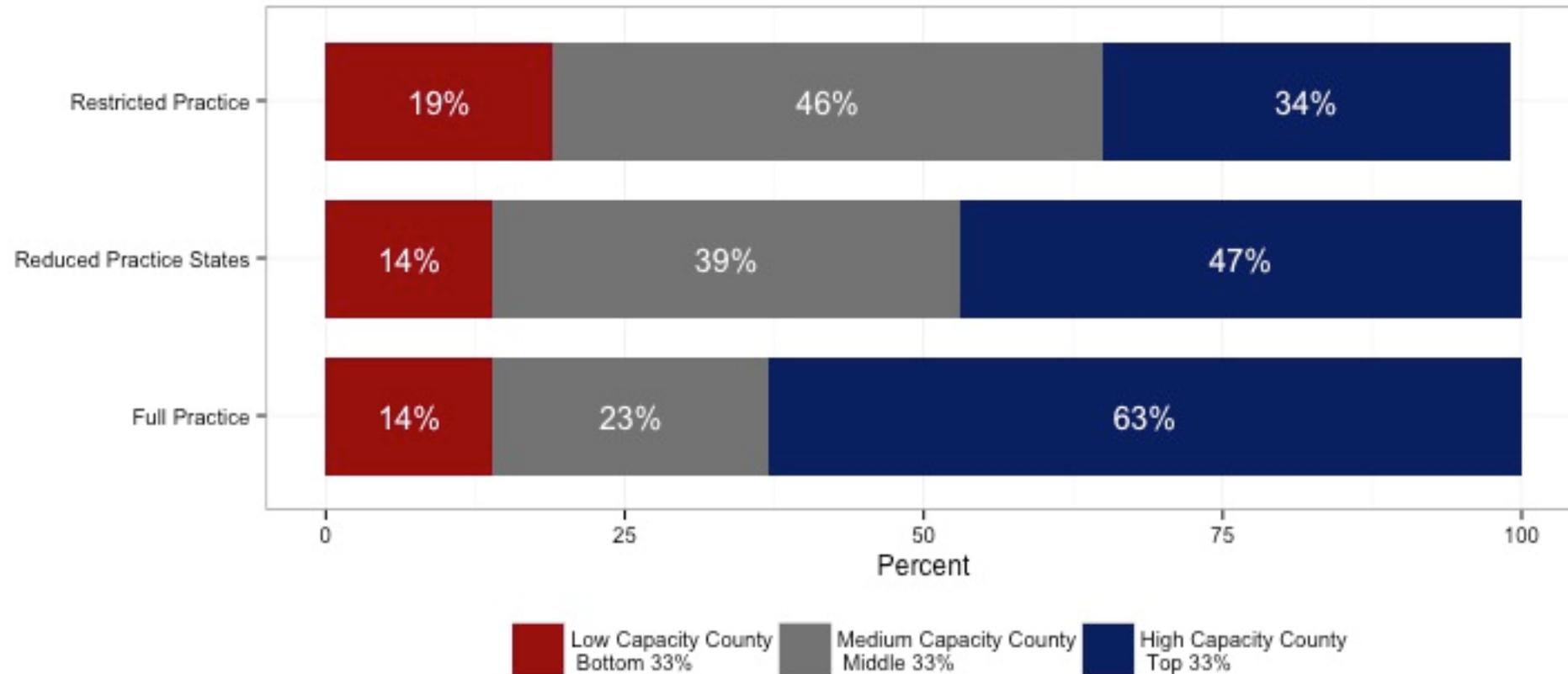


**Full practice – 23 states**

**Reduced practice – 16 states**

**Restricted practice – 12 states**

People living in restricted and reduced practice states have significantly less geographic access to primary care



Graves, J., Mishra, P., Dittus, R., Parikh, R., Perloff, J., Buerhaus, P. Role of geography and nurse practitioner scope of practice In efforts to expand primary care system capacity. *Medical Care*. 54(1): 81-89. 2015.

## In Sum

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