

Advanced Practice Providers in Gastroenterology

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Disclosures

• None

Objectives

- Review Advanced Practice Provider (APP) roles and scope of practice
- Discuss utilization and role of APPs in gastroenterology

Advanced Practice Providers (APPs)

Include:

- Nurse Practitioners (NPs)
- Physician Assistants (PAs)
- Certified Registered Nurse Anesthetists (CRNAs)
- Certified Nurse Midwives (CNM)
- Clinical Nurse Specialists (CNS)

Previously referred to as:

- Mid-level providers
- Physician extenders
- Non-physician providers
- Non-physician clinicians
- Allied health professionals

APPs: Who Are We?



	NURSE PRACTITIONERS1	PHYSICIAN ASSISTANTS ²
Education	Registered Nurses (RNs) with graduate education (Master's or Doctoral degrees)	Bachelor's degree plus 27 months or 3 year Master's in PA Studies
Established	1965	1967
Number	290,000 as of 2020	140,000 as of 2020
Visits (per year)	> 1,000,000,000	> 400,000,000
Certification	National Board Certification Renewed every 5 years	National Board Certification Recertification every 10 years
Licensure	By state	By state

¹ American Association of Nurse Practitioners (AANP), 2020

² American Academy of Physician Assistants (AAPA), 2018

APPs in Gastroenterology

Estimated shortage of 54,100 and 139,000 physicians in primary and specialty care by 2033¹

By 2025, greatest shortages are projected for²:

- Cardiologists (7,080 FTEs)
- Gastroenterologists (1,630 FTEs)
- Hematologists/Oncologists (1,400 FTEs)
- Pulmonologists (1,400 FTEs)

¹ Association of American Medical Colleges (AAMC), 2020

² U.S. Department of Health and Human Services (DHHS), Health Resources and Services Administration (HRSA), 2016



An official website of the United States government Here is how you know >

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NP & PA listed among the fastest growing occupations over the next decade

OCCUPATIONAL OUTLOOK HANDBOOK

Occupational Outlook Handbook >

Fastest Growing Occupations

Fastest growing occupations: 20 occupations with the highest percent change of employment between 2019-29.

Click on an occupation name to see the full occupational profile.



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Nurse Practitioners

- Order, perform, interpret diagnostic tests and procedures
- Diagnose and treat acute and chronic conditions
- Prescribe medications
- Develop treatment plans
- Provide patient education & counseling

Physician Assistants

- Order, perform, interpret diagnostic tests and procedures
- Diagnose and treat acute and chronic conditions
- Prescribe medications
- Develop treatment plans
- Provide patient education & counseling

- Trained in the nursing model
- Practice authority determined by states laws (full, reduced, restricted)
- Trained in the medical model
- Most state laws require agreement with a specific physician in order to practice

NP & PA Scope of Practice

Collaboration or Supervision

Requirements

Prescriptive authority

Individual state laws

Organization job descriptions, policies, bylaws

Level of physician involvement

Services provided

New Legislation
Affecting NP &
PA Scope of
Practice in
California



SB-697

- PAs
- Effective January 1, 2020

AB-890

- NPs
- Signed into law by Governor Newsom on September 29, 2020
- NPs can practice independently starting Jan. 1,
 2023 if they meet the requirements

SB-697

Practice agreement replaces the Delegation of Services Agreement (DSA)

- Written agreement developed through collaboration among one or more physicians and surgeons and one or more physician assistants
- Defines the medical services the PA is authorized to perform

No longer requires medical chart reviews or cosignatures by a supervising physician

AB-890



- Establishes the Nurse Practitioner Advisory Committee
- The bill, beginning January 1, 2023, would also authorize a nurse practitioner to perform functions without standardized procedures outside of specified settings or organizations in accordance with specified conditions and requirements if the nurse practitioner holds an active certification issued by the board.

APPs in Gastroenterology

60-70 million

• Americans affected by digestive diseases per year¹

1,630 FTE

• Projected shortage of gastroenterologists by 2025²

>800

Members in GHAPP

1 in 4

• Specialty practices in 2016 employed an APP³

¹ U.S. Department of Health and Human Services, National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), 2009

² U.S. Department of Health and Human Services (DHHS), Health Resources and Services Administration (HRSA), 2016

³ Martsolf et al. JAMA Intern Med. 018 Apr 30. doi: 10.1001/jamainternmed.2018.1515. [Epub ahead of print]

Twitter Poll

85% of respondents work with APPs (n=47)





Monica Nandwani @Monica_Nandwani

As an Advanced Practice Provider in #Gastroenterology, I would like to ask the #GITwitter community how many of you work with #APPs in your practice/group? Responses will be used for an upcoming presentation Representation Thank you in advance!

#nursepractitioner #physicianassistant

Yes, I work with APPs

85%

No APPs in our GI group

15%

47 votes · Final results

3:04 PM · 10/4/20 · Twitter for iPhone

APPs in Gastroenterology

Table. Percent of Physician Practices With Advanced Practice Clinicians and the Percent Change From 2008 to 2016														
GI Practices with APPs (%)			tal Practices, No.		Any Advanced Practice Clinician, %		Any NP, %			Any PA, %				
			2008	2016	2008	2016	Change	2008	2016	Change	2008	2016	Change	
				32 682	165 655	23.2	28.3	21.7	14.4	19.2	32.6	11.6	14.0	20.3
	2008	2016	% 个	37 178	109 125	20.2	23.3	15.7	13.6	16.3	19.9	8.3	9.9	19.3
	2000	2010	spi cialties	22 881	22 185	17.8	20.6	15.8	5.8	7.7	32.6	13.6	15.3	12.0
		Multispecialty		2 623	34 345	40.5	49.0	20.9	26.3	35.5	34.9	22.4	26.1	16.4
APP	25.1	28.7	14.2	.2 909	16 535	14.7	17.4	18.4	13.1	15.9	20.9	2.2	2.7	19.2
		Obstetrics/	ynecology	.2 676	13 148	29.5	29.3	-0.7	25.3	25.3	0.2	6.1	6.5	5.7
NID	4 - 4	10 2	ogy 34 7	9939	10 505	8.0	0.7	-10.8	0.3	0.3	3.7	0.6	0.5	-9.1
NP	15.4	19.2	24.7	6142	8483	30.3	31.0	2.4	22.1	24.3	9.6	12.7	12.9	1.8
				6758	7293	28.0	29.1	3.9	4.9	7.0	43.0	25.3	25.4	0.6
PA	12.5	14.4	15.1	6213	6400	11.2	13.8	24.0	5.4	7.6	40.1	6.6	7.5	14.6
ГА	PA 12.3	±htt.atty -	13.1	3814	5162	13.8	21.3	54.2	9.5	15.6	64.5	5.4	8.2	52.4
		Plastic surg	Plastic surgery		4177	6.4	9.8	54.2	2.7	3.8	39.8	3.9	6.4	62.9
		Dermatolog	у	J420	0041	27.4	50.5	32.3	0.4	11.5	50.0	21./	29.5	33.0
		Gastroenter	Gastroenterology		5496	25.1	28.7	14.2	15.4	19.2	24.7	12.5	14.4	15.1
		Family practice		30 322	31 936	36.7	44.8	22.1	22.4	31.6	41.0	18.4	21.0	13.9
Internal medicine		22 514	22 424	18.3	23.9	30.8	12.0	17.6	46.2	7.7	9.3	21.3		
		Pediatrics		12 164	12 939	27.9	34.3	22.8	23.0	29.3	27.3	7.3	9.0	22.4

Abbreviations: NP, nurse practitioner; PA, physician assistant.

rheumatology, sleep medicine, sports medicine, urology, vascular and interventional radiology.

^a Specialty practices include medical specialties: addiction medicine, adolescent medicine, aerospace medicine, allergy/immunology, anesthesiology, cardiology, critical care medicine, dermatology, dialysis, emergency medicine, endocrinology, gastroenterology, general preventive medicine, genetic specialist, gynecologic oncology, holistic medicine, infectious disease, nephrology, neurology, nuclear medicine, obstetrics/gynecology, occupational medicine, oncology/hematology, ophthalmology, otolaryngology, pain management. physical medicine/rehab, psychiatry, pulmonology,

^b Surgical specialties include bariatrics, colorectal surgery, general surgery, head and neck surgery, neurological surgery, orthopedic surgery, plastic surgery, thoracic surgery, transplant surgery, trauma surgery, and vascular surgery.

^c Primary care includes family practice, general practice, geriatric medicine, internal medicine, internal medicine/pediatrics, and pediatrics.

APPs in Gastroenterology

- APPs have demonstrated positive outcomes¹⁻³
- APP role varies based on:
 - Type of practice (private versus academic)
 - Inpatient versus outpatient
 - Institutional policies
 - State regulations

¹ Newhouse et al. Nurs Econ. 2011 Sep-Oct;29(5):230-250

² Capstack et al. J Clin Outcomes Manag. 2016 Oct;23(10), 455-461.

³ Moses RE, McKibbin RD. Am J Gastroenterol. 2017 Apr;112(4):530-531.

APPs in Gastroenterology: Roles & Responsibilities^{1,2}

Inpatient

- Admission history & physical
- Daily rounds
- Hospital care management
- Coordination of referrals
- Arrange endoscopic procedures
- Organize discharge
- Ensure outpatient follow-up

¹ Moses RE, McKibbin RD. Am J Gastroenterol. 2017 Apr;112(4):530-531.

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Outpatient

- Clinic visits (independent or shared)
- Triage phone calls and health portal messages
- Discuss diagnostic test results and treatment plans
- Coordinate care
- Provide patient education
- Post-admission follow-up

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APPs in Gastroenterology: Roles & Responsibilities^{1,2}

Inpatient	Outpatient	Procedural
Admission history & physical	Clinic visits (independent	Endoscopic procedures
 Daily rounds 	or shared)	(EGD, colonoscopy, flexible sigmoidoscopy)
Hospital care management	 Triage phone calls and health portal messages 	 Paracentesis
 Coordination of referrals 	 Discuss diagnostic test 	• Liver biopsies
 Arrange endoscopic procedures 	results and treatment plans	 Motility study interpretation (HRM, ARM,
Organize discharge	 Coordinate care 	pH impedance)
Ensure outpatient follow-up	 Provide patient education 	Breath test interpretation
	 Post-admission follow-up 	 Clinical trials

¹ Moses RE, McKibbin RD. Am J Gastroenterol. 2017 Apr;112(4):530-531.

² Wagonfeld JB, Murphy RF. Gastrointest Endosc Clin N Am. 2006 Oct;16(4):719-25.

APPs in Gastroenterology: Determining Practice Fit

Most GI APPs do not undergo formalized post-graduate training

• 3 APP fellowship programs (Hopkins, Swedish Medical Center, AASLD)

Assess needs of the practice and tailor APP role

On-boarding/orientation period recommended

Tailor based on level of experience

APPs in Gastroenterology: Determining Practice Fit



Establish roles and goals

- Number and type of patients APP will be seeing
- Procedures APP will be trained to perform
- Team members APP will be working with
- Administrative time & on-call requirements
- Regular performance review

Highlight role of APP to staff and patients





Benefits^{1,2}

- ✓ Earlier access to care
- ✓ Increased provider face time
- ✓ Improved patient education and satisfaction
- ✓ Better MD work-life balance
- ✓ Enhanced revenue
- ✓ Time to focus on research, endoscopic procedures, and complex patients

¹ Moses RE, McKibbin RD. Am J Gastroenterol. 2017 Apr;112(4):530-531.

² Wagonfeld JB, Murphy RF. Gastrointest Endosc Clin N Am. 2006 Oct;16(4):719-25.

APPs in Gastroenterology: In Summary



- NPs & PAs function similarly in practice but have different backgrounds
- APP scope of practice and supervision requirements vary by state → California has new legislation
- There has been increased incorporation of APPs in GI over the last decade
- APPs work as part of a multidisciplinary team to optimize patient care and satisfaction
- APPs in GI can increase access to digestive care







Thank you! Questions?

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References

- American Association of Nurse Practitioners (AANP). (2020). Retrieved from https://www.aanp.org
 American Academy of Physician Assistants (AAPA). (2020). Retrieved from https://www.aapa.org
 American Medical Directors Association ad hoc Work Group on Role of Attending Physician and Advanced Practice Nurse. (2011). Collaborative and supervisory relationships between attending physicians and advanced practice nurses in long-term care facilities. Journal of the American Medical Directors Association, 12(1), 12–18. California Board of Registered Nursing. General information: Nurse practitioner practice. (2011). Retrieved from
- http://www.rn.ca.gov/pdfs/regulations/npr-b-23.pdf
- Capstack, T. M., Segujja, C., Vollono, L. M., Moser, J. D., Meisenberg, B. R., & Michtalik, H. J. (2016). A comparison of conventional and expanded physician assistant hospitalist staffing models at a community hospital. *Journal of Clinical Outcomes Management*, 23(10), 455-461.
- Màrtsólf, G. R., Barnes, H., Richards, M. R., Ray, K. N., Brom, H. M., & McHugh, M. D. (2018). Employment of Advanced Practice Clinicians in Physician Practices. *JAMA Internal Medicine*. https://doi.org/10.1001/jamainternmed.2018.1515

 • Moses, R. E., & McKibbin, R. D. (2017). Non-Physician Clinicians in GI Practice Part 1: Current Status and Utilization. *The American*
- Journal of Gastroenterology, 112(3), 409–410. https://doi.org/10.1038/ajg.2017.16

 Moses, R. E., & McKibbin, R. D. (2017). Non-Physician Clinicians in GI Practice Part 2: Utilization and Risks. The American Journal of
- Gastroenterology, 112(4), 530–531. https://doi.org/10.1038/aig.2017.20
 Newhouse, R. P., Stanik-Hutt, J., White, K. M., Johantgen, M., Bass, E. B., Zangaro, G., ... Weiner, J. P. (2011). Advanced practice nurse outcomes 1990-2008: a systematic review. *Nursing Economic\$*, 29(5), 230–250; quiz 251. Resnick, B., & Bonner, A. (2003). Collaboration: foundation for a successful practice. *Journal of the American Medical Directors*
- Association, 4(6), 344-349. https://doi.org/10.1097/01.JAM.0000095256.98046.6A
- U.S. Department of Labor, Bureau of Labor Statistics. (2020). Fastest growing occupations. Retrieved from https://www.bls.gov/ooh/fastest-growing.htm
- U.S. Department of Health and Human Services, Health Resources and Services Administration, National Center for Health Workforce Analysis. 2016. Supply and Demand Projections for Internal Medicine Subspecialties: 2013-2025. Rockville, Maryland.
 Wagonfeld, J. B., & Murphy, R. F. (2006). The nonphysician provider in the gastroenterology practice. Gastrointestinal Endoscopy Clinics of North
- America, 16(4), 719–725. https://doi.org/10.1016/j.giec.2006.08.002