

UTILIZATION CASE STUDY

Utilizing PAs and NPs as autonomous clinicians in the clinic setting

A West Virginia orthopedic group ran a six-month pilot to determine optimal use of PAs in their outpatient orthopedic clinic. They were comparing two models: 1) shared visit model where the physician would see all patients that were seen by the PAs and residents and 2) the split model in which PAs saw patients independently while the collaborating physician maintained their own clinic with their residents.

Study Goals

- Compare the two models of seeing clinical outpatients.
- Improve patient satisfaction while decreasing wait times for appointments.
- Increase revenue generated by the PA.
- Maintain or increase revenue generated by the physician.
- Decrease the number of no-shows and nonoperative patients in the physician schedule.


Study Outcomes

- 17% increase to total patient volume with split clinic
- New patient volume increased by 41%.
- The number of no-shows to the physician schedule decreased by 14%.
- Although the surgeon did see a patient volume decrease of 20% during the transition from shared to split clinic visits, his surgical volume projections were 33% higher for the following month.
- Physicians saw an increase of 16% in net payments.
- Time to first appointment decreased from three weeks to under one week.
- 95% of patients rated PAs as “good” or “excellent” clinicians in the survey.

Considerations

- Administrative support for the PA should match that of the physician in order to truly increase clinical availability.
- Allowing PAs to run multiple clinic rooms may further increase productivity.

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