

# NPs: Better Health Access for Primary Care

The nation's 355,000 nurse practitioners are prepared to meet the primary care access challenge. Nationwide, millions of patients choose a nurse practitioner (NP) as their primary care provider, and NPs deliver this high-quality care in more than 1 billion patient visits each year.

NPs are prepared at the master's or doctoral level to provide primary, acute, chronic and specialty care to patients of all ages and backgrounds. As clinicians who blend clinical expertise in diagnosing and treating health conditions with an emphasis on health promotion and disease prevention, NPs bring a comprehensive perspective to health care. Providing patients with full and direct access to NP care is critical to meeting the nation's health care needs and combating chronic disease and rising health care costs.

**Nearly 100 million Americans lack access to basic health care.<sup>1</sup>**

## NPs Provide Primary Care

**88%** of NPs are certified in an area of primary care<sup>2</sup>

**70.3%** of all NPs deliver primary care<sup>2</sup>

NPs represent **1 in 4** primary care providers in rural practices<sup>3</sup>

## NPs by the Numbers

**83.2%** of NPs see Medicare patients

&

**81.9%** see Medicaid patients<sup>2</sup>

**83.3%** see privately insured patients

&

**54.4%** see uninsured patients<sup>2</sup>

## NP Workforce Grows in States With Full Practice Authority



**52% growth** across the state with a **70% increase** in rural areas within 5 years of adopting FPA<sup>4</sup>



**34% growth** within 3 years of adopting FPA<sup>5</sup>



NP workforce grew in **20 state-designated** primary care medically underserved areas within 5 years of adopting FPA

## FPA States Have Better Access to Primary Care



More NPs practice in rural areas of FPA states<sup>7</sup>



NPs are 13% more likely to practice primary care in FPA states<sup>7</sup>



Easier to make health care appointments in states with FPA<sup>8</sup>

1. <https://data.hrsa.gov/topics/health-workforce/shortage-areas>

2. <https://www.aanp.org/about/all-about-nps/np-fact-sheet> and [https://storage.aanp.org/www/documents/NP\\_Infographic\\_111122.pdf](https://storage.aanp.org/www/documents/NP_Infographic_111122.pdf)

3. Barnes, H., Richards, M.R., McHugh, M.D., & Martsoff, G. Rural And Nonrural Primary Care Physician Practices Increasingly Rely On Nurse Practitioners. *Health Affairs*, 37:6 (2018):908-914.

4. Arizona Area Health Education Centers Program.(2011). Arizona Rural Health Workforce Trend Analysis <https://azahec.uahs.arizona.edu/sites/default/files/u9/azworkforcetrendanalysis02-06.pdf>

5. Nevada State Board of Nursing 2009-2015 annual reports 2016 numbers – Nevada State Board of Nursing News. Nevada Growth Update: Changes after implementation of Full Practice Authority. <https://campaignforaction.org/wp-content/uploads/2016/07/Nevada-Growth-Update.pdf>

6. Holmes, L. A. R., & Waltman, N. L. (2019). Increased access to nurse practitioner care in rural Nebraska after removal of required integrated practice agreement. *Journal of the American Association of Nurse Practitioners*, 31(5), 288-292. <https://doi.org/10.1097/JXX.0000000000000153> <https://nebraska.pure.elsevier.com/en/publications/increased-access-to-nurse-practitioner-care-in-rural-nebraska-aft>

7. Yang BK, Johantgen ME, Trinkoff AM, Idzik SR, Wince J, Tomlinson C. State Nurse Practitioner Practice Regulations and U.S. Health Care Delivery Outcomes: A Systematic Review. *Med Care Res Rev*. 2021 Jun;78(3):183-196. doi: 10.1177/1077558719901216. Epub 2020 Jan 30. PMID: 31997710.

8. Traczynski, J., & Udalova, V. (2018). Nurse practitioner independence, health care utilization, and health outcomes. *Journal of Health Economics*, 58(1), 90-109. <https://doi.org/10.1016/j.jhealeco.2018.01.001>

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**Better Health Access**