



### Highlights

- **Less than one-third of all active physicians, nurse practitioners, and physician assistants in New York provide primary care services.**
- **The majority of New York's nurse practitioners, physician assistants, and midwives complete their professional training in the state.**
- **A higher percentage of New York's primary care physicians attended a foreign medical school (40%) compared to a New York medical school (38%).**
- **New York's physicians and physician assistants are less likely to practice in non-metropolitan areas compared to nurse practitioners and midwives.**
- **Primary care providers are older on average than New York's civilian labor force on average and not as racially or ethnically diverse.**

### Background

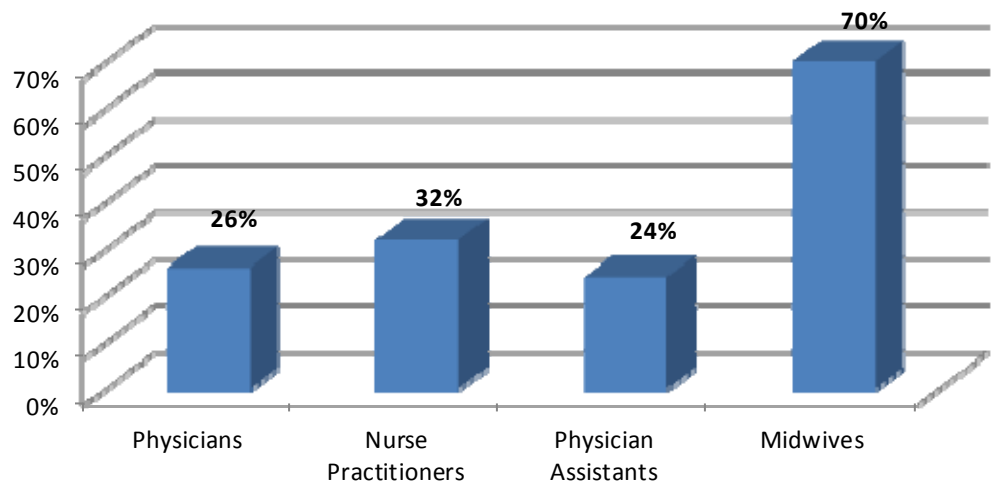
State and federal health care reforms are increasing demand for affordable and accessible primary care services. However, there is concern about the adequacy of the supply of primary care physicians to meet current and future need for services. At present, New York has 96 federally designated primary care health professional shortage areas (HPSAs), with 72 special population designations (i.e., low-income or Medicaid-eligible populations) and 24 geographic designations. More than three million New Yorkers reside in these primary care HPSAs.

It is generally recognized that nurse practitioners (NPs), physician assistants (PAs), and midwives are important providers of primary care services in the state. However, while many of these health professionals are trained in primary care, some do not work in primary care settings. Given the growing demand for primary care, it is critical to fully assess the available primary care capacity in the state, including the contributions of physicians, NPs, PAs, and midwives. This brief examines New York's current primary care capacity and describes the characteristics of active physicians, NPs, PAs, and midwives who provide primary care services to New Yorkers.

### Less than one-third of physicians, NPs, and PAs in New York provide primary care services.

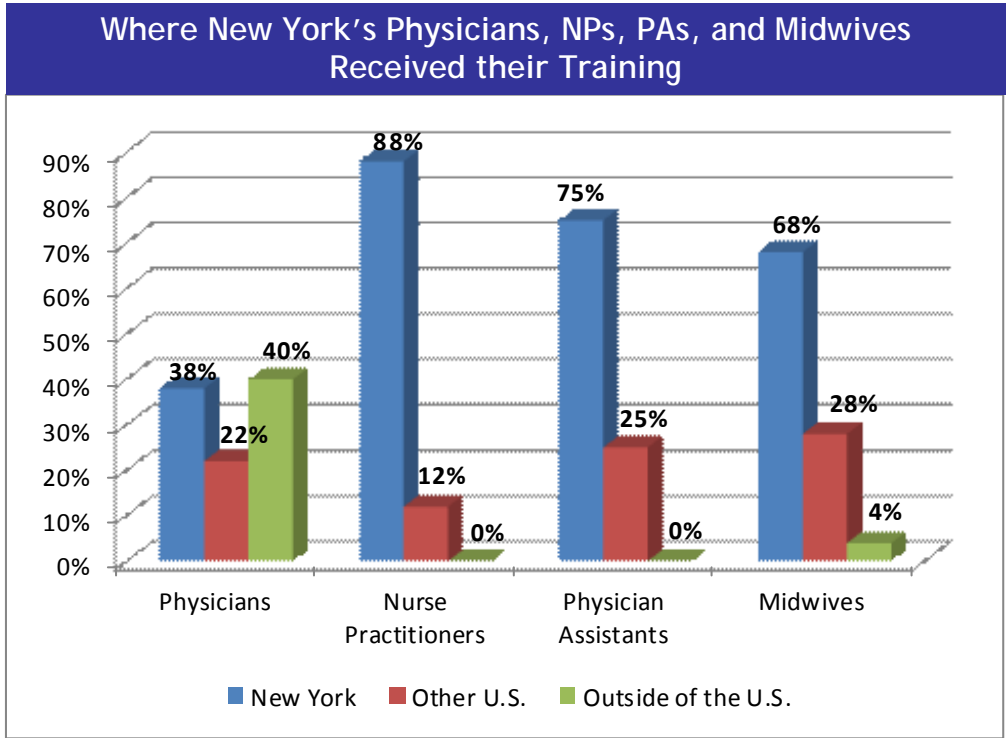
Of those providers actively practicing in New York in 2013, 32% of NPs, 26% of physicians, and 24% of PAs provided primary care services. In contrast, 70% of actively practicing midwives in New York provided primary care services.

Percentage of New York's Physicians, NPs, PAs, and Midwives that Provide Primary Care Services

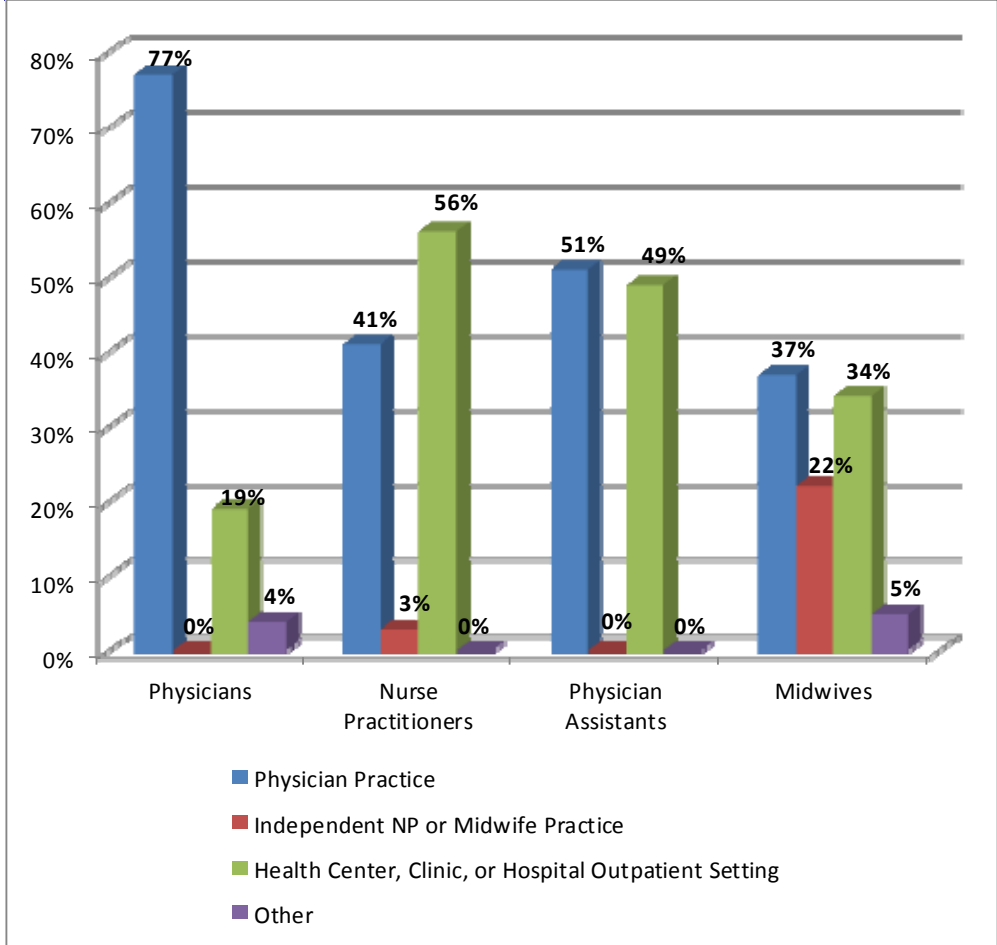


**A majority of NPs, PAs, and midwives who provide primary care in New York trained in the state. Only 38% of primary care physicians attended medical school in the state.**

Eighty-eight percent (88%) of NPs who provided primary care services in New York received their NP training in the state. Furthermore, 80% of NPs completed their initial RN training in the state. Seventy-five percent (75%) of PAs who provided primary care services received their professional training in New York, as did 68% of midwives. However, more of New York's primary care physicians trained in a foreign country than in the state.



**Distribution of New York's Primary Care Providers by Practice Setting**



**Primary care practice setting varies widely by provider type.**

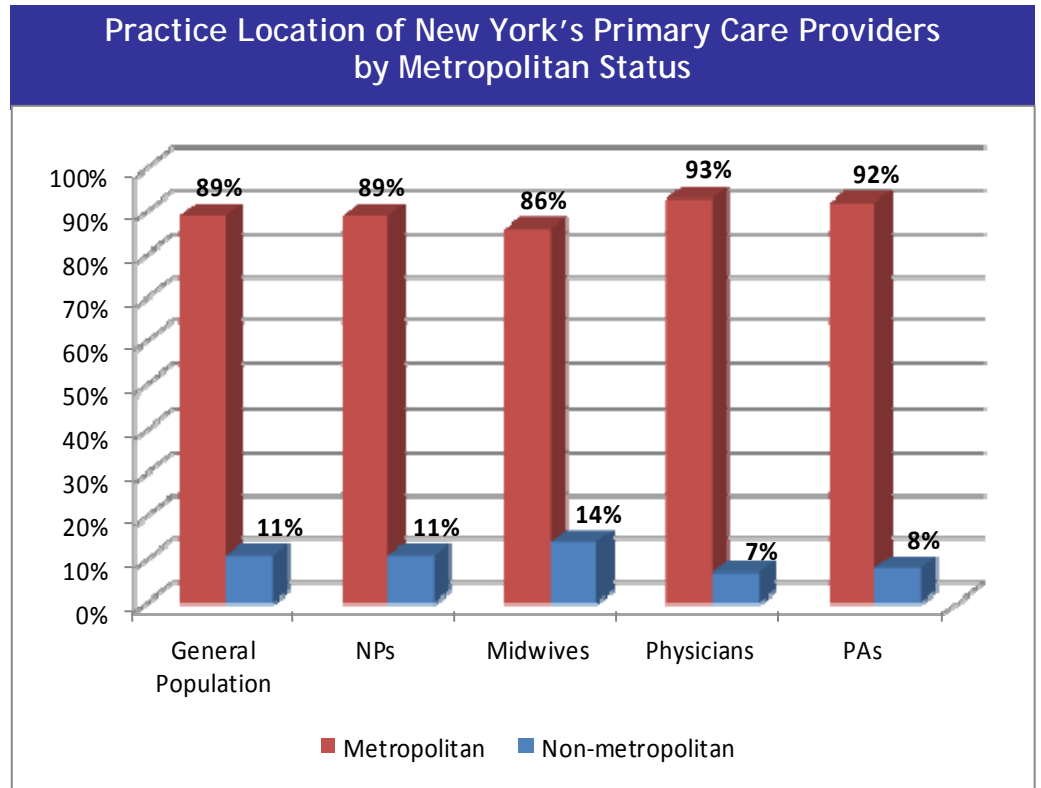
Seventy-seven percent (77%) of physicians who provided primary care services worked in physician practices, while less than 20% worked in health centers, clinics, or hospital outpatient settings.

NPs who provided primary care services were most likely to work in health centers and clinics (56%), while PAs were closely divided between physician practices and health centers, clinics, or hospital outpatient settings (51% and 49%, respectively).

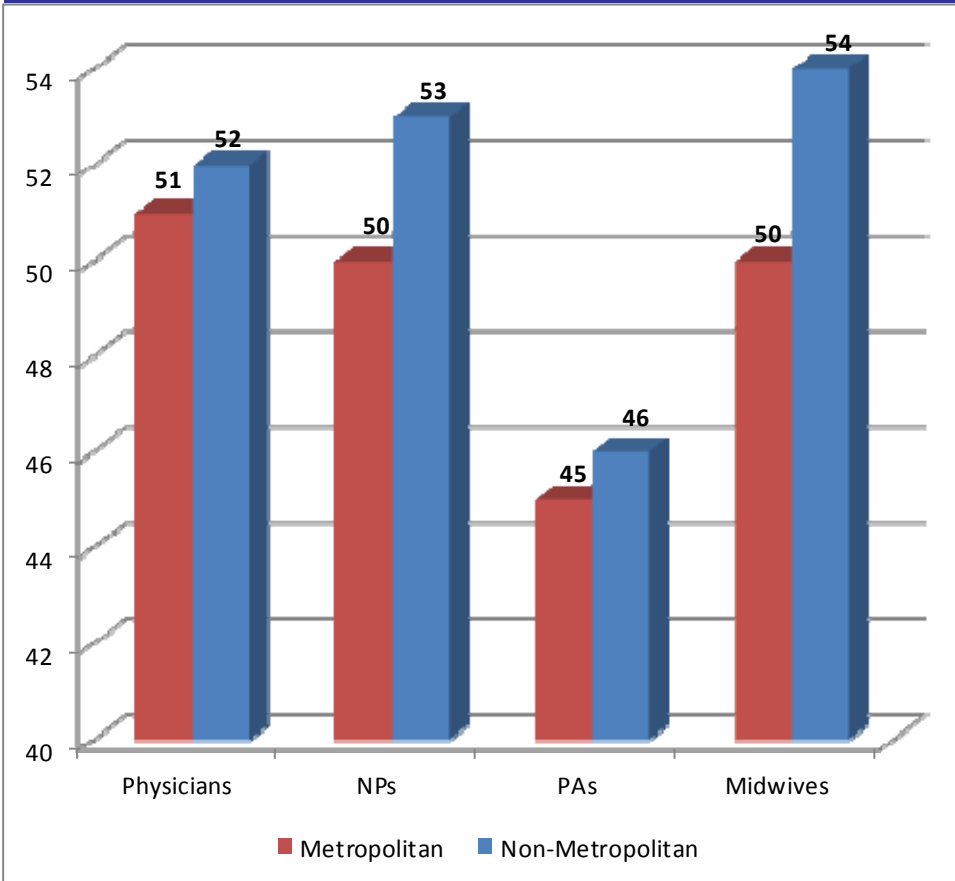
Midwives had the most varied practice settings with 37% working in physician practices; 34% in health centers, clinics, or hospital outpatient settings; and 22% in independent midwifery practices.

**The vast majority of physicians and PAs practice in metropolitan areas of New York.**

In 2013, 11% of New York's general population resided in non-metropolitan communities in the state, which included micropolitan communities, small towns, and rural communities.<sup>1</sup> The same percentage of NPs (11%) practiced in non-metropolitan areas. A larger percentage of midwives practiced in non-metropolitan areas (14%). However, only 7% of primary care physicians and 8% of PAs practiced in non-metropolitan areas of the state.



**Average Age of New York's Primary Care Providers by Metropolitan Status**



**Primary care providers are older on average than the civilian labor force. Their average age varies by provider type and geographic practice location.**

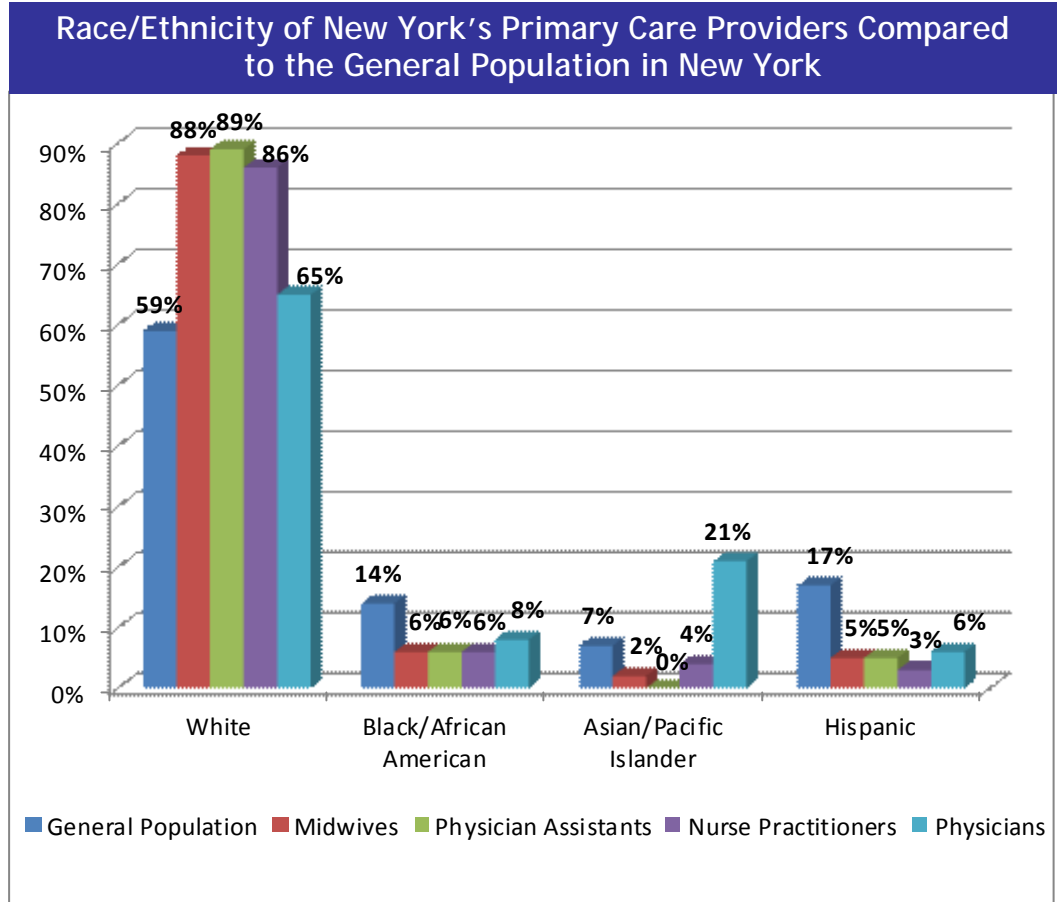
The average age of the civilian labor force population in New York is 42. PAs are older on average (age 46) than the state's civilian labor force, but younger on average than midwives (age 50), NPs (age 50), and physicians (age 51). The average age of all primary care providers was higher in non-metropolitan areas than in metropolitan areas.

The average age differences between primary care practitioners in non-metropolitan vs. metropolitan areas were greatest for midwives (53 vs. 50) and NPs (54 vs. 50). In non-metropolitan areas, midwives and NPs were older on average than physicians or PAs.

1. Metropolitan status is based on the Rural Urban Continuum Area (RUCA) codes established by the USDA, the U.S. Census Bureau, and the Rural Health Research Center at the University of Washington, using the provider practice location zip code. Specific details may be found at: <http://depts.washington.edu/uwruca/>.

**Primary care providers are not as racially or ethnically diverse as New York's population.**

Providers in the four primary care professions were much less diverse than the state's population. While Blacks/African Americans comprised 14% of the general population, they comprised just 8% or less of the primary care workforce. Hispanics/Latinos comprised 17% of the general population, but only 6% or less of the primary care workforce. In contrast, Asian/Pacific Islanders were underrepresented in all the professions except physicians, and Whites were over-represented in all four primary care provider professions.



**Methods**

As of April 2014, there were more than 91,000 physicians, 18,000 NPs, 12,000 PAs, and 1,000 midwives licensed to practice in New York. Data for this research brief were drawn from ongoing re-registration surveys of the four professions. All surveys are voluntary and collect information on demographic, professional, and practice characteristics of these health professionals. Primary care specialties for physicians include family medicine, general practice, general internal medicine, general pediatrics, and obstetrics/gynecology. Primary care specialties for NPs and PAs are based on the specialty of the collaborating or supervising physician. Primary care practice settings are accessible to the general public and include independent practitioner offices, community health centers, free-standing clinics, and hospital outpatient clinics. The response rates for the four surveys were as follows: physicians - 76%; NPs - 18%; PAs - 13%; and midwives - 20%. The generalizability of the research is limited, given the response rates for some of the professions.

**Discussion**

State and federal health care reform is expected to result in increased demand for primary care services. An assessment of the state's primary care workforce capacity suggests that NPs, PAs, and midwives have important roles in the delivery of primary care services, particularly in some areas of the state. The differences in the practice settings for primary care providers are notable, with NPs, PAs, and midwives more likely to work in health centers, clinics, or hospital outpatient settings and physicians more likely to practice in private offices. NPs and midwives are more likely to work in non-metropolitan communities than physicians or PAs.

Findings from the re-registration surveys of physicians, NPs, PAs, and midwives contribute to a better understanding of the primary care workforce in New York. Collectively, data from these surveys will be useful in future assessments of primary care capacity, particularly with anticipated changes to federal shortage designation rules. These data can also help inform workforce programs and policies aimed at increasing access to primary care services for underserved populations in New York.

**The Center for Health Workforce Studies**

This brief was prepared by the Center for Health Workforce Studies at the School of Public Health, University at Albany, State University of New York. Center staff who worked on this brief include Tracey Continelli and Jean Moore. The New York re-registration surveys for physicians, NPs, PAs, and midwives are part of the Center's New York Health Workforce Data System, which is designed to support ongoing monitoring of the state's health workforce. <http://chws.albany.edu>