



ADVANCED PRACTICE NURSES

DEDICATED | CARING | QUALIFIED

NURSE PRACTITIONERS (NP)

NPs diagnose and prescribe for specific populations of patients. 75% of NPs provide primary care and 25% care for acutely ill patients. Whether in clinics, hospitals or long-term care facilities, NPs are high value providers.

NPs can Reduce Costs by 20% and:

- Maintain or improve patient outcomes
- Improve patient satisfaction
- Reduce non-emergency ER visits
- Reduce hospitalizations and lengths of stay

NPs Achieve these Results by:

- Following evidence-based guidelines
- Improving communication with patients
- Increasing patient education
- Encouraging healthy behaviors
- Coordinating care to promote healthier outcomes

REFERENCES:

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A medical economist reviews published literature and concludes quality, access and cost savings are goals that can be accomplished by allowing independently licensed NPs to provide services in a variety of settings. Bauer, J.C. (April 2010). Nurse practitioners as an underutilized resource for health reform: Evidence-based demonstrations of cost-effectiveness. *Journal of the American Academy of Nurse Practitioners*, 22, 228-231.

Management by NPs was found to decrease drug costs. Chen, C., McNeese-Smith, D., Cowan, M., Upenieks, V., & Afifi, A. (2009). Evaluation of a nurse practitioner led care management model in reducing inpatient drug utilization and costs. *Nursing Economics*, 27(3), 160-168.

Treatment provided by NPs in retail clinics costs less than treatment in physician offices or urgent care centers with no apparent adverse effect on quality of care. Mehrota, A. et al. (2009). Comparing costs and quality of care at retail clinics with that of other medical settings for 3 common illnesses. *Annals of Internal Medicine*, 151, 321-323.

NPs in nurse-managed clinics provide a medical home for many medically underserved. Nurse-managed clinics decrease urgent care and ER visits and reduce hospital admissions, while providing high-quality care with a high level of patient satisfaction. Coddington, J.A., and Sands, L. (2008). Cost of health care and quality outcomes of patients at nurse-managed clinics. *Nursing Economics* 26, 75-83.

NPs improve quality of care in nursing home patients resulting in decreased hospital admissions and lengths of stay for nursing home residents. Study results show a high level of satisfaction with NP care and NPs spend more time with residents than physicians. Bakerjian, D. (2008). Care of nursing home patients by advanced practice nurses: a review of the literature. *Research on Gerontological Nursing*, 1, 177-185.

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NPs are more likely than MDs to practice in rural areas and with vulnerable populations. NPs can provide almost 90% of the services primary care MDs provide. Time to educate an APN is less than half that of a MD, and the interprofessional skill mix provided by NPs enhance medical care compared with an MD alone. Hooker, R.S. (2006). PAs and NPs: the US experience. *Medical Journal of Australia* 185, 2-3.

NPs managing and coordinating all aspects of complex cases can have a positive impact on clinical outcomes and costs. NPs are now used in many inpatient settings. Larkin, H. (2003). The case for nurse practitioners. *Hospital Health Network* 77, 54-58.

NPs and MDs use similar decision-making processes to arrive at similar diagnoses and treatment options. Offredy, M. (2002). Decision-making in primary care: Outcomes from a study using patient scenarios. *Journal of Advanced Nursing* 40, 532-41.

Clinical and financial outcomes were significantly improved for patients admitted to a neurology intensive care unit by having Acute Care NPs (ACNPs) manage the patients. The group managed by ACNPs was hospitalized 2306 fewer days than the baseline group, at a total cost savings of \$2,467,328. Russell, D., Vorder, B.M., Burns, S.M. (2002). Effect of an outcomes-managed approach to care of neuroscience patients by acute care nurse practitioners. *American Journal of Critical Care* 11, 353-62.

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In Tennessee's state MCO, TennCare, NP-delivered health care was 23% below the average cost of other primary care providers with a 21% reduction in hospital inpatient rates and 24% lower lab utilization rate than physicians. NPs wrote 42% fewer prescriptions while delivering top quality health care. Spitzer, R. (1997). The Vanderbilt University Experience. *Nursing Management* 28, 38-40.

Research shows NPs manage 80-90% of what primary care physicians do, without the need for consultation or referral. Employing NPs could save 20% of primary care cost – saving the country a potential \$8.75 billion annually. Munding, M. (1994). Advanced practice nursing, good medicine for physicians. *New England Journal of Medicine*, 330.

“A Number of other studies and articles, including a 1998 editorial in the Journal of the American Medical Association have also concluded that within their particular scope of practice, nurse practitioners offer a quality of care equivalent to that of physicians.”

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