Recommendations for NPs re: primary care workforce recruitment, training, and retention

1. Re: recruitment and training

   Need for generous loan repayment or otherwise underwriting educational expenses for those providers who deliver primary care services at least 80% of their work week.

   Rationale: In addition to safety net providers, there is a severe shortage of primary care providers in the rural corners of the state, as well as in urban centers. If the charge is to ensure that primary care is accessible to all of Connecticut’s citizens, using federal guidelines may not extend to these areas. Thus, our recommendation is to use a broader designation. Nurse Practitioners may be particularly interested in working in the more rural areas, not just the cities.

   Also, settings for practice should include not only community health centers and private practices, but all those settings where primary care needs to be provided: corrections facilities, nursing homes, group homes, school based health centers, etc.

   Note: Loan repayment provision or similar measures should also be made for those engaged in preparing primary care practitioners for the workforce. With the shortage of nursing educators in the state, this would also encourage talented NPs to go into graduate nursing education for FNP, PNP, WHP, and ANP programs.

   As for training, perhaps the entire cost of education for advanced practice nurses, as well as for physicians or physician assistants, should be considered, with a payback requirement for providing primary care in the State of Connecticut (much like the National Service Health Corps scholar program). This has the potential of recruiting students from other states as well as Connecticut.

   We do not see any of these proposals as mutually exclusive.

2. Retention

   It is absolutely necessary to join the 29 states which have nurse practitioners designated in statute as primary care providers. With such designation, insurers will include NPs as empanelled providers with competitive reimbursement rates for providing care to their members.

3. Additional presentation or speakers:

   We recommend exploring all opportunities for expanding the numbers of primary care providers in the future. The findings that have been presented to this committee re: the decreasing number of physicians choosing primary care suggest that other qualified health professionals need to be recognized as viable PCPs. To think that raising reimbursement rates for physicians will solve the shortage is short-sighted. As the population grows, the need for sub-specialists/specialists increases as well, which appears to be a much more attractive option for most new and many practicing physicians, as has been documented in our state and nationally.