Primary Care Staffing and Functions: Findings from 18 Practices in California

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RESEARCH QUESTION

Previous research outlined recommended staffing models[1] and evidence-based functions for Advanced Primary Care.[2]

How are real-world primary care practices across California performing these functions?

METHODS

We interviewed representatives from 18 diverse primary care practices across California.



PRINCIPAL FINDINGS

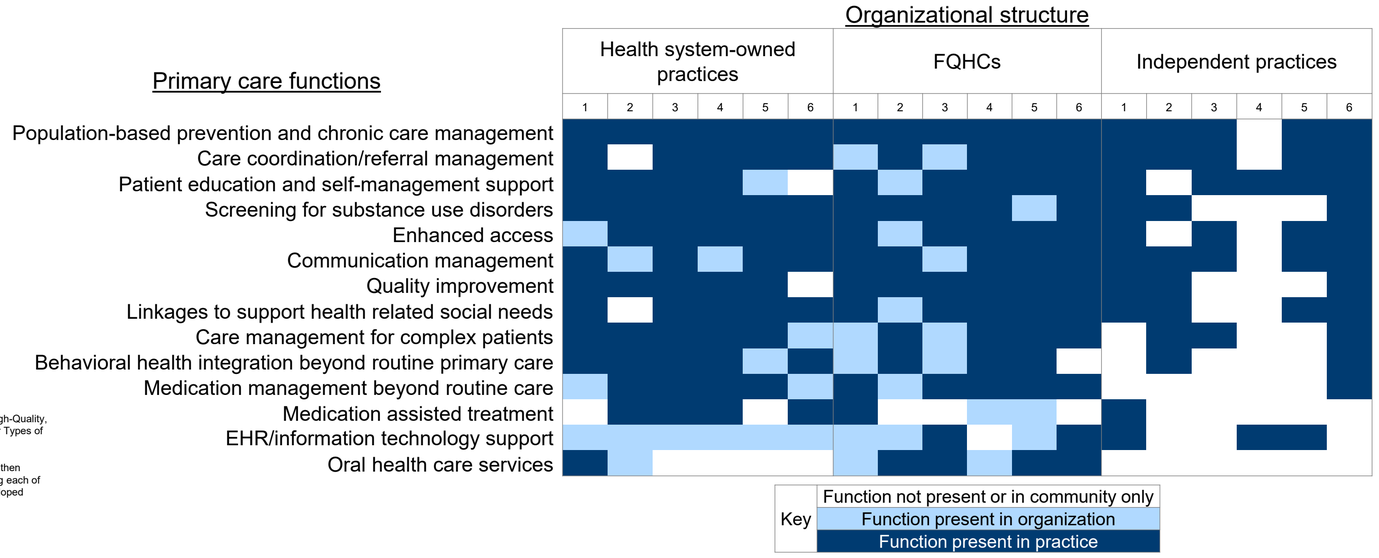
FTE per 10,000 patients: 18 practices[3] compared to Meyers et al. model

	Average in this study	Meyers et al.	% difference
Socially Complex Patient Population			
Primary Care Provider	7.6	10	-24
Nurse	5	2.5	+100
Medical Assistant	7.4	10	-26
General/Index Patient Population			
Primary Care Provider	5.8	8	-27
Nurse	0.8	1.5	-48
Medical Assistant	9.1	9	+1

Practices are experimenting with **team-based staffing models** to deliver robust primary care services, even with **larger-than-ideal panel sizes**.

Many practices **rely on organizational supports** to deliver the expanded functions of primary care.

The presence of primary care functions by organizational structure



View our full report and policy recommendations!

IMPLICATIONS

Primary care practices must be adequately resourced to support robust team-based care. As states adopt primary care spending targets, our findings provide insights for what types of staff and functions are most often missing and in need of additional investment.



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[1]Meyers, D., LeRoy, L., Bailit, M. et al. Workforce Configurations to Provide High-Quality, Comprehensive Primary Care: a Mixed-Method Exploration of Staffing for Four Types of Primary Care Practices. J GEN INTERN MED 33, 1774–1779 (2018). https://doi.org/10.1007/s11606-018-4530-7

[2]We developed our list of expanded care team functions by cross-walking and then adjudicating several definitions of high-performing primary care. After reviewing each of these lists of primary care functions, we mapped all areas of overlap and developed definitions to explain what specific activities were included in each function.

[3]Medical Assistant data was missing for two practices