

# **Systems Issues:**

## **Productivity and Work Environment**

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# Work Environment

- HIV care is delivered in a wide variety of practice environments with multiple competing interests...
  - Academic Center vs Community Based
  - General Medical vs HIV-Specific Clinic
  - Primary Care vs Specialty Care
  - Outpatient Only vs Full Spectrum Care
  - Integrated vs Non-integrated Care



# Productivity

- The need for revenue drives medical administration to push for higher productivity...
- Provider satisfaction is decreased by the perception of unrealistic expectations...



# Productivity

- Productivity is compromised by...
  - Patient acuity and complexity
  - External mandates
- Guidelines from MGMA or professional organizations for productivity in HIV care are absent...



# Productivity

- What little data there are suggests:
  - Panel sizes of 250-350 patients per 40 hr FTE
  - Visit lengths of 60 minutes for new patient and 20-30 minutes for follow-up visits

HIVMA survey, AETC listserv , NY AIDS Institute



# Summary

- There is an absence of data and a lack of consensus as to productivity standards (panel size, visit length, etc.) for providers engaged in the care of HIV-infected patients.
- The diverse practice settings in which HIV care is delivered complicate the development of standards.
- Work toward consensus guidelines for credentialing and productivity standards may enhance the recruitment, retention, and satisfaction of HIV providers.



# HIVMA RW Part C Survey Data

**Average patient panel size:**

**Physicians: 224**

**(Range: 8 to 1250)**

**Physician Assistants: 85**

**(Range: 4 to 600)**

**Nurse Practitioners: 138**

**(Range: 5 to 750)**



# HIVMA RW Part C Survey Data

## Average duration of appointments:

- **New Patients:**

**56 minutes**

**(Range: 15 to 240 min)**

- **Established Patients:**

**30 minutes**

**(Range: 15 to 180 min)**

