



## Patient Perceptions Regarding Health Care Providers

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With federal health reform promising to expand coverage to millions of additional patients, state policymakers, like patients, wonder whether the health system in their state has the workforce capacity to meet the demand, particularly for primary care. Many non-physician providers view themselves as an answer to this shortage and continue to seek expansions to their scopes of practice. Despite their lack of medical education and clinical training, non-physicians such as nurse practitioners (NP) often claim that patient opinion supports an expansion of their scope of practice.

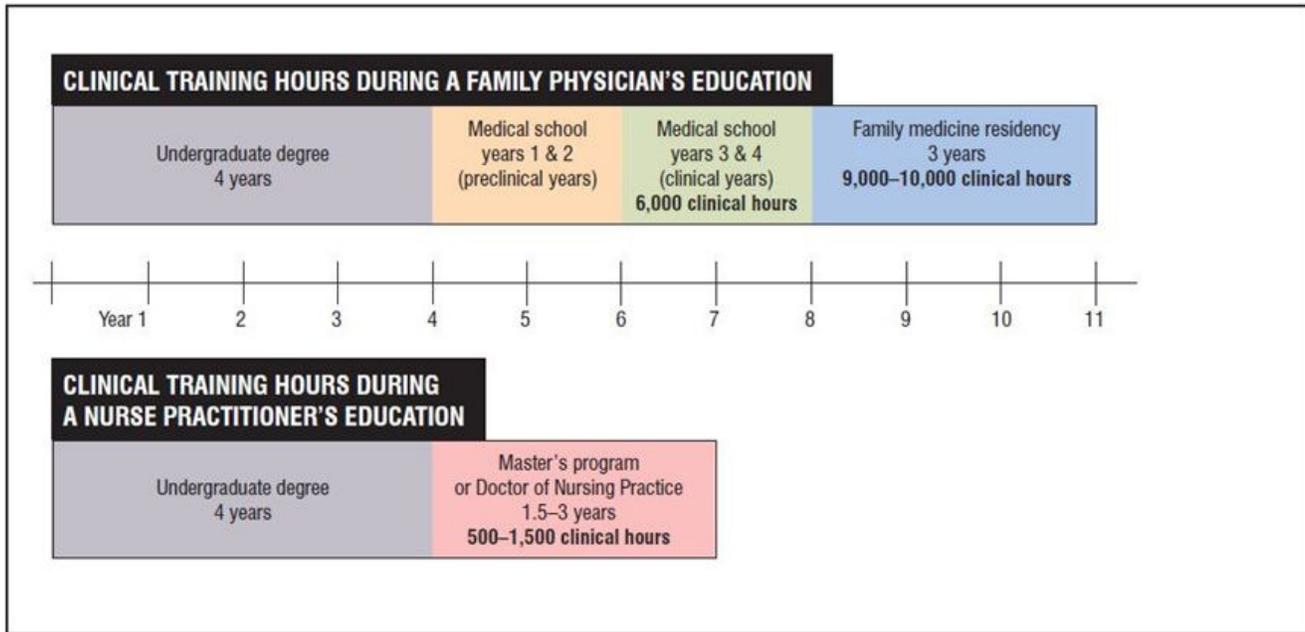
However, recent patient surveys demonstrate profound confusion about whether a physician or other health professional is providing their care. The American Medical Association (AMA) conducted patient opinion surveys in 2008 and 2010 to determine how well patients understand the general qualifications of those providing their care.

The 2010 survey found 26 percent of patients identified nurse practitioners as medical doctors and another five percent were unsure. The addition of the title “doctor” increased confusion among nearly one-quarter of patients surveyed. Moreover, more than one-third of respondents (35%) thought a doctor of nursing practice (DNP) was a medical doctor, while nearly one out of five (19%) were unsure. In short, more than half of respondents could not identify a DNP as a member of the *nursing*, not medical, profession.

Slightly more than half of respondents (51%) think they can easily determine whether their health professional is a licensed medical doctor by reading what services they offer, their title and other licensing credentials in advertising or other marketing materials. Nearly nine out of 10 (87%) want to require that providers display their training and the license under which they practice. Ninety-three percent think that only medical doctors should be allowed to use the title, “physician.” As noted by the AMA, “[n]inety percent of respondents said that a physician’s additional years of medical education and training (compared to a nurse practitioner) are vital to optimal patient care, especially in the event of a complication or medical emergency.”

A recent survey conducted by the Colorado Academy of Family Physicians (CAFP) further illustrates the value of family physicians’ additional years of training, compared to that of an NP or DNP. Only four percent of patients said they would prefer an NP or physician assistant (PA) to provide a diagnosis when they have not been feeling well for a while. Five percent of patients responded that they would prefer an NP or PA for continued monitoring of an ongoing, serious health condition; six percent held that preference for a visit for an acute illness; and, 11 percent indicated such a preference for a chronic but stable health condition requiring periodic check-ups.

The same CAFPP survey indicated that patients, “are generally satisfied with their ability to obtain high quality healthcare.” Four out of five (82%) were somewhat satisfied or very satisfied with their ability to obtain high quality healthcare. More than two-thirds (68%) felt that family physicians were most likely to understand their entire health background; nurse practitioners received 11 percent. Meanwhile, nearly three-quarters of respondents (72%) indicated they trusted physicians the most for information related to their health care; only 6 percent trusted nurses most.



Patients indicate a clear preference to be cared for by a physician, but they're significantly confused about the qualifications of certain professionals who care for them. Before experiments expanding scope of practice are considered for non-physician providers, policymakers may wish to consider ways of responding to patients' expectations that health professionals clearly identify their licensure, training and expertise. Those expectations are substantiated by the AMA survey, which found about nine out of 10 patients (93% in 2008 and 87% in 2010) said they would support legislation to require all health care advertising materials to clearly designate the level of education, skills, and training of all health care professionals promoting their services.

**Sources**

"Truth in Advertising." American Medical Association, 2011. <http://www.ama-assn.org/go/arc> 2011 Public Survey Report. Colorado Academy of Family Physicians, 2011.

**Graphic Credit**

"Compare the Education Gaps Between Primary Care Physicians and Nurse Practitioners." Texas Academy of Family Physicians, 2011. <http://tafp.org/advocacy/resources/PCCIssueBriefScopeEdu.pdf>.