Medical groups are hiring more advanced practice providers (APPs) than ever, yet few are realizing the full value these providers offer. The average medical group leaves $491 on the table for each primary care visit led by a physician that could be conducted by an APP. Even if that happens just once a day, it quickly adds up to an annual loss of $10,000 per physician.

Fully realizing the financial and productivity gains APPs offer requires deploying and managing these providers at scale. To do this, medical groups must adopt a group-wide model for APP use instead of leaving those decisions up to individual physicians. Just as a symphony orchestra has four instrumental sections, a scalable APP model has four components. Each component plays a critical role in ensuring the harmonious use of APPs within the medical group.

**DEPLOYMENT**

*Consider group needs when deploying APPs*

**Key to success**: Groups should deploy APPs to support one of three group goals: access expansion, population health management, and/or expansion into a new business.

**Group role**: Design APP roles that meet predefined goals.

**Specialty role**: Identify the most important specialty or practice priority and deploy APPs in the corresponding role.

*Make sure APPs are used as intended*

**Key to success**: Groups must develop a mechanism to hold teams accountable for using APPs to meet predefined goals.

**Group role**: Develop a metric picklist to measure impact against group goals.

**Specialty role**: Pick the most relevant metrics by which to measure success.

**TRAINING**

*Combine physician and APP onboarding*

**Key to success**: To save time, groups should use one process for all provider onboarding, but pair newly hired APPs with tenured APP mentors.

**Group role**: Reevaluate existing physician and APP onboarding programs.

**Specialty role**: Assign an APP mentor to each new APP.

*Design a more efficient clinical training curriculum*

**Key to success**: A more efficient training program relies on APPs to lead training and focuses on specific skill gaps.

**Group role**: Develop a list of core competencies on which to train all newly hired APPs and assess APPs against it.

**Specialty role**: Start a preceptorship program to train APPs on specialty-specific competencies.

**EVALUATION**

*Hold APPs to the same standards as physicians*

**Key to success**: APPs working at top-of-license should have the same impact on group performance as physicians, so they should be held to the same standards.

**Group role**: Evaluate APPs on same performance metrics as physicians (e.g., productivity, quality, patient experience).

**Specialty role**: Choose specialty-specific metrics to measure.

*Move APPs to a performance-based compensation model*

**Key to success**: Using a base + bonus compensation model for APPs incentivizes them to improve their performance on group goals (e.g., productivity, quality, patient experience).

**Group role**: Create a standard set of compensation frameworks to use for each APP role.

**Specialty role**: Incorporate specialty-specific metrics into variable compensation.

**LEADERSHIP**

*Create a mechanism for APP self-governance*

**Key to success**: Groups should create an APP leadership structure to empower APPs to problem solve and reduce the amount of time group leaders spend on APP-specific issues.

**Group role**: Launch a group-wide APP council with representatives from all constituencies.

**Specialty role**: Appoint APPs to serve on the group-wide council.

*Elevate APPs to group-wide leadership positions*

**Key to success**: Include an APP in group-wide leadership roles to enable their input in strategy development and boost their engagement in the group.

**Group role**: Select at least one APP to serve on group-wide leadership bodies (e.g., committees, board).

**Specialty role**: Nominate APPs to serve in leadership roles.

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1) Calculated for a level 3 evaluation and management code billed by a physician in primary care vs. APP with the APP billing at 85% of the physician rate.
2) Work relative value unit.

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For more about creating a scalable APP model: advisory.com/mgsc/APPtoolkit