The American Association of Nurse Practitioners® (AANP) conducted its second COVID-19 Nurse Practitioner (NP) Impact Survey between July 28 and August 9, 2020, to continue assessing how the global pandemic has impacted NP clinical practice across settings, specialties and geographic locations. NPs report their practices are better prepared to deal with COVID-19 today than at the start of the pandemic, and access to personal protective equipment (PPE) and viral testing are more widely available. However, 78% of NPs cite significant delays in receiving results for patients’ COVID-19 tests and report testing as the greatest barrier to implementing an effective pandemic response in their communities. Overall, access to PPE is no longer defined by NPs as a top barrier, and federal telehealth waivers and temporary policies to suspend state barriers to practice have proven beneficial.

NPs are better prepared to deal with COVID-19 than at the start of the pandemic and are able to accommodate non-COVID-19, in-person visits for routine care, immunizations and chronic disease management.

Today, 82% of NPs indicate their practices are better prepared to deal with COVID-19 than at the beginning of the pandemic. About one out of every three NPs reported their practices are ready for a surge in COVID-19 cases (35%), a surge in issues related to delayed or deferred care (31%) and the upcoming flu season (34%). Currently, the vast majority of NP practices (86%) also have the means to accommodate patients for non-COVID-19-related, in-person care.

Access to viral testing has improved, but NPs experience significant delays in receiving patients’ test results.

Similar to the first AANP COVID-19 survey, NPs continue to provide COVID-19 testing to patients (61%) and refer patients to centralized testing sites (69%). More than one-third of NPs reported having patients turned away from testing sites for not meeting specific criteria (36%). Fifty-three percent of NPs report that COVID-19 testing in their community is accessible for all patients, and 46% stated testing continues to be limited to patients who meet eligibility criteria. This is a marked improvement compared to May, when 69% of NPs reported testing was limited to those who met eligibility criteria. Roughly four out of five NPs reported experiencing significant delays in receiving test results (78%). These delays have been described on the low end, as between seven to 10 business days, and on the high end, as taking up to 20 days. Lack of viral testing and timely test results continues to be the greatest barrier to effectively responding to COVID-19 in communities.

Despite increased PPE supplies, the number of NPs testing positive for COVID-19 has increased three-fold. Telehealth has been effective for patient visits, but improvements to access are necessary.

Whereas in May, less than 2% of NPs reported testing positive for COVID-19 themselves, today that figure has more than tripled, with 5% responding that they were infected at some point between the start of the pandemic and the end of July. While lack of PPE is no longer a top barrier for most NPs responding to COVID-19 in their communities, approximately one in five NPs (18%) continue to report they are going without necessary PPE. Since the beginning of the pandemic, nearly 17% of NPs experienced a furlough. The majority have returned to their positions; however, 4% were still furloughed at the end of July, 3% continued to experience a layoff.
or termination and about 1% stated their practices remained closed. When asked about changes to their employment, approximately 40% indicated decreases to their overall income, and 31% had decreases in hours worked. Since the start of the pandemic, nearly 15% of NPs applied for unemployment benefits, 8% applied for personal loans and 58% looked for other NP positions.

Less than half (44%) of practices continue to experience significant decreases in overall patient load due to COVID-19. Additionally, about 63% continue to transition patients from in-person to telehealth care, and 34% continue to cancel or postpone patient appointments due to the pandemic. The top barriers to NP practice in telehealth were patient connectivity issues (73%), patient access to technology and internet (69%) and patient comfort with technology (58%). The primary barrier to telehealth not related to patient issues, however, was reimbursement rates for services (35%). About 8% indicated they were still only providing virtual or telehealth care in their practices at this time.

Temporary policies to suspend barriers to practice and increase patients’ access to NP-provided care have been beneficial, according to an overwhelming majority of NPs.

When asked about the kinds of policy and organizational-level actions that have been most beneficial, the top three most beneficial were as follows: federal telehealth waivers (76%), expansions to services covered (68%) and reimbursement rate increases (62%). More than half of NPs surveyed indicated state-level temporary suspension of all supervisory or collaborative practice agreement requirements were beneficial or very beneficial. Looking to the future, based on their own experiences practicing during COVID-19, NPs reported the most important activities over the next six months will be funding for COVID-19 research (87%), continued investment in vaccine development (84%) and additional funding for health care providers and support staff (84%).

“This survey demonstrates the significant progress NPs are making in combatting COVID-19 in communities nationwide and treating patients in every clinical setting. As a nation, we must work together to address barriers and increase access to patient care, from overcoming delays in COVID-19 test results to eliminating practice restrictions on NPs,” said David Hebert, JD, Chief Executive Officer of AANP. “We call on policy makers at the federal and state level to respond to the needs of providers and patients as the pandemic continues. We urge policymakers to prioritize access to care for all patients by enacting legislation that enables NPs to practice to the top of their education and clinical training. The pandemic has illuminated longstanding shortcomings in our nation’s health care system. Waivers and adjustments have addressed some of those challenges and have enabled us to effectively provide care during this time. However, it is essential that permanent changes to laws are made to ready our nation for the further delivery of health care to patients and to meet the health care challenges that exist beyond the pandemic.”

AANP will continue to share its members’ experiences and insights with Congress, state legislatures and other policymakers in order to strengthen health care access for patients during and after this crisis. The association is committed to staying connected to members — and all NPs — by conducting periodic surveys and continuing to evaluate the ongoing impact of COVID-19 on practices and providers.

About NPs and AANP
NPs are advanced practice registered nurses (APRNs) who are prepared at the master’s or doctoral level to provide primary, acute, chronic and specialty care to patients of all ages and walks of life. Daily practice includes
assessment; ordering, performing, supervising and interpreting diagnostic and laboratory
tests; making diagnoses; initiating and managing treatment, including prescribing medication
and nonpharmacologic treatments; coordinating care; counseling; and educating patients,
their families and their communities. NPs practice in nearly every health care setting and hold
prescriptive authority in all 50 states and Washington D.C. AANP is the largest professional
membership organization for NPs and represents the interests of the more than 290,000
licensed NPs in the U.S. AANP provides legislative leadership at the local, state and national levels,
advancing health policy; promoting excellence in practice, education and research; and establishing
standards that best serve NPs’ patients and other health care consumers. For more information
about AANP, visit aanp.org.