

Onsite Nurse Practitioners – An Emerging Trend?

By Dennis McClain, MD, ABEM, ABIME, MROCC



This spring will mark my 20th year in occupational medicine. Back then, it was the beginning of a new era for this specialty. Providers were actually listening to employers and trying to meet their needs. It was a great time to practice because it was so easy to please people. A telephone call from a treating physician was unheard of at that time and returning an injured worker to modified duty with no lost time was a reason to celebrate.

Times have changed. Being around for 20 years allows a person to have a perspective that can only be acquired by experience. Trying to stay on the cutting edge of medicine is akin to throwing a dart at a passing bullet—your chances of hitting the mark are fairly limited. For my colleagues who are new to medicine, our “healthcare system” must seem like an incredible maze of practice patterns and regulations that make it impossible to keep pace. But for those of us who have been around awhile, it is easier to spot some trends.

Since I started my practice years ago, companies have really put some things together. For example, most of you have now figured out workers compensation and how to control your costs. You have learned to be in control—eliminate injuries through safety programs; reduce lost time with return to work programs; and, of course, work the “mod” to keep those insurance rates as low as possible. And if I had a nickel for every safety officer who has accompanied an injured worker to the clinic and has reminded me of what makes an injury OSHA recordable, I would already have that beachfront home in St. Croix that I like to fantasize about during times of stress.

Now is the time to apply the same principles with which you learned to control your workers compensation costs, to control your group health costs as well. Managing wellness and disease can reap huge dividends for those willing to invest. One excellent way to get started is to place a nurse practitioner in your company on a regular basis. This allows them to monitor chronic illness such as diabetes or hypertension and coordinate care changes before they become a costly crisis—both personal and financial.

Your team members will not have to miss work as frequently for urgent care, health maintenance issues such as allergy shots, or just to have that blood pressure checked. Every dollar that doesn’t hit your group health insurance helps lower your experience rating. Every hour at work not missed, hits your bottom line. It is the same principle you applied with your workers comp.

One trend I have noticed is that medicine is becoming less intimate all the time. I hope we don't soon reach the day when you will report to the computer for your virtual physical exam (although having that colonoscopy online sounds like a good idea!). My sense is that people still like to have that personal touch, and no caregiver provides that better than a qualified nurse practitioner with immediate access to physician support. NPs are perfectly suited for this role.

Patients consistently choose NPs over doctors because they succeed where we docs often fail—they are good listeners. Sure, you can use a computer or a telephone to consult a faraway person who is also staring at their computer screen with care algorithms as they “individualize” your healthcare. But most of us still prefer that one on one, face to face encounter with our providers—someone who sees us on a regular basis and really knows who we are.

I have no doubt that in the next few years, most of you will be aggressively managing all of your company's healthcare and productivity. I encourage you not to wait—there are advantages to take today. Here's to the next 20!