

North Carolina Society of Gastroenterology 2026 Annual Meeting



How to Optimize the role of APPs in a Community Practice Setting

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Joint Providership



American Society for
Gastrointestinal Endoscopy

Disclosures: (list below)

- No financial relationship disclosures
- Resources from ACG and Advisory Board were utilized in the preparation of the materials

GI Demand and Workforce Reality

- Growing GI disease burden
- Projected GI physician shortfall; APP workforce growth (NPs and PAs) supports access
- Independent practices must balance throughput, quality, and patient experience

APPs help GI practices meet growing demand

- Support continuity of care
- Improve patient outcomes through team-based care

Key Pillars for Success

Key Elements of APP Role Clarity in GI

- Scope alignment (PA/NP regulatory requirements)
- Clear clinical responsibilities and care team integration
- Standardized orientation and continued development
- Annual evaluation of performance and quality

Team-Based Care Models

- APP Practice models in Gastroenterology vary
- Model selected should consider:
 - Practice needs
 - State licensure and scope of practice
 - APP education and experience

Common Practice Models

- Outpatient clinic
- Inpatient or hospital setting
- Combination of hybrid model

Training and Mentorship

Essential for a safe, high quality APP model to build or strengthen an APP care model, practices should include:

- Role based onboarding & orientation aligned to APP scope and responsibilities
- Practice workflows and common GI Conditions
- Policies, procedures, and clinical standard
- Advance/specialty clinic training (as needed based practice demand)

Mentorship: A strong, consistent physician and APP relationship, built on trust, respect, and professional growth.

Professional Development and Continuing Education

- Support society membership and CME
- Keep APPs current on guidelines and best practices
- Strengthen outcomes, retention, and practice growth
- Expand development into leadership, research, and training as needed

Operational and Financial Efficiency

- **Workflow Optimization**

- Standardize templates, scheduling, and visit types
- Enable APPs to practice at the top of license (within policy and clinical strategy)

- **Reimbursement:**

- Use complaint billing models: independent, shared, and incident-to (when allowed)

- **Performance Metrics:**

- Track visits, RVUs, access, and throughput
- Perform routine coding audits and payer update reviews

Risk Management

- **Common Risk Areas**

- Inadequate supervision and vicarious liability exposure
- Physician liability for APP actions or omissions
- Insufficient documentation (shared/combined visits)
- Delayed escalation/referral for serious conditions

- **Risk Mitigation Strategies**

- Maintain a collaborative physician APP model with clear oversight
- Hire qualified, well-trained APPs
- Use standardized onboarding and ongoing training aligned to scope
- Follow established policies, protocols, and guidelines

Future Direction and Considerations for a Modern GI Practice

Building a Modern GI Care Model:

As healthcare evolves, APPs will play a growing role in expanding access, improving throughput, and supporting specialty care through training, telehealth, procedural support, and clinic leadership.

Conclusion

- APPs are essential to GI and hepatology, expanding access, continuity, and patient education
- Success requires role clarity, strong training/mentorship, and ongoing development
- Clear goals and measurement, quality, patient experience, and financial performance, support sustainability
- A flexible, practice-aligned model allows the APP program to evolve with patient and operational needs

CME/MOC Question:

Which factor most supports the growing need for APP integration in community GI practices?

- A. Decreasing GI disease burden
- B. Improved physician supply in GI
- C. Rising GI demand and physician shortage pressures
- D. Reduced patient expectations for access

CME/MOC Answer

C. Rising GI demand and physician shortage pressures

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