Expanding Access to Reproductive Endocrinology and Infertility Care Through Advanced Practice Provider Integration

Findings and Recommendations from the ASRM APP/Physician Summit

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Executive Summary

Demand for reproductive endocrinology and infertility (REI) services in the United States continues to outpace the available subspecialty workforce. Geographic disparities, financial barriers, and increasing utilization of assisted reproductive technology (ART) contribute to inequitable access to care. At the same time, the number of trained reproductive endocrinologists (REIs) and embryologists remains insufficient to meet current and projected demand.

Advanced Practice Providers (APPs)—including nurse practitioners (NPs), physician associates (PAs), and certified nurse midwives (CNMs)—represent a critical, underutilized workforce solution. When integrated into collaborative care models, APPs can expand access, improve efficiency, reduce time to treatment, and enhance the patient experience without compromising quality.

This white paper synthesizes findings from the ASRM APP/Physician Summit and provides practical guidance for REI practices seeking to incorporate APPs effectively. It outlines current utilization patterns, recommended roles, implementation challenges, and a roadmap for standardization and future workforce development.

Purpose of This White Paper

The purpose of this white paper is to:

- Define the role of APPs in REI clinical practice
- Provide evidence-informed recommendations for integrating APPs into fertility care models
- Identify barriers to implementation and propose actionable solutions
- Establish a framework for training, competency development, and collaborative practice
- Support REI practices in expanding access to high-quality fertility care

Background: Workforce Constraints and Access Challenges in REI

Access to fertility care in the United States is constrained by multiple systemic factors. Geographic disparities persist, with several states having limited or no access to fertility clinics. Financial barriers remain substantial, as most states do not mandate insurance coverage for fertility treatment. These challenges disproportionately affect minority populations, who face longer travel distances, higher out-of-pocket costs, and systemic inequities in healthcare access.

Simultaneously, demand for fertility services is increasing due to delayed childbearing, improved treatment outcomes, and reduced societal stigma. Despite this growth, the REI workforce remains limited. The number of active REIs is insufficient to meet current demand, resulting in delays in patient intake, prolonged time to treatment, and increased provider burden.

These dynamics necessitate innovative workforce strategies. APP integration offers a scalable, evidence-supported approach to expanding clinical capacity while maintaining high standards of care.

Overview of Advanced Practice Providers in Clinical Practice

Advanced Practice Providers (APPs) are highly trained clinicians with advanced education and clinical experience beyond the bachelor's level. Their roles across healthcare settings include diagnosing and managing medical conditions, ordering and interpreting diagnostic tests, prescribing medications, and performing procedures within their scope of practice.

In specialties with comparable complexity—such as critical care, oncology, and surgical subspecialties—APPs have demonstrated effectiveness in improving patient throughput, enhancing care coordination, and supporting physician-led teams.

In REI, APP roles are evolving but remain variably defined. This variability reflects differences in training pathways, state regulations, and practice-specific workflows. Standardization of APP roles in REI represents a key opportunity to optimize care delivery.

This table outlines the educational pathways, licensing, certification, and maintenance requirements for nurse practitioners (NPs), physician associates (PAs), and certified nurse midwives (CNMs) practicing in the United States. APP roles, training requirements, and certification pathways are summarized in Figure 1.

ASRM APP/Physician Summit: Design and Intentionality

In December 2023, a national APP/Physician Summit was convened to address the evolving role of APPs in REI. Participants were intentionally selected to reflect diversity across clinical roles, training pathways, practice settings (academic, private, and network-based), geographic regions, and career stages.

This intentional composition ensured a broad range of perspectives and facilitated meaningful dialogue regarding current practices, perceived barriers, and opportunities for innovation in workforce integration.

Survey Findings: Patterns of APP Utilization in REI

A national survey of REIs and APPs informed summit discussions and revealed several key findings:

- A majority of REIs reported working with APPs in their practices
- Familiarity with APP capabilities was strongly associated with physician confidence in collaborative care models
- APPs were widely supported in performing low-complexity clinical tasks
- Complex ART decision-making remains physician-led

These findings suggest that increased exposure to APP collaboration enhances trust and supports broader adoption of team-based care models.

Summit Recommendations: Roles of APPs in REI

1. Patient Intake and Initial Consultation

APPs can serve as the first point of contact for new patients, conducting comprehensive histories, providing education, and outlining diagnostic pathways. Telemedicine enhances accessibility and efficiency in this role.

2. Scope of APP Participation in Diagnostic Evaluation in REI

APPs may participate in ordering, performing, and interpreting a wide range of diagnostic tests in reproductive medicine. Scope of practice varies by state regulation and institutional policy.

3. Treatment Coordination and Management

Within collaborative frameworks, APPs can:

- Manage ovulation induction cycles
- Monitor follicular development
- Coordinate intrauterine insemination (IUI) cycles
- Provide ongoing patient counseling and follow-up

4. Procedural Contributions

With appropriate training and oversight, APPs may perform:

- Intrauterine insemination (IUI)
- Ultrasound procedures
- Early pregnancy management
- Office-based gynecologic procedures

5. Operational and Leadership Roles

Experienced APPs may contribute to practice management, workflow optimization, staff education, and quality improvement initiatives.

The scope of APP involvement in diagnostic and treatment processes is outlined in Figures 2 and 3. APPs may participate in ordering, performing, and interpreting a wide range of diagnostic tests in reproductive medicine. Scope of practice varies by state regulation and institutional policy. APPs may contribute to treatment planning, cycle management, and selected procedures within collaborative care models. Procedural scope is determined by training, competency, and regulatory environment.

Implementation Challenges

Regulatory Variability

State-specific scope-of-practice laws affect APP autonomy and clinical responsibilities.

Reimbursement Limitations

Differences in payer policies may impact financial sustainability of APP roles.

Lack of Standardized Training

There is currently no formal REI-specific training pathway for APPs.

Cultural and Professional Barriers

Misunderstanding of APP roles may hinder adoption in some practices.

ASRM and AP3G Initiatives: Building a Framework

Professional organizations are positioned to address these barriers through:

- Development of standardized competency frameworks
- Expansion of educational resources and certification pathways
- Promotion of APP-focused training programs and fellowships
- Advocacy for policy reform supporting scope of practice and reimbursement
- Facilitation of interprofessional collaboration models

Proposed Roadmap for APP Integration

1. Define Scope and Roles

Clearly delineate APP responsibilities aligned with regulations and practice needs.

2. Implement Structured Training

Utilize existing resources and incorporate hands-on training and mentorship.

3. Standardize Competencies

Develop core clinical and procedural competencies, including ultrasound proficiency.

4. Establish Collaborative Protocols

Create standardized workflows and ensure regular physician oversight.

5. Monitor Outcomes

Track access, patient satisfaction, and clinical outcomes to refine models.

Value and Impact of APP Integration

APP integration provides:

- Increased access to care
- Reduced time to treatment

- Improved patient education and engagement
- Enhanced operational efficiency
- Reduced physician burnout
- Cost-effective delivery of care

These benefits support a team-based, patient-centered approach to fertility care.

Future Directions

Key priorities include:

- Establishing national certification standards
- Developing APP fellowship programs in REI
- Expanding outcomes-based research
- Advocating for legislative and reimbursement alignment
- Promoting adoption of collaborative care models

Conclusion

The growing demand for fertility care in the United States requires innovative and scalable solutions. Advanced Practice Providers represent a critical component of the future REI workforce. Through intentional integration, standardized training, and collaborative practice models, APPs can significantly expand access to high-quality reproductive care.

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