Internists and Physician Assistants: Team-Based Primary Care

Summary of Position Paper Approved by the ACP Board of Regents and the Board of Directors of the American Academy of Physician Assistants, April 2010

How Do Physician Assistants Contribute to Team-Based Primary Care?

A physician assistant (PA) is a graduate of an accredited PA education program who is authorized by the state to practice medicine with the supervision of a licensed physician. PAs are trained to provide diagnostic, therapeutic, and preventive care as delegated by a physician. The roles of physician-physician assistant teams have expanded over the past 20 years in response to shortages in the primary care physician supply, changing health care needs of the population, and the outstanding track record of the team-based model of care.

Each PA’s scope of practice is defined by the individual’s education and experience, state law, facility policy and physician delegation. In the primary care setting, a supervising physician may delegate a PA to perform physical examinations, diagnose and treat illness, order and interpret lab tests, prescribe medications, manage patients with chronic conditions, perform minor surgical procedures, provide patient education, make hospital or nursing home rounds, and take call. Since PA training is rooted in providing physician-guided, team-based care, PAs are particularly suited to play a central role in the patient-centered medical home. As key members of the team, PAs can help to ensure continuity, comprehensiveness, and coordination of care, working with physicians and other health care professionals.

How Can Physician-Physician Assistant Teams Work Together Most Effectively?

Effective interdisciplinary teams play a vital role in improving the quality of primary care services. The American Academy of Physician Assistants (AAPA) and the College both recognize that PAs and physicians share common goals of providing high-quality, patient-centered care and improving the health status of their patients. In addition, physicians and PAs share concerns regarding the decline in the primary care workforce, the need for team-oriented practice and models of care such as the patient-centered medical home, and the importance of inter-professional educational opportunities to improve the training of both physicians and PAs.

Among the challenges that PAs and internal medicine specialists face is the struggle to find the appropriate balance of autonomy and supervision for the PA in the practice. Because physicians and PAs are a team, issues that affect one profession often have a direct affect on the other, such as decreasing reimbursements and increasingly burdensome paperwork and regulations.
Key Findings and Recommendations from the Paper

ACP recommends the following:

- AAPA and ACP believe that physicians and PAs working together in a team-oriented practice, such as the patient-centered medical home, is a proven model for delivering high-quality, cost-effective patient care. National and state legal, regulatory, and reimbursement policies should recognize that PAs function as primary care providers in the patient-centered medical home as part of a multidisciplinary clinical team led by a physician.
- AAPA and ACP encourage training programs from both health professions to promote and support opportunities for internists to precept PA students and participate as faculty at PA programs.
- AAPA and ACP encourage interdisciplinary education of physicians-in-training and PA students throughout their educational programs.
- AAPA and ACP should continue to be represented on the accrediting and certification bodies of the PA profession.
- AAPA and ACP encourage the creation of an interdisciplinary task force on workforce development. Workforce policies should ensure adequate supplies of primary care physicians and PAs to improve access to quality care and to avert anticipated shortages of primary care clinicians for adults. Workforce policies should recognize that training more PAs does not eliminate the need nor substitute for increasing the numbers of general internists and family physicians trained to provide primary care.
- AAPA and ACP encourage flexibility in federal and state regulation so that each medical practice determines appropriate clinical roles within the medical team, physician-to-PA ratios, and supervision processes, enabling each clinician to work to the fullest extent of his or her license and expertise.

For More Information

This issue brief is a summary of *Internists and Physician Assistants: Team-Based Primary Care*. The full paper is available at [http://www.acponline.org/advocacy/where_we_stand/policy/internists_asst.pdf](http://www.acponline.org/advocacy/where_we_stand/policy/internists_asst.pdf).