Physician Assistants

Virginia L. Valentin, MCMS, PA-C
Past president of Kentucky Academy of Physician
Assistants

Objectives

At the end of this session the primary care physician should be able to:

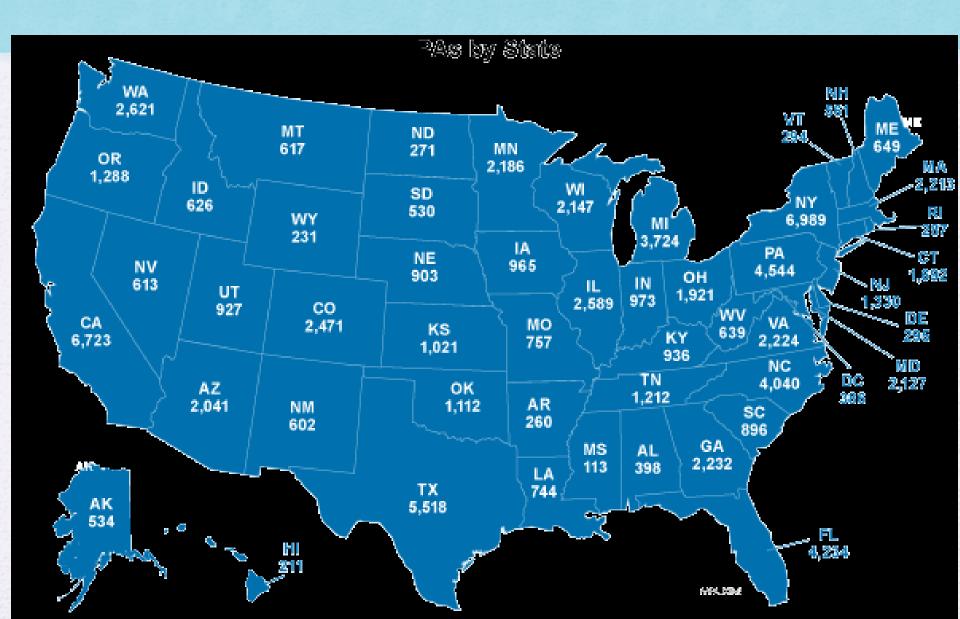
- 1. Summarize what is a physician assistants (PA) education and training
- 2. Describe how a PA would function in a family medicine practice
- 3. List what are the new laws regarding PAs in Kentucky
- 4. Determine where do you go to 'recruit a PA'.

Virginia Valentin

- PA 2007
- RN for 8 years prior
- Professor at UK PA program 2012
- Currently- Past president of KAPA



PAs in the United States



PAs in the United States

- 80,214 PAs
- 127,000 expected by 2025
- Median pay-\$97,000
- 25% in Family medicine with workforce trend mirroring physician trend into specialty care
- 173 PA programs
- 13,136 PA students

History of Kentucky PAs

- 1965- Duke starts first PA program in US
- 1973- University of Kentucky PA program
- 1988- Kentucky PAs get certification
- 2006- Kentucky PAs get licensure
- 2010- University of Cumberland PA program
- 2014- Sullivan University PA program

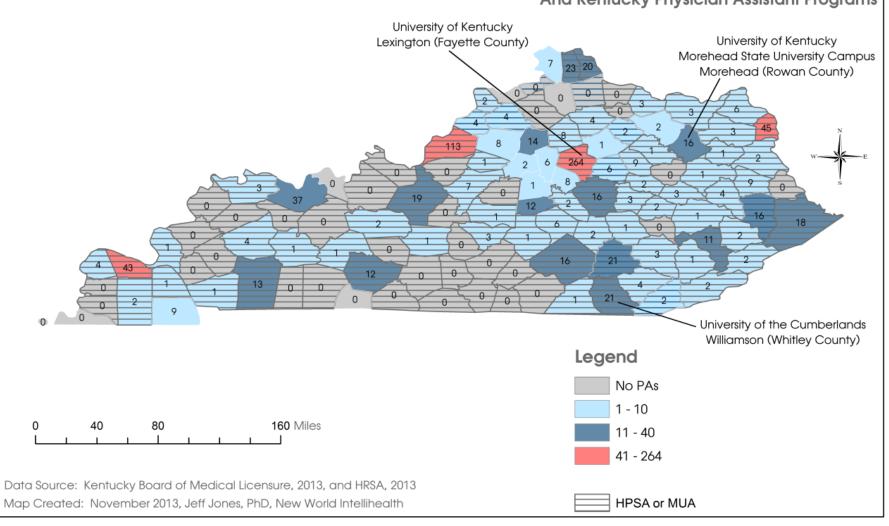
PAs in Kentucky

- Approximately 1000 PAs
- 33% work in Primary care
- 22% work in Family medicine
- http://www.kentuckypa.org/



Number of Physician Assistants By Kentucky County, 2013

And Medically Underserved Areas (MUAs)
And Health Professionals Shortage Areas (HPSAs)
And Kentucky Physician Assistant Programs



PA Education model

- Average PA student
 - 26 y/o
 - 70% female
 - 3% military
 - 2,000 clinical experience



PA Education model

- Medical model
 - 1½ year didactic
 - 1 year of clinicals with MD/DO or PA
 - Family medicine/Internal medicine
- 88% programs Masters degree
- No programs with doctorate degree



PA Education model

Courses

- Physiology
- Anatomy
- Pathophysiology
- Pharmacology
- Physical Diagnosis

Rotations

- Internal medicine
- Family medicine
- OBGYN
- Emergency medicine
- Surgery

#1 Masters degree



PA role in Family Practice

- Physician led team
- Dependent provider
- 85-100% pay by insurance
- "Incident to" billing



What a PA can do

- Perform History and Physical Exams
- Diagnose and treat illnesses
- Order and interpret labs
- Prescribe medications
- Manage patients with chronic illnesses
- Minor procedures

- Patient education
- Hospital or nursing home rounds
- Home visits
- Take Call



PA Scope of Practice

- Each PA's scope of practice is defined by the individual's education and experience, state law, facility policy, and physician delegation.
- The PA's scope of practice is mainly determined by the supervising physician's scope of practice and his or her delegatory decisions.
- The physician evaluates the PA's competency and performance, and together they develop a team approach based on both the PA's and physician's clinical skills and patient needs.
- The physician and PA share ethical and legal responsibility for the care of a patient.

How to utilize a PA?

- Options:
- 1. Work together with shared schedule
- 2. Work side by side with separate schedules leaving open slots in PA's schedule for sick visits or overflow from MD/DO's schedule
- 3. Work in separate clinics with MD available via phone for supervision

What PA brings

- Education in the medical model
- Increased coordination of care
- Increased patient satisfaction
- Increased quality of care
- Increased revenue (PA paid \$0.36 for every \$1 generated for practice)
- Decreased physician workload

AAPA Six Key Elements

- 1) "Licensure" as the Regulatory term
- 2) Full Prescriptive Authority
- 3) Scope of Practice Determined at Practice Level
- 4) Adaptable Supervision Requirements
- 5) Chart Co-Signature Requirements Determined at the Practice Level
- 6) Number of PAs an MD may Supervise Determined at the Practice Level

Kentucky Statues

KRS 311.840-311.862

13 separate statutes addressing PAs

KMBL

http://www.kbml.ky.gov/ah/pa.htm

Supervision

- Amendment effective June 1 2013
- 18 months of direct supervision for new graduates eliminated
- 3 months of direct supervision required until June 1 2014

Co-signature

- Amendment to KRS 311.856 effective June 1 2014
- Supervising physician required to co-sign 10% of chart notes
- Co-signature not required to execute an order

Joseph Tuvia, M.D.

Future Goals

- KRS 311.854
- A physician may enter into supervision agreements with a maximum of four (4) physician assistants but shall not supervise more than two (2) physician assistants at any one (1) time. Application for board approval to be a supervising physician shall be obtained individually for each physician assistant

How to recruit a PA

- Post a job on KAPA website or AAPA website
- Contact a local PA program
- Take a PA student



Questions?



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Resources

- Family Physicians and Physician Assistants: Team-Based Family Medicine. A Joint Policy Statement. http://www.aapa.org/WorkArea/DownloadAsset.aspx?id=849
- Roblin DW, et al. Use of midlevel practitioners to achieve labor cost savings in the primary care practice of an MCO. Health Serv Res. 2004 June;39(3):607-626.
- American Academy of Physician Assistants. Issue Brief: Physician Assistants in Primary Care. January 2010. http://www.aapa.org/workarea/downloadasset.aspx?id=648
- American Academy of Physician Assistants. Issue Brief: The Physician-PA Team. http://www.aapa.org/WorkArea/DownloadAsset.aspx?id=2497
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