

**Work Group:** Clinical Quality Improvement

**Research Question:** Physician Assistant (PA) Role Within the Patient-Centered Medical Home

**Source:** Idaho Academy of Physician Assistants

<http://iapa.affiniscape.com/displaycommon.cfm?an=7>

Idaho Board of Medicine

<http://bom.idaho.gov/BOMPortal/BoardPage.aspx?Board=PAC>

Idaho Medical Home Collaborative (IMHC)

<http://www.imhc.idaho.gov/PilotExpectations.aspx>

1. Provider Qualification for IMHC
  - Board Certified MD or DO ambulatory practice; includes PA and/or nurse practitioners.
2. Regulatory Oversight
  - Idaho Board of Medicine (Board).
3. Practice Privileges
  - PA can own his/her own practice and employ physicians.
  - Has full prescriptive authority including controlled substances.
  - Must work with supervising physician(s) to determine an appropriate scope of practice, rather than limiting the scope via law.
  - Not required to have charts co-signed by supervising physician. Instead, PA must work with the physician to determine the appropriate level of chart review.
  - Protected by statutes that regulate licensure.
4. Physician Assistant Advisory Committee, Idaho Board of Medicine
  - Make recommendations to the Board regarding PA licensure.
  - Committee does not have authority to revoke licenses or impose limitations or conditions on licenses.
  - The scope of practice of PAs and graduate PAs must be defined in the Delegation of Services Agreement and may include a broad range of diagnostic, therapeutic, health promotion, and disease prevention services.
  - The scope of practice must include only those duties and responsibilities delegated to the licensee by his/her supervising and alternate supervising physicians and in accordance with the Delegation of Services Agreement.
  - Patient services must be within the education, training, and experience of the PA or graduate PA, and consistent with the expertise and regular scope of practice of the supervising and alternate supervising physician.