



# FAQ: Physician Assistants

The Minnesota Medical Association (MMA) and the Minnesota Academy of Physician Assistants (MAPA) have developed the following guidance for physicians, practice managers and physician assistants (PAs) to address commonly asked questions about PAs.

## ● General Information

### Q: What is a physician assistant (PA)?

**A:** A “physician assistant” or a “licensed physician assistant” is a person licensed under Minnesota Statute Chapter 147A to provide patient services *under the supervision of a doctor of medicine or a doctor of osteopathy*.<sup>1</sup> Physician assistants are licensed in Minnesota by the Minnesota Board of Medical Practice (BMP), the same regulatory agency that licenses physicians.

## ● Education, Certification and Licensure

### Q: How are physician assistants educated?

**A:** Applicants to PA programs must complete at least two years of college courses in basic science and behavioral science as prerequisites to PA training. Most PA students hold a bachelor’s degree and have approximately three years of health care experience prior to enrollment in a PA program.<sup>2</sup>

Once enrolled, PAs are educated in didactic and clinical programs that are accredited by the Accreditation Review Commission on Education for the Physician Assistant ([ARC-PA](#)).<sup>3</sup> The average PA curriculum runs 26 months and focuses on classroom and laboratory instruction in the medical and behavioral sciences (such as anatomy, pharmacology, pathophysiology, clinical medicine, and physical diagnosis) followed by rotations in internal medicine, family medicine, surgery, pediatrics, obstetrics and gynecology, emergency medicine, and geriatric medicine.<sup>4</sup> Physician assistant students complete on average over 2,000 hours of supervised clinical practice prior to graduation.

There are currently three locally-accredited PA programs:

- [Augsburg College Physician Assistant Program](#)<sup>5</sup> (which is located in Minneapolis, Minn. and grants a Master’s of Science in Physician Assistant Studies along with a certificate of completion)
- [Mayo-UW La Crosse-Gunderson PA Program](#)<sup>6</sup> (which is housed at the University of Wisconsin LaCrosse but is affiliated with the Mayo Clinic in Rochester, Minn. and grants a Master’s of Science in Physician Assistant Studies along with a certificate of completion).
- [College of St. Catherine Master of Physician Assistant Studies Program](#)<sup>7</sup> (which is located in St. Paul, Minn. and offers a Master of Physician Assistant Studies).

### Q: How are physician assistants certified?

**A:** Once a student graduates from a PA program, he or she becomes eligible for the National Commission on Certification of Physician Assistant’s initial certification exam, known as “PANCE” (Physician Assistant National Certifying Exam). New graduates must pass PANCE within six attempts and within six years of graduation.<sup>8</sup> To maintain certification, PAs must acquire 100 hours of continuing education every two years,<sup>9</sup> and pass the “PANRE” (Physician Assistant National Recertification Exam) every six years.<sup>10</sup>

### Q: What are the steps for physician assistants to become licensed with the BMP?

**A:** The BMP may grant licensure to a PA who:

1. submits a completed application for PA licensure;
2. pays the appropriate fee;
3. has current certification from the National Commission on Certification of Physician Assistants (or its successor agency as approved by the board);

4. certifies that he or she is mentally and physically able to engage safely in practice as a PA;
5. has no current restrictions on their PA licensure, certification, or registration due to discipline, revocation, suspension, or probation for cause resulting from the applicant's practice as a PA (unless the board considers the condition and agrees to licensure);
6. submits any other information the BMP deems necessary; and
7. has been approved for licensure by the BMP.

Note: Prior to June 30, 1995 PAs were registered (not licensed) and governed under the rules of the Minnesota Department of Health. In 1995 the rules were replaced by Minnesota Statute Chapter 147A and PA registration fell under the jurisdiction of the Minnesota Board of Medical Practice. In 2009, PAs became licensed under the statute (rather than registered). Physician assistants that were registered as of June 30, 1995 are eligible for continuing license renewal under Minnesota Statute Chapter 147A.<sup>11</sup>

## ● Physician assistant scope of practice

### Q: What is the scope of practice for Minnesota physician assistants?

**A:** The scope of PA practice is defined in Minnesota Statute Chapter 147A.09:

“Physician assistants shall practice medicine only with physician supervision. Physician assistants may perform those duties and responsibilities as delegated in the Physician and Physician Assistant Delegation Agreement . . . including the prescribing, administering, and dispensing of medical devices, and drugs, excluding anesthetics, other than local anesthetics, injected in connection with an operating room procedure, inhaled anesthesia and spinal anesthesia.”

Patient services must be limited to:

1. services within the training and experience of the PA;
2. services customary to the practice of the supervising physician or alternate supervising physician;
3. services delegated by the supervising physician or alternate supervising physician under the Physician and Physician Assistant Delegation Agreement; and
4. services within the parameters of the laws, rules, and standards of the facilities in which the PA practices.<sup>12</sup>

### Q: What kinds of services may physicians delegate to physician assistants?

**A:** Physician assistants may perform the duties and responsibilities that are delegated to them by the supervising physician(s) in the Physician and Physician Assistant Delegation Agreement (discussed in the physician supervision and documentation requirements section of this FAQ). The services delegated must be within the customary practice of the supervising or alternate supervising physician and must be appropriate to the PA's practice and within the scope of the PA's training. Duties that may be delegated include, but are not limited to the following:<sup>13</sup>

- taking patient histories and developing medical status reports;
- performing physical examinations;
- interpreting and evaluating patient data;
- ordering or performing diagnostic procedures including radiography;
- ordering or performing therapeutic procedures;
- providing instructions regarding patient care, disease prevention and health promotion;
- creating and maintaining patient records;
- transmitting or executing the supervising physician's orders;
- prescribing, administering, and dispensing legend drugs and medical devices (if delegated and appropriate);
- emergency care;
- certifying physical disability under Minnesota Statute section 169.345, Subd. 2a. (for the purpose of granting a disability parking permit);
- assisting in surgery; and
- providing medical authorization for an emergency hold of a patient who poses an immediate threat of harm to themselves or another person.

**Note: Orders of PAs are considered to be the orders of their supervising physicians in all practice-related activities, including, but not limited to, the ordering of diagnostic, therapeutic, and other medical services.**<sup>14</sup>

## ● Physician supervision and documentation requirements

### Q: Is physician supervision required for physician assistants?

**A: Yes.** Physician assistants may practice medicine only with physician supervision.<sup>15</sup> Note that the constant presence of the supervising physician is not required provided that the PA and supervising physician are able



to stay in contact with one another by radio, telephone, or other telecommunication device.<sup>16</sup>

**Q: Who can be a “supervising physician?”**

**A:** A supervising physician is a physician that is licensed in Minnesota, and oversees and accepts *full medical responsibility* for the performance, practice, and activities of a PA pursuant to a Physician and Physician Assistant Delegation Agreement (discussed in this section of this FAQ).<sup>17</sup> “Alternate Supervising Physicians” may hold the same role and responsibility as the supervising physician if listed in the Physician and Physician Assistant Delegation Agreement, or in a supplemental listing.<sup>18</sup>

**Q: How many physician assistants may a physician supervise at one time?**

**A:** Generally, a supervising physician may not supervise more than five full-time equivalent PAs simultaneously unless the BMP makes an exception or a disaster or emergency situation is declared (see the emergency and disaster situations section of this FAQ).<sup>19</sup>

**Q: What documentation is required for a physician assistant and their supervising physician?**

**A:** There are two documents that are required for PAs and supervising physicians: (1) the PA Notice of Intent to Practice; and (2) the Physician and Physician Assistant Delegation Agreement.

**Notice of Intent to Practice:** Licensed PAs are required to submit a document to the BMP that notifies it of their intent to practice. The document can be filled out online by going to [“Notice of Intent to Practice.”](#)<sup>20</sup>

The document must include proof of a Physician and Physician Assistant Delegation Agreement, and provide the names, business addresses and phone numbers of both the supervising physician and PA.<sup>21</sup>

**Physician and Physician Assistant Delegation Agreement:** A PA and a supervising physician (including alternative supervising physicians, where applicable) must sign an agreement known as the “Physician and Physician Assistant Delegation Agreement.” **This Agreement must be reviewed and updated on an annual basis** and can be filled out electronically by going to

[“Delegation Agreement.”](#)<sup>22</sup>

The Agreement must contain all of the following items:

- description of the practice setting;
- listing of categories of delegated duties;
- description of supervision type; and
- description of the process, prescriptive authority and schedule for review of prescribing, dispensing, and administering legend and controlled drugs and medical devices by the PA authorized to prescribe (where delegated).<sup>23</sup>

The Agreement must be maintained by both the supervising physician and PA and be made available to the BMP upon request.

Note: Physician assistants are required to have a separate Agreement for each place of employment. If they change their name, address of record, or telephone number, they must provide the BMP written notice of that change within 30 days of it taking effect.<sup>24</sup>

**Q: Are there any special requirements for physicians and physician assistants who prescribe, dispense, and administer legend drugs and medical devices?**

**A: Yes.** Physician Assistants who have been delegated the authority to prescribe, dispense, and administer legend drugs and medical devices must provide evidence of current certification by the National Commission on Certification of Physician Assistants (or its successor agency) when becoming licensed or renewing their license as a PA. Physician Assistants must hold a valid DEA certificate. Supervising physicians must also retrospectively review the prescribing, dispensing, and administering of legend and controlled drugs and medical device practices of the PAs. The process and schedule for this supervisory physician review must be outlined in the Physician and Physician Assistant Delegation Agreement.<sup>25</sup>

● **Accountability**

**Q: Are supervising physicians legally accountable for patient care provided by the PA?**

**A: Yes.** Although the physician and the PA share ethical and legal responsibility for the care of the patient, the

supervising physician(s) is ultimately accountable for the care provided by the PAs that they supervise (except for care rendered by a PA in situations of disaster or emergency as discussed in the emergency and disaster situations section of this FAQ). Orders of PAs are considered to be the orders of their supervising physicians in all practice-related activities.<sup>26</sup>

## ● Liability insurance

**Q:** Should physician assistants have professional liability insurance?

**A:** Yes. Although having professional liability insurance is not a requirement for PA licensure, securing coverage is strongly recommended to protect the PA against individual claims of liability. Physician assistants can be included under their employer's professional liability policy or they may purchase individual coverage.

## ● Emergency and Disaster Situations

**Q:** Can a physician assistant provide unsupervised care in an emergency or disaster situation?

**A:** Yes. A PA who is responding to an emergency or state or local disaster by providing free, emergency care, advice, or assistance may provide the medical treatment that the PA is trained to provide without physician supervision if she or he is either licensed or credentialed in a United States jurisdiction or by a federal employer.

Filing a Notice of Intent to Practice with the BMP and signing a Physician and Physician Assistant Delegation Agreement is not required for care rendered by a PA in an emergency or disaster situation.<sup>27</sup>

**Q:** Is a supervising physician accountable for the care provided by the physician assistant in an emergency or disaster situation?

**A:** No. The supervising physician who otherwise provides supervision to a PA under a Physician and Physician Assistant Delegation Agreement (described in the physician supervision and documentation requirements section of this FAQ), will not be held medically responsible for the care rendered by a PA during times of emergency or in response to a disaster. These PA services are considered to be outside the scope of the relationship between the supervising physician and the PA.<sup>28</sup>

## ● Payment/Reimbursement

**Q:** Does Medicare reimburse for physician assistant services?

**A:** Yes. Medicare Part B covers PA services provided that all of the following conditions are met:

- the services would otherwise be covered as physicians' services if furnished by an M.D. or a D.O.;
- the PA (1) has graduated from a PA educational program that is accredited by the Commission on Accreditation of Allied Health Education Programs; or (2) has passed the national certification examination that is administered by the NCCPA; and is licensed by the state to practice as a PA;
- the PA is legally authorized to perform the services in the state in which they are performed and there are no statutory exceptions for those services;
- the PA performs the services under the general supervision of a physician (as outlined in the physician supervision and documentation requirements section of this FAQ); and
- the employer of the PA bills for the services furnished by the PA and the PA performs the services in all settings (either rural or urban areas) or otherwise serves as an assistant at surgery.<sup>29</sup>

Physician Assistants can be paid for professional services if the services have been:

- personally performed by the PA; and
- no facility or other provider either charges for those services or is otherwise paid any amount for the furnishing of those professional services.

Note: The supervision of other non-physician staff by a PA does not constitute personal performance by the PA.<sup>30</sup>

**Q:** Does Medicare reimburse for "incident to" professional services and supplies provided by PAs?

**A:** Yes. Medicare will pay for services provided directly by PAs and when PAs provide services incident to a physician's professional services (Medicare also pays for services furnished by auxiliary personnel incident to the services of PAs). "Incident to" services are defined by Medicare as "the services or supplies that are furnished as an integral although incidental part of the physician's<sup>31</sup> professional services."<sup>32</sup> Medicare covers these services and supplies (including drugs and biologicals that cannot be self-administered) if the services:

- Are an integral, although incidental part of the physician's professional service;



- are commonly furnished in a physician's office or clinic;
- are commonly rendered without charge or included in the physician's bill; and
- are furnished by the physician or by auxiliary personnel under the physician's direct supervision.<sup>33</sup>

**Q: Does Medicare reimburse for "incident to" professional services and supplies provided by Physician Assistants?**

**A: Yes.** Medicare will pay for services provided directly by PAs and when PAs provide services incident to a physician's professional services (Medicare also pays for services furnished by auxiliary personnel incident to the services of PAs). "Incident to" services are defined by Medicare as "the services or supplies that are furnished as an integral although incidental part of the physician's professional services." Medicare covers these services and supplies (including drugs and biologicals that cannot be self-administered) if the services:

- are an integral, although incidental part of the physician's professional service;
- are commonly furnished in a physician's office or clinic;
- are commonly rendered without charge or included in the physician's bill; and
- are furnished by the physician or by auxiliary personnel under the physician's direct supervision.<sup>34</sup>

**Q: Does the Minnesota Medicaid program reimburse for professional services performed by the physician assistant?**

**A: Yes.** Medical Assistance covers services performed by a licensed PA if the service is otherwise covered under Minnesota Statute Chapter 256B.0625 as a physician service, and if the service is within the scope of practice of a licensed PA (as outlined in the physician assistant scope of practice section of this FAQ).<sup>34</sup>

**Q: Do private insurers reimburse professional services performed by the physician assistant?**

**A: Yes.** Private insurers generally cover medical services provided by PAs when they are included as part of the physician's bill or as part of a global fee for surgery. Most insurance companies now credential PAs and billing is done under their provider number. The reimbursement rate is negotiated in the contract the employer has with the insurance company.

● **Conclusion**

Physician assistants can be an asset to physicians seeking assistance in their practices. Once a PA becomes licensed and submits a Notice of Intent to Practice with the BMP, the supervising physician may delegate duties and responsibilities to the PA through a Physician and Physician Assistant Delegation Agreement, which must be updated annually and can be filled out online. Physician assistants must be supervised by either a medical doctor or a doctor of osteopathy, however that supervision may take place remotely via telecommunication. The supervising physician holds ultimate accountability for the medical treatment provided by the PA, and securing professional liability coverage for the PA is recommended. Physician assistant services are reimbursable by most insurers.



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#### References

1. Minn. Stat. 147A.02 and 147A.01 Subds. 23-24.
2. [http://www.aapa.org/the\\_pa\\_profession/quick\\_facts.aspx](http://www.aapa.org/the_pa_profession/quick_facts.aspx) (site visited February, 2012)
3. Standards for accreditation can be viewed at: [http://www.arc-pa.org/acc\\_standards/](http://www.arc-pa.org/acc_standards/) (site visited October, 2011)
4. NCCPA Certification Standards: <http://www.nccpa.net/pdfs/Certification%20Standard.pdf>
5. See: <http://www.augsburg.edu/pa/> (site visited September, 2011)
6. See: <http://www.mayo.edu/mshs/pa-prog-rch.html> (site visited September, 2011)
7. See: <http://www.stkate.edu/academic/mpas/> (site visited April, 2012)
8. See: <http://www.nccpa.net/pdfs/Certification%20Standard.pdf> (site visited September, 2011)
9. See: <http://www.nccpa.net/pdfs/Certification%20Standard.pdf> (site visited October, 2010)
10. <http://www.nccpa.net/pdfs/Certification%20Standard.pdf>
11. Minn. Stat. 147A.02
12. Minn. Stat. 147A.09
13. See Id.
14. Minn. Stat. 147A.09 Subd. 2 (16)
15. Minn. Stat. 147A.09 Subd. 1
16. Minn. Stat. 147A.01 Subd. 24
17. Minn. Stat. 147A.20 and 147A.01 Subd. 23
18. Minn. Stat. 147A.01 Subd, 5
19. Minn. Stat. 147A.01 Subd. 24; Minn. Stat. 147A.01 Subd. 23
20. The document can be filled out online by going to: <http://www.state.mn.us/portal/mn/jsp/content.do?subchannel=-536887085&programid=536909320&id=-536882626&agency=BMP&sp2=y> and clicking on "Notice of Intent to Practice."
21. Minn. Stat. 147A.20 Subd. 2
22. This Agreement must be reviewed and updated on an annual basis and can be filled out electronically by going to: <http://www.state.mn.us/portal/mn/jsp/content.do?subchannel=-536887085&programid=536909320&id=-536882626&agency=BMP&sp2=y> and clicking on "Delegation Agreement."
23. Minn. Stat. 147A.20 Subd. 1 (a) and (d)
24. Minn. Stat. 147A.20 Subd. 1 (c)
25. Minn. Stat. 147A.18 Subd. 1(b)
26. Minn. Stat. 147A.09 Subd. 2
27. Minn. Stat. section 147A.23 (a); Minn. Stat. section 604A.01
28. Minn. Stat. section 147A.23(c)
29. 42 CFR Ch. IV (10–1–07 Edition), § 410.74; [http://edocket.access.gpo.gov/cfr\\_2007/octqtr/pdf/42cfr410.74.pdf](http://edocket.access.gpo.gov/cfr_2007/octqtr/pdf/42cfr410.74.pdf) (site visited September, 2011).
30. See Id.
31. Note that "physician" is defined in this section to include a: physician, physician assistant, nurse practitioner, clinical nurse specialist, nurse midwife, and clinical psychologist. <https://www.cms.gov/manuals/Downloads/bp102c15.pdf> (site visited 12/27/2011).
32. See (See the Medicare Benefit Policy Manual (pub 100-2), Chapter 15, Covered Medical and Other Health Services, Subsection 60, Service and Supplies: <https://www.cms.gov/manuals/Downloads/bp102c15.pdf>) (site visited 12/27/2011)
33. See Id.
34. Minnesota Academy of Physician Assistants, 2008: <http://www.slideshare.net/samuelfjack/minnesota-physician-assistant-employment-guide> (site visited September, 2011).