

Physician Assistants As Members of the Medical Staff

The standards of the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) and the Medicare Conditions of Participation both allow for PA membership on hospital medical staffs. In new hospital standards for 2004, JCAHO recognizes the need to be flexible about medical staff composition. This is addressed in the medical staff chapter overview, where it states: “The governing body and the medical staff define medical staff membership criteria that must include LIPs (licensed independent practitioners) but may include other practitioners as deemed necessary by the governing body and the medical staff. The Joint Commission does not dictate who is eligible for medical staff membership at accredited hospitals. The medical staff may create categories of membership, as in active member, courtesy member, and so forth. These categories may be helpful in defining the roles and expectations for the various members of the medical staff.”



Physician assistants (PAs) who provide patient care in hospitals should be members of hospital medical staffs. Physician assistants provide physician services. While they practice with physician supervision, PAs exercise a high level of decision making and autonomy in providing medical care.

The PA profession believes — and many hospitals concur — that the prudent and appropriate route for determining a PA's scope of practice in an institution is to require medical staff membership, along with the credentialing, privileging, and other quality measures that are part of medical staff oversight. Because PAs provide medical care to patients, it is important that they be full participants in the system through which medical staff policies are made and communicated.

Many hospitals grant medical staff membership to PAs, some as full voting members. In some cases, hospitals include PAs in the “allied health” category of the medical staff. While this may be convenient, it is not clinically appropriate. PAs are providers of medical care — that is, physician services, not allied health services. Other possible categories for PA medical staff members might include “associate medical staff,” “auxiliary staff,” or “ancillary staff.” Hospitals also should be aware of state laws; some are explicit about who may be a medical staff member.

Additional information about physician assistant education, certification, licensure, and other professional practice issues is available at www.aapa.org or by calling AAPA government and professional affairs staff at 703/836-2272. Comprehensive information about the regulation of PA practice in hospitals is available in the AAPA publication, *Physician Assistants and Hospital Practice*, which can be purchased at www.aapa.org/aapastore, or by calling 703/787-8044.

April 2004



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