

Alaska State Medical Board

Policies and Procedures

Board Issued Guidelines	Section 6
Subject:	<i>Scope of Practice for Physician Assistants</i>
Implemented:	
<p>Certified physician assistants may do any task for which they are appropriately educated, trained, and skilled to do as long as they are authorized by their collaborating physician to perform that task. It is the burden of the collaborating physician to insured that the physician assistant with whom they collaborate is properly educated, trained, and skilled for the requirements of the practice. The PA's practice may not exceed the scope of practice of the physician.</p> <p>As with physicians, some physician assistants are trained in certain specialties of medicine. For example, there are those who are trained to work only orthopedics. In Alaska, most physician assistants work in family practice environments.</p>	

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Board Issued Guidelines	Section 6
Subject:	<i>Guidelines for Collaborating Physicians</i>
Implemented:	
<p>Alaska law requires that certified physician assistants must have an active collaborative plan with a physician in order to practice medicine. Following are the requirements of law and the expectations of the board for physicians who enter into collaborative relationships with physician assistants.</p> <p><u>The Collaborative Plan:</u> A collaborative plan is an agreement between a physician and a physician assistant (PA). The plan details the nature of the relationship by asking the physician to define the PA’s scope of practice, practice location, method of referrals, etc. There are minimum standards set by law; however, the plans can be customized to meet the needs of the practice, the physician, and the PA. For example, the law details the prescriptive authority for PAs but the physician may wish to restrict the PA from writing prescriptions in that practice.</p> <p>The collaborative plan is valid when it is approved by a representative of the board and it is noted on the PA’s temporary permit or permanent license. State law requires that a copy of this approved plan be available for review by the public at the place of employment. The physician should retain a copy in their records, as well.</p> <p>The parties to the collaborative plan are the physician and the PA; however, to be approved by the board, there must be at least one alternate collaborating physician who signs the agreement. Alternate physicians may be added and removed in writing, at any time, as long as the alternate physician signs the responsibility statement for alternate physicians. The agreement may be voided at any time by either party to the agreement.</p> <p><u>Qualifications of a Collaborating Physician:</u> The law requires that the physician be actively licensed in Alaska, and must not be under sanction by the board. The physician must, by law, also accept “complete personal or employer liability to a patient of the physician assistant for whom malpractice is adjudged.”</p> <p>It is the board’s expectation that the physician is in active practice, performing a minimum of 200 clinical hours per year. and are collaborating with a PA in the same area of practice. The PA’s practice may not exceed the scope of practice of the physician.</p> <p><u>Responsibilities of a Collaborating Physician:</u></p> <ol style="list-style-type: none">1. The physician must be available for referrals, consultations, and advice to the PA. The physician should also be willing to serve as an educational resource for the PA. <p style="text-align: right;"><i>-continued-</i></p>	

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Guidelines for collaborating physicians (continued)

2. The physician must have a method of quality assurance that includes regular contact with the PA, both via telephone or radio and in person-to-person contacts. State law requires at a minimum: monthly telephone or radio contact and at least two days each quarter of direct and personal contact for the purpose of reviewing the PA's performance in the practice, knowledge, skills, patient care, and health care records.
3. Collaborating physicians are required by law to establish a "periodic method of assessment" of the PA's practice. Methods of assessment include personal observation and evaluation of the PA's clinical skills, assessment of the PA's practice on a regular and on-going basis, and continuing instruction and supervision of the PA's practice. State law requires that collaborating physicians maintain records of assessment. It is the expectation of the board that such records of assessment include performance evaluation records which evaluate the PA's clinical skills, relationships with patients, medical knowledge, and professional attitudes and behaviors. The board does not consider periodic chart reviews to be an adequate method of assessment of a PA's practice. The law also mandates the records of assessment be audited by the board. Evaluating physicians must submit the board form "Periodic Record of Assessment" to board staff to comply with the audit.
4. It is the responsibility of the collaborating physician to maintain records of each collaborative agreement in which he/she is engaged, and to obtain and maintain on file copies of valid licenses and permits prior to allowing the PA to practice.

Scope of Practice for a Physician Assistant

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