

Joint Task Force on the Future of PA Practice Authority

BACKGROUND:

As discussed by the Board at its October 2015 retreat and reiterated in the AAPA strategic plan, one critical issue facing the profession is PA practice authority. As described in the strategic plan, “PAs practice medicine in collaboration with other members of the healthcare team; however, there is a wide spectrum of clinical autonomy in PA practice, depending on specialty and setting. As other professions in healthcare strive for and attain independent practice, some believe the PA profession should attempt to sever any legal link with physicians.” In addition to the [Strategic Plan](#), AAPA’s [Model State Legislation](#) as well as the recently approved [Guidelines for State Regulation of PAs](#) provide a foundation for continued and substantial progress in this area. As well, the House of Delegates recommended further study of the issue of full practice responsibility, referring resolution 2016-A-08 at its May 2016 meeting.

The Task Force on the Future of PA Practice Authority is intended to help AAPA better understand the range of issues involved; document the current statutory, legislative, and operational context; identify options and opportunities; and make AAPA policy recommendations to the Board of Directors and the House of Delegates.

OBJECTIVE:

To consider and make a recommendation to the Board of Directors and House of Delegates with regard to the following foundational questions:

Should AAPA go beyond its current position that:

- **PAs should be able to practice autonomously; and**
- **Individual state COs may pursue full practice authority/full practice responsibility/independent practice for PAs?**

If so, what should that practice authority be called, and how should it be defined and described?

For the purpose of understanding this objective, the Task Force is asked to define or redefine terms, as it deems necessary.

SPECIFIC CHARGES:

1. Consistent with the findings and recommendations of the Task Force, develop a resolution and accompanying rationale for the Board of Directors to consider prior to the May 2017 House of Delegates meeting and for the House of Delegates to consider at the May 2017 House of Delegates meeting.
2. In developing its report and recommendations, the Task Force should:
 - a. Understand and document the current federal, state, and employer context of the practice authority of PAs, APRNs, and other relevant healthcare providers.
 - b. Obtain input and/or feedback from PA stakeholders.
 - c. Develop or select appropriate terms and definitions for different types of PA practice authority.
 - d. Consider and describe what, if any, limitations or requirements should be established for PAs under the Task Force’s recommended PA practice authority (i.e., differences for primary care PAs vs. surgical PAs, contingent upon number of years practicing or number of years practicing in a specialty, etc.).
 - e. Consider and describe the potential benefits of its recommendations for PAs, patients, PA employers, as well as any potential risks and obstacles that should be taken into account (i.e., malpractice insurance).