### **Issue Brief**

# Physician Assistants in Orthopedic Surgery

#### **Benefits for Employers**

Hiring a PA brings several related benefits to employers and patients. Because the physician-PA team reduces appointment waiting time, patients can be seen quickly—a large boost to patient satisfaction. PA patient education and communication skills improve outcomes and free physicians to attend to more complicated cases.

The health care system, institutions, and individual practices can realize considerable savings when PAs are fully utilized. According to the Medical Group Management Association, PAs generate revenues covering far more than what their compensation costs employers. MGMA collects data annually comparing PA compensation with their gross charges. According to the data from 2002, for every dollar of charges a PA generates for a primary care practice, the employer pays on average 28 cents to employ the PA. For PAs in surgical practices, the employer pays 32 cents for every dollar of charges generated. (Physician Compensation and Production Survey, 2003 Report Based on 2002 Data. Reprinted with permission from the Medical Group Management Association, 104 Inverness Terrace East, Englewood, CO 80112-5306; 303/799-1111.)



Orthopedic surgical practices benefit from the enhanced efficiency and continuity of care physician assistants provide. PAs in orthopedic surgery are key team members at each stage of patient care. In 2003, the approximately 3,200 PAs in orthopedic surgical practices conducted 11,094,097 patient visits, an average of 76 a week.

PAs are licensed professionals who practice medicine with physician supervision. Orthopedic surgeons who supervise PAs delegate a wide range of responsibilities. Typical PA duties include performing comprehensive histories and physical exams prior to surgery, ordering and interpreting lab tests, and assisting at surgery. Procedures provided by PAs in orthopedic surgery include tendon repairs; wound closures and debridements; injections of joints and tendons; and brace, cast, and splint applications.

PAs first assist and perform surgical tasks as delegated by their supervising physician. Postoperatively, PAs conduct hospital rounds, write orders, take call, help formulate and implement therapeutic treatment plans for patients, and dictate discharge summaries. PAs also order and prescribe medications and orthopedic devices within the limits of state law.

#### **PA Credentials**

Physician assistants attend intensive medical education programs accredited by the Accreditation Review Commission on Education for the Physician Assistant. The average PA program curriculum is 26 months and is characterized by a rigorous, competency-based curriculum with didactic and clinical components. Programs are offered at medical schools, colleges and universities, and teaching hospitals, and through the U.S. armed services.

The training of PA students in a traditional medical model, including intensive study in basic medical sciences and other clinical subjects, prepares them to be effective providers of physician-directed care.

After graduation from an accredited PA educational program, PAs are required to pass the national certifying examination administered by the National Commission

on Certification of Physician Assistants before they can obtain a license to practice. To maintain certification, PAs must complete 100 hours of continuing medical education every two years and take a recertification examination every six years.

All states, the District of Columbia, and Guam regulate PAs. In those 52 jurisdictions and in many federal agencies, physicians may delegate to PAs those duties that are within the physician's scope of practice and the PA's training and experience and are allowed by law.

#### Seamless Coverage for Hospital and Office -

In a growing North Carolina orthopedic spine surgery practice, a highly experienced PA provides and coordinates treatment in the office and operating room. When a new patient comes for treatment, the PA performs a complete workup. This includes completing a thorough history and physical and ordering any lab tests or diagnostic scans needed to establish a diagnosis in consultation with his supervising physician. Overall, the PA sees between 25-40 patients a day in the clinic. These visits include setting acute fractures, applying casts or braces, and performing facet injections.

Assisting in the operating room, the PA handles patient positioning, tissue retraction, bone graft harvesting, and wound closure. Postoperatively, the surgeon and PA both round on patients, and the PA coordinates patient discharge. For follow-up visits, patients generally see the PA, who helps them complete their recovery with myofascial pain management, physical therapy, marcaine injections, and related treatments. A flexible schedule allows the PA to move between the clinic and operating room according to the needs of physicians and patients. The PA's versatility helps keep the practice agile and responsive to patients undergoing orthopedic surgery and rehabilitation.

#### **Shoulder Care Focus**

Another PA is a key member of a dynamic orthopedic surgical practice in the Midwest, working with a team of seven physicians and eight PAs. Her primary supervising physician is a shoulder specialist. Together, they treat patients for a range of

shoulder injuries, including tendonitis, rotator cuff tears, dislocations, and arthritis.

Typically, she performs a complete history and physical for new patients, ordering any necessary x-rays and diagnostic tests. (The PA and supervising perform complete shoulder exams together.) On the basis of test results and patient interview, the PA makes a preliminary diagnosis, which is honed and finalized through consultation with her supervising physician.

Once a week, the PA first assists during a range of shoulder surgeries (arthroscopic and open procedures). After surgery, the PA helps coordinate patient care, acting as liaison between patients, surgeon, and hospital; reporting on patient status to the surgeon; answering questions from patients and families; and managing the discharge from the hospital. Her role as communicator/coordinator frees her employer to perform additional surgeries and attend to more complex cases.

The eight PAs in the office clinic help the seven physicians with the large number of follow-up visits. Patients are pleased with the continuity of care and the reassurance of having access to both physicians and PAs throughout their recovery.

#### Surgical Care and Pain Management

In another busy practice, five orthopedic surgeons employ three physician assistants to help them. One PA who has worked in the field for 14 years sees patients for preoperative histories and physicals and coordinates their postoperative care. He sees up to 30 patients a day for preoperative and post-surgical care.

Two days a week, he assists his primary supervising physician perform a variety of surgeries, including total hip and knee replacements, and spine surgery including spinal fusion. With a challenging number of patients and practice sites — the surgeons operate at four different local hospitals — patients and physicians benefit from the efficiency, accessibility, and flexibility of PAs as part of the medical team. Patients also appreciate the personalized pain management care from one of three PAs available to answer their questions about medications and assist them step-by-step as they return to mobility.

#### Partners in Surgery and Research

A renowned Utah bone and joint practice showcases the effectiveness of team practice. Here, one of the world's foremost joint replacement surgeons works with his PA, a clinical partner for 17 years. Together, they share vital tasks, performing joint arthroplasties two days a week, with the PA acting as first assistant. In total, the team performs between 12 and 15 surgeries a week.

The PA sees new patients and performs complete histories and workups to assess the nature of their hip or knee problems. He orders x-rays and lab tests as required. When therapy will not suffice and surgery is required, patients meet with the surgeon and PA for comprehensive question and answer sessions. To enhance patient education, the team has created a detailed guide on surgical options, insurance issues, and preparing for and recovering from surgery. In the operating room, the PA assists with patient positioning and draping, tissue retraction, and wound closure as part of total knee and hip replacement procedures.

This dynamic team also collaborates in surgical innovation, researching and implementing new surgical techniques and tools that have been presented at surgical conferences and are being adopted by other orthopedic surgeons. Under the surgeon's leadership, they have developed new implants for joint procedures and pioneered the use of smaller incisions during total hip and knee replacement to make surgery less invasive and allow many patients to return home the same day.

## Third-party Services for Coverage Provided by PAs

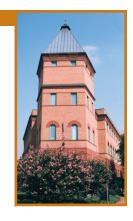
Most third-party payers cover physician services provided by PAs. Payment is made to the PA's employer. Medicare covers physician services provided by PAs at 85 percent of the physician fee schedule. Medicare reimburses a physician who first assists at the rate of 16 percent of the primary surgeon's fee. PA first assistants are covered at 85 percent of 16 percent, or 13.6 percent of the primary surgeon's fee. Detailed information about third-party coverage for services provided by PAs is available on AAPA's Web site, www.aapa.org/gandp/3rdparty.html.

8/04

#### **Additional Resources**

The American Academy of Physician Assistants has several resources to assist a practice or institution in effectively employing a physician assistant. The AAPA Web site features a wealth of information about all aspects of PA practice: www.aapa. org. For more information about PAs in orthopedic surgery, contact Physician Assistants in Orthopedic Surgery, Inc., www.paos.org, P.O. Box 10781, Glendale, AZ 85318-0781; 800/804-7267; fax, 623/581-0085; info@paos.org.

To contact AAPA's Professional Affairs Department with questions about hiring and employing orthopedic surgical PAs, call 703/836-2272, ext. 3220; *jhohman@aapa.org*.



## The following publications are available from the AAPA store. Order on-line at www.aapa.org/aapastore or call 703/787-8044.

#### Hiring a Physician Assistant

This publication includes information about education requirements for physician assistants, guidelines regarding their scope of responsibilities and practice, and a pre-employment checklist. The book also covers topics such as state regulations, national certification, malpractice coverage, employment agreements, recruiting, and compensation. (68 pages)

Members \$25.00 Nonmembers \$50.00

#### Physician Assistant Third-Party Coverage

This resource summarizes third-party coverage policies for PA medical and surgical services, and outlines rules, regulations, and billing concepts for coverage of physician services provided by PAs under Medicare, Medicaid, TRICARE/CHAMPUS, and private insurance companies. Practice issues such as strategies for handling claim denials are also covered. This book provides the physician assistant with insight into courses of action that can be taken to help solve problems and maintain a more positive reimbursement environment. (100 pages)

Members \$25.00 Nonmembers \$50.00

#### Physician Assistants and Hospital Practice

This publication is a summary of information on the practice of PAs in hospitals. It contains policy statements from national organizations, information about JCAHO, patient restraints, EMTALA, model hospital bylaws, and a sample credentialing form. (74 pages)

Members \$25.00 Nonmembers \$50.00

#### Contacts & Contracts: An Employment Guide for PAs

This comprehensive manual helps both new graduates and experienced PAs identify and secure the perfect job. It includes information about job opportunities, employment recruiters, resume and cover-letter writing, the interview process, and contract negotiation. Handy checklists for pre-employment issues, contract negotiations, and resigning procedures are also featured. (108 pages)

Members \$25.00 Nonmembers \$50.00

#### Physician Assistants: State Laws and Regulations

This publication is a detailed resource of state laws and regulations related to the PA profession, including a state-by-state summary of statutes and regulations, with information on scope of practice, prescribing and dispensing, qualifications for practice, and the definition of supervision. It contains summaries of more than two dozen key provisions of each state's statute and regulations complete with legal citations. (9th ed., 300 pages)

Members \$50.00 Nonmembers \$100.00

#### Annotated Bibliography of the PA Profession

An annotated bibliography containing concise summaries of studies, books, reports, and medical journal articles on the PA profession published between 1986 and 1993. (4th ed., 281 pages)

Members \$25.00 Nonmembers \$50.00

#### Addendum to the Annotated Bibliography, 1993-1999

Companion to the Annotated Bibliography. Contains descriptions of the most recent books, journal articles, studies, and reports on PAs. Categorized by practice setting, specialty, and other topics. (200 ed., 92 pages)

Members \$25.00 Nonmembers \$50.00



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