

The American Physician Assistant: A Profile

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Purpose: Physician assistants (PA) play key roles in the US healthcare workforce. All are nationally-certified and state licensed-health professionals. Throughout 56 semi-independent jurisdictions, American PAs practice medicine and work together with physicians and other members of the healthcare team.

Periodic demographic and role assessments offer unique information about the PA workforce, types of patient care provided, and characteristics of patients treated. The results are made available to health workforce planners and policymakers.

Methods: A survey of the estimated 93,098 practicing PAs was conducted by the American Academy of Physician Assistants in 2013; 16, 563 responses from employed PAs were returned (18%). Sample characteristics were matched with those of the PA population, and with other published national surveys of practicing PAs. Data were analyzed separately and added to 10-year trend data on the PA workforce for projection purposes.

Key Findings: Sampling of returns suggests the results are reflective of a representative profile of clinically active PAs based on other independent observations. Among respondents, 65% were female with a mean age of 40 years. The average PA has 10 years of experience as a PA, has been in their specialty for seven years, works 40-45 hours/week, sees 61-70 patients/week, writes 50-100 prescriptions/week, and works with four supervising physicians, three other PAs, and one NP.

PAs work in all broad areas of medicine and surgery. The most common specialty areas include surgery and surgical subspecialties (26%), emergency medicine (10.6%), family medicine (23%), and internal medicine (15%). One-third (32%) of PAs practice in primary care; 57% state that they plan to remain in primary care. Two-thirds (67%) of PAs work in primary care health professional shortage areas, and 39% practice among populations designated as medically underserved (e.g., inner city, rural and remote sites).

Four-fifths (81%) of PAs in primary care report they provide clinical preventive services and are twice more likely to deliver such care when compared to PAs in specialty practices.

In the aggregate, PAs perform a variety of clinical and nonclinical functions across practice settings. The most common clinical activity is writing prescriptions (82%) followed by test and imaging ordering.

Almost all manage acute conditions (80%). In addition, most PAs see patients with chronic conditions and multiple comorbidities; data by specialty and practice setting are presented.

Policy Implications: Physician assistants are distributed across a wide range of medical delivery sites including hospitals and remote clinics in the US, and among the patients who most need medical care.

Practice patterns and tasks performed by PAs are similar to those of the physicians with whom they collaborate, with increasing practice trends in specialties and subspecialties. Health workforce policy discussions need to include roles and contributions of PAs. Further research attention to the rapidly growing PA population is warranted.