



PAs as Primary Care Providers (PCPs)

PAs in US Healthcare

PAs (physician assistants) are proven and integral members of the US healthcare system, with approximately 150,000 practicing across every medical specialty and practice setting.

PAs practice medicine in every state, the District of Columbia, and all U.S. territories. PA scope of practice is determined by the PA's education and experience, state law, facility policy, and the needs of patients. PAs perform physical examinations, diagnose and treat illnesses, order and interpret diagnostic tests, perform procedures, and assist in surgery.

PAs often serve as a patient's principal healthcare provider, and more than 20%* of PAs work in primary care (defined as family medicine, general internal medicine, and general pediatrics).

Source: 2020 AAPA Salary Report

What is a Primary Care Provider (PCP)?

“A clinician who provides integrated, accessible health care services and who is accountable for addressing a large majority of personal health care needs, including providing preventive and health promotion services for men, women, and children of all ages, developing a sustained partnership with patients, and practicing in the context of family and community, as recognized by a State licensing or regulatory authority.”

Affordable Care Act

“A physician [MD or DO], nurse practitioner, clinical nurse specialist or physician assistant, as allowed under state law, who provides, coordinates or helps a patient access a range of health care services.”

Healthcare.gov

PAs Recognized as PCPs

PAs are recognized as being eligible to be PCPs in the [Affordable Care Act](#)*. In addition, more than 30 States have explicit statutory or regulatory language designating PAs as eligible to be PCPs. PAs are also recognized as PCPs by the [Centers for Medicare and Medicaid Services](#), including Medicare's Program of All-Inclusive Care for the Elderly (PACE), Federal loan repayment programs, and many commercial payers. Despite Federal recognition, some commercial payers do not recognize PAs as PCPs or will only recognize them as such if mandated by State law.

*Source: *Patient Protection and Affordable Care Act. Section 5501(a)(2)(A)(i)(II)*.

Why PCP Status for PAs Matters

The inability of a PA to be recognized as a PCP can have detrimental effects, particularly on a patient’s access to care, cost of care, and satisfaction.

If a health insurance plan requires a beneficiary be assigned to a PCP, this can limit access to care, especially in underserved areas if the commercial payer does not recognize a PA as a PCP.

Lack of recognition of PAs as PCPs can also create problems for patients who may be charged a higher copay to see a PA compared to a physician in the same primary care practice because of the lack of a PCP designation. The problem seems to occur when a patient has an insurance plan with different copays for primary care versus “specialty” (or non-primary) care. If a PA is not recognized as a PCP, then the patient may be charged for a non-PCP, or specialist, copay, which might be quite higher than if they saw a primary care physician.

Patient Access	Patient Cost	Patient Satisfaction	Incentive Payments
<p>Health insurance plans might require a beneficiary be assigned to a PCP.</p> <p>This can be a problem if the provider is a PA but is not recognized as a PCP by the managed care plan.</p>	<p>There may be copay differentials for services furnished by a PCP versus a non-PCP. If PAs are not recognized as PCPs, patients may have to pay higher copays to see a PA than to see a physician.</p>	<p>Patients may prefer to receive primary care services from a PA. Patients may not be able to if PAs are not recognized by payers as PCPs.</p>	<p>Some payers have incentive payments for primary care services/providers.</p> <p>If PAs aren’t recognized as PCPs, they and their employers may not be able to receive the enhanced primary care payments.</p>

For these and other reasons, it is important for PAs practicing in primary care to be recognized as PCPs.

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