A physician-PA team enhances allergy and immunology medicine. Instructed in the medical model to provide physician-directed medical treatment, PAs are effective and versatile members of allergy, asthma and immunology practices.

PAs are trained in intensive educational programs accredited by the Accreditation Review Commission on Education for the Physician Assistant. The average PA program is 27 months and is characterized by a comprehensive, competency-based curriculum with didactic and clinical components. Programs are offered at medical schools, colleges and universities, teaching hospitals and through the U.S. Armed Forces. PA students are trained in a traditional medical model, including rigorous study in basic medical sciences and other clinical subjects. This educational design prepares them to be effective providers of physician-directed care.

Physician assistants (PAs) working in allergy and immunology medicine provide a range of diagnostic and therapeutic procedures. A recent study confirms the benefits of employing PAs in asthma practices. The study found patient satisfaction higher in practices that employed a PA compared to those that did not. The study also found that physicians working with PAs were highly satisfied with the PAs' medical knowledge and the level of care they provided.
After graduation from an accredited PA educational program, PAs are required to pass the National Physician Assistant Certifying Examination administered by the National Commission on Certification of Physician Assistants before they can obtain a license to practice. To maintain their 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 the majority of US territories authorize PAs to practice. In those jurisdictions and in many federal agencies, physicians may delegate to PAs duties that are within the physician’s scope of practice, the PA’s training and experience and that are allowed by law. PAs are recognized as covered providers by Medicare and most private insurers.

**PAs in Action**

The versatile and personalized care PAs provide lends itself well to the complexity of allergy and immunology conditions. AAPA had an opportunity to interview leading PAs in their specialties and the following examples attest to their range of work.

**COLORADO PRACTICE EXEMPLIFIES TEAMWORK**

One of Colorado’s largest allergy and asthma practices illustrates the resourcefulness of the physician-PA team. Here, nine physicians and nine PAs work as a closely coordinated and flexible team. Their organization maximizes both the number of patients treated and the personalized attention given to each patient.

One of the PAs has 14 years of experience in allergy and asthma medicine. His calling to this specialty began during PA school when he trained with a renowned asthma researcher at the National Jewish Hospital. The PA, his wife, his daughter and son all have asthma, and this personal experience affords him an extra measure of empathy and wisdom to share with patients.

This PA sees a combination of new patients and ongoing cases, and is a sub-investigator in the clinic’s allergy and research unit. He accommodates same-day patients, thereby boosting patient satisfaction levels. When new patients come to the clinic with unspecified allergy/asthma problems, the PA is available to meet with them for an in-depth discussion of their symptoms and medical history.

Based on the history and physical exam, the PA orders tests for allergens and lung functions, and forms a preliminary diagnosis and treatment plan. The patient is scheduled for a follow-up visit within three weeks to be seen by the PA or his supervising physician. In addition to his many clinical responsibilities, the PA represents the practice at community forums addressing allergy and asthma topics.

**PRACTICE ROOTED IN COMMUNITY**

Another highly experienced PA helps a growing Colorado allergy and asthma practice run smoothly. Serving a community with a large military population, she works in a team with two physicians. During her 15 years of experience in the practice, she has treated many patients from childhood to young adulthood; many of her patients are high school athletes with asthma.

This PA serves the community and her supervising physician well. The PA’s availability has been an asset for the practice, and her presence ensures additional time for patient education. Further, her experience managing the evolving symptoms of her patients has honed her skills as a practitioner. She orders all allergy tests and, when her supervising physician is unavailable, she performs hospital consults. She also aids her supervising physician’s research by performing physicals for study participants and acting as a sub-investigator in clinical trials.

On a typical day, the PA sees both acute and follow-up patients. Chronic and acute sinus conditions comprise a large part of her daily patient load. Yet, there is room in her schedule to see new and acute patients on very short notice. She administers allergy shots and sees patients suffering from allergy and asthma attacks on an as-needed basis.

Additionally, her ability to write prescriptions relieves her supervising physician of an extra task. The physician
welcomes the financial and scheduling benefits of having a PA on hand to administer allergy shots and treat adverse reactions that may occur.

**PARTNERS IN ASTHMA MANAGEMENT**

In a flourishing Washington state allergy and asthma practice, a team of one supervising physician and two PAs treats a wide variety of patients with allergy and immunology conditions. The PAs see most new patients, who have symptoms ranging from atopic dermatitis to chronic coughs. During the first visit, they take detailed histories, perform physical exams and conduct an array of allergy and asthma tests. To keep acute asthma patients from hospitalization as much as possible, the PAs also provide in-office breathing treatments.

Additionally, the PAs staff an immunology clinic where they provide treatments in consultation with the supervising physician. The PAs can effectively remedy any serious reactions to allergy shots given to patients in the clinic.

**BALANCING PATIENT CARE AND RESEARCH**

An exceptional physician-PA partnership of 12 years forms the foundation of a Texas practice with a dual pediatric pulmonology and allergy focus. With two office sites, a large patient base and a slate of clinical trials under way, the practice benefits considerably from the versatility of its PA, who is active in all aspects of the practice and keeps its many activities coordinated.

The supervising physician, a pediatric pulmonologist, inherited a substantial number of allergy patients when his former allergist partner retired. The physician and PA now treat pediatric pulmonary issues — including asthma, bronchitis and pneumonia — along with allergy patients of all ages. The supervising physician sees all new patients while the PA handles the extensive follow-up visits and ongoing cases.

The PA provides a range of care. He treats children and adults with allergic rhinitis, chronic sinusitis, dermatitis and psoriasis. Treating allergic skin conditions is one of the PA’s specialties, and to speed diagnosis, he performs skin punch biopsies and forwards the results to the supervising physician. Also, the PA can test for immunological disorders, including immunoglobulin G subclass deficiency. In consultation with his supervising physician, the PA occasionally administers intravenous gamma globulin in the office.

In the busy allergy shot clinic, the PA provides antidotes for patients experiencing negative reactions to the injections. His presence at the allergy clinic allows his supervising physician to maintain a busy schedule of new patients at the satellite office. The supervising physician has full confidence that the PA can handle most complications that arise. Equally, the PA trusts in the physician’s willingness to take over cases that are beyond his expertise.

Clinical trials are an important part of the clinic’s work, and the PA and supervising physician have jointly administered them for the full 12-plus years of the PA’s employment. As a sub-investigator in clinical trials, the PA closely monitors patients undergoing the protocols.

[The PA’s] presence at the allergy clinic allows the supervising physician to maintain a busy schedule of new patients at the satellite office.

**REIMBURSEMENT**

Nearly all private payers cover medical and surgical services provided by PAs. However, private health insurance companies do not necessarily follow Medicare’s coverage policy rules. Because of the potential variation among insurance companies, practices should verify each company’s specific payment and coverage policies for PAs. AAPA has extensive information about private payer policies available at [www.aapa.org](http://www.aapa.org).

Medicare pays the PA’s employer for medical and surgical services provided by PAs in all settings at 85 percent of the physician’s fee schedule. These settings include hospitals (inpatient, outpatient, operating room and emergency departments), nursing facilities, offices, clinics, the patient’s home and first
assisting at surgery. In certain settings, services that PAs provide may be billed at 100 percent under the supervising physician's provider number by meeting the "incident to" or shared visit billing requirements.

All 50 states and the District of Columbia cover medical services provided by PAs under their Medicaid fee for service or Medicaid managed care programs. The rate of reimbursement is either the same as or slightly lower than that paid to physicians.

For more information about third-party coverage, visit our Reimbursement page at www.aapa.org.

The PA Answer

The high degree of patient education and follow-up care needed in the allergy and immunology specialty make PAs a perfect fit for busy practices. Handling routine and follow-up care with ease, PAs help increase patient access to treatment and enhance satisfaction with care. They also can streamline the schedules of their supervising physicians, enhancing the physicians’ quality of life while creating more time for them to focus on complex and challenging cases. All in all, PAs are a highly beneficial asset for patients and allergists alike.

To learn more, visit AAPA at www.aapa.org, or contact the American Academy of Physician Assistants in Allergy, Asthma, and Immunology at info@aapa-aai.com or 210-722-7622.

References


2 Ibid.