Frequently Asked Questions – Collaborative Practice

Q: Does the new law limit a PA’s or graduate PA’s scope of practice?

A: Yes. The scope of practice of PAs and graduate PAs includes only those duties and responsibilities identified in a collaborative practice agreement or the facility bylaws or procedures of any facility with credentialing and privileging systems.

Q: What is a collaborative practice agreement?

A: A collaborative practice agreement is a written agreement executed by a PA and/or graduate PA and at least one collaborating physician.

Q: Is a collaborative practice agreement required for all Idaho-licensed PAs?

A: A written collaborative practice agreement is required for most PAs and graduate PAs. The only exception is that a written collaborative practice agreement is not generally required for those PAs and graduate PAs who are employed by a facility with credentialing and privileging systems. In those situations, the facility bylaws and procedures will govern the PA’s and graduate PA’s scope of practice.

Q: Could a collaborative practice agreement be necessary if a PA or graduate PA is employed by a facility with a credentialing and privileging system?

Possibly. If the bylaws and procedures of a facility with credentialing and privileging systems do not contain the four elements required by I.C. § 54-1807A and Board Rule, then the elements will need to be addressed through either an employment agreement or a collaborative practice agreement. (Continue reading the FAQ’s for a list of the 4 required elements). For instance, if the bylaws and procedures do not address monitoring parameters which apply to a specific PA or graduate PA, then those monitoring parameters will need to be addressed through an employment contract or collaborative practice agreement.

Q: If a PA or graduate PA is not employed by a facility with a credentialing and privileging system, can a PA or graduate PA practice without a collaborative practice agreement in place?

A: No. Beginning July 1, 2021, before a PA or graduate PA can practice, that individual must have a written collaborative practice agreement in place with at least one collaborating physician. If no such agreement is in place on July 1, 2021, the PA or graduate PA must cease practicing until he/she has a fully executed written collaborative practice agreement.
Q: What do PAs and physicians who are currently in a supervisory relationship need to do?

A: No later than July 1, 2021, any PAs and physicians who are subject to a current delegation of service agreement should enter into a written collaborative practice agreement.

Q: Do I need to notify the Board to terminate a current delegation of service agreement?

A: No. For the Board’s purposes, any DOS agreement will automatically expire on June 30, 2021. On July 1, 2021, PAs and physicians who practice outside of a facility with a credentialing and privileging system must have a fully executed written collaborative practice agreement in place.

Q: Do physicians still need to renew their Supervising Physician registration to supervise PAs or graduate PAs?

A: No, physicians do not need to renew their SPHY license. Similarly, collaborating physicians do not need to submit an Affidavit of Primary Supervising Physician to the Board.

Q: Does the collaborative practice agreement need to be submitted to the Board by July 1, 2021?

A: No. The collaborative practice agreement only needs to be submitted to the Board upon request. Please do not provide the Board with a copy unless the Board specifically requests it. The Board will not retain copies of any agreements which its staff did not specifically request.

Q: Will the Board provide forms for the collaborative practice agreement?

A: No, the Board will not provide a form or template of a collaborative practice agreement. Instead, the Board recommends licensees contact relevant associations, such as the IAPA and IMA, regarding a template and/or contact an attorney for assistance with the preparation of the agreement.

Q: Will the Board approve collaborative practice agreement templates or forms prepared by others, such as the IAPA and IMA?

A: No. Individual licensees, not the Board, are responsible for ensuring any collaborative practice agreement complies with the requirements set forth in I.C. § 54-1807A and Board rule.

Q: What terms or provisions must a collaborative practice agreement contain?

A: Pursuant to I.C. § 54-1807A and Board rule, a collaborative practice agreement must contain the following elements: (1) The parties to the agreement; (2) the authorized scope of practice for each licensed physician assistant or graduate physician assistant; (3) A requirement that the physician assistant or graduate physician assistant must collaborate with, consult with, or refer to the collaborating physician or another appropriate physician as indicated by: the condition of the patient; the education, experience and competence of the physician assistant or graduate physician assistant; and the community standard of care; and (4) if necessary, any monitoring parameters.
Q: Can the collaborative practice agreement contain terms beyond what is required by the statute or Board rule?

A: Yes. The collaborative practice agreement is a contract between one or more PAs and one or more collaborating physician(s). The parties to the agreement can add any agreed-upon terms which make sense for their collaboration. So long as the agreement contains the above-referenced required terms and any additional provisions are not contrary to Idaho law or the community standard of care, the parties are free to make the agreement as detailed or general as they desire.

Q: Will the limits on the number of PAs a physician can work with still be in place?

A: No. The statutes and Board rules do not limit the number of PAs who can collaborate with a single physician. However, a collaborating physician should be mindful of the statutory duties regarding collaboration, consultation and referrals when deciding whether to enter into a collaborative practice agreement with one or multiple PAs and graduate PAs.

Q: Can a PA or graduate PA perform medical services beyond those regarding which the collaborating physician has training and experience?

A: No. Collaboration between a PA and a specific collaborating physician is limited to only those medical services for which the collaborating physician has training and experience. However, a PA can collaborate with multiple physicians through a facility/practice wide collaborative practice agreement or multiple collaborative practice agreements. The PA or graduate PA needs to be mindful that he/she is not performing services beyond those allowable by any collaborative practice agreement or beyond the PA’s or graduate PA’s scope of education, experience, and competence.

Q: Does the collaborative practice agreement need to identify the frequency or types of meetings between a PA/graduate PA and the collaborating physician?

A: While the written collaborative practice agreement can contain this level of detail, such detail is not required. However, the parties must be mindful of their other duties required by Idaho law including, but not limited to the duties to ensure the PA/graduate PA is only performing services within his/her scope of education, experience, and competence; and that the collaborating physician and PA/graduate PA are actually collaborating, consulting, and referring based upon: the condition of the patient; the education, experience, and competence of the physician assistant; and the community standard of care.

Q: Does the collaborative practice agreement need to require medical record reviews by the collaborating physician?

A: While the written collaborative practice agreement can contain this level of detail, such detail is not required. However, the parties must be mindful of their other duties required by Idaho law including, but not limited to the duties to ensure the PA/graduate PA is only performing services within his/her scope of education, experience, and competence; and that the collaborating physician and PA/graduate PA are actually collaborating, consulting, and referring based upon: the condition of the patient; the education, experience, and competence of the physician assistant; and the community standard of care.
Q: Who is responsible for the care provided by a PA?

A: The PA is responsible for the care he/she provides.

Q: What responsibilities does a collaborating physician have regarding the care provided by a PA?

A: The collaborating physician and facility are responsible for ensuring the medical services performed by the PA or graduate PA are within the PA’s or graduate PA’s scope of education, experience, and competence. The collaborating physician must also comply with other legal requirements such as actually collaborating, consulting, and accepting referrals based upon: the condition of the patient; the education, experience, and competence of the physician assistant; and the community standard of care.

Q: Can a PA be disciplined for not complying with the terms of a collaborative practice agreement?

A. Yes. While the Board will not dictate every provision of a collaborative practice agreement, the Board will discipline a PA or graduate PA who is not complying with the law and not properly consulting with, conferring with, and referring to the appropriate collaborating physician.

Q: Can a PA be disciplined for performing services which are outside the scope of any collaborative practice agreement?

A. Yes.

Q: Can a physician be disciplined for not complying with the terms of a collaborative practice agreement?

A. Yes. While the Board will not dictate every provision of a collaborative practice agreement, the Board will discipline a collaborating physician who is not complying with the law and not properly consulting with, conferring with, or accepting appropriate referrals from a PA with whom the physician is collaborating.

Q: Do the parties to the collaborative practice agreement have to be licensed in Idaho?

A. Yes. The PAs, graduate PAs, and collaborating physician(s) must be licensed in Idaho.

Q: Does a PA still need to obtain prescribing authority from the Board?

A. No. Beginning July 1, 2021, PAs will no longer need to submit a Physician Assistant Application for Prescription Privileges to the Board of Medicine or obtain the Board of Medicine’s authorization to prescribe or to obtain a Board of Pharmacy or DEA controlled substance registration. Beginning July 1, 2021, a PA’s prescribing privileges will be governed by the collaborative practice agreement or the facility bylaws or procedures of any facility with credentialing and privileging systems. PAs will need to go directly to the Board of Pharmacy and the DEA to obtain the necessary controlled substance registration.