

AMERICAN MEDICAL ASSOCIATION ORGANIZED MEDICAL STAFF SECTION

Resolution: 5
(A-23)

Introduced by: Oklahoma

Subject: Advocate to The Joint Commission to Redefine the Term "Provider"

Referred to: OMSS Reference Committee
(xxxx, MD, Chair)

- 1 WHEREAS, Communication is the key to a strong patient-doctor relationship; it is critical to use
2 correct terms and particularly important to use the word "physician" instead of "provider"; and
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4 WHEREAS, Patient care experience is of the utmost importance to our profession and using the
5 word "provider" to describe physicians is detrimental to that interaction; and
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7 WHEREAS, The premise of the "provider" based environment is that health care delivery is
8 essentially a commercial transaction, a market-based enterprise with a market ethic; and
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10 WHEREAS, The word "provider" is confusing to patients and they deserve to know who does
11 what on the team of medical professional who take care of them; and
12
13 WHEREAS, The word "provider" levels distinctions and implies a uniformity of expertise and
14 knowledge among health care professionals as well as erroneously implies that "providers" are
15 interchangeable and patients can expect to receive the same level of care from any "provider";
16 and
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18 WHEREAS, By lumping the care team together with the word "provider", patients do not know
19 whether they are seeing a nurse, physician, therapist, physician assistant, or nurse practitioner;
20 and
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22 WHEREAS, Our American Medical Association considers the generic terms "health care
23 providers" and "providers" to be inadequate to describe the extensive education and
24 qualifications of physicians licensed to practice medicine in all its branches and has instituted an
25 editorial policy prohibiting the use of the term "provider" in lieu of "physician" in all AMA
26 publications outside of JAMA (AMA Policy H-405.968); and
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28 WHEREAS, In December 2022, The Joint Commission (TJC) stated they will no longer use the
29 term "licensed independent practitioner" in its hospital and critical access hospital standards,
30 replacing it with the term "licensed practitioner" as of February 2023¹; and
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32 WHEREAS, According to the TJC, "the revisions are consistent with current terminology used
33 by the Centers for Medicare & Medicaid Conditions of Participation," and "better reflects the full
34 scope of practice of licensed practitioners allowed by their license and permitted by state and
35 federal law and regulation while keeping the intent of the requirement"²; and
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37 WHEREAS, In addition to eliminating the term "licensed independent practitioner," TJC is also
38 updating, revising and/or deleting the following terms from its glossary: Staff (revised); Clinical

1 staff (revised); Practitioner (replaced with Licensed practitioner); Licensed independent
2 practitioner (deleted); and Provider (new)³; and

3
4 WHEREAS, TJC pre-publication standards effective February 19, 2023, revised glossary
5 definitions defines “provider” as “a licensed individual or organization that provides health care
6 services outside the accredited organization”³; and

7
8 WHEREAS, The TJC definition of “provider” refers to both individuals and organizations, which
9 is inherently confusing and does not allow the distinction of expertise and knowledge of
10 physicians; therefore be it

11
12 RESOLVED, That our American Medical Association advocate to The Joint Commission to
13 redefine the term “provider” in their revised glossary as to separate “licensed individuals” and
14 “organizations” and should not use the term “provider” when referring to physicians (Directive to
15 Take Action); and be it further

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17 RESOLVED, that our AMA encourage The Joint Commission to not delete the term and
18 definition of “licensed independent practitioner” (Directive to Take Action).

Fiscal Note: TBD

Received: 4/28/2023

References:

1. Kondilis, K. (2022). *Joint Commission Eliminates Use of “Licensed Independent Practitioner”*. Patient Safety & Quality Healthcare News.
<https://www.psqh.com/news/joint-commission-eliminates-use-of-licensed-independent-practitioner/>
2. The Joint Commission. (2023). *The Term Licensed Independent Practitioner Eliminated for AHC and OBS* [Press release].
<https://www.jointcommission.org/standards/prepublication-standards/the-term-licensed-independent-practitioner-eliminated-for-ahc-and-obs/>
3. The Joint Commission. (2022). *Revisions to Eliminate Terms “Licensed Independent Practitioner”*. Prepublication Requirements, issues November 21, 2022.
https://www.jointcommission.org/-/media/tjc/documents/standards/prepublications/effective-2023/lip_hap_glossary_prepub.pdf

RELEVANT AMA POLICY

Clarification of the Term "Provider" in Advertising, Contracts and Other Communications H-405.968

1. Our AMA supports requiring that health care entities, when using the term "provider" in contracts, advertising and other communications, specify the type of provider being referred to by using the provider's recognized title which details education, training, license status and other recognized qualifications; and supports this concept in state and federal health system reform.

2. Our AMA: (a) considers the generic terms "health care providers" or "providers" as inadequate to describe the extensive education and qualifications of physicians licensed to practice medicine in all its branches; (b) will institute an editorial policy prohibiting the use of the term "provider" in lieu of "physician" or other health professionals for all AMA publications not otherwise covered by the existing JAMA Editorial Governance Plan, which protects editorial independence of the Editor in Chief of JAMA and The JAMA Network journals; and (c) will forward to the editorial board of JAMA the recommendation that the term "physician" be used in lieu of "provider" when referring to MDs and DOs.

Citation: Sub. Res. 712, I-94 Reaffirmed: Res. 226, I-98 Reaffirmation I-99 Res. 605, A-09 Reaffirmed: CLRPD Rep. 1, A-09 Modified: Speakers Rep., A-15 Reaffirmed: BOT Rep. 09, A-19

Education of the General Public on the Role of Physician and Non-Physician Health Care Providers H-450.955

The AMA will educate the general public and legislators to the differences between physician and non-physician providers of clinical services regarding their unique training, experience, broad based knowledge, ability and expertise, which impacts on their ability to provide high quality clinical care.

Citation: res. 308, A-98; Reaffirmed: A-99; Reaffirmed: CMS Rep. 5, A-09; Reaffirmed: BOT Rep. 9, A-19