

Hearing Date: March 14, 2023

Committee: Finance

Bill: [SB673 – Physician Assistants - Revisions \(Physician Assistant Modernization Act of 2023\)](#)

Position: SUPPORT

This is a letter in **Support of SB 673- PA Modernization Act.**

I am a licensed Maryland physician assistant (PA), a faculty member of the PA Program of George Washington University School of Medicine & Health Sciences, and a recent (2020) past president of the PA Education Association (which represents all 300 of the PA programs within the United States). I am writing in support of updating the Maryland rules for the practicing the PAs. As health care has recognized the quality, training, and capabilities of PAs, many states have removed unnecessary barriers. These barriers placed undue hardships on patients, physicians, and PAs. This bill will remove barriers, update and streamline how PAs practice in the state to provide more productive patient care.

I will provide a small overview of PA education. PAs are clinicians who have received rigorous academic and clinical training that prepares them to provide quality health care services in collaboration with other health care team members. PA training programs are accredited by the Accreditation Review Commission on the Education for the Physician Assistant (ARC-PA), which provides and maintains standards of quality for PA education. PA education has two phases, the didactic (classroom/lab) phase and the clinical phase. PA program didactic curriculum includes basic medical, behavioral, and social sciences. Specific topic areas include anatomy, physiology, pathophysiology, genetics, immunology, microbiology, and pharmacology. Our didactic clinical preparation has over 300 hours of clinical medicine, 130 hour of clinical decision-making, 60 hours of behavioral medicine, 100 hours of pharmacology, and 90 hours of technical skills and procedures training. In the clinical education phase students complete more than 2000 hours of clinical rotations in family medicine, internal medicine, psychiatry, surgery, obstetrics and gynecology, emergency medicine and other subspecialties. In this phase PA students get hands-on learning in clinical locations like hospitals, clinics, private practices and are trained by physicians and PAs. This prepares them to deliver health care services in collaboration with other clinicians and health care team members.

The current barriers for PAs within the state makes Maryland a less desirable place to work. PA students at George Washington University have clinical rotations across the Maryland, District of Columbia, and Virginia area. They compare what it takes to practice in each jurisdiction and are disappointed by such things as Maryland PAs inability to sign certain forms which can delay tests or treatments for patients. They are surprised by the idiosyncrasy of Maryland regulations requiring PAs to ask to be granted advanced privileges to perform procedures that they have learned in their basic training in PA school. Approximately one third of our students come from

Maryland but many choose to practice in DC or Virginia because they perceive those regulations for PAs in those jurisdictions as more in synch with modern practice of medicine.

SB 673- PA Modernization Act will allow Maryland to optimize the talents of its health care workforce through the effective use of PAs. It will enhance more efficient patient care, promote productive team care, and attract additional PAs to work and remain in the state. For these reasons, I support this bill.

Sincerely,

A handwritten signature in black ink, appearing to read "H. Straker", with a long horizontal line extending to the right.

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