



MARYLAND ASSOCIATION OF DERMATOLOGY PHYSICIAN
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Testimony on SB 673 & SB 674

**Physician Assistants – Revisions (Physician Assistant Modernization Act)
PA Parity Act
Position: Favorable
Senate Finance Committee**

March 13, 2023

To: The Honorable Melony Griffith, Chair, Finance Committee

Dear Chair Griffith:

As president of the Maryland Association of Dermatology Physician Assistants (MADPA), I am providing oral and written testimony asking for **your vote in favor of SB 673 Physician Assistant Modernization Act and SB 674**. MADPA supports this legislation put forth by the Maryland Academy of Physician Assistants (MdAPA).

Physician Assistants (PA's) play a critical role in the delivery of healthcare and increase patient access to care in Maryland, and particularly in underserved and rural communities. In rural communities, there are fewer primary care and specialty physicians. PAs are trained and educated in all specialties and clinical settings. Therefore, they would be able to fulfill those underserved communities. By removing the barriers of the current law, the scope of practice would be determined by the clinical setting and what is in the best interest for the practice and patient care. Also, it would provide greater flexibility for PAs to deliver healthcare to all citizens of Maryland in all clinical settings and communities.

Maryland legislation is behind the times when it comes to the PA profession. The national PA/Physician model is to define the nature of the PA working with physicians and replace it with "collaborative agreements". Furthermore, having clear laws and regulations that state physicians are not responsible for the care provided by PAs reduces physician risk but does not reduce patient safety.

In my own specialty of dermatology, COMAR 10.32.09 regulations, Dermatology PAs are being held to a standard equivalent to that of no other PA. According to these regulations, cosmetic procedures require increased supervision. This hindrance is not experienced by other advanced practice providers, such as Nurse Practitioners who have equivalent education and perform these very same procedures. This over-regulation is unnecessary and burdensome to the dermatologist and PA and hinders the flow of the practice. The theoretical "safety net" provides a false sense of security and has no statutory basis.

The Board of Physicians list of current advance duties “is not all inclusive”, so you have to guess what they are. This leads to confusion on the practice level, as to whether or not they're practicing within proper state regulations. Who is to determine if there is an advanced duty that is not listed? It is the physician and the PA who decide if these duties fall within their scope of practice. This collaboration is ALREADY happening on the practice level. This has not changed patient safety to date.

As part of Maryland law, the “collaborative agreement” has been in effect since 1979 for other practitioners with equivalent education. PAs could be part of the solution to fulfill Maryland’s healthcare workforce shortage by removing the legislative barriers in the current law.

Maryland’s clinically practicing licensed PAs and students are carefully monitoring improvements in neighboring state laws, as they decide to continue employment in Maryland to begin practice upon graduation. Maryland will not be able to keep pace with the recruitment and retention rate of these highly educated and skilled PAs without positive legislative changes. Maryland, as well as in these other states are struggling with the same issues of healthcare shortage. Maryland is losing PAs to its surrounding states that do not have the hassle and struggle of the restrictive burdensome PA practices laws in Maryland.

The PA profession in Maryland is at a critical point to keep pace with the rest of the country and be in a position to recruit and retain PAs. It is worrisome that PAs are electing to leave Maryland for other states where legislative laws are more conducive and where PAs can practice medicine in autonomy to their fullest ability of their experience, education and training.

PAs take the same Hippocratic Oath as physicians. An oath “To uphold professional ethical standards of medicine”, and not to be ashamed to say "I know not,” nor fail to call colleagues when the skills of another are needed for a patient's treatment plan. PAs have their own medical license, malpractice insurance, practice standards, NPI number and ethical morality to uphold. We are requesting that you remove the legislative barriers in the current law to PA practice and implement an improved statutory and regulatory environment for PAS, with the scope of practice at the practice level, collaborative agreement with registration.

For these reasons, we urge a favorable report on Senate Bill **673** Physician Assistant Modernization Act.

Respectfully submitted,

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