

Hearing Date: March 14, 2023

Committee: Finance

Bill: [SB674 – Parity With Other Health Care Practitioners \(Physician Assistant Parity Act of 2023\)](#)

Position: SUPPORT (Favorable)

This is a letter in **Support of SB 674- PA Parity Act.**

Madam Chair,

I ask that you please vote in favor of SB 674. My name is Jennifer Grover and I have been practicing as a PA in Maryland since 2010. I have been trained in multiple subspecialties including OB/GYN, orthopedics, and internal medicine. I have also been working with hospital administration on standardization of care amongst all providers and I can attest as to the current administrative burden that hiring PAs pose to organizations, especially in underserved communities. I have had the privilege of being a past president and current legislative director of the Maryland Academy of Physician Assistants (MdAPA). While holding these positions I have received a startling amount of correspondence from PAs and administrators regarding the arbitrary rules that restrict PAs ability to serve their patients. Including not being able to sign necessary documents for their own patient population. Parity with other licensed providers is essential to the delivery of healthcare especially in underserved areas. PAs are very well trained to provide excellent medical care within their training and experience, however, are limited by the unfortunate exclusion of PA in laws regarding Physicians and Nurse Practitioners.

Voting in favor of SB 674 will:

- Lessen the administrative burden for healthcare organizations and physicians, increasing the ability to have PAs provide quality medical care in underserved communities.
- Reduce unnecessary delays in care, the inability for PAs to sign documents required for their patients.
- Reduce cost of care created by the additional visits and redundancy in office visits to see multiple providers.
- Eliminate the hospital administrative confusion when PA, Physician and NP are hired in the same department to do the same job, but PA are the only providers with arbitrary restrictions.

To continue to burden PAs and health systems with regulations that are inconsistent with other surrounding states and the rest of the country is contradictory to the effort to expand access to primary care.

In closing, I would like to thank the members of the Committee for this opportunity to highlight the challenges of PAs to work in underserved areas and would strongly encourage your support of SB 674.

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