

Hearing Date: March 6, 2023

Committee: Health and Government Operations

Bill: HB727- Physician Assistants – Revisions (Physician Assistant Modernization Act of 2023)

Position: SUPPORT (Favorable)

This is a letter in **Support of HB 727- PA Modernization Act of 2023.**

I serve as the emergency department chair of a community hospital in Baltimore and have worked alongside of, managed, and consulted with many PAs over my 1 years of practice. The premise of this bill reflects the current practice of healthcare today. Physician assistants are highly trained team members that add an additional layer of support, care, and access to our patients. Our PAs do not function in a vacuum under one supervising physician, but truly collaborate with the entire healthcare team including physicians, other advanced practice providers, nursing, allied health, and administrators. In our healthcare system, we have flexibility to move our nurses, allied health, and physicians to where the need is most. For PAs, we do not provide the same flexibility despite being fully licensed, having a defined curriculum for education and training, and standard delineation of privileges across all our service lines. Currently, with every new chair or attending that comes into the department, a host of administrative documentation follows; despite the role of the physician assistant never changing.

PAs continue to be required to have the supervising physician name on all their prescriptions. This is occurring even when the physician assistant holds their own DEA and CDS license and has completed the necessary education to maintain their prescriptive licenses. The PA can and should be responsible for the prescriptions they write, untethered to a physician.

Lastly, the idea around filing for advanced duties is laborious and unnecessary. As with any profession, PAs perform procedures according to their training. Medicine is ever changing, and new procedures and techniques must be learned. We hold training sessions for physicians and PAs alike for new techniques, yet our PAs must submit additional paperwork. The "list" of advanced duties continues to change and will continue to do so in medicine. Learning procedures is something that is routine to all medical professions. Moreover, individual hospitals already oversee and regulate the privileges and procedures they have at their individual sites based on training and competencies. To require PAs to then provide the same information to the state is time consuming and duplicative.

Thank you for your consideration.

Sincerely,



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