SB0167 Physician Assistants – Revisions (Physician Assistant Modernization Act of 2024)

Support Testimony of Jennifer Barnett (FAV)

Population Health Physician Assistant Work at a Federally Qualified Health Center with locations in Harford and Cecil County jbarnettpa@gmail.com

Good afternoon, members of the Senate Committee,

I am Jennifer Barnett, MPAS, PA-C, a Maryland licensed physician assistant working for a Federally Qualified Health Center in Harford and Cecil County, Maryland. I support the bill, SB 167 - Physician Assistant Modernization Act of 2024, legislation put forth by the Maryland Academy of Physician Assistants (MdAPA).

As you are aware, Maryland is currently grappling with significant shortages in healthcare providers. These shortages place immense pressure on existing practitioners and severely limit patients' access to essential care services, particularly in crucial areas such as primary care, women's health, behavioral health, and underserved rural communities. Physician Assistants (PAs) offer a valuable solution to this challenge. Trained on an accelerated medical model and emphasizing a collaborative, team-based approach, PAs work closely with physicians and other healthcare professionals to deliver comprehensive care. However, the administrative hurdles in hiring PAs in Maryland only exacerbate the strain on healthcare facilities, increasing administrative costs and delays in employing these highly trained professionals.

I am a physician assistant with over 20 years of experience who transitioned to family practice at a FQHC. Our practice has hit many administrative barriers with the layer of approvals for duties through the board of physicians. Procedures that are common in family practice, such as female contraceptive placement and removal, injections of joints, and superficial skin biopsy, I am trained and skilled, but I must submit pages of additional documents to be able to perform. In addition, my supervising physician is not on-site to directly supervise me, which makes the burden of 10-25 directly supervised procedures nearly impossible. If these procedures are needed, the patient must schedule another visit with another provider, causing additional copay, transportation, and delay. Because of these administrative burdens, I am one of the few Physician Assistants our FQHC has hired. There are a large number of PAs who would love to work for FQHCs and provide primary care, but our current laws cause significant barriers.

The proposed legislation focuses on removing these administrative barriers, which delay the employment and utilization of well-trained, compassionate PAs, who can assist in reducing the gap in access to care and the unprecedented healthcare shortage.

Thank you for your time and commitment to Maryland,

Jennifer Barnett, MPAS, PA-C Population Health Physician Assistant Federally Qualified Health Center in Harford and Cecil Counties