

To: House Health Care Committee
From: Jessa Barnard, Vermont Medical Society
Date: May 12, 2020
RE: S. 128, An Act Relating to Physician Assistant Licensure

The Vermont Medical Society is pleased to testify in support of S. 128, An Act Relating to Physician Assistant Licensure. The Vermont Medical Society (VMS) is the largest physician membership organization in the state, representing over 2000 physicians and medical students across all specialties and geographic locations, as well as over 150 physician assistants.

VMS is very supportive of efforts to modernize the PA regulatory structure. As you are aware, the practice of medicine for both physicians and PAs has changed greatly in the past few decades, away from small physician-owned practices to larger groups and hospital-employed practitioners. This change has had impacts on the relationships between physicians and PAs, as the physicians in the practice are likely no longer responsible for hiring or day-to-day oversight of PAs. This reality has made physicians more wary to take on the legal liability that currently attaches to the PA supervision requirement and also means that the currently regulatory structure for PAs in Vermont does not reflect the changes in PA practice over time.

VMS and the PA Association of Vermont (PAAV) held a series of meetings starting in 2017 to discuss regulatory changes that could modernize PA regulation. Based on those conversation, VMS supports the changes found in S. 128 (and the amended language offered by the PAAV) that:

- **Simplify documentation and administrative requirements** in the PA-physician relationship: the proposal would remove the need for delegation agreements with primary and secondary supervising physicians. Instead, PAs would be required to practice according to a practice agreement with one practice-identified physician.
- **Update the terminology** away from physician “supervision” according to a “delegation agreement.” Instead PA practice would be defined as the practice of medicine by a PA in a practice agreement with a physician.
- **Update the regulatory standards** to reflect the variety of structures and needs of practices: practice agreements would be written by the practice and describe the process between the PA and physician/physician group for communication, availability, decision-making and periodic joint evaluation of the PA’s services and must include an agreement that the PA’s scope of practice shall be limited to medical care that is within the education, training and experience of the PA.
- **Continue a commitment to team practice** and a meaningful, documented relationship between physicians and PAs.
- **Remove physician liability for PA practice** solely based on being the participating physician who completes a practice agreement. Instead physician assistants would be legally liable for their medical decision-making. We support the new language in Section 3 that modernizes language previously found in the PA section of statute regarding delegating activities to other medical technicians or assistants.

We ask for the Committee’s support of S. 128, as VMS believes this is an important step forward to modernizing and strengthening Vermont’s PA – and physician - workforce. I would be happy to answer any additional questions.