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June 1, 2009

The Independent Regulatory Review Commission:

I am writing on behalf of the Pennsylvania Society of Physician Assistants regarding regulation 16A-5318 which would permit physician assistants practicing under the direction of an osteopathic physician to prescribe drugs. We approve the amended language to section 15.177 (a) (3) which deals with Schedule II controlled substances and respectfully request approval and subsequent adoption of this regulation.

As you are aware in 1993 allopathic physicians (MDs) were given authority to delegate prescriptive privileges to PAs. Because MDs and osteopathic physicians (DOs) are regulated by separate boards in Pennsylvania, the authority to delegate prescriptive privileges did not apply to DOs who supervised PAs. Currently the Pennsylvania State Board of Osteopathic Medicine is the only board that regulates PAs in the entire United States that does not allow PAs to prescribe medications. In March 2007, the State Board of Osteopathic Medicine (SBOM) proposed regulations that would give DOs this authority and it was published in the Pennsylvania Bulletin in October 2007. This would mean that we only have until October of 2009 for final approval or the process would need to start over.

When the regulations governing the practice of PAs working with DO supervision are substantially different than the regulations governing the practice of PAs working with MD supervision, the result is too often widespread confusion among practice administrators, PAs, physicians and patients. Many PAs work in group practices that include both MDs and DOs. In these situations, the rules governing the PA's prescriptive privileges may change significantly day-by-day depending on which physician is providing supervision. If these regulations are not passed before October of 2009, our window of opportunity will pass and this disparity will continue.

Another concern that we have is access to care. Pennsylvania can expect substantial shortages of physicians by 2020 that will cut across most specialties. According to research done through the Pennsylvania Medical Society the specialties that serve the elderly will show the greatest shortages. In a state with a growing elderly population this regulation to allow PAs to practice to the fullest extent of their training is imperative. With the evolving changes in the healthcare climate we find that any delay in processing this bill would further impair access to care for many patients in Pennsylvania.

Thank you for your time and consideration of this matter.

Sincerely,

Linda Sekhon, MMS, PA-C
Pennsylvania Society of Physician Assistants

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