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April 21, 2009

Honorable Michael McGeehan 221 Irvis Office Box 202173 Harrisburg, PA 17120-2173

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Dear Representative McGeehan:

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 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. As you are aware, in March 2009, the House Professional Licensure Committee approved the final regulations with the support of the SBOM. Unfortunately one month later the SBOM reversed its position. At their April 8, 2009 meeting the SBOM approved an amendment to section 25.177 (a) (3) which deals with Schedule II controlled substances.

The amended language in this section only concerns Schedule II controlled substances and does not affect medications prescribed on a daily basis for routine care. Although we are unhappy with the exact wording and the process in which approval by the SBOM was rescinded, the inconsistency that currently exists with PA practice regarding delegated authority to prescribe within Pennsylvania takes precedence. 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.

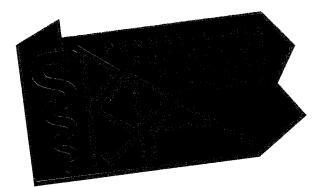
Thank you for your time and consideration of this matter.

Sincerely,

Linda Sekhon/ 20

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

Cc; Basil Merenda, Chairman Bureau of Professional & Occupational Affairs Arthur Coccodrilli, Chairman, Independent Regulatory Review Commission Honorable Robert Tomlinson, Chair, Consumer Protection & Professional Licensure



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Honorable Robert Tomlison 362 Capitol Building Box 203006 Harrisburg, PA 17120

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