

July 24, 2019

Steven M. Jenkusky, MD  
Chair  
New Mexico Medical Board  
Attn: Sondra Frank, Esq. Executive Director  
2055 South Pacheco Street, Bldg. 400  
Santa Fe, NM 87505

Re: Comments proposed repeal and replacement of 16.10.16 NMAC (Administering, Prescribing, and Distribution of Medications)

Dear Dr. Jenkusky:

On behalf of the American Medical Association (AMA) and our physician and medical student members, I write to **express our serious concerns with the proposed amendments to 16.10.16 NMAC (Administering, Prescribing, and Distribution of Medications by Physician Assistants)** for consideration by the New Mexico Medical Board (Board). We understand these changes are pursuant to House Bill (H.B.) 215 as enacted by New Mexico's legislature in 2017. This legislation, in part, granted physician assistants authority to prescribe, administer, dispense and distribute certain drugs pursuant to rules adopted by the Board, with the supervision or collaboration of a licensed physician. We believe the proposed rule under consideration by the Board exceeds the authority granted in H.B. 215 by removing all references to physician supervision. As such, the proposed rule would inappropriately authorize physician assistants to prescribe, administer, dispense and distribute dangerous drugs independent of physician supervision or collaboration. This is clearly not the intent or language of H.B. 215 and sets a dangerous precedent for patients.

The AMA has long valued the commitment of physician assistants to the team-based model of care, and greatly respects the contributions physician assistants make to the health care team. Physician assistants are an integral part of physician-led health care teams across the country and as such, are important partners in helping patients receive the most patient-centered, highest quality care possible. Yet, physician assistant education is inadequate for the independent practice of medicine, including administering, prescribing, dispensing or distributing dangerous drugs. Physicians complete more than 10,000 hours of clinical education and training during their four years of medical school and three-to-seven years of residency training. By sharp contrast, the current physician assistant education model is two years in length with 2,000 hours of clinical care – and includes no residency training requirement.

Scope of practice should be based on standardized, adequate training and demonstrated competence in patient care. The well-proven pathways of education and training for physicians include medical school and residency, and years of caring for patients under the expert guidance of medical faculty. **Allowing inadequately trained professionals to prescribe dangerous medications, including controlled substances, without the support and mentorship of a team-based practice environment poses an unacceptable risk to patient safety.**

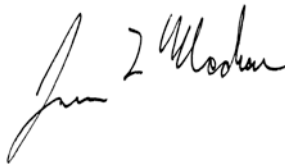
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This approach is particularly troubling at a time when we are working so hard to reverse the opioid epidemic. While we are making progress on this front including reducing the number of opioid prescriptions and encouraging all health care providers to enhance their education about opioid prescribing, pain management and screening for substance use disorders, now is not the time to add to the list of prescribers, especially unsupervised prescribers.

We urge the Board to support amendments offered by New Mexico Medical Society to the proposed rule, including language that clearly states the physician assistant may only act under the supervision or collaboration of a licensed physician as provided in New Mexico law.

Thank you for your consideration. If you have any questions, please contact Kimberly Horvath, JD, Senior Legislative Attorney, AMA Advocacy Resource Center, at [kimberly.horvath@ama-assn.org](mailto:kimberly.horvath@ama-assn.org) or (312) 464-4783.

Sincerely,

A handwritten signature in black ink, appearing to read "Jams L. Madara". The signature is written in a cursive style with a large initial "J" and "M".

Jams L. Madara, MD

cc: New Mexico Medical Society  
Barbara L. McAneny, MD