

April 30, 2021

Members of Louisiana House of Representatives
State of Louisiana
State Capitol
P.O. Box 44486
Baton Rouge, LA 70804-4486

Re: **AMA Opposition to Louisiana H.B. 442**

Dear Members of the Louisiana House of Representatives:

On behalf of the American Medical Association (AMA) and our physician and medical student members, I am writing to express our **strong opposition to House Bill (H.B.) 442**. By eliminating physician supervision of physician assistants, this bill would allow physician assistants to independently diagnose and treat patients, as well as prescribe controlled substances without any physician involvement. **No other state allows this arrangement, setting Louisiana on an untested and dangerous path.** More important—it is not what patients want. In a recent AMA survey, 68% of U.S. voters agree physicians should be involved in their medical diagnoses and treatment. Patients want and expect the most educated and highly trained health care professional to be involved in their care. As such, we strongly encourage you to stand up for patients and oppose H.B. 442.

The AMA is deeply concerned that H.B. 442 eliminates physician-led teams. In fact, H.B. 442 sets Louisiana apart from every other state, including the 40 states that currently require physician supervision of physician assistants, nine states that require physician collaboration, and one state in which physician assistants are required to work with a participating physician according to the terms of a written practice agreement. **If H.B. 442 is enacted, Louisiana will be a stark outlier to all other states, putting Louisiana patients at risk.**

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. It is our long-held belief that health care professionals' **scope of practice should be based on standardized, adequate training, and demonstrated competence in patient care.** This is imperative in protecting the health and safety of our patients.

While all health care professionals share an important role in providing care to patients, their skillsets are not interchangeable with those of a fully trained physician. Patients want and expect a physician to be involved in their medical diagnoses and treatment decisions. Physician-led health care teams allow all members to draw on their specific strengths, work together, and share information and decision-making for the benefit of the patient. Just as teams do in business, government, sports, and schools, health care teams require leadership. With seven or more years of postgraduate education and more than 10,000 hours of clinical experience, physicians are uniquely qualified to lead the health care team. By sharp contrast, the current physician assistant education model is two years in length with only 2,000 hours of clinical care—and no residency requirement. Patients expect the most qualified person—physician experts with unmatched training, education, and experience—to deal with the unexpected. Yet, H.B. 442, removes physician supervision of physician assistants, thereby removing the most qualified person on the care team.

Physician assistant educators agree: physician assistant education is inadequate for independent practice

The AMA agrees with the conclusion of physician assistant educators that physician assistant education is inadequate for independent practice. The Physician Assistant Education Association (PAEA) surveyed physician assistant educators—program directors, past presidents, and medical directors—about independent physician assistant practice. (PAEA. Optimal Team Practice: The Right Prescription for New PA Graduates? Available at http://paeaonline.org/wp-content/uploads/2017/05/PAEA-OTP-Task-Force-Report_2017_2.pdf.) Overwhelmingly, respondents concluded that the current physician assistant school curriculum does not adequately prepare physician assistants to practice without physician supervision, collaboration, or oversight. Rather, the current education system trains physician assistants under a model created with the intention to prepare physician assistants to practice in a mutually beneficial team-based care model under the supervision of or in collaboration with physicians.

Specifically, in the PAEA survey, first, all respondents were asked, “[D]oes your program’s current curriculum already prepare your graduates to practice without a supervisory, collaborating, or other specific relationship with a physician in order to practice?” **Eighty-six percent of physician assistant program directors and 100 percent of PAEA past presidents responded, “no.”**

Next, particular concern was expressed by physician assistant educators about the implications of proposals to remove physician supervision or collaboration for new physician assistant school graduates, who “may have an incomplete understanding of their own limitations and knowledge and/or are practicing in settings where there are geographic or other barriers to consultation.” According to the PAEA, this could lead to the negative consequences of compromising physician assistants’ success and confidence and pose a potential risk to patient safety.

Moreover, many physician assistant students are under the impression that upon graduation they will be practicing under a high degree of physician collaboration, which may decrease as they gain experience. **PAEA data indicates that 91 percent of physician assistant students nearing graduation described the collaborating physician relationship as “essential” or “very important.”** The AMA agrees, and as such, encourages legislators in Louisiana to oppose H.B. 442.

As the provision of health care in this country becomes more complex, a fully coordinated, quality-focused and patient-centered health care team will be the optimal means by which Americans will receive their health care. In the physician-led team approach, each member of the team plays a critical role in delivering efficient, accurate, and cost-effective care to patients. The AMA is committed to helping all members of the health care team work together in a coordinated, efficient manner to achieve the triple aim in health care: ensure that Louisiana’s patients receive the highest quality of health care, at the lowest cost, resulting in the most optimal clinical outcomes. **Simply put, H.B. 442 is contrary to this goal.**

Finally, the AMA is concerned with language in H.B. 442 that would allow physician assistants to prescribe controlled substances without physician supervision. There is strong evidence that expanding prescriptive authority for physician assistants has resulted in more prescribing of addictive opioids. A 2020 study published in the *Journal of General Internal Medicine* found that 8.4 percent of physician assistants prescribed opioids to more than 50 percent of their patients, compared to just 1.3 percent of physicians. **They also found nurse practitioners and physician assistants in states with independent prescription authority for schedule II opioids were 20 times more likely to overprescribe opioids compared to nurse practitioners and physician assistants in states with restricted prescription programs.** It is important to note that the study also found that from 2013 to 2017 almost every other medical specialty decreased opioid prescribing while nurse practitioners and physician assistants

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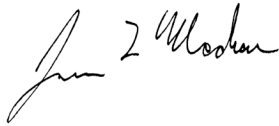
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increased opioid prescribing. We believe you will agree that these results are startling, yet they are indicative of the significant risk patients in Louisiana will face if H.B. 442 becomes law.

While there is certainly room for improvement in our health care system, allowing physician assistants to provide physician-level care is a step in the wrong direction. The AMA stands in strong opposition to H.B. 442 as written. We urge you to support physician-led health care, support patient safety and oppose H.B. 442.

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.

Sincerely,

A handwritten signature in black ink, appearing to read "Jim L. Madara". The signature is written in a cursive, flowing style.

James L. Madara, MD

cc: Louisiana State Medical Society