



INSERT DATE HERE

Addressing the Opioid Epidemic and Promoting Public Health: How PA Education Is Part of the Solution

*Submitted for the Record to the House Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies – April 26, 2018
Testimony of Lisa Mustone Alexander, EdD, MPH, PA-C, President,
Physician Assistant Education Association*

The Physician Assistant Education Association (PAEA), on behalf of the 235 accredited PA programs in the United States, is pleased to submit the following testimony in support of sustained investment in Title VII health workforce programs under the Public Health Service Act in Fiscal Year (FY) 2019. PAEA joins with our health professions education colleagues in requesting \$690 million in FY 2019 for Title VII health workforce and Title VIII nursing workforce programs. PAEA also requests that \$12 million be directed to support innovation in primary care education and the ongoing development of PA programs under the Primary Care Training and Enhancement (PCTE) program in FY 2019. Of note, PAEA wishes to commend the Subcommittee for its long-time support of the 15% funding floor for PA training in the PCTE program. At a time of rapid growth in both PA education and the PA profession, continued federal investment is essential to the development of a well-prepared PA workforce capable of providing high-quality care to patients throughout the country.

PA Education: Promoting Public Health

For more than 50 years, PAs have been on the frontlines of health care delivery in the United States and have played a crucial role in expanding access to care in rural and medically underserved areas. PA programs are designed in the medical training model and are second only to physician education in requiring more than 2,000 hours of rigorous

1 ADDRESSING THE OPIOID EPIDEMIC AND PROMOTING PUBLIC HEALTH: HOW PA EDUCATION IS PART OF THE SOLUTION



clinical training, in addition to didactic instruction. Our member programs graduate more than 8,000 new PAs each year, with a plurality of students going on to serve in primary care capacities following graduation.¹ PAs currently constitute a significant portion of the primary care workforce, with more than 25,000 PAs practicing in primary care capacities.²

A major challenge to the ability of PA programs to prepare enough graduates to meet the nation's health care needs is clinical site capacity, particularly in primary care and behavioral health. This shortage of clinical sites will become even more significant as PAs in primary care play an increasingly crucial role in addressing the opioid epidemic through the use of medication-assisted treatment (MAT) and other behavioral health interventions. Continued federal investment in primary care training for PA programs is critical to meet these public health and workforce demands.

The Opioid Crisis: PA Education Is Part of the Solution

The national opioid epidemic that is ravaging communities throughout the United States presents a clear and compelling challenge to both policymakers and the health professions community. The Centers for Disease Control and Prevention estimates that 42,000 people died in 2016 as the result of opioid-related overdoses — a tragic figure that calls for a marked shift in strategy among educators tasked with preparing the future health workforce.³ While Congress has already acted boldly to implement short-term measures by expanding access to treatment through State Targeted Response grants and improving the capacity of PAs to prescribe MAT through the Comprehensive Addiction and Recovery Act, this deep-rooted crisis also requires long-term workforce solutions. Currently, there are not enough clinical training sites to develop sufficient PAs to treat those suffering from opioid use disorder (OUD), particularly in the fields of primary care and behavioral health, and funding is inadequate to facilitate instructional innovation in preparing students to provide care to those with OUD. To help PAs contribute optimally to the long-term solution to the national opioid crisis, PAEA urges Congress to implement a comprehensive strategy to improve clinical training site availability and quality, while increasing investments in existing Title VII workforce programs.

¹ Physician Assistant Education Association. (2017). *By the Numbers: Program Report 32: Data from the 2016 Program Survey*, Washington, DC: PAEA. doi: 10.17538/PR32.2017

² National Commission on Certification of Physician Assistants. (2016). *2016 Statistical Profile of Certified Physician Assistants by Specialty*. Johns Creek, GA: NCCPA.
<https://prodcmssstoragesa.blob.core.windows.net/uploads/files/2016StatisticalProfilebySpecialty.pdf>

³ Opioid Overdose. (2017). Retrieved April 02, 2018, from <https://www.cdc.gov/drugoverdose/index.html>



Clinical Training Sites: Investment Needed

One component of a broader national response to the opioid epidemic must be improving both the availability and quality of behavioral health clinical training sites. In a 2014 survey of PA programs, behavioral and mental health clinical training sites and preceptors were found to be the third most difficult to recruit.⁴ We are deeply concerned about the impact of limited clinical site capacity on the ability of PA programs to provide the best possible training to students. According to PAEA’s most recent Student Report, regarding clinical rotations, students were least likely to give psychiatry and behavioral medicine rotations — those with the most direct bearing on OUD training — an “excellent” rating.⁵ Furthermore, increased demand for providers with the skills necessary to treat OUD will be a growing source of pressure on the nation’s already limited supply of clinical training sites in primary care. Continuing support of Title VII health workforce programs, which benefit PA training in primary care, remains a crucial step Congress can take to improve the capacity of PA programs to prepare practice-ready graduates.

Title VII Funding

As the PA education community grapples with existing structural barriers to building the PA workforce in response to the national opioid epidemic, current federal initiatives have a significant role to play in the development of workforce solutions. Recognizing the importance of a well-trained PA workforce in primary care, Congress enacted a 15% allocation requirement for PA education under the PCTE program beginning in 2010. This funding has been an invaluable tool for stimulating innovation in PA primary care education — with demonstrable positive implications for student training and patient care. For example, the PA program at James Madison University has used PCTE funding to operate a Physician Assistant Student-Engaged Medical Clinic focusing on primary care training with a medically underserved patient population. Moreover, citing the most recent outcomes data available as of FY 2016, the Health Resources and Services Administration has found that the PCTE program significantly exceeds targets both in the number of PAs graduating from funded programs as well as those trained in and going on to practice in underserved areas.⁶ To encourage continued innovation in primary care instruction among PA education

⁴ Physician Assistant Education Association. (2014). *2014 PAEA Program Survey*. Alexandria, VA: PAEA.

⁵ Physician Assistant Education Association. (2017). *By the Numbers: Student Report I*. Washington, DC: PAEA. doi: 10.17538/SR2017.0001

⁶ Health Resources and Services Administration. (2018). *FY 2019 Congressional Budget Justification*. Rockville, MD: HRSA.



programs, especially as we work to address the opioid epidemic, PAEA urges the Subcommittee to protect the 15% funding floor in the PCTE program in FY 2019.

Diversity and Care for Underserved Populations

In addition to the innovation in primary care instruction made possible through PCTE grants, PAEA also strongly supports increased funding for Scholarships for Disadvantaged Students, the National Health Service Corps, and the Health Careers Opportunity Program. These initiatives help increase the diversity of the health care workforce and expand access to essential health care services. Federal investments in the training and subsequent retention of PA students from underserved areas, which are often those hardest hit by the opioid epidemic, are crucial and a vital part of the long-term solution to this public health crisis.

Recommendations for FY 2019 Appropriations

To facilitate continued innovation in PA education, PAEA urges the Subcommittee to reinforce its commitment to Title VII health workforce programs in FY 2019. Along with our partners in the health professions, we support funding Title VII and Title VIII programs at a total level of \$690 million for FY 2019. Regarding specific funding for PA education under the PCTE programs, we request \$12 million to continue enhancing the long-standing track record of PA graduates providing high-quality primary care to patients.

PAEA thanks the Subcommittee for its ongoing support of Title VII health workforce programs and their role in supporting PAs as a vital component of long-term solutions to the opioid epidemic. We look forward to continuing to work with members to educate and develop the PA workforce necessary to combat the opioid epidemic and to promote public health across the country.