March 5, 2018

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Oregon Medical Board
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Re: Proposed Rule Change to 847-050-0060

Dear Members of the Oregon Medical Board:

On behalf of the Physician Assistant Education Association (PAEA), which represents the 229 accredited PA programs in the United States, we write in support of the February 27 letter from the Oregon Society of PAs (OSPA) concerning the above-named proposed rule change. As indicated in our letter of December 11, 2017, PAEA continues to oppose the imposition of new and burdensome requirements on preceptors of PA students. The revised proposed changes lack evidence that they will improve clinical training experiences; instead, they will have a detrimental impact on the ability of Oregon PA programs to sustain clinical training sites and preceptors.

In contrast to the proposed rule change at the end of 2017, the most recent suggested change to 847-050-0060 proposes that preceptorships be supervised by a “Board-approved supervising physician, who either is actively involved in supervising the preceptorship or is the medical director of the accredited physician assistant education program.” We agree with
OSPA’s assertion that this requirement adds an additional layer of administrative complexity that is likely to have a negligible impact on patient safety while acting as an unnecessary barrier to clinical training opportunities. We reiterate that, in a recent national PAEA survey, 94.8 percent of PA program directors reported that they were moderately or very concerned about the availability of clinical training sites. Introducing regulatory restrictions on preceptors of PA students is likely to exacerbate the clinical site availability issue in Oregon.

The proposed rule (an amendment to OAR 847-050-0060) would also require licensed physicians in good standing to submit an additional application fee, complete a separate written exam, and receive approval by the Board to supervise PA students. Many physicians who are not Board-approved as a supervising physician currently train multiple learners to meet rigorous standards.

We reaffirm our agreement with OHSU’s assertions that:

- Supervision of PA students is already sufficiently governed by the Oregon Medical Board and other entities, including the Accreditation Review Commission on Education of the Physician Assistant, without this amendment;
- This rule amendment is administratively burdensome in terms of cost, duplication of effort, and time; and
- This will create an unnecessary barrier to training PA students in Oregon and will discourage physician preceptors from offering mentorship opportunities.

As detailed in our December 11, 2017 letter, we reiterate the current role of ARC-PA in setting high standards for clinical training experiences in the interest of future patient safety. ARC-PA Standards establish national accreditation requirements for PA student clinical rotations with which the accredited programs at OHSU and Pacific University, like all programs, must comply. ARC-PA Standard B3.05 leaves the determination of appropriate preceptors to individual programs, so long as they comprise primarily practicing physicians and PAs.

Since our December 2017 letter, there have been no additional data that serve as evidence of an issue and no new cases in which PA students and their preceptors have been the subject of disciplinary proceedings that we are aware of. Patient safety is of the utmost
importance; however, the proposed restrictions, which would limit the training of PA students, do not appear to have any effect on patient safety and would exacerbate an existing provider shortage in Oregon.

We strongly urge the Board to work with OSPA, OHSU, and Pacific University to avoid burdensome regulatory actions that will harm PA education and reduce access to care for the citizens of Oregon while failing to improve patient safety.

Sincerely,

Lisa Mustone Alexander, EdD, MPH, PA-C
President

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Chief Executive Officer