

November 8, 2022

The Honorable Kathy Hochul, *Governor* Governor of New York State
New York State Capitol Building
Albany, NY 12224

VIA EMAIL: legislative.secretary@exec.ny.gov

RE: <u>Veto A6056 (Gottfried)/S5956A (Rivera): Physician Assistants Serving as Primary Care Providers under Medicaid</u>
Managed Care Plans

Dear Governor Hochul:

On behalf of the New York State Society of Plastic Surgeons (NYSSPS), I am writing in strong opposition to A6056/S5956, which would allow for autonomous physician assistants (PAs). NYSSPS is the statewide medical specialty society representing board-certified plastic surgeons, with a mission of promoting public policy that protects patient safety. As such, we urge you to veto this legislation.

NYSSPS recognizes that the ultimate goal of this proposal is to expand access to primary care services, especially in an area that has difficulty attracting physicians. However, rigorous studies conducted by the American Medical Association<sup>1</sup> have consistently shown that expanding PA scope of practice does not increase access to care in underserved areas. Authorizing PAs to independently practice, even if limited to Medicaid managed care plans, represents a dangerous expansion of their role in patient care. There has been no demonstration that PAs can safely practice independently. PAs do not receive sufficient medical training to provide them with the clinical expertise to practice outside of a supervisory agreement. Their training is in no way equivalent to that of physicians, who offer essential diagnostic and medical expertise to patients. Physician training continues through post-graduate medical education, where all physicians are trained in accredited residency programs and receive at least three additional years of training before becoming licensed and board certified. Ultimately, physicians will train for eight to sixteen years, as much as four-times-as-long as a PA.

Moreover, before any changes are made to any piece of a PA's scope of practice, the legislature needs to assess and understand how the change will impact PAs, physicians, and most importantly, patients. For instance, a major topic that must be addressed is liability and malpractice coverage. In New York, individual liability coverage for PAs is advisable, but not required. As it stands, a PA shares responsibility and liability with their supervising physician, and either or both may be named in a malpractice action. Currently, malpractice insurance may not cover a PA if it is found that they were practicing outside of their licensed scope, which could cause a number of complications.

We are extremely concerned that this legislation will create a model of substandard care for an already underserved community and would not address the deeper issues impacting patient access to appropriate care and resources. We must focus on the systemic problem of access to resources for facilities and current and future providers. A6056/S5956 is founded on the flawed premise that such legislation will increase access to primary care services for areas in need. Unfortunately, this is simply untrue, and will fail to address this warranted concern. As surgeons, we encourage you to uphold the highest level of patient care that has been established and permit licensed PAs to only practice under the supervision of physicians who meet appropriate education, training, and professional standards to practice medicine in New York. We urge you to veto A6056/S5956.

Sincerely,

Dan Huang, MD

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President

New York State Society of Plastic Surgeons