On behalf of the more than 159,000 PAs (physician associates/assistants) throughout the United States, the American Academy of PAs (AAPA) appreciates the opportunity to submit this statement to the Special Medical Advisory Group as they advise the Secretary of Veterans Affairs and the Under Secretary for Health on the care and treatment of Veterans, and other matters pertinent to the Veterans Health Administration.

PAs represent a highly educated and experienced VA workforce that provides the comprehensive care veterans desperately need across a wide range of clinical settings and specialties. The VA is currently the single largest employer of PAs in the United States. PAs practice in all medical and surgical specialties in all 50 states, the District of Columbia, U.S. territories, as well as the uniformed services. PAs provide high quality, cost-effective medical care in virtually all health settings. PAs undertake rigorous education and clinical training and are established as fully qualified and prepared to manage the treatment of patients who present with physical and/or mental illnesses. Further, PAs routinely treat patients with complex diagnoses or multiple comorbidities, including the unique healthcare situations that impact the nation’s military and veteran populations.

The PA profession maintains a close connection to the VA, as the first PA students in the 1960s were veterans. Today, 11 percent of all PAs in the United States are veterans, active-duty military or serve in the National Guard and Reserves. Further, 24 percent of the PAs employed by the Department of Veterans Affairs are veterans themselves and maintain a strong, personal desire and dedication to serve their fellow veterans. For decades, PAs employed by the VA have practiced medicine under federally established guidelines. The current PA utilization directive, which was issued in 2013, makes clear that “states are prohibited from regulating or controlling the activities of the federal government without written Congressional consent; where federal and state laws conflict, federal law governs official actions of Federal employees.” The directive also states that “examples of the types of activities that the federal government may establish are qualifications for employment and scopes of practice.”

AAPA encourages the VA to remove undue barriers that restrict the ability of providers, including PAs, to practice to the full extent of their education and experience. For example, currently, PAs are not
considered Licensed Independent Practitioners (LIP) within the VA. As has been confirmed in VA policy and RIN 2900-AQ94—Authority of VA Professionals to Practice Health Care the VA maintains the needed regulatory authority to authorize health care professionals, including PAs, to practice to the full extent of their education, training, and experience. AAPA urges the VA to ensure that its robust PA workforce is in the strongest possible position to continue serving our nation’s veterans. In 2019, the Medicare Payment Advisory Commission concluded in a report to Congress that “PAs provide care that is substantially similar to physicians in terms of clinical quality outcomes and patient experience. PAs have also been shown to increase access to care, improve care coordination and decrease healthcare costs.”

AAPA supports the VA’s ongoing efforts to develop National Practice Standards that ensure our nation’s veterans receive the highest-quality health care available. Former VA secretary Robert Wilkie wrote to Congress in 2021 that the “VA fully supports the idea of giving PAs full practice authority that would enable Veterans Health Administration PAs to practice medicine as licensed independent practitioners...[and] increase veterans’ access to care.” AAPA supports and encourages the VA to authorize PAs to practice to the full extent of their education, training, and experience and in a manner that standardizes the professions’ practice in all VA medical facilities. Full practice authority for PAs would ensure that our nation’s veterans continue to receive the high-quality care that they deserve while also reducing burdens across the VA health system.

AAPA thanks the Special Medical Advisory Group and the Office of Under Secretary for Health for the opportunity to submit these comments. Should you have any questions or require additional information, please do not hesitate to contact Tate Heuer, AAPA Vice President, Federal Advocacy, at 571-319-4338 or at theuer@aapa.org.

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