



March 6, 2023

Hon. Merrick B. Garland
Attorney General
U.S. Department of Justice
950 Pennsylvania Ave NW
Washington, DC 20530

Re: Agency information Collection Activities; Proposed eCollection eComments Requested; Extension Without Change of a Currently Approved Collection; USMS Medical Forms.

Dear Attorney General Garland,

The American Academy of PAs (AAPA), on behalf of the more than 168,300 PAs (physician assistants/associates) throughout the United States, appreciates the opportunity to provide comments on the Department of Justice's (DOJ) U.S. Marshals Service's (USMS) proposed collection of information. Specifically, AAPA urges the agency to amend the medical forms referenced in the proposed collection of information to allow PAs to complete and sign the forms.

In the proposed collection of information, the DOJ references three specific USMS medical forms:

- USM-522A Physician Evaluation Report for USMS Operational Employees
- USM-522P Physician Evaluation Report for USMS Operational Employees–Pregnancy Only
- USM-600 Physical Requirements of USMS District Security Officers

AAPA requests that these forms and the DOJ's policies be amended to authorize PAs to sign and complete them. This would be in line with revisions made to USM-522A, USM-522P and USM-600 in 2019, which added nurse practitioners (NPs) as health professionals authorized to complete and sign the forms.¹ Prior to these revisions, only physicians could complete and sign these forms. Including NPs but excluding PAs is in direct contrast to numerous federal healthcare programs that authorize both PAs and NPs to oversee a patient's health care and complete health evaluation forms, including Medicare, Medicaid, Tricare, the FEHB Program, Veterans Health Administration, Indian Health Service, Public Health Service, the Department of Education and the Department of Defense.

In fact, the Centers for Medicare and Medicaid Services attested to the quality of PA education and training stating, "PAs are trained on a medical model that is similar in content, if not duration, to that of physicians. Further, PA training and education is comparable in many ways to that of APRNs, and in some ways, more extensive."²

¹ 1105-0099-Supporting Statement-2019 renewal. Available at: <https://omb.report/icr/201911-1105-001/doc/96763902>.

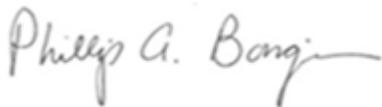
² 81 Fed. Reg. 116, 39452 (June 16, 2016)

PAs are the primary source of care for many patients. According to information provided in an October 2021 Medicare Payment Advisory Commission meeting, in 2018 APRNs and PAs accounted for a third of all primary care clinicians treating Medicare beneficiaries and up to half of primary care clinicians in rural areas.³ PAs have more than 400 million patient visits annually. Patients who routinely rely on a PA for their medical care should not have the continuity of their care disrupted by being required to find an NP or physician who the patient may have never met to complete one of these forms. USMS employee access to a qualified health professional, and the subsequent collection of required medical information, will be enhanced with the ability of PAs to complete and sign the abovementioned forms.

PAs are highly trained and educated health professionals who are well-qualified to assess a patient's status, and complete and sign these forms. Other federal agencies acknowledge the capacity for PAs to complete similar federal agency forms. For example, in 2022 the U.S. Department of Education expanded the list of health professionals who may certify that a student loan borrower is totally and permanently disabled (TPD) to include licensed PAs and NPs. In finalizing that rule, the Department of Education stated that authorizing PAs and NPs to certify TPD discharges was "imperative" to ensuring that loan borrowers were able to "more easily obtain TPD discharges for which they qualify," particularly in rural and underserved communities.

Thank you for the opportunity to provide feedback on the DOJ's U.S. Marshals Service's proposed collection of information. For any questions you may have please do not hesitate to contact Michael Powe, AAPA Vice President of Reimbursement & Professional Advocacy, at michael@aapa.org.

Sincerely,



Phillip A. Bongiorno
Senior Vice President
Advocacy and Government Relations

³ <https://www.medpac.gov/wp-content/uploads/2021/11/cong-req-vulnerable-access-medpac-oct-2021.pdf>