December 5, 2017

Honorable David Shulkin  
Secretary of Veterans Affairs  
U.S. Department of Veterans Affairs  
810 Vermont Avenue NW  
Washington, DC 20420

Dear Secretary Shulkin,

On behalf of the more than 115,000 PAs (physician assistants) throughout the United States, and the more than 2,200 PAs currently employed full-time by the U.S. Department of Veterans Affairs (VA), the American Academy of PAs (AAPA) is very concerned about the exclusion of PAs from key provisions in the Caring for our Veterans Act of 2017, as marked up by the Senate Committee on Veterans’ Affairs on November 29, 2017. AAPA would like to work with you to ensure this legislation best meets the needs of veterans and fully enables the VA to attract needed providers, including PAs, which you have identified as a critical need. We would also like to work with you to make sure the needs of the PA workforce are taken into consideration when policy is developed by the VA.

AAPA has significant concerns that the Caring for our Veterans Act of 2017, as currently drafted, would undermine the important role PAs have historically played as advanced practice providers for our nation’s veterans at the VA. In addition, and ironically, it is in direct contradiction to the spirit and effect of Section 212 of the VA Choice and Quality Employment Act of 2017 (Public Law 115-46) recently passed by Congress and signed by the President. This law ensures competitive pay for PAs at the Department of Veterans Affairs (VA) by taking into consideration private sector PA salaries in local markets when establishing compensation for PAs at VA facilities. The need for Congress to intervene to ensure competitive salaries for PAs when the VA could have taken that step administratively creates the perception that VA leadership does not value its PA workforce. Further complicating this situation is that advanced practice registered nurses received full practice authority at the VA last year while PAs continue to seek this same work environment, allowing them to serve our nation’s veterans as their education and experience have provided for.

Specifically, PAs are omitted from two key sections in the Caring for our Veterans Act of 2017:

**Sec. 208. Modification of pay cap for nurses.** As currently written, this section would raise the pay cap for nurses in the VA from Schedule IV to Schedule III, but not do the same for PAs. PAs are advanced practice providers and frequently perform and compete with nurse practitioners (NPs) for the same jobs at the VA; to raise the pay cap for one profession and not the other would create an inequity.

**Sec. 209. Reimbursement of continuing professional education (CPE) requirements for board certified advanced practice registered nurses.** As currently written, this section would reimburse CPE requirements for advance practice registered nurses (APRNs), but it would not
apply to PAs. PAs must complete 100 hours of continuing medical education (CME) every two years to maintain their certification, a requirement for VA employment. It only makes sense that continuing education for PAs also be included in this section or else it would create an inequity.

Including PAs in sections 208 and 209 of this legislation would ensure parity for advanced practice providers in the VA, and allow the VA to better recruit and retain PAs to provide healthcare for our nation’s veterans.

PAs are currently classified by the VA Office of Inspector General as a critical occupation facing significant staffing shortages in the VA system, and the 2015 Veterans Health Administration (VHA) Workforce Planning Report identified PAs as having “one of the highest administrative quit rates, retirement rates and total loss rates of any of the mission critical occupations” within the VHA. Given these findings, it does not make sense to create new inequities for PAs who currently work for, or wish to work for, the VA.

If PAs are excluded from incentives offered to other providers – many of whom serve in the same positions as PAs – it will only become harder for the VA to employ the nation’s PA workforce. Not allowing PAs to have the same recruitment incentives and retention benefits as their similarly situated advanced nursing colleagues will only serve to further erode the VA’s PA workforce, which we do not believe is the intent of the proposals or of the VA.

**Our Ask:** It is our understanding the language in sections 208 and 209 came directly from the VA as part of a larger package of policy requests for the Senate Committee on Veterans’ Affairs to include in the Caring for our Veterans Act of 2017. Therefore we need your assistance in remedying this. Given AAPA’s concerns and the VA’s identification of the PA profession as critical to carrying out the VA’s mission of providing care to our nation’s veterans, we respectfully ask:

1) **The VA to work with AAPA and the Senate Committee on Veterans’ Affairs to fix Sections 208 and 209 of the Caring for our Veterans Act of 2017, before this legislation moves forward in the senate, to ensure PAs are included in the bill and new inequities are not created for the PA profession. The Committee needs to hear the VA values the PA profession and wants it treated similarly to APRNs.**

2) **The VA to consult with the VA’s PA workforce in the future when policy is being developed, to consider the impact of policy on all VA providers and to ensure future oversights and inequities do not occur.**

3) **The Secretary meet with AAPA’s CEO and president to further discuss our concerns and how best the PA workforce can be utilized at the VA going forward.**

Since January 2017, it has been a privilege to have several meetings and contacts with the leadership team at the VA, such as letters to you and in-person conversations with former Undersecretary Blackburn, to discuss issues such as workforce development and gaining full practice authority for PAs at the VA. We would like to continue these conversations in an effort to assist the VA in meeting the critical needs of veterans.
AAPA stands ready to assist the VA in meeting its challenge to provide veterans with timely access to high quality medical care. Should you have any questions or require additional information, please do not hesitate to reach out to Tate Heuer, AAPA Vice President, Federal Advocacy, at 571-319-4338 or at theuer@aapa.org.

Thank you for your assistance. We look forward to meeting with you soon and continuing to work with you on these important issues.

Sincerely,

Jennifer L. Dorn  
Chief Executive Officer

L. Gail Curtis, MPAS, PA-C, DFAAPA  
President and Chair of the Board

cc: Senator Johnny Isakson  
Senator Jon Tester