

March 8, 2021

The Honorable Norris Cochran, Acting Secretary U.S. Department of Health & Human Services (HHS) 200 Independence Avenue, SW Washington, DC 20201

Dear Acting Secretary Cochran,

On behalf of the American Academy of PAs (AAPA) and approximately 150,000 PAs (Physician Assistants) serving patients across the United States of America, I am writing you today in relation to several of the amendments to the Declaration Under the Public Readiness and Emergency Preparedness Act for Medical Countermeasures Against COVID-19 to ask that it be further amended to ensure the PA profession is fully and appropriately utilized to get Americans vaccinated more expeditiously.

The fifth amendment to the Declaration allows "any physician, advanced practice registered nurse, registered nurse, or practical nurse who has held an active license or certification to prescribe, dispense, or administer vaccines within the last five years" to be covered under the PREP Act, but does not extend this same coverage to recently retired PAs. AAPA requests an additional amendment to the PREP Act declaration to authorize the administration of vaccines by retired PAs whose license became inactive, expired or lapsed in good-standing within the last 5 years.

The third amendment of the Declaration allows pharmacy interns acting under the supervision of a statelicensed pharmacist to administer any vaccine that the Advisory Committee on Immunization Practices (ACIP) recommends to persons ages three through 18 according to ACIP's standard immunization schedule. AAPA requests an additional amendment to the PREP Act declaration to authorize PA students Acting under the supervision of a PA or other qualified healthcare provider to administer any COVID-19 vaccine on the ACIP immunization schedule.

Although we believe PAs would be covered by the 5th amendment, which authorizes healthcare providers who are permitted to prescribe, dispense, or administer vaccines in a state to do so in any state, we ask that PAs be explicitly listed among the healthcare providers who may prescribe, dispense, or administer vaccines. Although no state laws prohibit PAs from doing so, several state laws do not specifically mention these activities and it has led to confusion regarding the authority of PAs to do so.

There is no medical, educational, or scope of practice reason for PAs to not be included in these amendments. As clinicians, PAs practice team-based, collaborative, patient-centered medicine. PAs are highly trained providers who practice medicine in all 50 states and the District of Columbia, diagnose

illness, develop and manage treatment plans, prescribe medications, and often serve as a patient's principal healthcare provider. PAs work across all practice settings and are already a significant part of the on-the-ground efforts to diagnose and treat COVID-19. PAs are qualified, well-trained medical providers ready to deliver care — but because some state laws may be ambiguous, PAs need swift federal action to give them the appropriate flexibility to step up and truly serve patients through the course of this pandemic.

The PA workforce is committed to fighting the COVID-19 pandemic. PAs have remained on the front lines in great numbers throughout the pandemic, providing high-quality and efficient care for patients in a wide variety of settings, particularly in rural and underserved areas that frequently suffer from a lack of healthcare providers. Ensuring that this workforce is fully utilized will expand America's ability to care for patients and bolster our healthcare workforce during this pandemic.

AAPA appreciates the opportunity to highlight our shared goals in relation to responding to the ongoing COVID-19 pandemic and stands ready to further assist the Administration in this response. Please do not hesitate to contact Tate Heuer, Vice President Federal Advocacy, at theuer@aapa.org or (571) 319-4338, if you have any further questions.

Sincerely,

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Beth R. Smolko, DMSc, MMS, PA-C, DFAAPA President and Chair of the Board

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