



## **2021 Report to AAPA House of Delegates IMPLICATIONS OF TITLE CHANGE FOR PA EDUCATION**

### **Introduction**

The recurring question of the most appropriate title for the PA profession is a complex and sometimes contentious one, with a long history going back to the beginnings of the profession. PAEA has monitored the recent title change investigation with interest, as any change in the profession's title would clearly have implications for the Association and for our member programs. The investigation took on new urgency when AAPA delivered a two-year study of the PA profession title at the November 2020 House of Delegates. PAEA President Howard Straker, PAEA President-Elect Michel Statler, PAEA Past President Jon Bowser, and CEO Mary Jo Bondy all participated in this event. It was clear to all four PAEA participants that the current title does not fully describe or capture the expansive roles and responsibilities of practicing PAs.

For PAEA, over the past year or more, the current title change investigation has taken place against a background of significant challenges in higher education, especially clinical education, due primarily to the COVID-19 pandemic. PA programs have experienced unprecedented challenges and have responded with courage and resiliency. PAEA's focus has been on supporting our programs through these challenging times — through providing resources, collecting and sharing data on how programs are adapting to COVID, and developing venues for sharing of support and ideas.

The COVID pandemic, along with the racial justice movement that was given new impetus last summer, have also laid bare long existing health disparities and structural barriers to achieving PAEA's mission of health for all. This has in turn given new urgency to our longstanding commitment to diversity, equity, and inclusion in PA education.

The issue of title change was not part of PAEA's 2017-2020 strategic plan or on our current agenda. Due to the far-reaching implications of title change for all aspects of the profession, the PAEA Board of Directors approached the issue by examining the perceptions and opinions of multiple stakeholders, pursuing an environmental scan, and participating in an internal assessment of the potential impact of title change on our member programs and on PAEA. We also engaged in dialogue with the cross-organizational PA leadership to better understand the perspectives and effects on other PA organizations of this proposed change.

To briefly summarize our findings:

- Title change is not among the highest priorities facing PA programs or PAEA in the era of COVID and the racial justice movement.
- PA faculty are unclear on the overall value proposition of a title change, taking into account both benefits and costs.
- We estimate direct costs to the Association of changing the name, rebranding, legal fees, and advocacy work at approximately \$4 million over five years. This does not include activities related to helping programs with title change. Costs to individual PA programs and institutions are unknown at this point.

### **PAEA VISION**

The PAEA vision is Health for All, adopted as an aspirational goal in 2017. Throughout this unprecedented year, we have kept the vision as the north star that guides all of our decision-making.

### **PAEA MISSION**

Our mission of leadership, innovation, and excellence in PA education has driven our work for many years. It has guided our strategic planning and our initiatives to help meet the growing need for competent, compassionate, and ethical providers.

## **Examining Title Change from Multiple Perspectives**

### **SURVEY DATA**

PAEA requested and received from AAPA the faculty and student responses from the WPP survey of all PAs and students conducted in 2019. About 1,350 students responded, or approximately 7 percent of the 19,000 surveyed. The majority felt that the title did not accurately represent the roles and responsibilities of a PA and supported a change in title when asked this question, without considering costs, time, or other implications. About 340 faculty responded, approximately 13 percent of all the faculty on PAEA's rosters. The majority of PA faculty respondents also felt that the title did not accurately represent the roles and responsibilities of a PA and supported a change in title when asked the question, again without consideration of costs, time, or other implications.

### **INPUT FROM DEANS AND ADMINISTRATORS**

We also sought input from PA deans and administrators in departments housing PA programs at institutions around the country. They acknowledged that the PA title does not comprehensively represent our roles and responsibilities, but in the context of COVID, changes in higher education, and healthcare economic disruption, they did not believe that title change would be well received by institution leaders, as the value proposition has not been clearly defined. They also raised questions related to the impact on accreditation and on the state and higher education regulatory landscape. We know that PA graduates are finding employment and the PA profession is the number one-ranked career by *US News and World Report*. The potential impact of a PA title change on recruitment and enrollment is unknown, during a time of significant hardship for the higher education sector.

### **PROGRAM DIRECTORS LISTENING SESSION**

A final source of perspective on this issue was a listening session that we held with more than 100 program directors in mid-March. In this session, PAEA leadership provided some background on the trajectory of the title change investigation to date, as well as some preliminary data on its likely implications for PAEA and PA programs.

Program directors' perspectives included the following, according to a thematic analysis of the discussion by PAEA research staff:<sup>1</sup>

- The problem for which title change is a solution is not fully clear.

- COVID has introduced many new concerns for programs, including budget cuts and further tightening of access to clinical sites.
- Programs would incur significant costs related to changes in affiliation agreements and other legal documents, as well as rebranding costs.
- A title change may affect the willingness of physician preceptors to precept students, depending on what new title were chosen, especially in the environment of OTP.
- Could the financial investment required to implement title change be better used on a marketing campaign to raise awareness of the roles of PAs?
- Admissions might be affected for a period of time due to applicants being confused about a newly titled profession.

## **Implications of Title Change for PA Education**

### **PROGRAM PRIORITIES**

In the 2019 WPP survey, both faculty and student respondents indicated a belief that the current title does not adequately reflect the roles and responsibilities of the PA and that it should be changed, in the absence of any other factors. Since that survey, more information has become available. We know that based on AAPA's assessment, implementing title change for the profession would cost \$22 million over five years, and that it could well be more, given the unknowns and uncertainties that WPP acknowledged in its report. And this estimate does not include costs to constituent organizations or to educational or healthcare institutions. PAEA's initial estimate of costs to the Association is approximately \$4 million over five years. This does not include costs to PA programs, which are not known in any detail at this point.

When surveyed by PAEA throughout 2020-2021, as part of PAEA's series of Rapid Response surveys, program directors did not list title change as a priority in the context of PA education during COVID. Instead, they considered the most pressing issues to be budget concerns, faculty and student wellness, and the already critical issue of access to clinical sites. PAEA's Rapid Response Report 3 showed that the COVID pandemic has adversely impacted more than 50 percent of PA program budgets.<sup>2</sup> And more than 70 percent of programs reported incurring additional costs due to COVID, possibly making them more dependent upon the physician volunteer workforce to meet accreditation standards.<sup>2</sup> Currently, more than 60 percent of PA program preceptors are physicians. And these conditions are unlikely to change soon, even if the pandemic itself is under control in the near future. The impact of budget cuts, and lingering uncertainties regarding clinical sites, will likely continue for some time into the future.

### **ADVOCACY AND LEGAL ISSUES**

According to the PAEA advocacy team, PA education advocacy setbacks and costs would be significant if title change were enacted, potentially limiting our ability to advocate for Title VII and other federal and state funding while efforts are undertaken to replace the "physician assistant" language in state and federal legislation. This would require a specific statutory change in the United States Code, as well as legislation directing agencies to revise existing references to "physician assistant" in relevant titles of the Code of Federal Regulations and agency guidance documents. The complexities of this process make the potential for unintended consequences significant. Furthermore, PAEA does not have the legal authority to require PA programs to change their name.

## FINANCIAL IMPACT

Estimated costs to PAEA alone for title change would be approximately \$4 million over five years, including advocacy and rebranding. The costs for programs are unknown at this point but programs would face similar issues, including costs related to changing program and degree names; revising curriculum, policies, and affiliation agreements; and rebranding costs for everything from websites to marketing materials to white coat patches.

Given the enormous financial impact of the COVID-19 pandemic on our health systems, higher education institutions, state budgets, programs, faculty, and students, these costs would be a significant burden. For PAEA, any funding required to implement title change would likely come mostly from member programs, which in turn would probably have to shift them on to students, likely worsening the already significant issue of rising student debt and increasing barriers to PA education.

### Diversity, Equity, and Inclusion

At a town hall meeting during our 2020 Education Forum, members were asked about their most pressing concern, and the response was clear – diversity, equity, and inclusion. In healthcare and education communities, COVID-19 has brought into sharp relief the many barriers that have contributed to ongoing and worsening health disparities and outcomes. Higher education was forced to look critically at recruiting, welcoming, retaining, and supporting our students of color. During the spring of 2020, we learned some difficult lessons. PAEA committed to doing better, listening and learning, providing resources like our Diversity, Equity, and Inclusion Toolkit, and sponsoring online forum discussions to build awareness and move to action. The title change debate must be considered in this context.

## Conclusion

After our investigation, we are left with more questions and concerns than answers. We recognize that title change is a complex and critical issue for the PA profession today. As fiduciary representatives of the Physician Assistant Education Association, in our analysis, the cost-benefit case has not yet been made.

---

## References

1. Physician Assistant Education Association. *Program Director Title Change Listening Session Summary Report and Appendix*. April 14, 2021. <https://paea.edcast.com/pathways/title-change>.
2. Physician Assistant Education Association. *COVID-19 Rapid Response Report 3*. February 2021. <https://paea.edcast.com/pathways/covid-19-rapid-response-reports/cards/7259120>