## MEDICAL SOCIETY of the STATE OF NEW YORK

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IN SENATE HIGHER EDUCATION

**S.5520 (RIVERA)** 

COMMITTEE

**A.5012 (SOLAGES)** 

IN ASSEMBLY HIGHER EDUCATION COMMITTEE

AN ACT to amend to education law, in relation to the performance of medical services by physician assistants

We are writing to you relative to the above referenced legislation that would authorize Physician Assistants (PAs) to provide patient care without any requirement for oversight by a physician, once practicing for 3,600 hours. We thank the Legislature for rejecting a similar proposal that had been included in the Executive Budget that would have permitted independent practice after 8,000 hours. Enactment of this either of these proposals would compromise the health and safety of patients by entrusting diagnosis and treatment management to clinicians with one-quarter of the training of physicians. Therefore, **the Medical Society of the State of New York strongly opposes this legislation and urges that it be defeated.** 

The increasing complexity of medicine demands constant study and professional development for all clinicians. With the advent of new and complex treatments such as immunotherapy, stem cells, and genetic therapies, patients need clinicians who are not only current in their knowledge but also committed to keeping pace with rapid developments in medicine. Medical school and residency training ingrain the ethic of self-motivated continuing professional education.

PAs are valued members of the medical care team. However, they are trained to assist physicians - not replace them. After four years of medical school, physicians have an additional 3-7 years of postgraduate education and training consisting of their residency and fellowship including at least 10,000-16,000 hours of clinical patient care. PAs receive only 26 months of education and training, and no residency.

A recent study shows that when non-physicians are permitted to practice independently, this difference in training increases both health care costs and patient safety risks. An examination of 10 years of cost data on 33,000 patients by the South Mississippi system's accountable care organization (ACO) found that care provided to patients exclusively by non-physicians (PAs and NPs) was much more expensive than the care delivered by physicians. This is because non-physician providers ordered more tests and referred more patients to specialists and hospital emergency departments than physicians did. The care provided by non-physicians was also determined to have lower quality rankings.

Other peer-reviewed studies have found that non-physician practitioners order more diagnostic imaging than physicians do for the same clinical presentations. This not only increases health care costs, but threatens patient safety by exposing them to unnecessary radiation. A study in the American Journal of Radiology that analyzed skeletal x-ray utilization for Medicare patients found a 400% increase in ordering by non-physicians who were primarily NPs and PAs.

Moreover, a recent national survey found that it is important to 95% of patients that a physician be involved with their diagnosis and treatment decisions. Patients feel more comfortable and benefit most by having a team-based approach to health care - with physicians leading the team. Unfortunately, this legislation would have the effect of creating silos in health care delivery and endangering patient safety by removing physicians from the health care team.

For all of the reasons stated above, we urge that this bill be defeated.

5/16/2023 MMA – Oppose Respectfully Submitted,

MSSNY DIVISION OF GOVERNMENTAL AFFAIRS