

MSSNY's Scope of Practice Ad Hoc Committee Meeting
Thursday November 9, 2023
7:00pm via Zoom
MINUTES

Present

Richard Chang, MD
Inderpal Chhabra, MD, Vice-Chair
Lisa Eng, DO, Chair
Arthur Fougner, MD
Nathan Kaplan, MD
Marian Kurian, MD
Purvi Parikh, MD
James Slough, MD

MSSNY Staff

Morris Auster, Senior VP and Chief
Legislative Counsel

1. Draft for Resolution 111- Giving MAs Greater Scope of Practice

Dr. Chhabra indicated that the issue with the proposed resolution to define the scope of practice for Medical Assistants overlaps substantially with MSSNY's existing policy. The committee agreed with this, and Mr. Auster added that it is a good idea to re-affirm existing policy because it has been slightly difficult to determine the tasks that medical assistants should be able to do. Reaffirming would create a guideline for everyone to follow, therefore reducing confusion. The committee reviewed the documents with the dos and don'ts of what MAs are permitted to perform. There was also a suggestion of having exceptions for medical assistants in underserved areas (such as Upstate NY), which would include receiving certifications for additional skills. Dr. Parikh and Dr. Chhabra raised concerns with this potential approach because there is no true definition on what the underserved areas are. The committee agreed. A motion was made to accept the suggestion of reaffirming MSSNY's policy and submitting it to the MSSNY Council, and it was approved.

2. Scope of Practice for Medical Specialties

Mr. Auster indicated that after speaking with the Higher Education Committee chair in the New York State Assembly, it is clear that they want the issue of health care worker shortages to be addressed. Mr. Auster added that MSSNY has been in contact with each of the specialty societies and the main issues that have been highlighted include concerning legislation that would inappropriately permit Psychologists to prescribe medication, CRNAs practicing independently without anesthesiologist supervision, Podiatrists treating up to the knee; pharmacists ordering lab tests without direction and

27 coordination with a physician; and PAs and NPs practicing without physician
28 supervision or collaboration . Dr. Eng suggested that it may be time to
29 define scope of practice based on training/certification, proficiency, and skill
30 sets, instead of specialty. Meaning, considering all these things, and then
31 designating the delineation of privileges based on that; this will ensure fair
32 practices and patient safety. The committee agreed, and Mr. Auster indicated
33 that he would check with the AMA as to other states that have sought to
34 define scope of practice in this manner, and bring back to the Committee.
35 Legislation to ensure truth in advertising was also brought up. Mr. Auster
36 indicated that the lack of agreement among the specialties has prevented
37 that legislation from moving forward. However, he also added that MSSNY
38 has been working with the Dermatology and Plastic Surgery society lobbyists
39 to facilitate agreement among the specialties and put together legislation
40 that ensures anyone who introduces themselves as a doctor but is not an MD
41 or DO, needs to explicitly state that.

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43 Dr. Kurian indicated that the scope of practice in terms of what NPs, PAs, and
44 Medispas are doing regarding weight loss medications needs to be
45 investigated. In NYS, NPs can prescribe for medical weight loss by
46 themselves, while PAs cannot. She stated that there are many NPs and some
47 doctors referring patients to compounding pharmacies, which is inappropriate
48 considering medications that are still under patent, for e.g., Semaglutide, are
49 being compounded. Patients are therefore receiving illicit prescriptions that
50 are possibly unsafe due to lack of testing. Dr. Eng stated that she will add Dr.
51 Kurian's concern to the list of issues to be addressed. Following the
52 discussions, Mr. Auster indicated that he will get in contact with the AMA for
53 additional information on each of these issues

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55 **3. Adjournment**

56 The meeting was adjourned.