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November Newsletter

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New PANRE Model Selected for Exploration, Comments to Be Solicited Formally Starting Next Month

Days ago, the NCCPA Board selected a new model for recertification for further exploration.

In this new model, general or core medical and surgical knowledge would be assessed during every 10-year certification maintenance cycle on periodic "open book," take-at-home exams that cover content across the broad range of organ systems and task and skill areas included in today's PANRE. There would be opportunities for remediation through CME (rather than retesting) for those whose performance is below but near the passing standard. The take-at-home exams would allow PAs to use reference materials – like they do in practice -- to answer questions on topics they may not encounter every day in their specialty.

Specialty-related knowledge would be assessed on a secure, proctored, timed exam during the final years of each 10-year cycle (like today's PANRE). These exams would assess knowledge PAs need to practice safely and effectively in their chosen area of practice. Exam options would include family medicine, general surgery, and a number of others that will be selected after additional analysis of PA practice patterns and consideration of feedback received during the formal comment period.

For the specialty-focused exam, several performance bands would be established: (1) a minimum level below which examinees would be required to retest; (2) a remedial level of performance in which examinees would not retest but would be required to complete CME activities related to areas of suggested knowledge deficiency; (3) an intermediate to high range in which no remediation would be required; and (4) an exceptional level of performance at which examinees would be eligible for a Certificate of Added Qualification (CAQ) in that specialty *should they desire to pursue one and meet related CME and experiential requirements.*

Like today, all PAs who successfully complete the certification

At NCCPA, we work to promote the role, impact and qualifications of PAs in many ways including through the media. Here are some recent results.

Read certified PA Cindy Lord's account of how [Certified PAs Address Oral Health](#) in the latest Physicians Practice blog. This blog was also picked up and run by Diagnostic Imaging. You will have to sign in to read it but it is free to register.

Certified PA Valery DeSimone explains to seniors "[Tips to Maximize the Annual Wellness Visit](#)" on page 23 of this month's issue of Southern California Life after 50.

Want to get involved? If you have a great article idea or a story to share, contact PR manager, Mary Rittle, at maryr@nccpa.net.

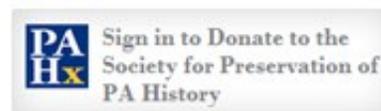


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maintenance process would be awarded the same generalist PA-C credential, and those earning a CAQ would have that additional, specialty-related credential.

We are preparing now to launch a public comment period to gather response and insight from certified PAs, state medical boards, and other key stakeholder groups that will help inform final decisions next year about this recertification new model. More details will be published when the formal comment period is launched later this year, and every certified PA will be invited to complete a survey soliciting feedback on the recertification exam model.



The selection of this recertification exam model followed a year-long study of current PA practice, perspectives of PAs and other stakeholders gathered through focus groups and surveys, psychometric analysis, and consideration of a wide range of assessment methods.

Ultimately, the Board sought a recertification exam model that reflected the following key points:

- PAs and NCCPA desire a recertification exam process that is relevant and meaningful to current and emerging PA practice;
- Greater than 70 percent of certified PAs practice in specialties other than primary care, and an analysis of PA practice shows that the nature of the work PAs perform differs from specialty to specialty;
- It is reasonable for the public and other key NCCPA stakeholders to expect that PAs are assessed across general or core medical content and within their area of current practice;
- The generalist PA-C credential supports PAs' flexibility to change specialties during their career span, and that inter-specialty mobility is a hallmark of the PA profession that many value deeply;
- In practice, PAs must both recall some knowledge and have the opportunity to consult other resources when needed;
- NCCPA and its stakeholders desire a high degree of exam security and integrity; and
- NCCPA recognizes the value of both enhancing and assessing medical knowledge, especially given the rapid pace of advancement in science and medicine.

“Having worked to balance what we know about the practice and preferences of certified PAs with our responsibility to serve the public’s interest, the NCCPA Board has selected a new recertification model that we believe would serve both the public and the profession exceptionally well for many years to come,” says NCCPA President/CEO Dawn Morton Rias, Ed.D, PA-C. “I personally am proud that we found a model that maintains and honors the broad-based knowledge that has in many ways defined and facilitated the growth and mobility of our profession while also recognizing that – in real practice – patients can be served well through PAs’ consultation of resources. This new take-at-home model still includes an assessment for general or core knowledge, but it addresses many concerns about the expense and time of preparing for a timed exam that covers a breadth of content that many PAs do not use in their day-to-day practice. At the same time, this two-part model would test specialty-related knowledge that is used day-to-day, which clearly serves the

public well. That said, there is still a considerable amount of important work to be done, and we will consider thoughtfully the feedback we receive during the upcoming comment process.”

Given the time required for the development of these new exams, the new new recertification exam model, if approved, would be implemented several years from now for those in the 10-year certification maintenance process.

[This article has been updated since its initial release.]

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New PA Director at Large Elected to NCCPA Board

Katherine (Kaesa) Footracer, MS, PA-C was chosen from a field of 64 applicants to serve on the NCCPA Board as a PA director at large beginning in January. A full-time clinician, she provides primary care and urgent care in West Covina and Glendale, Calif. Ms. Footracer brings a wide range of experience to her new role with NCCPA, with experience as a member of the AAPA's House of Delegates and Quality Care Work Group of the Clinical and Health Affairs Commission, as a director at large of the New Jersey State Society of PAs, and -- prior to her PA career -- in staff and leadership positions with other non-profit organizations.

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April Emergency Medicine CAQ Exam in San Diego –
Register NOW to Secure a Spot!

In conjunction with SEMPA 360, NCCPA will offer a special administration of the Emergency Medicine Specialty Exam for those pursuing a CAQ in that specialty on April 4, 2016. The exam will be offered at both of Pearson VUE's San Diego locations. Registration for the exam opens Nov. 25. Since the test centers will also be testing for other clients on that date, we encourage you to schedule your exam early.

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The National Commission on Certification of Physician Assistants is dedicated to serving the interest of the public. We do so with a passionate belief that certified physician assistants are essential members of the health care delivery team who provide millions access to more affordable, high quality health care.

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