

June 9, 2016

National Commission on Certification of Physician Assistants
12000 Findley Road, Suite 100
Jones Creek, GA 30097-1409

Board of Directors,

The PA profession is now 50 years old and the profession has grown in size and diversity, ranging from our origins in primary care to every medical specialty practiced in medicine today. The success of our profession is directly related to our basic training in primary care, our flexibility to adapt with the ever-changing needs in health care, and our ability to move between specialties. The Society of Emergency Medicine Physician Assistants (SEMPA), a constituent organization of the AAPA, was formed in 1990 to represent PAs working in the emergency medicine specialty. SEMPA has grown into one of the largest specialty organizations within the PA profession and is the exclusive professional organization representing PAs in emergency medicine.

SEMPA's Board of Directors has given a considerable amount of thought to NCCPA's proposed changes to the recertification process with multiple discussions held at Board of Directors meetings, participation in the discussion within the House of Delegates this year at AAPA and discussion among members. Also, due to the significance of the proposed changes, SEMPA surveyed its members. SEMPA received more than 315 responses along with an overwhelming amount of written-in comments. As you now know, we learned there are a great deal of diverse opinions of both the current process and the proposed changes. Many of our members applaud the concept of a primary care examination with special concentration to the specialty of practice, without the addition of multiple exams. However, after SEMPA leaders reviewed and summarized the survey results, we found the majority of our members were not in favor of the NCCPA proposed changes. Therefore, SEMPA feels strongly that the concerns of our membership be heard and taken into consideration.

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- **Financial cost of the proposed recertification model.** SEMPA members are concerned about potential increase in costs to the recertification model. CME funding from employers is consistently decreasing, which causes more out of pocket costs to PAs. Surveys cite that PAs already spend a significant amount of time and resources dedicated to the existing recertification process. SEMPA does not see value in adding more cost dedicated to this process, at this time, without evidence to substantiate these additional changes.
- **Efficacy of the proposed recertification model.** The proposed changes also allow for less time to be spent on CME in order to keep the PA current. PAs will be spending more time on the recertification process and less on CME current to their practice. Studies show that people learn and retain more information by active engagement learning. Take home tests are not considered active engagement learning. The addition of take home exams increases time it takes to recertify. PAs are busy caring for patients, which is why we went into the medical field in the first place. By adding take home examinations, the amount of time PAs can spend evaluating and treating patients lessens.

- **Minimize the meaning of the Emergency Medicine Certificate of Added Qualifications.** SEMPA endorses the NCCPA's CAQ in Emergency Medicine. We feel the CAQ is a master level competency process and cannot be used as an entry-level credential for PAs beginning to practice in emergency medicine. Our membership is concerned that by allowing people who score higher on the PANRE to be awarded a CAQ, it minimizes the meaning and acknowledgment of PAs who strive towards mastery in their specialty practice and earning the CAQ.
- **Loss of flexibility within the profession and employment options.** SEMPA feels strongly that the proposed NCCPA changes pose a threat to the flexibility of the PA profession. While many SEMPA members are happy in their chosen specialty of emergency medicine, many also feel the flexibility of the PA profession is key to the continued success and growth of the profession. The majority of SEMPA members also feel the proposed NCCPA changes would produce a negative legislative effect and a negative effect on hospital medical staff privileging. While NCCPA does not share this concern, it is quite possible that employers will soon see the value of the specialty credential and is only a matter of time before employers cite liability issues and mandate passage of such "specialty" certification. This could lead to stricter laws and credentialing processes for the PA, which in turn could lead to less employment opportunities or could even divert people away from the profession altogether.
- **Too many changes at the same time.** Even though the PI/SA CME changes and the switch to the 10-year cycle occurred three years ago, there are still PAs who haven't even started that new recertification process. Without the NCCPA having any data on the effectiveness of the most recent changes, SEMPA does not feel another change would be beneficial to the practicing PA.

In conclusion, SEMPA does not endorse the proposed NCCPA changes to the recertification process. SEMPA believes the CAQ process is a valuable way to recognize specialty standards. SEMPA endorses the flexibility of practice that exists within the profession today and believes that this factor has helped the profession to grow and thrive. The SEMPA Board of Directors feel there needs to be further discussions with key stakeholder organizations, PA leaders, and the NCCPA before any changes are made. SEMPA strongly suggests, as leaders of the NCCPA, you take into account all responses and comments from the constituent organizations as well as the AAPA HOD deliberations and resolutions from the most recent HOD meeting. SEMPA appreciates the opportunity to submit its position on the proposed changes and looks forward to meeting with NCCPA to further discuss the recertification process. We appreciate your continued commitment to the PA profession.

Sincerely,



Krisi Gindlesperger, MPAS, PA-C
SEMPA President