

**PAEA Business Meeting
October 12, 2019
Washington, DC**

MINUTES

Voting Members Present: T. Moore, Alderson-Broaddus University; C. Hendrix, Anne Arundel Community College; R. Langstaff, Arcadia University; W. Langen, Barry University; K. Erdman, Baylor College of Medicine; E. Schmidt, Butler University; C. Forest, California State University Monterey Bay; S. Massey, Central Michigan University; P. Kabara, Concordia University; P. Scholting, Creighton University; K. Ehrhardt, DeSales University; J. Barnett, Duke University Medical Center; M. Lund, Emory University; K. Cavanagh, Gannon University; A. Steele, Gardner Webb University; K. Wright, George Washington University; K. Robinson, Hardin-Simmons University; M. Sparrell, Idaho State University; E. Mandel, Johnson & Wales University; W. Reynolds, King's College; R. Brown, Le Moyne College; T. Horvath, Marist College; A. Davis, Marywood University; J. Mattingly, Mercer University; C. Sim, MGH Institute of Health Professions; J. Gunn, Midwestern University (Downers Grove); D. Gibbons, Milligan College; D. Patel, Northeastern University; C. Healy, Northwestern University; C. Finley, Nova Southeastern University, Fort Lauderdale; A. Steinhour, Nova Southeastern University, Fort Myers; D. O'Donoghue, Oklahoma City University; P. Kenney Moore, Oregon Health & Science University; S. Cappelmann, Pace University-Lenox Hill Hospital, NYC; L. Levy, Philadelphia College of Osteopathic Medicine; H. Grotke, Rochester Institute of Technology; T. Layne, Rocky Mountain University of Health Professions; C. Ruff, Rocky Vista University; R. Chen, Rush University; D. Agnew, Salus University; A. Miller, Shenandoah University; J. Goble, Jr, South College - Nashville; S. Schellenberg, South University, Richmond; J. Otey, SUNY Downstate Medical Center; J. Coale, Thomas Jefferson University, East Falls Campus; P. Pashkioff, Touro College (Manhattan); M. Davenport, Towson University CCBC – Essex; B. Reeves, Trevecca Nazarene University; M. Petersen, Union College; T. Morris, University of Arkansas; A. Lampkins, University of Evansville; A. Breneman, University of Iowa; K. Schuer, University of Kentucky; M. Archambault, University of Lynchburg; B. Ekey, University of Mount Union; D. Visich, University of New England; P. Cheminski, University of North Carolina - Chapel Hill; W. Nilson, University of North Dakota; M. Yozzo, University of Oklahoma, Oklahoma City; S. Ijams, University of Oklahoma, Tulsa; W. Nilson, University of South Dakota; K. Caruthers, University of Tennessee Health Science Center (Memphis); F. Ambriz, University of Texas Rio Grande Valley; L. Speer, University of Toledo; T. Scott, University of Washington; K. Graham, University of Wisconsin – La Crosse; T. Howell-Stampley, UT Southwestern – School of Health Professions; J. Zaweski, Valparaiso University; G. Curtis, Wake Forest University (Bowman Gray); S. Brammer, West Liberty University; M. Medina, Western University of Health Sciences; J. Marchesi, Westfield State University; A. Garino, Yale University School of Medicine; L. Butler, Nova Southeastern University, Orlando; D. Brown, Quinnipiac University; J. Pennington, Baldwin Wallace University; W. Boeve, Bethel University- MN; J. Kinzel, Drexel University; N. Guzman, Florida

Gulf Coast University; P. Marsicovetere, Franklin Pierce University; M. Reinhold, Grand Valley State University; M. Wiemiller, Marquette University; K. Bonnin, Midwestern University (Glendale); A. Ahmed, New York Institute of Technology; E. Villarreal, Northern Arizona University; C. Dobbs, Red Rocks Community College; M. McQuillan, Rutgers University; M. DeRosa, Samuel Merritt University; M. Bruza-Augatis, Seton Hall University; T. Williams, South University, Tampa; S. Fernandes, Stanford University; K. Ervie, University of Missouri – Kansas City; D. Beck, University of Pittsburgh; K. Loheny, University of Southern California (LA); M. DiBaise, Arizona School of Health Sciences; S. White, Boston University School of Medicine PA Program; J. Brodhead, Charleston Southern University; J. Truscott, Chatham University; M. Valdez, College of Saint Elizabeth; A. Bronson, Colorado Mesa University; H. Taylor, Des Moines University; M. Murphy, Harding University; J. Hargis, Heritage University; L. Sekhon, High Point University; M. L'Eplatteneir, Hofstra University; G. Weniger, James Madison University; A. Smith, Lock Haven University; R. Dye, Mississippi College; S. Sweitzer, Pace University - Pleasantville; J. Radke, Rosalind Franklin Univ of Medicine; C. Chang, Saint Louis University; A. Bell, Texas Tech University Health Sciences Center; G. Landel, Touro University California; S. Horak, University of Nebraska; S. McGilvray, University of South Alabama; R. Philpot, Jr., University of Texas – Medical Branch at Galveston; J. Grant, University of the Pacific; V. Snyder, University of Wisconsin – Madison; G. Marciano, Weill Cornell Medicine Graduate School of Medical Sciences; R. Smith, Albany Medical College; C. Lord, Case Western Reserve University; C. Garrubba, Dominican University of California; B. Smolko, Frostburg State University; S. Kramer, Lake Erie College; C. Beebout, Saint Francis University; J. Pearl, University of California-Davis; R. Becker, Wingate University; S. Banas, SUNY Upstate Medical University; B. Calhoun, Duquesne University; N. Multak, University of Florida

Voting Members Not Present: AdventHealth University; Augsburg University; Augusta University; Bay Path University; Bethel University- TN; Bryant University; California Baptist University; Campbell University; Carroll University; Chapman University; Charles R. Drew University; Christian Brothers University; Clarkson University; College of Saint Mary; College of St. Scholastica; CUNY York College; D'youville College; Daemen College; Dominican University; East Carolina University; Eastern Michigan University; Eastern Virginia Medical School; Elon University; Emory & Henry College; Florida International University Herbert Wertheim College of Medicine; Florida State University; Francis Marion University; Franciscan Missionaries of Our Lady University; Franklin College; Gannon University-Ruskin; Indiana State University; Indiana University School of Health & Human Sciences; Interservice; Keiser University; Kettering College; Lenoir-Rhyne University; Lincoln Memorial University; Lipscomb University; Loma Linda University; Long Island University; Louisiana State University – New Orleans; Louisiana State University Health Sciences Center Shreveport; Marietta College; Marshall B. Ketchum University; Mary Baldwin University (Murphy Deming College of Health Sciences); MCPHS University (Boston); MCPHS University (Manchester/Worcester); Medical University of South Carolina; Mercy College; Mercyhurst University; Methodist University; Miami Dade College; Misericordia University; Missouri State University; Monmouth University; Morehouse School of Medicine; Mount St. Joseph University; North Greenville University; Nova Southeastern University, Jacksonville; Ohio Dominican University; Ohio University; Pacific University; Penn State University; Pennsylvania College of Technology; Radford University; Rocky Mountain

College; Sacred Heart University; Saint Catherine University; Samford University; Seton Hill University; Slippery Rock University; South College; South University in Savannah; Southern California University of Health Sciences; Southern Illinois University; Springfield College; St. Ambrose University; St. John's University; Stephens College PA Program; Stony Brook University; Sullivan University; Temple University Lewis Katz School of Medicine; The CUNY School of Medicine; Thomas Jefferson University, Center City Campus; Touro College (Bay Shore); Touro University Nevada; Trine University; Tufts University; University of Alabama at Birmingham; University of Bridgeport; University of Charleston; University of Colorado; University of Dayton; University of Detroit Mercy; University of Dubuque; University of Findlay; University of La Verne; University of Nevada, Reno; University of New Mexico; University of North Texas HS Center; University of Saint Francis (Fort Wayne); University of Saint Joseph; University of South Carolina, SOM; University of South Florida; University of St. Francis; University of Tampa; University of Texas – HS Center at San Antonio; University of the Cumberlands; University of Utah; Wagner College; Wayne State University; Western Michigan University; Wichita State University; Yale University – Online Program.

Board Members Present: Jon Bowser, president; Howard Straker, president elect; Stephane VanderMeulen, past president; Carl Garrubba, treasurer; Janie McDaniel, secretary; Kara Caruthers, director at large; Gerald Kayingo, director at large; J; Dipu Patel, director at large; Michael Roscoe, director at large; Kevin Schuer, director at large; Michel Statler, director at large; Kathleen Holec, student member at large.

Senior Staff Present: Sara Fletcher, interim CEO; Olivia Ziegler, chief assessment officer; Dave Keahey, chief policy & research officer; Karen Hills, chief, educational development; Steven Lane, senior director, strategic communications; Lynn Heitzman, senior director, operations.

1. Approval of the Agenda. *The agenda was approved.*

2. Announcement of Board of Directors Election Results. Mr. Bowser congratulated Michel Statler on being elected president elect and reported that since no candidate for director at large had achieved the necessary 50 percent of the vote, a run-off election would be held. *(In the run-off election, Nicole Burwell, Reamer Bushardt, and Linda Sekhon were elected to the Board.)*

3. Approval of the Minutes. There were no corrections to the minutes. ***A motion to approve the minutes was seconded and carried.***

4. President/CEO Report. Mr. Bowser indicated that he had no additions to the report in the book. ***There was no objection to the report being accepted as written.***

5. Treasurer's Report. Mr. Garrubba reported that PAEA is in a strong financial position, with CASPA and exam sales remaining strong. He noted that while an 11% deficit had been planned, the deficit actually came in at 7% deficit, due primarily to expenses being controlled. He

reported that in 2020 PAEA would launch the End of Curriculum exam, which several programs had already bought, and had also launched the new Exam Box to bundle exams and to provide strong data for national benchmarking. He thanked his colleagues on the Finance Steering Committee and the PAEA finance staff.

There were no objections to the report bring accepted as presented.

6. Liaison Reports

A) SAAAPA. Mr. Bowser noted that SAAAPA liaison Jonathan Kilstrom could not be present and thanked Mr. Kilstrom for his work in this important position.

There were no objections to the report bring accepted as written.

7. External Organization Reports

A) AAPA. Mr. Mittman wished members a happy final day of PA week and recognized the importance of collaboration between the two organizations and of respecting each other's positions. He briefly updated members on optimal team practice actions around the states and noted that PAs must not be "invisible" in the care they provide. On the title change initiative, he cited a recent AAPA survey as finding that 90% of PAs cite a disconnect between what they do and their title.

B) PA Foundation. Dr. Erickson reported on the Foundation's student scholarships, now totaling \$2.3 million, and noted that the Timi Agar Barwick scholarship had now been offered for the second year. He invited PAs to the Foundation's planned activities at the 2020 AAPA conference in Nashville and thanked them for donating to the Foundation, which can be done on their website.

C) NCCPA. Dr. Hunter-Buskey and Dr. Morton-Rias came to the podium together to deliver reports from the three NCCPA-related organizations. Dr. Hunter-Buskey noted that the written report for NCCPA was in the book and that she had nothing to add.

D) nccPA Health Foundation. Dr. Morton-Rias reported to members on the Foundation's grants programs, including the partners in mental health program and Smiles for Life.

E) Physician Assistant History Society. Dr. Morton-Rias reported that the society had held a luncheon honoring Dr. Reggie Carter, founder of the society. PAHx has toolkits, bootcamps, and other resources to help PAs who would like to be historians of the profession.

8. Continuing Business

A) OTP Task Force Report. Ms. Statler reported that it had been a privilege to chair this task force and thanked its members and PAEA staff for their work, noting that this was a

collaborative, interprofessional initiative. She noted that the task force had asked for an extension of its deadline in 2018, as they had found optimal team practice (OTP) to be an evolving issue. She reported that the final task force report had been placed on the PAEA Digital Learning Hub, to guard against its content being used out of context, which had happened with the first PAEA report on the predecessor of OTP. Also for this reason, the Board had elected not to ask the membership to take action on the report, but the task force was simply presenting its findings, as required by the original motion that created it.

B) Competencies for the PA Profession. Ms. Carruthers, one of the two PAEA representatives on the Competencies Task Force, provided an update on the task force’s work on its charge to “review and recommend revisions to the PA Professional Competencies to ensure alignment with the Competencies for New PA Graduates.” She said that the task force has developed a good first draft and would be seeking public feedback on it after the Forum, and that the ultimate goal would be for each of the four national PA organizations for approval through their own governance pathways.

C) Journal of Physician Assistant Education. Dr. Asprey thanked members who responded to the JPAE readership survey and provided excellent feedback. He noted that the journal was still awaiting its impact factor, which would be important for promotion and tenure. He reported that Editorial Board member Tami Ritsema was leaving the board so there was an opening. ***There was no objection to the report being accepted as presented.***

9. New Business/Other Items.

2019-BOD-1. CORE COMPETENCIES FOR NEW PA GRADUATES

Mr. Bowser invited Mary Jo Bondy, co-chair of the task force that developed the new graduate competencies, to speak to the motion. Dr. Bondy reviewed the history and rationale for establishing the task force and developing the competencies. She noted that the competencies would be iterative and that adopting them did not make them binding on PA programs; the competencies are simply a resource for programs to use to develop their own program outcomes as they see fit. Mr. Bowser stated that the membership would be voting to adopt only the competencies themselves, not the entire paper, and that Board’s preference was to hold an up-or-down vote on the competencies. ***There was no objection to holding the up-or-down vote. The motion to adopt the competencies passed.***

2019-BOD 2. PAEA POSITION POLICIES

Background/Rationale: PAEA’s Policies and Procedures manual contains two classes of policies: operational policies, which are in the purview of the Board, and position policies, which must be approved by the membership. All policies sunset every five years. The position policies are chiefly used to guide the Association’s advocacy work, with government agencies or other

organizations. PAEA's Government Relations staff have reviewed and proposed revisions to these policies. Policies with no proposed revisions need to be reaffirmed to remain current.

Motion: Be it resolved that the following revisions to and reaffirmations of PAEA's position policies be adopted.

Mr. Bowser stated that the PAEA position policies would be placed on a consent agenda, with the exception of position policy 14, regarding optimal team practice. He asked if anyone wished to pull any other policies off the consent agenda. Mr. Miller asked to pull policy 11, Terminal Degree of the Profession.

CONSENT AGENDA

1. Certification to Practice

PAEA supports the entry-level certification examination administered by the National Commission on Certification of Physician Assistants as the only examination requirement for PAs to obtain state licensure and to qualify for employment as a PA. (Adopted October 18, 2014)

2. Clinical Training

~~PAEA supports an expansion in the number of PA clinical training opportunities.~~ supports policy, **FEDERAL FINANCING**, federal grant and regulatory actions that ensure an adequate supply of high quality clinical training sites for all health care professionals **PA STUDENTS** and encourages the development of sites committed to educating interprofessional teams of health care providers. (Adopted October 18, 2014)

3. Expansion of Stafford Loan Program

PAEA supports **REFORM** ~~an expansion~~ of the **FEDERAL DIRECT** Stafford Loan Program to **ENSURE** ~~provide~~ **THAT BORROWING** loan limits for PA students that are sufficient to assist in the financing of their education and commensurate with other health care professions. (Adopted October 18, 2014)

4. Generalist Education

PAEA supports a generalist framework and comprehensive approach to entry-level PA education. PA education prepares graduates to meet the primary care workforce needs of the nation and provides the PA graduate with flexibility in career choices. (Adopted October 18, 2014)

5. Graduate Medical Education

PAEA supports the modernization of graduate medical education (GME) in a manner that promotes and funds PA-physician interprofessional educational experiences designed to prepare effective teams that provide **HIGH-QUALITY** safe health care. (Adopted October 18, 2014)

6. Health Reform

~~PAEA supports comprehensive health care reform that improves access and quality of care for all patients with PAs as an integral part of team-based delivery systems. (Adopted October 18, 2014)~~

7. Loan Repayment for Faculty

PAEA supports an expansion of loan repayment programs for PA faculty, especially those designed to improve the recruitment and retention of a diverse PA education workforce. (Adopted October 18, 2014)

8. Loan Repayment for Students

PAEA supports an expansion of student loan repayment programs for PA graduates linked to service in medically underserved populations and **RURAL** communities. (Adopted October 18, 2014)

9. Pathway to Practice

PAEA supports graduation from ARC-PA–accredited programs and certification by the National Commission on Certification of Physician Assistants as the sole pathway to practice as a PA in the nation. (Adopted October 18, 2014)

10. Technology

PAEA supports the increased utilization of technology within PA programs, to include electronic health records, patient simulators, and other innovations, that prepares graduates for entry into the health care system and supports patient safety. (Adopted October 18, 2014)

12. Title VII Reauthorization and Updating

PAEA supports the reauthorization and expansion of Title VII as a vital source of federal funding for PA programs. (Adopted November 7, 2009; Reaffirmed October 18, 2014)

13. DIVERSE Workforce

PAEA supports policies that ensure a diverse PA health care workforce sufficient to meet the current and projected healthcare needs of the nation and reflect the population it serves. (Adopted October 18, 2014)

The motion to approve the consent agenda (position policies 1-10, 12, 13) passed.

14. OPTIMAL TEAM PRACTICE

PAEA SUPPORTS THE GOAL OF OPTIMAL TEAM PRACTICE TO REDUCE ADMINISTRATIVE BURDENS ON PAS BY ESTABLISHING PHYSICIAN COLLABORATION AT THE PRACTICE LEVEL.

Dr. Smolko moved to amend the OTP motion by striking the word “physician”:

PAEA SUPPORTS THE GOAL OF OPTIMAL TEAM PRACTICE TO REDUCE ADMINISTRATIVE BURDENS ON PAS BY ESTABLISHING ~~PHYSICIAN~~ COLLABORATION AT THE PRACTICE LEVEL.

There was no discussion. The amendment passed. There was no discussion of the amended motion. The amended motion passed.

11. Terminal Degree of the Profession

Despite the adoption of clinical doctoral degrees by other health professions, PAEA is confident in the preparation of PA graduates at the master's degree level to meet the competencies necessary for quality and cost-effective PA practice. PAEA reaffirms its endorsement of the master's degree as the sole recognized entry-level and terminal degree of the profession. (Adopted October 18, 2014)

Mr. Miller moved to amend this position policy. This was seconded. The amended policy read:

Terminal Degree of the Profession

~~Despite the adoption of clinical doctoral degrees by other health professions, PAEA is confident in the preparation of PA graduates at the master's degree level to meet the competencies necessary for quality and cost-effective~~ **CLINICAL** PA practice. PAEA ~~reaffirms its endorsement of the master's degree as the sole recognized entry level and terminal degree of the profession. (Adopted October 18, 2014)~~ **HOWEVER, BECAUSE OF THE INCREASING COMPLEXITY OF MEDICINE AND HEALTH CARE SYSTEMS AND THE NEED FOR PAS TO HAVE EXPANDED KNOWLEDGE AND SKILLS IN A TEAM-BASED PRACTICE ENVIRONMENT, CLINICAL KNOWLEDGE AND SKILLS ALONE MAY BE INSUFFICIENT FOR SUCCESSFUL PA PRACTICE IN SOME SETTINGS. THEREFORE, PAEA ENDORSES THE CLINICAL DOCTORATE AS AN OPTION FOR ENTRY-LEVEL EDUCATION.**

Speaking to his amendment, Mr. Miller noted that many health professions have moved to the clinical doctorate degree in recent years, and that "add-on" doctorates for PAs have proliferated. He stated that these additional degrees are expensive and that this cost could be reduced by allowing PA programs to offer an entry-level doctorate degree. Other testimony included the benefit of additional curriculum on health care systems when physical therapy moved to the DPT and the statement that it is a myth that moving to the doctorate will increase the length and cost of PA programs.

Dr. Multak moved that the motion be referred to a task force, which was seconded. Immediate past president Stephane VanderMeulen then moved to amend this motion and instead "refer the motion to the Board to determine the most appropriate mechanism for further investigation of this issue."

This motion to amend the motion to refer passed. The amended motion to refer this position policy to the Board passed.

10. Adjournment. Mr. Bowser passed the ceremonial gavel to incoming president Howard Straker and the meeting was adjourned.

Approval of the Agenda
Announcement of Board of Directors Election Results
Approval of the Minutes of the October 2018 Business Meeting
Annual Membership Report — <i>J. Bowser, S. Fletcher</i>
Financial Report Treasurer’s FY19 4th Quarter Report — <i>C. Garrubba</i>
Liaison Reports A) SAAAPA — <i>J. Kilstrom</i>
External Organization Reports A) AAPA — <i>D. Mittman</i> B) PA Foundation — <i>J. Erickson</i> C) NCCPA — <i>R. Hunter-Buskey</i> D) nccPA Health Foundation — <i>D. Morton-Rias</i> E) Physician Assistant History Society — <i>D. Morton-Rias</i>
Continuing Business A) OTP Task Force Report — <i>M. Statler</i> B) Competencies for the PA Profession — <i>K. Caruthers</i> C) Journal of Physician Assistant Education Report — <i>D. Asprey</i>
New Business/Other Items A) Motions Received by the Deadline Consent Agenda: BOD Motions 2019-BOD 1. Core Competencies for New PA Graduates 2019-BOD 2. PAEA Position Policies
Passing of the Gavel/Adjournment