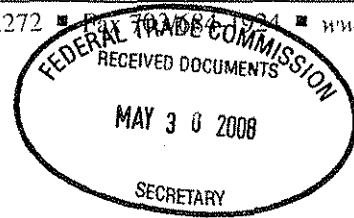




American Academy of Physician Assistants

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May 21, 2008 .

The Honorable William Kovacic
Federal Trade Commission/Office of the Secretary
600 Pennsylvania Avenue, N.W.
Room H-135 (Annex A)
Washington, DC 20580

Re: Health Care Delivery - Comment, Project No. V080005

Dear Chairman Kovacic:

On behalf of the nearly 70,000 clinically practicing physician assistants (PAs) represented by the American Academy of Physician Assistants (AAPA), I wish to thank you for the opportunity to submit comments on the public workshop, "Innovations in Health Care Delivery". Specifically, my comments are focused on the topic of limited service clinics (or "retail clinics") and the role of physician assistants.

Physician assistants are licensed health care professionals who deliver high quality, cost-efficient care to millions. PAs are trained to practice medicine as delegated by and with the supervision of a physician, who may, in all 50 states, delegate to PAs those medical duties that are allowed by law and are within the physician's scope of practice and the PA's training and experience. Additionally, all states, the District of Columbia, and Guam authorize physicians to delegate prescriptive privileges to the PAs they supervise.

In 2007, an estimated 245 million patient visits were made to PAs and approximately 303 million medications were prescribed or recommended by PAs. PAs work in virtually all health care settings and areas of medicine and surgery, and are widely acknowledged as essential health care professionals. PAs' rigorous training and recertification requirements prepare them well to provide quality medical care, and make them highly qualified to staff retail clinics.

Currently, a relatively small number of PAs report retail clinics as their primary employer. However, if the number of retail clinics providing basic primary care diagnostic and treatment services grows as expected, the number of PAs in those settings can be expected to grow as well. Retail clinics offer an employment environment that is attractive to many PAs – the possibility for part time or flexible hours; the ability to extend access to care to underserved or underinsured populations, as well as those seeking care in situations which may require more immediate attention than a practice setting; and the opportunity to increase exposure to and reliance upon the PA profession as a whole.

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The Honorable William Kovacic

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Recognizing that the PA profession was created to address physician distribution issues and improve patient access to medical care, particularly for underserved populations, the rise of retail clinics and the use of PAs to staff them is a natural extension.

In 2003, in response to the rise of retail clinics, the AAPA adopted the following policy:

“The AAPA supports expanded health care access for all people. AAPA encourages innovation in health care delivery, but remains committed to the model of physician directed team care. AAPA maintains that continuity of care is a high priority; therefore, communication between the episodic care provider and the primary provider should be maximized within the constraints of regulation, patient confidentiality, and patient preference.”

Although in-store clinics increase access to basic health care at low cost, they do not offer a perfect solution. The clinics do not encourage the establishment of a medical home for patients. Continuity of care can be jeopardized as patients arrive without medical histories and without establishing a relationship with the health care provider. And retail clinics do not coordinate or focus on preventive care, a critical piece of the medical home in today's society where 45% of Americans have at least one chronic disease, such as hypertension, diabetes, and asthma.

However, given retail clinics' rise in popularity as an efficient and inexpensive health care option for many Americans, and given that PAs will most certainly continue to provide high quality care within these retail settings, the AAPA recommends that retail clinics:

- Seek to establish arrangements by which all retail clinic health care providers have ongoing access to and supervision by physicians (MDs and DOs), consistent with state laws;
- Seek to establish referral systems with physician practices or other facilities for appropriate treatment if the patient's condition is beyond the scope of services provided by the clinic; and
- Seek to establish formal connections with physician practices in the community to provide continuity of care and encourage a medical home for patients.

AAPA believes that the above principles will ensure that retail clinics that employ PAs and other health care providers continue to provide patients with the highest-possible quality of care, while improving access to basic diagnostic and treatment services.

Thank you for considering our comments. Should you have any questions on the comments, the PA profession, or the AAPA, please do not hesitate to contact Sandy Harding, AAPA's Director of Federal Affairs, at 703-836-2272, extension 3205.

Sincerely,

William F. Leinweber
Executive Vice President, Chief Executive Officer