Opponent Testimony HB 353
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The Academy of Medicine of Cleveland & Northern Ohio
November 19, 2025

Chair Schmidt, Vice Chair Deeter, Ranking Member Somani, and members of the House Health Committee, thank you for the opportunity to provide opposition testimony on House Bill 353.

My name is Weston Brooks, and I am a second-year medical student, and member of the AMCNO Future Leaders Council. I would like to begin by stating that I have nothing but respect and appreciation for physician assistants and the work they do within the medical system. Providing the highest level of care to every patient should be the goal of all healthcare workers, and having physician assistants certainly plays a role in achieving this goal. With that being said, I find it difficult to believe that the changes suggested in HB 353 would do anything other than confuse patients and inevitably lead to problems in the future.

As a medical student, I understand and can relate to the rigorous process of becoming a physician. The countless hours of studying and years of training we put in prepare us to serve leaders in hospitals and other medical settings where the patient is at the center of team-based care. By changing the title of PAs from physician assistant to physician associate, we would be muddying the waters regarding where responsibility lies and ultimately who is best equipped to make tough decisions about intricate medical issues.

I want to share an example about a close friend of mine who decided to become a physician assistant after college. This friend and I graduated the same year, and after one gap year and my first year of medical school, they completed a 24-month physician assistant program. I have no doubts that this friend will be an incredible physician assistant and that they are fully capable of functioning in that capacity following the completion of their two-year program. However, referring to them as a physician associate and suggesting that they are completing tasks and

[1] https://codes.ohio.gov/ohio-revised-code/section-4730.22

performing clinical evaluations of patients on the same level as a physician minimizes the differences in training.

An argument in support of HB 353 I have heard is that the responsibilities and tasks of physician assistants have expanded over the years, requiring an updated name to reflect these updated roles. Unfortunately, this argument falls short, as this can be said for virtually every healthcare worker as advancements in technology and medicine make it possible for everyone to do more. The fact of the matter is that physician assistants still have the same scope of practice, and per Ohio Revised Code section 4730.22[1], the supervising physician is legally responsible for services provided by the physician assistant. I want to reiterate that I respect and appreciate the role physician assistants play in healthcare teams, but as a future physician, assuming responsibility for another provider does not make them my associate.

For these reasons, I urge the committee to consider the potential for confusion, misalignment in training and responsibility, and the unintended consequences this bill may introduce into the healthcare system. Clear, transparent titles are essential for maintaining patient trust and ensuring that every member of the care team is recognized for the unique and valuable role they play. HB 353 risks undermining that clarity. I respectfully ask that you oppose House Bill 353 in the interest of protecting patients, preserving team-based care, and upholding the integrity of the physician–patient relationship. Thank you for your time and consideration.

[1] https://codes.ohio.gov/ohio-revised-code/section-4730.22