Chair Cirino, Vice Chair Rulli, Ranking Member Ingram, and Members of the Workforce and Higher Education Committee,

My name is Michell McDiffett, testifying on behalf of the Ohio Association of Physician Assistants (OAPA). I was born and raised in Painesville, Ohio in Lake County. I studied psychology at The Ohio State University and then completed a Master of Health Science/Physician Assistant certification in 2010 at CSU/Tri-C. Employment history includes social worker for Lake County Job and Family Services Children Services, mental health case manager for children and adults at Signature Health, Inc. I have been practicing as a psychiatric PA-C at Signature Health, Inc. since 2010 and treat adults with mental illness and substance use disorders. I am the Research and Outcomes Coordinator and assistant clinical faculty for the Lake Erie College PA Program in Painesville, Ohio and have been there since 2019. I am responsible for the behavioral medicine curricular aspects of the Program. I am an advocate for the PA profession in Ohio and currently serve as the Past president of the OAPA BOD and have previously served as president, regional director, delegate and students affairs committee chair.

Formed in 1978, the OAPA has provided a foundation for the PA profession for the state of Ohio. This organization promotes quality, cost-effective, accessible health care through the physician assistant – physician team approach.

A PA is a member of the healthcare team who is trained, nationally certified, and state licensed to practice medicine in collaboration with a supervising physician in a variety of health care settings, including mental and behavioral health.

OAPA opposes Senate Bill 60. While we applaud the sponsor and proponents for seeking to address our state's shortage of mental health professionals, OAPA believes there are better ways to address the issue. Primarily, OAPA believes that creating a new provider, which is duplicative of services provided by PAs and APRNs, is unlikely to address the issue. Instead, OAPA believes it's more likely to pull from existing training programs, resulting in no increase of providers.

Additionally, the creation of certified mental health assistants will likely reduce the number of clinical sites available for training PAs and NPs, potentially creating new problems. Moreover, creation of this new provider does not address the underlying issue that was raised in previous testimony to this committee, the loss of psychiatrists. How does creating a new profession address that issue? Who will supervise the certified mental health assistants?

OAPA believes the better path is to make Ohio more appealing for PAs to practice in the state. Better solutions include policies like the proposed PA compact (S.B. 28) or removing impediments in the Ohio Revised Code that prevent PAs from practicing to their full training. For example, Ohio law could be amended to allow PAs to "pink slip" patients who are a danger to themselves or others, like PAs are allowed in other states. Additionally, the requirement for on-site supervision of a PA by a physician for the first 500 hours of practice makes new graduate PAs undesirable candidates for employers who do not have the full time physician workforce to provide the oversight. This is especially limiting for PAs in psychiatry, a field that is known to have existing physician shortages. I have personally seen how these impediments have affected access to care for many patients in northeast Ohio. My current employer is one of the largest FQHCs in Ohio, serving over 30,000 patients annually. They have the same workforce needs as most agencies providing care in rural areas. Yet, they underutilize PAs due to lack of psychiatrists to supervise them, and have limited their behavioral medicine fellowship program to NPs for similar reasons.

PAs undergo extensive training. Most PA schools are 27-30 months in duration, a Masters level of education, and is typically divided into a didactic and clinical curricula. Didactic year is rigorous and mirrors the first two years of a typical medical school curriculum with emphasis in the areas of clinical medicine, pathophysiology, anatomy, and pharmacology. Clinical year typically entails 4-6 week clinical rotations in the core areas of family medicine, internal medicine, emergency medicine, general surgery, mental and behavioral health, women's health and pediatrics. ARC-PA accreditation standards include specific didactic and clinical training in behavioral medicine. I am currently faculty at Lake Erie PA Program in Painesville, Ohio and am responsible for the behavioral medicine curriculum. I prepare students for behavioral medicine with instruction of the diagnosis and management of acute and chronic mental illness and substance use disorders including principles of psychotherapy and psychopharmacology.

Upon graduation from an accredited PA program, students must sit for boards, Physician Assistant National Certifying Examination, commonly referred to as the PANCE, which is the national certification process administered by the National Commission on Certification of Physician Assistants (NCCPA). Upon becoming nationally certified, PA-Cs, are generally permitted to obtain state licensure and prescribing abilities. PAs are required to engage in Continuing Medical Education (CME). Nationally, PAs are required to obtain 100 CME every 24 months. The state of Ohio specifically requires an additional 12 hours of CME dedicated specifically to pharmacology.

A PA who undertakes all of the above training at one of Ohio's excellent PA programs cannot be blamed for looking to practice in other states with fewer restrictions. Ohio loses too many PAs to other states because of restrictions in the Ohio Revised Code. Creating a new profession does nothing to address that issue.

We stand ready to work with the Ohio General Assembly to address the mental health provider shortage, but feel that S.B. 60 is not the right path forward.

Thank you for the opportunity to testify today. I'm happy to answer any questions you might have.