DIRECTOR OF PHYSICIAN ASSISTANT SERVICES AT VETERANS HEALTH ADMINISTRATION

MAY 15, 2008.—Committed to the Committee of the Whole House on the State of the Union and ordered to be printed

Mr. FILNER, from the Committee on Veterans' Affairs, submitted the following

REPORT

[To accompany H.R. 2790]

[Including cost estimate of the Congressional Budget Office]

The Committee on Veterans' Affairs, to whom was referred the bill (H.R. 2790) to amend title 38, United States Code, to establish the position of Director of Physician Assistant Services within the office of the Under Secretary of Veterans Affairs for Health, having considered the same, report favorably thereon with an amendment and recommend that the bill as amended do pass.

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AMENDMENT

The amendment is as follows: Strike all after the enacting clause and insert the following:

SECTION 1. ESTABLISHMENT OF DIRECTOR OF PHYSICIAN ASSISTANT SERVICES AT VETERANS HEALTH ADMINISTRATION OF DEPARTMENT OF VETERANS AFFAIRS.

(a) IN GENERAL.—Section 7306(a) of title 38, United States Code, is amended by

striking paragraph (9) and inserting the following:

"(9) The Director of Physician Assistant Services, who shall be a qualified physician assistant who shall report to the Under Secretary for Health on all matters relating to the education and training, employment, appropriate utilization, and optimal participation of physician assistants within the programs and initiatives of the Administration. The Director of Physician Assistant Services shall serve in a full-time capacity at the Central Office of the Department.

(b) Deadline for Implementation.—The Secretary of Veterans Affairs shall ensure that an individual is serving as the Director of Physician Assistant Services under section 7306(a)(9) of title 38, United States Code, as added by subsection (a),

by not later than 120 days after the date of the enactment of this Act.

PURPOSE AND SUMMARY

H.R. 2790 was introduced by Representative Phil Hare of Illinois on June 20, 2007. The legislation would establish a full-time Director of Physician Assistant Services within the Veterans Health Administration in the Department of Veterans Affairs (VA). This position would be located in the Department of Veterans Affairs Central Office.

Background and Discussion

Physician Assistants (PAs) who choose to work for the federal government are credentialed health professionals. As of March 12, 1993, certification by the National Commission on Certification of Physician Assistants is a requirement for employment. PAs provide a comprehensive range of diagnostic and therapeutic services including performing physical exams, taking patient histories, ordering and interpreting laboratory tests, diagnosing and treating illnesses, and writing prescriptions. PAs practice medicine as delegated by, and under the supervision of, a physician. Physicians may delegate to PAs medical duties that are within the physician's scope of practice, and the PA's training and experience, as allowed by law. All states, the District of Columbia, and Guam authorize physicians to delegate prescriptive privileges to the PAs they supervise. According to the American Association of Physician Assistants, approximately 245 million patient visits were made and about 303 million medications were prescribed or recommended by PAs.

The first physician assistants to graduate from PA academic programs were former medical corpsmen who had served in Vietnam and wanted to use their medical knowledge and experience in civilian life. Dr. Eugene Stead of Duke University Medical Center in North Carolina put together the first class of PAs in 1965, selecting Navy corpsmen that had considerable medical training during their military experience. Today, there are 139 accredited PA programs across the United States.

Since the PA Advisor position was authorized by the "Veterans Benefits and Health Care Improvement Act of 2000," Public Law 106–419, the number of PAs within the VA health care system has increased 34 percent, from 1,195 to nearly 1,600 today. VA is the largest single employer of PAs in the United States. PAs work in

a wide variety of medical centers and outpatient clinics throughout the VA health care system.

Although the institution of the part-time, field-based PA Advisor has improved the utilization of PAs, there continues to be inconsistencies in the way PAs are used across the system. A full-time director, located in VA central office, would ensure efficient utilization and full integration, when appropriate, of VA's PA workforce in VA's patient care programs and initiatives. The full-time PA Director would also work closely with other offices within the Veterans Health Administration, such as the Office of Rural Health, to ensure that veterans living in medically underserved communities receive timely access to medical care.

HEARINGS

On January 17, 2008, the Subcommittee on Health held a legislative hearing on a number of bills introduced in the 110th Congress, including H.R. 2790. The following witnesses testified: The Honorable Phil Hare of Illinois; The Honorable Stephanie Herseth Sandlin of South Dakota; The Honorable Zachary T. Space of Ohio; The Honorable Shelley Moore Capito of West Virginia; The Honorable Michael M. Honda of California; The Honorable Leonard L. Boswell of Iowa; The Honorable Steve Kagen of Wisconsin; Mr. Joseph L. Wilson, Deputy Director, Veterans Affairs and Rehabilitation Commission, The American Legion; Ms. Joy J. Ilem, Assistant National Legislative Director, Disabled American Veterans; Mr. Christopher Needham, Senior Legislative Associate, Veterans of Foreign Wars of the United States; Mr. Richard F. Weidman, Executive Director for Policy and Government Affairs, Vietnam Veterans of America; Gerald M. Cross, M.D., FAAFP, Principal Deputy Under Secretary for Health, Veterans Health Administration, U.S. Department of Veterans Affairs, accompanied by Mr. Walter A. Hall, Assistant General Counsel, U.S. Department of Veterans Affairs. Those submitting statements for the record included: American Academy of Physician Assistants; The Honorable Shelley Berkley of Nevada; Mental Health America; and the Paralyzed Veterans of America.

COMMITTEE CONSIDERATION

On April 23, 2008, the Subcommittee on Health met in open markup session and favorably forwarded H.R. 2790, as amended, to the full Committee for consideration by voice vote.

An amendment by Mr. Hare of Illinois to establish the position 120 days after the date of enactment.

On April 30, 2008, the full Committee met in open markup session, a quorum being present, and ordered H.R. 2790, as amended, favorably reported to the House of Representatives, by a voice vote.

COMMITTEE VOTES

Clause 3(b) of rule XIII of the Rules of the House of Representatives requires the Committee to list the record votes on the motion to report the legislation and amendments thereto. There were no record votes taken on amendments or in connection with ordering H.R. 2790 reported to the House. A motion by Mr. Buyer of Indiana

to order H.R. 2790, as amended, reported favorably to the House of Representatives was agreed to by voice vote.

COMMITTEE OVERSIGHT FINDINGS

In compliance with clause 3(c)(1) of rule XIII and clause (2)(b)(1) of rule X of the Rules of the House of Representatives, the Committee's oversight findings and recommendations are reflected in the descriptive portions of this report.

STATEMENT OF GENERAL PERFORMANCE GOALS AND OBJECTIVES

In accordance with clause 3(c)(4) of rule XIII of the Rules of the House of Representatives, the Committee's performance goals and objectives are reflected in the descriptive portions of this report.

NEW BUDGET AUTHORITY, ENTITLEMENT AUTHORITY, AND TAX EXPENDITURES

In compliance with clause 3(c)(2) of rule XIII of the Rules of the House of Representatives, the Committee adopts as its own the estimate of new budget authority, entitlement authority, or tax expenditures or revenues contained in the cost estimate prepared by the Director of the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974.

EARMARKS AND TAX AND TARIFF BENEFITS

H.R. 2790 does not contain any congressional earmarks, limited tax benefits, or limited tariff benefits as defined in clause 9(d), 9(e), or 9(f) of rule XXI of the Rules of the House of Representatives.

COMMITTEE COST ESTIMATE

The Committee adopts as its own the cost estimate on H.R. 2790 prepared by the Director of the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974.

CONGRESSIONAL BUDGET OFFICE COST ESTIMATE

Pursuant to clause 3(c)(3) of rule XIII of the Rules of the House of Representatives, the following is the cost estimate for H.R. 2790 provided by the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974:

U.S. Congress, Congressional Budget Office, Washington, DC, May 12, 2008.

Hon. Bob Filner, Chairman, Committee on Veterans' Affairs, House of Representatives, Washington, DC.

DEAR MR. CHAIRMAN: The Congressional Budget Office has prepared the enclosed cost estimate for H.R. 2790, a bill to amend title 38, United States Code, to establish the position of Director of Physician Assistant Services within the office of the Under Secretary of Veterans Affairs for Health.

If you wish further details on this estimate, we will be pleased to provide them. The CBO staff contact is Sunita D'Monte.

Sincerely,

ROBERT A. SUNSHINE (For Peter R. Orszag, Director).

Enclosure.

H.R. 2790—A bill to amend title 38, United States Code, to establish the position of Director of Physician Assistant Services within the office of the Under Secretary of Veterans Affairs for Health

H.R. 2790 would require the Department of Veterans Affairs (VA) to establish the position of Director of Physician Assistant Services within the office of the Under Secretary of Veterans Affairs for Health. As required under current law, VA has an Advisor on Physician Assistants who reports to the Under Secretary. VA indicated that the current advisor works part time. CBO expects that to meet the bill's requirements, VA would make the position full time and require small additional appropriations for salaries, expenses, and travel. CBO estimates that implementing the bill would cost less than \$500,000 over the 2009–2013 period, assuming availability of the estimated amounts. Enacting the bill would have no effect on direct spending or revenues.

H.R. 2790 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act and would not affect the budgets of state, local, or tribal governments.

The CBO staff contact for this estimate is Sunita D'Monte. This estimate was approved by Theresa Gullo, Deputy Assistant Director for Budget Analysis.

FEDERAL MANDATES STATEMENT

The Committee adopts as its own the estimate of Federal mandates regarding H.R. 2790 prepared by the Director of the Congressional Budget Office pursuant to section 423 of the Unfunded Mandates Reform Act.

ADVISORY COMMITTEE STATEMENT

No advisory committees within the meaning of section 5(b) of the Federal Advisory Committee Act would be created by H.R. 2790.

CONSTITUTIONAL AUTHORITY STATEMENT

Pursuant to clause 3(d)(1) of rule XIII of the Rules of the House of Representatives, the Committee finds that the Constitutional authority for H.R. 2790 is provided by Article I, section 8, of the Constitution of the United States.

APPLICABILITY TO LEGISLATIVE BRANCH

The Committee finds that the legislation does not relate to the terms and conditions of employment or access to public services or accommodations within the meaning of section 102(b)(3) of the Congressional Accountability Act.

SECTION-BY-SECTION ANALYSIS OF THE LEGISLATION

Section 1. Establishment of a Director of Physician Assistant Services at the Veterans Health Administration of the Department of Veterans Affairs

This section amends section 7306(a) of title 38, United States Code, to make the Advisor of Physician Assistant Services a Director of Physician Assistant Services, and also mandates that the position be a full-time position, based in the Central Office of the Department of Veterans Affairs.

CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italic, existing law in which no change is proposed is shown in roman):

SECTION 7306 OF TITLE 38, UNITED STATES CODE

§ 7306. Office of the Under Secretary for Health

(a) The Office of the Under Secretary for Health shall consist of the following: (1) * * *

* * * * * * *

[(9) The Advisor on Physician Assistants, who shall be a physician assistant with appropriate experience and who shall advise the Under Secretary for Health on all matters relating to the utilization and employment of physician assistants in the Administration.]

(9) The Director of Physician Assistant Services, who shall be a qualified physician assistant who shall report to the Under Secretary for Health on all matters relating to the education and training, employment, appropriate utilization, and optimal participation of physician assistants within the programs and initiatives of the Administration. The Director of Physician Assistant Services shall serve in a full-time capacity at the Central Office of the Department.

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