As the mild Winter days will soon come to an end, we have much to look forward to with many great events planned for the Spring. This is a busy time of year for ConnAPA as we continue to work on your behalf on several fronts.

ConnAPA is excited to host the 33rd annual Charter Oak Conference March 22nd - 25th at the Hilton Mystic Hotel. The Conference Committee has been hard at work over the past 10 months creating a robust agenda, with seasoned PA presenters from across the region. Attendees will be able to earn up to 30 hours of Category 1 CMEs. We have several great events lined up during the conference including a welcome reception, student poster presentation, and a fundraiser night for the Connecticut PA Foundation to raise money in support of student scholarships. We will hold our annual business luncheon during the conference to announce our PA of the year award. We hope you can join us!

Our Legislative Committee has also been busy, meeting with several organizations over the past months, gathering key stakeholders at the table to discuss ways to improve access to care for patients and modernize language in statues to better reflect PA practice. We have also been meeting with State Representatives and various Departments at the Capitol to further advance your voice at the state level. The next legislative session begins in just a few days and ConnAPA will have many more updates to come throughout the Spring.

ConnAPA is committed to the PA students of Connecticut and we are excited to announce our support of the 2020 Connecticut Student Challenge Bowl. This event will take place Saturday April 25th at Sacred Heart University. ConnAPA will support students to organize this friendly competition amongst each of the PA programs in the state. This is a great opportunity for students to network with their peers and practice with their teams before heading to the AAPA Conference in Nashville this May to compete in the national challenge bowl.

In continuation of student support, ConnAPA is also excited to assist students interested in running for National PA leadership positions. ConnAPA will cover the cost of registration for students running for election on the AAPA Student Academy Board. This is just one way for ConnAPA to foster student leaders and provide opportunities for our future colleagues. We are hoping to set a trend other states will follow.

As always, we continue to work on your behalf and seek input on how we can better serve you and your fellow PAs of Connecticut.

Mark Turczak, MHS, PA-C
ConnAPA President

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PAs In the Spotlight: Adam Olsen
New Program Director of SHU PA Program

Adam Olsen recently began his new position as Department Chair and Program Director of the Sacred Heart University PA program. ConnAPA congratulates Adam on this outstanding recognition and looks forward to working with and supporting Adam in this new role. Adam has several decades of experience as a PA working in cardiology and has a unique perspective as he made a transition to full-time academia over the past several years.

Tell us about your education and clinical training to become a PA.

I was fortunate enough to attend PA school right out of college. I completed my Graduate PA training at Touro College School of Health Sciences in Bayshore, NY in 2002 and graduated with a second Bachelor’s degree. It was a 24-month program. At the time of my application to PA school, there were only a handful of Masters Programs, with the majority of PA programs offering a certificate of completion.

What made you choose to be a PA?

I completed my undergraduate education at the University at Albany in NY. There was a University ambulance service that I had the fortunate opportunity to be part of and was able to complete my EMT certification during my freshman year. This also provided me the opportunity to work as a PCA in the Emergency Department at Albany Medical Center, a level I trauma center. It was working in the ED that I had my first exposure to PAs and came to understand their training and abilities. In many ways, they were indistinguishable from the Emergency Room Physicians. They had advanced skills and were treating acute patients. They were young, happy and energetic. The length of education and ability to work in multiple areas is what attracted me to choose the PA profession.

What does your average day look like?

As my role in academia has evolved, so has my work day. A common theme of my day includes answering emails, meetings, more emails, and teaching or prepping for a lecture or exam. Academia is different from full-time clinical. There are no emergencies in academia. You forget how much running around you do when working clinically.

What is the most satisfying aspect of being a PA in academia?

Giving back to my profession by educating the next generation of PAs. I have high expectations for my students because I know what it takes to work hard and earn the respect of your patients and colleagues. Watching the maturation of PA students from the start of their training to graduation is what makes it all worth it.

What advice do you have for a PA who may be interested in getting involved in academia?

I would recommend reaching out to local PA programs and inquire about teaching a lecture or two. PA programs are always looking for content experts for lectures and assistance with practicums and clinical skills. Begin integrating yourself into a PA program and learn about teaching methods and pedagogy. As you become more comfortable teaching, consider taking on an entire course. Learn about ARC-PA accreditation and the standards that PA programs must meet.

What challenges do you see PAs facing in CT?

Challenges PAs are facing in CT include the physician supervisory clause and the need for a written delegation agreement. PA’s work and function both independently and as part of a collaborative team. Seasoned PAs who have been practicing medicine in collaboration with physicians should be able to practice without the need for a designated physician supervisor. The idea of PAs practicing without a collaborative agreement would simply match the privileges that our APRN colleagues already have in CT.

What challenges do you see for PA programs or PA students?

The biggest challenges for PA programs are obtaining quality clinical sites for students to complete their required rotations. PA programs are not only competing with other CT healthcare programs, but they are competing with out-of-state healthcare programs and Caribbean medical programs that pay hospitals and clinics a lot of money to take their students. Being a preceptor and teaching PA students is not only a great way you can give back to your profession but it also helps with your own self-learning and improvement. Teaching students why you listen to 6 positions on the chest when auscultating heart sounds, why a certain medication should be used over another one, or the latest guidelines on the treatment of community-acquired pneumonia reminds us that medicine is about life-long learning. This learning doesn’t stop upon graduation from PA school.

What is one piece of advice you wish you had known at the start of your career?

What would you advise to a new graduate starting their first job?

I wish I would have been given more information and encouragement about getting involved in PA advocacy and leadership both at the state and national level at the start of my career. I was so focused on getting my first job and making money, that I forgot about supporting my profession and the people that work tirelessly to change regulations to improve our roles and responsibilities as PA’s. Our PA program at Sacred Heart University encourages and supports student leaders. The program pays for each student’s state membership and students are given time off to attend conferences. We have PA leaders from both the state and national levels come and educate students about opportunities to get more involved.

The advice I would give to a new graduate starting their first job is to never forget where you started. Everyone is a student at the start of their career. Remember to advocate for your profession and give back in any way you can, whether by maintaining memberships in both your PA state and national organizations, donating to your state chapter and supporting local leaders, precepting students, or running for PA leadership positions.
Registrations are pouring in and we are getting excited for the 33rd Charter Oak Conference at the Hilton Mystic.

In addition to providing you with up to 30 hours of Category 1 CME, we have planned several events which include:

- Welcome Reception
- Student poster presentation
- Exhibit Hall
- CTPAF cocktail reception at the Rio Salado
- Annual Business Luncheon
- Sponsored dinners

And much more...

We have an exciting and dynamic faculty to provide you everything to get rejuvenated, inspired and out of your everyday slump. Build connections, catch up with old friends and colleagues, and learn new strategies and techniques to bring back to your offices and practices. A good conference is what you need.

This year’s lectures will include: Approach to Migraine, Opioid Overdose Crisis, Colon Cancer, Healthcare of Gay Men and Other Sexual/Gender Minorities, Pediatric Update, Spinal Infections, Hemolytic Anemia, Reproductive Health Care, Vaccine Hesitancy, Prenatal Care and much more.

Online registration is open until March 15th! On site registration will be available.

https://members.connapa.org/events/event-registration

Please join us in Mystic!
March 22-25
Hilton Mystic - Mystic, CT

Thank you to our Presenting Sponsor for this event

Connecticut Orthopaedic Institute
at MidState Medical Center

CTPAF Cocktail Reception Fundraiser
Please attend a cocktail reception on Monday, March 25, 3019 from 5:30 - 7:00 PM at Rio Salado.

Enjoy Mystic’s newest hot spot, Rio Salado, while supporting the PA students of Connecticut. A suggested donation to attend is $25. All are welcome! Those attending the Charter Oak Conference can register with your conference registration.

Donations or ticket purchases can also be made at the event or online at
https://members.connapa.org/Donate-to-PAF

And click on the CTPAF Cocktail Reception Fundraiser

All proceeds benefit student scholarships.
Understanding CMS and Beyond: What is it and why should we care?

Rebecca Orsulak, MHS, PA-C, CPAAPA

The Centers for Medicare and Medicaid Services (CMS) was developed after the Medicare and Medicaid programs were signed into law by President Lyndon B. Johnson in 1965. At the time, the purpose of Medicare and Medicaid was to provide insurance coverage to Americans who did not already have it elsewhere. Overtime, CMS has grown to be much more than an insurance provider, and has led countless initiatives to improve our health care in the United States. CMS sets standards for coverage, quality, innovation and ultimately aims to provide access to high-quality and affordable health care for all Americans.1

In September 2019, CMS passed a rule Medicare and Medicaid Programs; Regulatory Provisions to Promote Program Efficiency, Transparency, and Burden Reduction. This rule removed the word “independent” from “licensed independent practitioner” to clarify that physician assistants are able to order restraints and seclusions. It also allows PAs to document progress notes for patients they are caring for in psychiatric hospitals.2

On October 3, 2019, President Donald Trump signed executive order #13890, Protecting and Improving Medicare for Our Nation’s Seniors. This executive order required that within 1 year, reforms should be proposed to CMS that will allow providers to spend more time with patients. This order mandated reviewing the effect that current regulations have on reimbursement of services provided by physicians and non-physician clinicians and the resulting disparities that exist. A regulation was proposed to allow appropriate reimbursement for services delivered by clinicians based upon the work performed, regardless of their occupation.3

In response to the executive order, and the adoption of expanded scope of practice laws for physician assistants (PAs) and other non-physician providers by several states across the nation, CMS recommended policy changes which were outlined in their 2020 Physician Fee Schedule (PFS) effective January 1, 2020. The 2020 PFS largely concedes to state laws and regulations, giving states the flexibility to determine what PA services are needed and appropriate in that state. This is particularly crucial in underserved or remote rural communities where access to health care is limited. In the absence of state law, a PA must have documentation at their practice location demonstrating their scope of practice and how they interact with other members of the healthcare team.4 Furthermore, the 2020 PFS:

- Encourages PAs to practice at the top of their education and expertise – CMS agrees that supervision requirements are ‘misinterpreted and misunderstood’ and therefore, limit a PA’s ability to practice at the top of their license.4
- Decreases disparities between how PAs and NPs are utilized by certain employers and states.4
- For PAs who are student preceptors: 2020 PFS now endorses PAs ‘reviewing and verifying’ student (PA, NP, CNS, CNM, CRNA, APRN, medical) notes in the medical record instead of re-documenting. This reduces documentation burdens and preventing duplicate documentation in the patient’s medical record by a student and their preceptor.4
- For PAs in Hospice: 2020 PFS supports the FY 2019 Hospice rule allowing physician assistants to serve as ‘attending physicians’ – by now allowing medication orders from PAs to be accepted by Hospice agencies and institutions.4

Continued efforts are being taken to eliminate ‘incident to’ billing where under certain circumstances, services provided by a PA can be billed under a physician’s name. Eliminating ‘incident to’ billing acknowledges the services provided to the patient were performed solely by the PA. This would increase transparency and allow for collection of more accurate data on PA-provided care, productivity and contributions. It would also reduce the risk of fraud and abuse associated with ‘incident to’ billings.5

Overall, these changes and efforts endorsed by the federal government are paramount successes and have the potential to decrease administrative burdens, increase access to care, and increase a PA’s ability to practice at the top of their education and expertise. However, this is only possible in reality if we continue to push forward and advocate to our profession everyday – at our place of employment and by supporting ConnAPA in their efforts at the State. Several PA employers - hospitals and medical practices remain at the liberty of their individualized bylaws or rules and regulations. It is up to us to continue to advocate for ourselves to ensure a shift in the culture in the workplace so that employers will facilitate real changes to allow for our patients to gain greater access to skilled clinicians.
