



## American Academy of PAs 118th Congress – Legislative Priorities

PAs are medical professionals who diagnose illness, develop, and manage treatment plans, prescribe medications, and are often a patient’s principal healthcare provider. PAs are highly trained professionals with thousands of hours of medical education and training who practice in every specialty and setting and in all 50 states, the District of Columbia, U.S. territories, and in the uniformed services. PAs are trusted healthcare professionals dedicated to expanding access to care and transforming health and wellness through patient-centered, team-based medical practice. AAPA prioritizes and strongly supports legislation that promotes and improves patient choice, healthcare quality, access to care, and favorable outcomes for patients across the nation.

On behalf of the more than 168,000 PAs throughout the United States, AAPA urges Congress to support the following priorities on behalf of PAs and their patients:

- **Cosponsor the Improving Access to Workers’ Compensation for Injured Federal Workers Act (H.R. 618/S. 131) This bipartisan legislation would modernize the Federal Employees’ Compensation Act (FECA) to cover services provided to injured federal workers by PAs and nurse practitioners (NPs).** Currently, federal employees are unable to receive treatment from PAs and NPs for care provided through FECA following injuries sustained on the job. This overly burdensome and outdated restriction has no basis in best medical practice, increases costs unnecessarily, and limits access to healthcare for federal employees. H.R. 618/S.131 would correct this unreasonable restriction for federal employees while also saving money for the federal government.
- **Cosponsor the ACO Assignment Improvement Act (H.R. 7665/S. 3939).** This bipartisan legislation would authorize Medicare beneficiaries who receive primary care from a PA to be assigned to a Medicare Shared Savings Accountable Care Organization (ACO). Under current law, patients of PAs and nurse practitioners are restricted from assignment to an ACO. This restriction can harm patients, particularly those in rural and underserved areas, by preventing them from accessing the coordinated care provided by ACOs.
- **Cosponsor the Promoting Access to Diabetic Shoes Act (H.R. 704/S.260) This bipartisan legislation would modernize Medicare policy to authorize PAs and NPs to certify a Medicare patient’s need for diabetic shoes.** Outdated and restrictive statute language prevents PAs from ordering diabetic shoes for their patients – an unnecessary restriction that disrupts access to a simple and effective treatment option for Medicare patients with diabetes.
- **Cosponsor the Increasing Access to Quality Cardiac Rehabilitation Care Act (H.R. 2583/S.3481) This bipartisan legislation would authorize PAs and NPs to order cardiovascular and pulmonary rehabilitation (CR/PR) services for Medicare patients in a manner consistent with state law.** The current, undue restriction on PAs reduces access to CR/PR services, particularly in physician shortage areas, increases hospital readmissions for patients who lack access to these essential rehabilitation services, and increases overall healthcare costs. Authorizing PAs to order this type of care when it is first needed, would provide access to patients who might otherwise not be able to receive it during a time of acute need for these services. CR/PR services are offered through medically directed and supervised programs designed to improve a patient’s physical, psychological, and social functioning.

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