



Brian Lampton & Gayle Manning  
House Districts 70 & 52  
State Representatives

### **House Bill 353 – Sponsor Testimony**

Chair Schmidt, Vice Chair Deeter, Ranking Member Somani, and members of the House Health Committee, thank you for the opportunity to provide sponsor testimony on House Bill 353. Today, I have the honor of introducing you all to what is probably the longest but also simplest bill that I have worked on in my time here at the House.

Coming in at just under 500 pages, this bill very simply changes the title of “physician assistant” to “physician associate” every time it appears in the Revised Code, which is approximately 600 times for anyone who wanted to know. There are absolutely no changes to a PAs scope of practice in this bill, it is only a title change.

The title change to physician associate is motivated by a few important factors. First, we believe that the title of physician associate more accurately represents the job description of a PA. Contrary to what the current title would suggest, PAs do much more than simply “assist” physicians. In reality, PAs regularly order and interpret tests, diagnose and treat patients, prescribe medication, and more. Navigating the healthcare system is hard enough as it is, and we believe that moving away from the title of “assistant” can reduce confusion for patients. The “physician associate” title more accurately reflects the work that PAs already

perform, meaning patients stand to better understand their provider's role and depth of medical training, which can build trust and improve outcomes.

Secondly, it aligns with the direction the industry is trending nationally. The American Academy already refers to themselves as physician associates, and the Ohio Association is just waiting on us before they change their name. Over just the past couple years, 3 other states have already instituted this title change in law. Additionally, PA programs at Yale University and Miami University here in Ohio already educate their students under the title of physician associate. By aligning Ohio law with this growing national trend, we ensure that our state will remain consistent for patients, payors, educators, and health systems for many years to come.

I thank the members of the committee for your time today. I'll now hand it over to my joint sponsor, Representative Manning.

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

In addition to the reasons that Representative Lampton already highlighted, we believe there is another crucial reason we should pass this physician associate title change, and that is the strengthening of our education pipeline and PA workforce here in Ohio.

Ohio is home to 17 PA programs, each graduating 25-50 students per year. PA students attend accredited, graduate-level programs of approximately 27 months

that culminate in a master's degree. The curriculum combines intensive classroom instruction in core medical sciences with more than 2,000 hours of supervised clinical training across multiple specialties. This pipeline supplies Ohio's healthcare workforce with highly skilled providers ready to meet patient needs.

Ohio has nearly 6,700 licensed PAs. This is a 36% increase since 2021, compared to just a 5% increase in physicians. PAs are already one of the fastest growing healthcare professions in the US and are projected to continue to grow substantially.

As we began working on this bill, we already heard from one PA who said that while he was considering where to be educated and seek employment, any state that had adopted the physician associate title would have been a much more attractive option because it signals to potential candidates that Ohio is a supportive environment for this line of work. We should want to gain this competitive advantage. We should want Ohio to be at the forefront of the PA profession to secure more of these critical, well-paying jobs for Ohioans, and even more importantly, to continue to provide an indispensable service to patients as members of a collaborative healthcare team.

Thank you again for the opportunity to provide testimony in support of House Bill 353. My joint sponsor and I would be happy to answer any questions you may have.