



Minnesota Academy of Physician Assistants  
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## **SF. 4124: Helping Address the Critical Shortage of Mental Health Providers**

### **Minnesota Faces a Mental Health Provider Crisis**

Minnesota faces a severe shortage of mental health providers. In 2019 the Minnesota Department of Health published data that identified “Zero psychiatrists listed as practicing in the rural areas of the state.” Every Minnesota county is defined as a “critical” psychiatrist shortage area except Olmstead County, which is defined as “severe.”

This shortage means that mental health patients that could benefit from medications often wait months to be seen. These delays in receiving care cause unnecessary pain and suffering for patients and their families. They also mean additional demand in hospital emergency departments.

### **PAs Are Trained, Licensed, and Prepared to Help Meet These Challenges**

PAs receive specific classroom and clinical training in psychiatry during their schooling. They are licensed by the Board of Medical Practice to diagnose mental illness and prescribe and monitor medications to treat patients with mental illness. PAs currently provide mental health care in primary care settings as well as in ED, OB-GYN, and pediatric settings. PAs also practice exclusively in psychiatry in clinics and hospital psych units.

### **Current Law Unnecessarily Restricts PAs Practicing in Psychiatry**

Despite this training and clinical expertise, PAs are currently excluded from most mental health regulations and face additional regulatory challenges limiting their practice, specifically in mental health:

- Subd. 3 and Subd. 5 in the PA Practice Act conflict, creating confusion for health systems and clinics considering hiring a PA to provide mental health care;
- This confusion has caused some providers to not hire PAs, even though they are licensed to provide psychiatric care;
- This means patients must wait for care even though they could be treated by a PA. Existing staff must pick up the extra work, leading to stress and burnout; and
- PAs and their employers face challenges getting reimbursed for mental health care services, which discourages hiring PAs.

**The Minnesota Board of Medical Practice supports removing Subd. 5 from the PA statute.**



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## **Federal Recognition of PAs**

- Medicare includes PAs among the health professionals eligible to furnish outpatient diagnosis and treatment for mental disorders.
- The National Rural Health Association<sup>4</sup> and the Center for Medicare & Medicaid Services (CMS)<sup>5</sup> identify PAs as key to alleviating mental health provider shortages.
- The federal 21<sup>st</sup> Century Cares Act defines PAs as “high-need providers in mental health.”
- The 2023 Physician Fee Schedule rule specifies that behavioral health services provided by licensed professional counselors and licensed marriage and family therapists can be provided under the general supervision of a PA, physician, or other non-physician health profession.
- The 2024 Physician Fee Schedule rule includes PAs among those practitioners who can provide and bill for psychotherapy for crisis. “These services help reduce a patient’s mental health crisis through an urgent assessment and history of a crisis state, a mental status exam, and a disposition (or what happens next for the patient).”

## **The Data Supports that PAs Provide Safe Care**

- A recent study in the Journal of Medical Regulation showed that “allowing PAs to practice consistent with their training and experience, and not limiting their [scope of practice] to that of a collaborating/supervising physician, was associated with a highly significant decrease in [malpractice rates] for both PAs and physicians.”
  - “This research, supporting similar findings that relaxing state laws and regulations does not result in harmful or low-quality care, should assuage fears that eliminating restrictive PA practice elements will lead to an increase in PAs’ patients having serious adverse medical events.”

**Minnesota’s restrictions on PAs providing mental health care are at odds with every other state, federal policy, and the Minnesota Board of Medical Practice.**

**Please support SF 4124 and increase access to needed mental health care.**