

August 24, 2016

Attn: Sophia McArdle; Scott Filter U.S. Department of Education 400 Maryland Ave, SW., Room 6W256 Washington, DC 20202

Via Electronic Submission: http://www.regulations.gov
Re: Program Integrity and Improvement; Proposed Rule Docket ID ED–2016–OPE–0050
RIN 1840–AD20

Dear Ms. McArdle and Mr. Filter:

The Association of Schools of Allied Health Professions (ASAHP) respectfully submits the following comments on the Program Integrity and Improvement notice of proposed rulemaking that was published in the Federal Register on Monday, July 25, 2016.

ASAHP is a national health education association comprised of 120 not-for-profit institutions of higher education with 930 academic programs focused on educating students in allied health professions, which include most skilled health care occupations in a hospital or rehabilitation setting other than physicians or nurses. None of ASAHP's institutional members are for-profit educators.

ASAHP members have been concerned with the adverse impact that state authorization has had on allied health professions education, as a lack of clinical education sites in many members' home states has required placing one or more students in out of state clinical rotations. Many states have chosen to charge exorbitant fees and require compliance with numerous administrative mandates before allowing an out-of-state postsecondary institution to place a student in clinical education rotations in their state, actions that were unheard of before this rule was originally proposed in 2010.

The results have been striking - 64 percent of our membership has reduced out of state clinical placements due to fees or burdensome administrative requirements by out of state entities. As a result, allied health professions schools have struggled to find clinical placements to meet the needs of their students at a time when the need for health workers is expanding rapidly.

In fact, the Bureau of Labor Statistics indicates that eleven out of the top twenty fastest growing occupations in our economy over the next decade are in allied health occupations, which comprise a minimum of one-third of our nation's health care workforce and range from certificate to doctoral level degrees in health related sciences. Yet ASAHP members have struggled to place their students in out of state settings since 2010 as a result of the discussions



surrounding state authorization.

State Reciprocity Agreements

ASAHP is pleased to see that the NPRM supports voluntary state reciprocity agreements created to help solve this problem. The National Council for State Authorization Reciprocity Agreement's (NC-SARA) voluntary effort among member states establishing uniform standards for the interstate offering of postsecondary distance-education courses and programs, without high fees or burdensome administrative requirements, has been very helpful to ASAHP members located in SARA states. SARA's inclusion of clinical rotations, referred to as "supervised field experiences", has been a great benefit to ASAHP's membership and the students they operate, as clinical experience is a core requirement of most allied health programs for graduation.

ASAHP has encouraged federal recognition of state authorization reciprocity agreements in order to ensure that voluntary engagement in SARA would allow institutions to continue to place students in out of state settings. We applaud the inclusion of state reciprocity language in the NPRM and encourage these provisions remain intact if a final rule is issued.

Active Review

ASAHP is also pleased to see the NPRM eliminates a requirement that states conduct an "active" review" of out-of-state institutions, a provision contained in previous drafts. This language resulted in the development of an unnecessarily burdensome approval process in some states, requiring an accreditation level review for out of state universities seeking to place a limited number of students in clinical education. This level of scrutiny is inappropriate and highly costly for ASAHP members, comprised of nonprofit postsecondary institutions which have already been accredited in their home state.

Thank you for considering our comments. We look forward to working with you to ensure that allied health institutions are able to provide students with the clinical experience necessary to provide high quality health care.

Sincerely,

Linda Petrosino, Ph.D.

President **ASAHP**

John Colbert, M.A., J.D. **Executive Director**

ASAHP