



The Honorable Miguel Cardona
Secretary
U.S. Department of Education
400 Maryland Ave. SW
Washington, D.C. 20202

Submitted Electronically.

RE: Docket No.: ED-2023-OPE-0089; Financial Value Transparency and Gainful Employment (GE), Financial Responsibility, Administrative Capability, Certification Procedures, Ability to Benefit (ATB)

Dear Secretary Cardona:

The Association of Schools Advancing Health Professions (ASAHP) respectfully submits the following comments on the Value Transparency and Gainful Employment (GE), Financial Responsibility, Administrative Capability, Certification Procedures, Ability to Benefit (ATB) notice of proposed rulemaking that was published in the Federal Register on May 19, 2013.

ASAHP is a national health education association comprised of over 120 not-for-profit institutions of higher education with 930 academic programs focused on educating students in the 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 institutions of higher education.

Certification Procedures §668.14(b)(32)(iii)

ASAHP has concerns regarding the proposed regulations language in §668.14(b)(32)(iii) that institutions must meet all state consumer protection laws related to closure, recruitment, and misrepresentations, and recommends the Department withdraw the draft language. As drafted, ASAHP is concerned this language would undermine State Authorization Reciprocity Agreements (SARA), which has been a successful, voluntary effort on interstate postsecondary distance education, agreed upon by 52 member states, districts, and territories.

After the Department of Education proposed rulemaking on state authorization in 2010, many states chose 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 previously. A 2015 survey by ASAHP found that 64 percent of our membership had reduced out-of-state clinical placements due to fees or burdensome administrative requirements by out of state entities. As a result, health professions schools struggled to find sufficient, high quality, relevant clinical placements to meet the needs of their students at a time of growing demand for allied health professionals.

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-

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education courses and programs, without high fees or burdensome administrative requirements, has been very helpful to ASAHP members. 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 is concerned that the language in §668.14(b)(32)(iii) could undermine SARA, significantly increase compliance burdens, decrease access to postsecondary education and clinical rotations, and result in the dismantling of current reciprocity agreements which have benefitted ASAHP institutional members, the students at those institutions, and the nation's health workforce. Due to these concerns ASAHP recommends the Department does not include the §668.14(b)(32)(iii) language in its rule. We encourage the Department to work with NC-SARA on consumer protection issues. Consumer protection is a value shared by NC-SARA, and SARA and its stakeholders can address topics including student consumer protections through its SARA Policy Modification Process.

If the Department decides not to move forward with this issue now, but in a separate upcoming negotiated rulemaking related to state authorization, then we encourage the Department to include participation from NC-SARA representatives to discuss the potential impacts of any proposed changes.

Administrative Capability §668.16(r)

ASAHP has concerns regarding the proposed language in §668.16(r) that requires an institution to provide students with accessible clinical opportunities. While ASAHP welcomes more accessible clinical opportunities, we believe that a requirement is not the best way to address the issue. An unintended consequence of this proposed language could be that institutions, to ensure compliance, may enroll only the number of students that the institution feels certain will have accessible clinical opportunities. This would decrease access to postsecondary enrollment for allied health students at a time when the demand for allied health workers is expanding rapidly.

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,

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President

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