



The Hospital + Healthsystem
Association of Pennsylvania

March 2, 2026

The Honorable Nicholas Kent
Under Secretary of Education
U.S. Department of Education
400 Maryland Avenue, SW
Washington, DC 20202

Re: ED-2025-OPE-0944 Reimagining and Improving Student Education

Dear Under Secretary Kent:

On behalf of The Hospital and Healthsystem Association of Pennsylvania (HAP), representing 235 hospitals and health systems across our commonwealth, we appreciate the opportunity to comment on the Department of Education's proposed changes affecting professional degree designations, Direct PLUS loan eligibility and limits, and annual Direct Loan borrowing limits.

We support creating avenues so that students have access to the necessary funding required to complete education in their respective clinical degrees including that of physicians, pharmacists, and clinical psychologists. However, these proposed revisions may limit and would worsen workforce shortages and undermine patient access to care by removing other essential post-baccalaureate health professions such as nursing, physician assistants, social workers, and physical and occupational therapy degrees which require advanced education. Hospitals and health systems need the full range of licensed professionals to deliver timely care to the communities they serve.

Background

The proposal § 34 CFR 668.2 to declassify essential health professional degrees such as advanced nursing, physician assistant (PA), and the social work program is inconsistent with the rigor and clinical responsibility associated with these fields.

The HAP 2025 Workforce Survey, Care Across the Continuum¹, documents severe staffing shortages across hospitals and nursing homes, including a decline of more than 2,400 hospital discharge referrals in a 90-day period due to staffing constraints along with access limitations to hospitals resulting in increased emergency department wait times, reduced bed availability, and delays in procedures.

Proposed changes § 685.203 impacting loan eligibility and borrowing limits Restricting Direct PLUS Loan Eligibility and Borrowing Limits

Limiting PLUS loan access would disproportionately burden students in high-cost clinical

¹ The Hospital and Healthsystem Association of Pennsylvania. "Care Across the Continuum" April 2025, <https://haponlinecontent.azureedge.net/resourcelibrary/workforce-survey-2025.pdf>



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programs. Without PLUS loans, many would be driven to private loans with higher interest rates and fewer protections, worsening shortages.

Lowering federal loan limits would directly reduce entry into clinical professions at a time when vacancy rates for advanced practice and allied health roles range between 12 percent and 30 percent.

Reduced aggregate loan limits may limit the ability for clinicians to seek advanced degrees to further their education which would lead to higher life-sustaining wages.

As an example, in Pennsylvania, Certified Registered Nurse Anesthetist (CRNA) programs cost between \$98,000 and \$165,000, reflecting the intensive clinical training these programs require. At the same time, CRNA vacancy rates average 30 percent statewide. These clinicians require access to the higher annual and lifetime limits provided to professional designated degrees. These combined pressures—high tuition and severe workforce shortages—demonstrate the need to preserve, not weaken, financial aid access.

Conclusion

For these reasons, we urge the department to adopt a more inclusive definition of professional degree programs that include a broader range of essential health professionals. Expanding eligibility and not restricting it will help maintain current frameworks that support the clinical workforce pipeline.

Sincerely,

Robert G Shipp III, PhD, BSN, RN, NEA-BC
Vice President, Workforce & Clinical Affairs