



Accreditation Review Commission on Education for the Physician Assistant, Inc.

NOTICE OF ACTIONS – ACCREDITATION STATUS (7.16.25)

The ARC-PA took the actions displayed below at its June 25-28, 2025 meeting. The accreditation decisions were based on the programs' compliance with the accreditation Standards or adherence to ARC-PA policies for accredited programs.

All accredited programs are required to file annual and periodic reports to document continuing compliance with the accreditation Standards throughout the accreditation cycle. Programs that received citations¹ from the commission are required to submit a report describing the manner in which the citation(s) have been addressed or resolved.

For definitions of accreditation statuses see <http://www.arc-pa.org/accreditation/accreditation-types-review-cycle/>.

For a complete listing of all accredited programs or for information about specific programs, see <http://www.arc-pa.org/accreditation/accredited-programs/>.

The programs, grouped by the purpose of the commission review, are listed in alphabetical order by state.

THE FOLLOWING LIST REFLECTS RESULTS OF ACCREDITATION ACTIONS FOR NEW PROGRAMS APPLYING FOR ACCREDITATION - PROVISIONAL² INCLUDING COMMENTARY REGARDING PROGRAM-SPECIFIC REPORTS TO THE COMMISSION DESCRIBING THE CITATION(S)¹ THAT MUST BE ADDRESSED OR RESOLVED.

PA Program at:	Accreditation Status Granted	Next Comprehensive Review
Larkin University, FL	Provisional ²	TBD
<i>Report due October 20, 2025:</i>		
<ul style="list-style-type: none"> Standard A3.15b (lacked evidence the program defines, publishes, consistently applies and makes readily available to students upon admission requirements and deadlines for progression in and completion of the program) Standard A3.15c (lacked evidence the program defines, publishes, consistently applies and makes readily available to students upon admission policies and procedures for remediation and deceleration) Standard B3.06a (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction) Standard B4.01a (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that align with what is expected and taught) Standard B4.01b (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in 		

PA Program at:	Accreditation Status Granted	Next Comprehensive Review
<p><i>meeting the program’s learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that allow the program to identify and address any student deficiencies in a timely manner)</i></p> <p>No report required:</p> <ul style="list-style-type: none"> • <i>Standard D1.01b (lacked evidence that based on the qualifications outlined in the Standards, the program has a medical director appointed by the institution on a permanent basis at least 15 months prior to the date of the scheduled site visit)</i> 		
<p>Palm Beach Atlantic University, FL</p>	<p>Provisional²</p>	<p>TBD</p>
<p><i>Report due September 15, 2025:</i></p> <ul style="list-style-type: none"> • <i>Standard B1.03e (lacked evidence that for each didactic and clinical course [including required and elective rotations], the program defines and publishes for students in syllabi or appendix to the syllabi, learning outcomes and instructional objectives, in measurable terms that can be assessed, that guide student acquisition of required competencies)</i> • <i>Standard B1.03f (lacked evidence that for each didactic and clinical course [including required and elective rotations], the program defines and publishes for students in syllabi or appendix to the syllabi, an outline of topics to be covered that align with learning outcomes and instructional objectives)</i> • <i>Standard B4.01b (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program’s learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that allow the program to identify and address any student deficiencies in a timely manner)</i> • <i>Standard D1.04d (lacked evidence the program has a course syllabus for each course and rotation offered in the program that has detailed information including outline of topics to be covered)</i> • <i>Standard D1.04e (lacked evidence the program has a course syllabus for each course and rotation offered in the program that has detailed information including learning outcomes and instructional objectives)</i> <p><i>No report due required:</i></p> <ul style="list-style-type: none"> • <i>Standard D1.01b (lacked evidence that based on the qualifications outlined in the Standards, the program has a medical director appointed by the institution on a permanent basis at least 15 months prior to the date of the scheduled site visit)</i> 		
<p>South College-Orlando, FL</p>	<p>Provisional²</p>	<p>TBD</p>
<p><i>Report due September 1, 2025:</i></p> <ul style="list-style-type: none"> • <i>Standard A3.07a (lacked evidence the program defines, publishes, makes readily available and consistently applies a policy on immunization and health screening of students and that is based on then current Centers for Disease Control and Prevention recommendations for health professionals and state specific mandates)</i> • <i>Standard B4.01b (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program’s learning outcomes and instructional objectives for both didactic and supervised clinical practice</i> 		

PA Program at:	Accreditation Status Granted	Next Comprehensive Review
<p><i>experience components and that allow the program to identify and address any student deficiencies in a timely manner)</i></p> <ul style="list-style-type: none"> • <i>Standard B4.01b (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program’s learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that allow the program to identify and address any student deficiencies in a timely manner)</i> 	Provisional ²	TBD
<p>Mount Saint Mary’s University, MD</p> <p><i>Report due September 15, 2025 (Standards, 5th edition):</i></p> <ul style="list-style-type: none"> • <i>Standard B1.03e (lacked evidence that for each didactic and clinical course [including required and elective rotations], the program defines and publishes for students in syllabi or appendix to the syllabi, learning outcomes and instructional objectives, in measurable terms that can be assessed, that guide student acquisition of required competencies)</i> • <i>Standard D1.04e (lacked evidence the program has a course syllabus for each course and rotation offered in the program that has detailed information including learning outcomes and instructional objectives)</i> 	Provisional ²	TBD
<p>Lenoir-Rhyne University, NC</p> <ul style="list-style-type: none"> • <i>No report related to Standards</i> 	Provisional ²	TBD
<p>North Carolina A&T State University, NC</p> <ul style="list-style-type: none"> • <i>No report related to Standards</i> 	Provisional ²	TBD
<p>Baylor University-Waco, TX</p> <p><i>Report due September 5, 2025:</i></p> <ul style="list-style-type: none"> • <i>Standard A2.13a (lacked evidence instructional faculty is qualified through academic preparation and/or experience to teach assigned subjects)</i> <p><i>Observation response due September 5, 2025 (Standards, 5th edition):</i></p> <ul style="list-style-type: none"> • <i>Standard B3.06a (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction)</i> <p><i>No report due (commission expects program director to demonstrate knowledge and responsibility at the provisional monitoring site visit):</i></p> <ul style="list-style-type: none"> • <i>Standard A2.09c (lacked evidence the program director is knowledgeable and responsible for fiscal management of the program)</i> 	Provisional ²	TBD

THE FOLLOWING LIST REFLECTS RESULTS OF ACCREDITATION ACTIONS FOR CURRENTLY ACCREDITED PROGRAMS INCLUDING COMMENTARY REGARDING PROGRAM-SPECIFIC REPORTS TO THE COMMISSION DESCRIBING THE CITATION(S)¹ THAT MUST BE ADDRESSED OR RESOLVED.

PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
South University-West Palm Beach, FL	Continued	July 2035
<i>Report due February 1, 2026 modified self-study report:</i>		
<ul style="list-style-type: none"> • <i>Standard C1.02b (lacked evidence the program implements its ongoing self-assessment process by performing critical analysis of data)</i> • <i>Standard C1.02c.ii. (lacked evidence the program implements its ongoing self-assessment process by applying the results leading to conclusions that identify program areas in need of improvement)</i> • <i>Standard C1.02c.iii. (lacked evidence the program implements its ongoing self-assessment process by applying the results leading to conclusions that identify action plans)</i> • <i>Standard C1.03 (lacked evidence the program prepares a self-study report as part of the application for accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment)</i> 		
Brenau, University-GA	Continued	July 2035
<i>Report due September 19, 2025:</i>		
<ul style="list-style-type: none"> • <i>Standard B4.01b (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program’s learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that allow the program to identify and address any student deficiencies in a timely manner)</i> 		
<i>No report required:</i>		
<ul style="list-style-type: none"> • <i>Standard E1.03 (lacked evidence program submits reports or documents as required by the ARC-PA)</i> 		
Touro University Illinois, IL	Provisional ²	July 2027
<i>Report due November 10, 2025:</i>		
<ul style="list-style-type: none"> • <i>Standard A1.01 (lacked evidence that when more than one institution is involved in the provision of academic and/or clinical education, responsibilities of the respective institutions for instruction and supervision of students are clearly described and documented in a manner signifying agreement by the involved institutions)</i> • <i>Standard A3.12d (lacked evidence the program defines, publishes and makes readily available to enrolled and prospective students general program information to include all required curricular components including required rotation disciplines)</i> • <i>Standard B2.10c (lacked evidence the curriculum prepares students to work collaboratively in interprofessional patient centered teams with instruction that includes application of these principles in interprofessional teams)</i> • <i>Standard B3.01 (lacked evidence the program secures clinical sites and preceptors in sufficient numbers to allow all clinical students to</i> 		

PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
<p><i>meet the program’s learning outcomes for supervised clinical practice experiences.</i></p> <ul style="list-style-type: none"> • <i>Standard B3.06a (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction)</i> • <i>Standard B3.06c (lacked evidence supervised clinical practice experiences occur with other licensed health care providers qualified in their area of instruction)</i> • <i>Standard B3.07g (lacked evidence supervised clinical practice experiences occur with preceptors who enable students to meet program defined learning outcomes for behavioral and mental health care)</i> • <i>Standard B4.01b (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program’s learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that allow the program to identify and address any student deficiencies in a timely manner)</i> <p><i>Commission observation⁵ response due November 10, 2025:</i></p> <ul style="list-style-type: none"> • <i>Standard C2.01b (lacked evidence the program defines and maintains effective processes and documents the initial and ongoing evaluation of all sites and preceptors used for supervised clinical practice experiences, to ensure students are able to fulfill program learning outcomes with access to patient populations)</i> 		
<p>Thiel College, IN</p>		
<p><i>Pending final review</i></p>		
<p>Concordia University-Ann Arbor, MI</p>	<p>Continued</p>	<p>July 2035</p>
<p><i>Report due September 1, 2025:</i></p> <ul style="list-style-type: none"> • <i>Standard A1.01 (lacked evidence that when more than one institution is involved in the provision of academic and/or clinical education, responsibilities of the respective institutions for instruction and supervision of students are clearly described and documented in a manner signifying agreement by the involved institutions)</i> 		
<p>University of Michigan-Flint, MI</p>	<p>Continued</p>	<p>July 2035</p>
<p><i>Report due December 1, 2025:</i></p> <ul style="list-style-type: none"> • <i>Standard A3.17b (lacked evidence student academic records kept by the sponsoring institution or program, in a paper or electronic format, are readily accessible to authorized program personnel and include documentation that the student has met institution and program health screening and immunization requirements)</i> • <i>Standard C1.03 (lacked evidence the program prepares a self-study report as part of the application for accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment)</i> 		
<p>Mississippi State University-Meridian, MS</p>	<p>Continued</p>	<p>July 2035</p>
<p><i>Report due August 22, 2025:</i></p> <ul style="list-style-type: none"> • <i>Update Details and Personnel tabs in Program Management Portal.</i> 		

PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
<p><i>Report due August 22, 2025:</i></p> <ul style="list-style-type: none"> <i>Standard A2.01 (lacked evidence all program faculty possess the educational and experiential qualifications to perform their assigned duties.</i> <i>Standard C2.01c (lacked evidence the program defines and maintains effective processes and documents the initial and ongoing evaluation of all sites and preceptors used for supervised clinical practice experiences, to ensure students are able to fulfill program learning outcomes with access to supervision)</i> <p><i>Report due January 16, 2026 modified self-study report:</i></p> <ul style="list-style-type: none"> <i>Standard C1.03 (lacked evidence the program prepares a self-study report as part of the application for accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment)</i> <p><i>Commission observation⁵ response due August 22, 2025:</i></p> <ul style="list-style-type: none"> <i>Standard B1.01d (lacked evidence the curriculum is of sufficient breadth and depth to prepare the student for the clinical practice of medicine)</i> <i>Standard B4.01a (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program’s learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that align with what is expected and taught)</i> <i>Standard B4.01b (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program’s learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that allow the program to identify and address any student deficiencies in a timely manner)</i> 		
<p>College of St. Mary, NE</p> <p><i>Pending final review</i></p>		
<p>Arcadia University, NY</p> <p><i>Report due September 15, 2025:</i></p> <ul style="list-style-type: none"> <i>Standard B3.03c (lacked evidence supervised clinical practice experiences enable all students to meet the program’s learning outcomes for women’s health [to include prenatal and gynecologic care])</i> <p><i>Report due June 30, 2026:</i></p> <ul style="list-style-type: none"> <i>Modified self-study report</i> 	Continued	January 2028
<p>Canisius University, NY</p> <p><i>Report due August 15, 2025:</i></p> <ul style="list-style-type: none"> <i>Update Details tab in Program Management Portal and publish Attrition Table on website.</i> <p><i>Report due November 1, 2025:</i></p> <ul style="list-style-type: none"> <i>Standard A3.11 (lacked evidence the sponsoring institution and program’s announcements and advertising accurately reflect the program offered)</i> 	Continued	July 2035

PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
<ul style="list-style-type: none"> • <i>Standard A3.14 (lacked evidence the program makes student admission decisions in accordance with clearly defined and published practices of the institution and program.</i> • <i>Standard B1.03e (lacked evidence that for each didactic and clinical course [including required and elective rotations], the program defines and publishes for students in syllabi or appendix to the syllabi, learning outcomes and instructional objectives, in measurable terms that can be assessed, that guide student acquisition of required competencies)</i> • <i>Standard B3.06c (lacked evidence supervised clinical practice experiences occur with other licensed health care providers qualified in their area of instruction)</i> • <i>Standard B3.07g (lacked evidence supervised clinical practice experiences occur with preceptors who enable students to meet program defined learning outcomes for behavioral and mental health care)</i> • <i>Standard B4.01a (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program’s learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that align with what is expected and taught)</i> • <i>Standard B4.01b (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program’s learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that allow the program to identify and address any student deficiencies in a timely manner)</i> • <i>Standard B4.03a (lacked evidence the program conducts and documents a summative evaluation of each student within the final four months of the program to verify that each student meets the program competencies required to enter clinical practice, including clinical and technical skills)</i> • <i>Standard B4.03b (lacked evidence the program conducts and documents a summative evaluation of each student within the final four months of the program to verify that each student meets the program competencies required to enter clinical practice, including clinical reasoning and problem-solving abilities)</i> • <i>Standard B4.03d (lacked evidence the program conducts and documents a summative evaluation of each student within the final four months of the program to verify that each student meets the program competencies required to enter clinical practice, including medical knowledge)</i> • <i>Standard B4.03e (lacked evidence the program conducts and documents a summative evaluation of each student within the final four months of the program to verify that each student meets the program competencies required to enter clinical practice, including professional behaviors)</i> 		
<p>Report due December 1, 2025 modified self-study report:</p>		
<ul style="list-style-type: none"> • <i>Standard C1.03 (lacked evidence the program prepares a self-study report as part of the application for accreditation that accurately</i> 		

PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
<i>and succinctly documents the process, application and results of ongoing program self-assessment)</i>		
St. Bonaventure University, NY	Continued	July 2035
<i>Report due October 15, 2025:</i>		
<ul style="list-style-type: none"> • <i>Standard A3.11 (lacked evidence the sponsoring institution and program’s announcements and advertising accurately reflect the program offered)</i> • <i>Standard B1.03e (lacked evidence that for each didactic and clinical course [including required and elective rotations], the program defines and publishes for students in syllabi or appendix to the syllabi, learning outcomes and instructional objectives, in measurable terms that can be assessed, that guide student acquisition of required competencies)</i> • <i>Standard B1.03f (lacked evidence that for each didactic and clinical course [including required and elective rotations], the program defines and publishes for students in syllabi or appendix to the syllabi, an outline of topics to be covered that align with learning outcomes and instructional objectives)</i> • <i>Standard B2.11c (lacked evidence the curriculum includes instruction in the normal and abnormal development across the life span area of social and behavioral sciences and its application to clinical practice)</i> • <i>Standard B4.01a (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program’s learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that align with what is expected and taught)</i> • <i>Standard B4.01b (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program’s learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that allow the program to identify and address any student deficiencies in a timely manner)</i> • <i>Standard B4.03c (lacked evidence the program conducts and documents a summative evaluation of each student within the final four months of the program to verify that each student meets the program competencies required to enter clinical practice, including interpersonal skills)</i> • <i>Standard B4.03d (lacked evidence the program conducts and documents a summative evaluation of each student within the final four months of the program to verify that each student meets the program competencies required to enter clinical practice, including medical knowledge)</i> • <i>No report required:</i> • <i>Standard C1.03 (lacked evidence the program prepares a self-study report as part of the application for accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment)</i> 		
Long Island University, NY	Probation ³	July 2027

PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
<i>Report due September 1, 2025:</i>		
<ul style="list-style-type: none"> • <i>Update goals on program website</i> 		
<i>Report due September 1, 2025:</i>		
<ul style="list-style-type: none"> • <i>Standard A1.02a (lacked evidence the sponsoring institution is responsible for supporting the planning by program faculty of curriculum design, course selection, and program assessment)</i> • <i>Standard A1.02c (lacked evidence the sponsoring institution is responsible for ensuring effective program leadership)</i> • <i>Standard A1.07 (lacked evidence the sponsoring institution provides the program with the human resources, including sufficient faculty, administrative and technical staff, necessary to operate the educational program, comply with the Standards, and fulfill obligations to matriculating and enrolled students)</i> • <i>Standard A1.08 (lacked evidence the sponsoring institution provides the program with the physical facilities to operate the educational program in accordance with the Standards and to fulfill its obligations to matriculating and enrolled students)</i> • <i>Standard A2.03 (lacked evidence principal faculty is sufficient in number to meet the academic needs of enrolled students and manage the administrative responsibilities consistent with the complexity of the program)</i> • <i>Standard A2.09d (lacked evidence the program director is knowledgeable about and responsible for continuous programmatic review and analysis)</i> • <i>Standard A2.12 (lacked evidence the medical director is an active participant in the program and support the development of the program competencies to meet current practice standards as they relate to the PA role.</i> • <i>Standard A3.12b (lacked evidence the program defines, publishes and makes readily available to enrolled and prospective students general program information to include evidence of its effectiveness in meeting its goals)</i> 		
<i>Report due December 1, 2026 modified self-study report:</i>		
<ul style="list-style-type: none"> • <i>Standard C1.01b (lacked evidence program defines its ongoing self-assessment process that is designed to document program effectiveness and foster program improvement and addresses effectiveness of the didactic curriculum)</i> • <i>Standard C1.01c (lacked evidence program defines its ongoing self-assessment process that is designed to document program effectiveness and foster program improvement and addresses effectiveness of the clinical curriculum)</i> • <i>Standard C1.01e (lacked evidence program defines its ongoing self-assessment process that is designed to document program effectiveness and foster program improvement and addresses PANCE performance)</i> • <i>Standard C1.01f (lacked evidence program defines its ongoing self-assessment process that is designed to document program effectiveness and foster program improvement and addresses sufficiency and effectiveness of principal and instructional faculty and staff)</i> • <i>Standard C1.02a (lacked evidence the program implements its ongoing self-assessment process by conducting data collection)</i> 		

PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
<ul style="list-style-type: none"> • <i>Standard C1.02b (lacked evidence the program implements its ongoing self-assessment process by performing critical analysis of data)</i> • <i>Standard C1.02c.i. (lacked evidence the program implements its ongoing self-assessment process by applying the results leading to conclusions that identify program strengths)</i> • <i>Standard C1.02c.ii. (lacked evidence the program implements its ongoing self-assessment process by applying the results leading to conclusions that identify program areas in need of improvement)</i> • <i>Standard C1.02c.iii. (lacked evidence the program implements its ongoing self-assessment process by applying the results leading to conclusions that identify action plans)</i> • <i>Standard C1.03 (lacked evidence the program prepares a self-study report as part of the application for accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment)</i> 		
<p>Miami University, OH</p> <p><i>Report due September 12, 2025:</i></p> <ul style="list-style-type: none"> • <i>Standard B4.01b (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program’s learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that allow the program to identify and address any student deficiencies in a timely manner)</i> 	Provisional ²	July 2027
<p>Arcadia University, PA</p> <p><i>Report due September 15, 2025:</i></p> <ul style="list-style-type: none"> • <i>Standard B3.03c (lacked evidence supervised clinical practice experiences enable all students to meet the program’s learning outcomes for women’s health [to include prenatal and gynecologic care])</i> <p><i>Report due June 30, 2026:</i></p> <ul style="list-style-type: none"> • <i>Modified self-study report</i> 	Continued	January 2028
<p>Meharry Medical College, TN</p> <p><i>Report due August 22, 2025:</i></p> <ul style="list-style-type: none"> • <i>Update Details tab in Program Management Portal</i> <p><i>Report due October 24, 2025 (Standards, 5th edition):</i></p> <ul style="list-style-type: none"> • <i>Standard A3.14 (lacked evidence the program makes student admission decisions in accordance with clearly defined and published practices of the institution and program.</i> • <i>Standard B1.03e (lacked evidence that for each didactic and clinical course [including required and elective rotations], the program defines and publishes for students in syllabi or appendix to the syllabi, learning outcomes and instructional objectives, in measurable terms that can be assessed, that guide student acquisition of required competencies)</i> • <i>Standard B3.06a (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction)</i> • <i>Standard B4.01a (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in</i> 	Provisional ²	July 2027

PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
<p><i>meeting the program’s learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that align with what is expected and taught)</i></p> <ul style="list-style-type: none"> • <i>Standard B4.01b (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program’s learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that allow the program to identify and address any student deficiencies in a timely manner)</i> <p>No report required:</p> <ul style="list-style-type: none"> • <i>Standard C1.03 (lacked evidence the program prepares a self-study report as part of the application for accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment)</i> 		
<p>University of Mary Hardin-Baylor, TX</p> <p><i>Report due August 22, 2025:</i></p> <ul style="list-style-type: none"> • <i>Update Details tab in Program Management Portal.</i> <p><i>Report due November 3, 2025 modified self-study report:</i></p> <ul style="list-style-type: none"> • <i>Standard C1.02b (lacked evidence the program implements its ongoing self-assessment process by performing critical analysis of data)</i> • <i>Standard C1.02c.ii. (lacked evidence the program implements its ongoing self-assessment process by applying the results leading to conclusions that identify program areas in need of improvement)</i> • <i>Standard C1.02c.iii. (lacked evidence the program implements its ongoing self-assessment process by applying the results leading to conclusions that identify action plans)</i> • <i>Standard C1.03 (lacked evidence the program prepares a self-study report as part of the application for accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment)</i> 	Continued	July 2035
<p>Marshall University, WV</p> <p><i>Report due August 22, 2025:</i></p> <ul style="list-style-type: none"> • <i>Update Details tab in Program Management Portal.</i> <p><i>Report due October 3, 2025:</i></p> <ul style="list-style-type: none"> • <i>Standard B3.06a (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction)</i> • <i>Standard B4.01a (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program’s learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that align with what is expected and taught)</i> <p><i>Commission observation⁵ response due October 3, 2025:</i></p> <ul style="list-style-type: none"> • <i>Standard B4.01b (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program’s learning outcomes and instructional objectives for both didactic and supervised clinical practice</i> 	Continued	July 2035

PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
<hr/> <i>experience components and that allow the program to identify and address any student deficiencies in a timely manner)</i> <hr/>		

THE FOLLOWING LISTS REFLECT ACTIONS FOR PROGRAMS WHICH APPLIED FOR PROGRAM CHANGES OR HAD REQUIRED REPORTS DUE TO THE COMMISSION.

Reports and program changes considered at the meeting

PA Program at:	Accepted/Not Accepted/Approved/ Defer Decision /Not Approved/Acknowledged/Not Acknowledged/Reviewed, More Information Requested	Next Comprehensive Review
Harding University ³ , AK	Reviewed, More Information Requested*/Accepted	October 2026 (probation review)
Indiana State University, IN ³	Accepted/Reviewed, More Information Requested*	September 2025 (probation review)
University of the Cumberlands-Northern Kentucky, KY ³	Reviewed, More Information Requested*	July 2026 (probation review)
Franciscan Missionaries of our Lady University, LA ³	Not Accepted*	September 2025 (probation review)
Assumption University, MA ²	Accepted	July 2027
Frostburg State University, MD ³	Reviewed, More Information Requested*	September 2025 (probation review)
Concordia University-Ann Arbor, MI	Accepted/Accepted	July 2035
University of Detroit Mercy, MI ³	Accepted/Deferred	September 2025 (probation review)
Pfeiffer University, NC ³	Accepted	October 2026 (probation review)
College of Saint Mary, NE	Not Accepted*/ Not Accepted*	July 2031
Kean University, NJ ³	Accepted/Reviewed, More Information Requested*	April 2026
Arcadia University, NY	Accepted	January 2028
Wagner College, NY	Not Accepted*	October 2029
University of Oklahoma School of Community Medicine, OK ³	Reviewed, More Information Requested*	January 2026 (probation review)
Carlow University, PA ³	Reviewed, More Information Requested*	October 2026
Commonwealth University, PA ³	Not Accepted	April 2027 (probation review)
Christian Brothers University, TN ³	Accepted	N/A
University of Mary Hardin-Baylor, TX	Accepted	July 2035
University of Texas Rio Grande Valley, TX	Reviewed, More Information Requested*	October 2033
Marshall University, WV	Reviewed, More Information	July 2035

Requested*

*Program is required to submit a follow up report to the ARC-PA

Reports considered via expedited process

PA Program at:	Next Validation Review
Samford University, AL	January 2034
A.T. Still Central Coast, CA ²	September 2025
Samuel Meritt University, CA	July 2029
Touro University California, CA	October 2029
Sacred Heart University, CT	January 2031
University of Bridgeport, CT	July 2033
Florida Gulf Coast University, FL	January 2032
The University of Tampa, FL	January 2034
Morehouse School of Medicine, GA	October 2033
Idaho State University, ID	January 2035
Chamberlain University, IL ^{2,*}	January 2027
North Central College, IL ^{2,*}	April 2026
Indiana State University, IN	September 2025 (probation review)
Indiana State University, IN	September 2025 (probation review)
Northwestern College, IA	October 2034
University of New England, ME	October 2026
Springfield College, MA	October 2026
Central Michigan University, MI	April 2034
Central Michigan University, MI	April 2034
Central Michigan University, MI	April 2034
Central Michigan University, MI	April 2034
Concordia University - Ann Arbor, MI	June 2025
Grand Valley State University, MI	October 2034
Grand Valley State University, MI	October 2034
Lawrence Technological University, MI ^{2,*}	October 2026
Michigan State University, MI	October 2026
Western Michigan University, MI	October 2027
Mayo Clinic School of Health Sciences, MN	October 2034
Kean University, NJ	April 2026
Seton Hall University, NJ	April 2027
St. Elizabeth University, NJ*	April 2027

PA Program at:	Next Validation Review
University of New Mexico, NM*	October 2034
Daemen University, NY	April 2023
D'Youville University, NY	October 2029
Ithaca College, NY ² *	April 2026
Mercy University, NY	July 2027
Touro University - Long Island, NY	July 2027
Touro University-Manhattan, NY*	October 2034
Gardner-Webb University, NC*	April 2028
University of North Carolina-Chapel Hill, NC	April 2030
Wake Forest University, NC*	July 2032
Wingate University, NC	October 2034
Case Western Reserve, OH	April 2030
Oklahoma State Univ Center for Health Sciences, OK	September 2025
University of Oklahoma (OK City), OK	October 2034
George Fox University, OR*	January 2035
Delaware Valley University, PA ²	October 2026
Duquesne University, PA	July 2032
Elizabethtown College, PA ²	October 2026
Marywood University, PA*	January 2026
Marywood University, PA*	January 2026
Philadelphia College of Osteopathic Medicine, PA	January 2028
St. Francis University, PA	January 2027
Thomas Jefferson Univ-East Falls/New Jersey, PA	January 2028
University of Pittsburgh, PA	April 2028
University of Pittsburgh-Hybrid Program, PA ²	January 2027
Widener University, PA ² *	January 2027
Bryant University, RI*	July 2028
Bryant University, RI*	July 2028
Medical University of South Carolina, SC	January 2033
University of Mary Hardin-Baylor, TX ²	June 2035
University of North Texas Health Science Center, TX	October 2034
Univ of Texas Health Science Center San Antonio, TX*	April 2028
UT Southwestern School of Health Professions, TX	January 2023

PA Program at:	Next Validation Review
Rocky Vista University, UT	April 2033
University of Charleston, WV*	October 2026
West Virginia University, WV	July 2034
University of Wisconsin-Madison, WI	September 2025

*Program is required to submit a follow up report to the ARC-PA

ADDITIONAL ACTIONS

The following programs provided informational actions for which no commission action was required.

PA Program at:	Next Validation Review
University of South Alabama, AL	October 2034
Harding University, AR ³	October 2026 (probation review)
Midwestern University-Glendale, AZ	July 2028
University of La Verne, CA	N/A
University of La Verne, CA	N/A
Red Rocks Community College, CO	April 2027
Yale Online PA Program, CT ³	N/A
Indiana State University, IN	September 2025 (probation review)
Trine University, IN	April 2033
Northwestern College, IA	October 2034
University of Iowa, IA	January 2023
University of Missouri-Kansas City, MO	October 2027
Frostburg State University, MD ³	September 2025 (probation review)
Concordia University-Ann Arbor, MI	June 2035
Grand Valley State University, MI	October 2034
Grand Valley State University, MI	October 2034
Lawrence Technological University, MI ²	October 2026
Mayo Clinic School of Health Sciences, MN	October 2034
Mayo Clinic School of Health Sciences, MN	October 2034
Saint Louis University, MO	July 2033
Kean University, NJ	April 2026
Rutgers University, IL	October 2026
University of New Mexico, NM	October 2034
University of St. Francis New Mexico, NM	N/A
University of St. Francis-New Mexico, NM	N/A
CUNY School of Medicine, NY ³	October 2026
D'Youville University, NY	October 2029
Touro University-Manhattan, NY	October 2034
Ohio Dominican University, OH	September 2025

PA Program at:	Next Validation Review
Arcadia University, PA	January 2028
Commonwealth University, PA ³	April 2027 (probation review)
DeSales University, PA	July 2027
Elizabethtown College, PA ²	October 2026
Temple University, PA	April 2030
San Juan Bautista School of Medicine, PR ³	N/A
San Juan Bautista School of Medicine, PR ³	N/A
University of South Dakota, SD	January 2033
Christian Brothers University, TN ³	N/A
Christian Brothers University, TN ³	N/A
University of North Texas Health Science Center, TX	October 2034
Mary Baldwin University, VA	January 2034
Shenandoah University, VA	April 2035
Shenandoah University, VA	April 2035
Concordia University-Wisconsin, WI ³	N/A
Marquette University, WI ³	September 2025

¹ A **citation** is a formal statement referenced to a specific standard noting the area in which the program failed to provide evidence demonstrating that it meets the standard or performs so poorly in regard to the standard that the efforts of the program are found to be unacceptable.

² Accreditation-**Provisional** is an accreditation status granted when the plans and resource allocation, if fully implemented as planned, of a proposed program that has not yet enrolled students appear to demonstrate the program's ability to meet the ARC-PA *Standards* or when a program holding accreditation-provisional status appears to demonstrate continued progress in complying with the *Standards* as it prepares for the graduation of the first class (cohort) of students. Accreditation-Provisional does not ensure any subsequent accreditation status. It is limited to no more than five years from matriculation of the first class. Accreditation-Provisional remains in effect until the program achieves Accreditation-Continued after its third review, closes or withdraws from the accreditation process, or until accreditation is withdrawn for failure to comply with the *Standards*.

³ Accreditation-**Probation** is a temporary accreditation status initially of not less than two years. However, that period may be extended by the ARC-PA for up to an additional two years if the ARC-PA finds that the program is making substantial progress toward meeting all applicable standards but requires additional time to come into full compliance. Accreditation-Probation is granted when a program holding an accreditation status of Accreditation-Provisional or Accreditation-Continued does not, in the judgement of the ARC-PA meet the *Standards* or when the capability of the program to provide an acceptable educational experience for its students is threatened. Once placed on probation, a program that fails to comply with accreditation requirements in a timely manner, as specified by the ARC-PA, may be scheduled for a focused site visit and is subject to having its accreditation withdrawn.

⁴ Accreditation-**Administrative Probation** is a temporary status granted when a program has not complied with an administrative requirement, such as failure to pay fees or submit required reports. Once placed on administrative probation, a program that fails to comply with administrative requirements in a timely manner, as specified by the ARC-PA, may be scheduled for a focused site visit and/or risk having its accreditation withdrawn.

⁵ A **commission observation** alerts the program that the ARC-PA commission, after thoroughly examining program materials during the review process, identified standard(s) that require further clarification before making a determination on the program's compliance.