THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILL No. 398 Session of 2021

INTRODUCED BY PITTMAN, SCAVELLO, COLLETT, YUDICHAK, MENSCH, YAW, BAKER, HUTCHINSON, STEFANO, REGAN, BOSCOLA AND BARTOLOTTA, MARCH 11, 2021

SENATOR TOMLINSON, CONSUMER PROTECTION AND PROFESSIONAL LICENSURE, AS AMENDED, JUNE 8, 2021

AN ACT

Amending the act of December 20, 1985 (P.L.457, No.112), 1 entitled "An act relating to the right to practice medicine 2 and surgery and the right to practice medically related acts; 3 reestablishing the State Board of Medical Education and 4 Licensure as the State Board of Medicine and providing for 5 its composition, powers and duties; providing for the 6 issuance of licenses and certificates and the suspension and 7 revocation of licenses and certificates; provided penalties; 8 and making repeals," further providing for DEFINITIONS, FOR 9 <---State Board of Medicine and for physician assistants; AND 10 <---ABROGATING REGULATIONS. 11 12 The General Assembly of the Commonwealth of Pennsylvania 13 hereby enacts as follows: 14 Section 1. Section 3(a) and (b) of the act of December 20, <--15 1985 (P.L.457, No.112), known as the Medical Practice Act of 1985, are amended to read: 16 17 SECTION 1. THE DEFINITION OF "PRIMARY SUPERVISING PHYSICIAN" <--18 IN SECTION 2 OF THE ACT OF DECEMBER 20, 1985 (P.L.457, NO.112),

19 KNOWN AS THE MEDICAL PRACTICE ACT OF 1985, IS AMENDED TO READ:

20 SECTION 2. DEFINITIONS.

21 THE FOLLOWING WORDS AND PHRASES WHEN USED IN THIS ACT SHALL

1 HAVE THE MEANINGS GIVEN TO THEM IN THIS SECTION UNLESS THE 2 CONTEXT CLEARLY INDICATES OTHERWISE:

3 * * *

PRIMARY SUPERVISING PHYSICIAN." A MEDICAL DOCTOR WHO IS
REGISTERED WITH THE BOARD AND DESIGNATED IN A WRITTEN AGREEMENT
WITH A PHYSICIAN ASSISTANT UNDER SECTION 13(E) AS HAVING PRIMARY
RESPONSIBILITY FOR [DIRECTING AND PERSONALLY] SUPERVISING THE
PHYSICIAN ASSISTANT.

9 * * *

10 SECTION 2. SECTION 3(A) AND (B) OF THE ACT ARE AMENDED TO 11 READ:

12 Section 3. State Board of Medicine.

(a) Establishment.--The State Board of Medicine shall 13 consist of the commissioner or [his] <u>THE COMMISSIONER'S</u> 14 <--designee, the Secretary of Health or [his] THE SECRETARY OF 15 <---<u>HEALTH'S</u> designee, two members appointed by the Governor who 16 17 shall be persons representing the public at large and [seven] 18 eight NINE members appointed by the Governor, one of whom shall <--19 be a physician assistant, [six] ONE OF WHOM SHALL BE A PHYSICIAN <--20 ASSISTANT, SEVEN of whom shall be medical doctors with 21 unrestricted licenses to practice medicine and surgery in this 22 Commonwealth for five years immediately preceding their 23 appointment and one who shall be a nurse midwife, [physician 24 assistant, certified registered nurse practitioner,] respiratory 25 therapist, licensed athletic trainer or perfusionist licensed or 26 certified under the laws of this Commonwealth. All professional 27 and public members of the board shall be appointed by the 28 Governor, with the advice and consent of a majority of the 29 members elected to the Senate.

30 (b) Terms of office.--The term of each professional and 20210SB0398PN0871 - 2 -

public member of the board shall be four years or until [his or 1 <---2 her] A successor has been appointed and qualified, but not <---3 longer than six months beyond the four-year period. In the event that any of said members shall die or resign or otherwise become 4 disqualified during [his or her] THE MEMBER'S term, a successor <--5 shall be appointed in the same way and with the same 6 7 qualifications and shall hold office for the unexpired term. No 8 member shall be eligible for appointment to serve more than two consecutive terms. The Governor shall assure that nurse 9 midwives, [physician assistants, certified registered nurse 10 practitioners,] perfusionists and respiratory therapists are 11 appointed to four-year terms on a rotating basis so that, of 12 13 every four appointments to a four-year term, one is a nurse 14 midwife, [one is a physician assistant, one is a certified registered nurse practitioner] one is an athletic trainer, one 15 16 is a perfusionist and one is a respiratory therapist. * * * 17 18 Section 2. Section 13(d), (d.1) and (e) of the act, amended <--19 July 2, 2019 (P.L.413, No.68), are amended to read: 20 Section 13. Physician assistants. * * * 21 (d) Supervision. [A physician assistant shall not perform a 22 23 medical service without the supervision and personal direction-24 of an approved physician. The board shall promulgate regulations-25 which define the supervision and personal direction required bythe standards of acceptable medical practice embraced by the 26 medical doctor community in this Commonwealth. 27 (d.1) Patient record review. 28 29 (1) The approved physician shall countersign 100% of the patient records completed by the physician assistant within a 30

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1	reasonable time, which shall not exceed ten days, during each-
2	of the following time periods:
3	(i) The first 12 months of the physician assistant's
4	practice post graduation and after the physician-
5	assistant has fulfilled the criteria for licensure set
6	forth in section 36(c).
7	(ii) The first 12 months of the physician
8	assistant's practice in a new specialty in which the
9	physician assistant is practicing.
10	(iii) The first six months of the physician-
11	assistant's practice in the same specialty under the-
12	supervision of the approved physician, unless the
13	physician assistant has multiple approved physicians and
14	practiced under the supervision of at least one of those-
15	approved physicians for six months.
16	(2) In the case of a physician assistant who is not-
17	subject to 100% review of the physician assistant's patient-
18	records pursuant to paragraph (1), the approved physician-
19	shall personally review on a regular basis a selected number-
20	of the patient records completed by the physician assistant.
21	The approved physician shall select patient records for-
22	review on the basis of written criteria established by the
23	approved physician and the physician assistant. The number of
24	patient records reviewed shall be sufficient to assure-
25	adequate review of the physician assistant's scope of
26	practice.] The supervising physician shall be responsible for
27	the medical services that a physician assistant renders.
28	Supervision shall not require the onsite presence or personal
29	direction of the supervising physician.
30	(e) Written agreement. A physician assistant shall [not -

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1	provide a medical service without a written agreement with one
2	or more physicians] provide medical services according to a
3	written agreement which provides for all of the following:
4	(1) Identifies and is signed by [each physician the
5	physician assistant will be assisting] <u>the primary</u>
6	supervising physician.
7	(2) Describes the [manner in which the physician-
8	assistant will be assisting each named physician. The written-
9	agreement and description may be prepared and submitted by-
10	the primary supervising physician, the physician assistant or-
11	a delegate of the primary supervising physician and the-
12	physician assistant. It shall not be a defense in any-
13	administrative or civil action that the physician assistant
14	acted outside the scope of the board approved description or
15	that the supervising physician utilized the physician
16	assistant outside the scope of the board approved description-
17	because the supervising physician or physician assistant
18	permitted another person to represent to the board that the
19	description had been approved by the supervising physician or
20	physician assistant] physician assistant's scope of practice.
21	(3) Describes the nature and degree of supervision [and
22	direction each named physician will provide the physician
23	assistant, including, but not limited to, the number and
24	frequency of the patient record reviews required by-
25	subsection (d.1) and the criteria for selecting patient
26	records for review when 100% review is not required] <u>the</u>
27	supervising physician will provide the physician assistant.
28	(4) Designates one [of the named physicians] physician
29	as having the primary responsibility for supervising [and
30	directing] the physician assistant.

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1	[(5) Has been approved by the board as satisfying the
2	foregoing and as consistent with the restrictions contained
3	in or authorized by this section. Upon submission of the
4	application, board staff shall review the application only-
5	for completeness and shall issue a letter to the supervising
6	physician providing the temporary authorization for the
7	physician assistant to begin practice. If the application is
8	not complete, including, but not limited to, required
9	information or signatures not being provided or the fee not
10	being submitted, a temporary authorization for the physician
11	assistant to begin practicing shall not be issued. The
12	temporary authorization, when issued, shall provide a period
13	of 120 days during which the physician assistant may practice
14	under the terms set forth in the written agreement as
15	submitted to the board. Within 120 days the board shall
16	notify the supervising physician of the final approval or
17	disapproval of the application. If approved, a final approval-
18	of the written agreement shall be issued to the supervising
19	physician. If there are discrepancies that have not been-
20	corrected within the 120 day period, the temporary-
21	authorization to practice shall expire.]
22	(5.1) Is maintained by the supervising physician at the
23	practice or health care facility and available to the board
24	upon request. The written agreement shall be supplied to the
25	board within 30 days of a request.
26	A physician assistant shall [not assist a physician in a manner
27	not described in the agreement or without the nature and degree
28	of supervision and direction described in the agreement. There-
29	shall be no more than four physician assistants for whom a
30	physician has responsibility or supervises pursuant to a written-
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 agreement at any time. In health care facilities licensed under- the act of July 19, 1979 (P.L.130, No.48), known as the Health Care Facilities Act, a physician assistant shall be under the supervision and direction of a physician or physician group- pursuant to a written agreement, provided that a physician supervises no more than four physician assistants at any time. A physician may apply for a waiver to employ or supervise more- than four physician assistants at any time under this section- for good cause, as determined by the board.] provide medical services in a manner as described in the agreement. A supervising physician shall determine the number of physician assistants supervised at any one time. *** SECTION 3. SECTION 13(C.1) INTRODUCTORY PARAGRAPH, (C.2)(1), < (D), (D.1), (E) AND (G) OF THE ACT ARE AMENDED TO READ: SECTION 13. PHYSICIAN ASSISTANTS. *** (C.1) EXCEPT AS LIMITED BY SUBSECTION (C.2), AND IN ADDITION TO EXISTING AUTHORITY, A PHYSICIAN ASSISTANT SHALL HAVE AUTHORITY TO DO ALL OF THE FOLLOWING, PROVIDED THAT THE PHYSICIAN ASSISTANT IS ACTING WITHIN THE SUPERVISION [AND DIRECTION] OF THE SUPERVISING PHYSICIAN: ***
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22 DIRECTION] OF THE SUPERVISING PHYSICIAN: 23 * * *
23 * * *
24 (C.2) NOTHING IN THIS SECTION SHALL BE CONSTRUED TO:
25 (1) SUPERSEDE THE AUTHORITY OF THE DEPARTMENT OF HEALTH
26 AND THE DEPARTMENT OF [PUBLIC WELFARE] <u>HUMAN SERVICES</u> TO
27 REGULATE THE TYPES OF HEALTH CARE PROFESSIONALS WHO ARE
28 ELIGIBLE FOR MEDICAL STAFF MEMBERSHIP OR CLINICAL PRIVILEGES.
29 * * *
30 (D) SUPERVISION[A PHYSICIAN ASSISTANT SHALL NOT PERFORM A

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MEDICAL SERVICE WITHOUT THE SUPERVISION AND PERSONAL DIRECTION 1 2 OF AN APPROVED PHYSICIAN. THE BOARD SHALL PROMULGATE REGULATIONS 3 WHICH DEFINE THE SUPERVISION AND PERSONAL DIRECTION REQUIRED BY THE STANDARDS OF ACCEPTABLE MEDICAL PRACTICE EMBRACED BY THE 4 MEDICAL DOCTOR COMMUNITY IN THIS COMMONWEALTH.] THE SUPERVISING 5 PHYSICIAN SHALL BE RESPONSIBLE FOR THE MEDICAL SERVICES THAT A 6 7 PHYSICIAN ASSISTANT RENDERS. SUPERVISION SHALL NOT REQUIRE THE 8 ONSITE PRESENCE OR PERSONAL DIRECTION OF THE SUPERVISING 9 PHYSICIAN. 10 (D.1) PATIENT RECORD REVIEW.--(1) THE APPROVED PHYSICIAN SHALL COUNTERSIGN 100% OF 11 THE PATIENT RECORDS COMPLETED BY THE PHYSICIAN ASSISTANT 12 WITHIN A REASONABLE TIME, WHICH SHALL NOT EXCEED TEN DAYS, 13 DURING EACH OF THE FOLLOWING TIME PERIODS: 14 (I) THE FIRST 12 MONTHS OF THE PHYSICIAN ASSISTANT'S 15 PRACTICE POST GRADUATION AND AFTER THE PHYSICIAN 16 ASSISTANT HAS FULFILLED THE CRITERIA FOR LICENSURE SET 17 18 FORTH IN SECTION 36(C). (II) THE FIRST 12 MONTHS OF THE PHYSICIAN 19 20 ASSISTANT'S PRACTICE IN A NEW SPECIALTY IN WHICH THE PHYSICIAN ASSISTANT IS PRACTICING. 21 (III) THE FIRST SIX MONTHS OF THE PHYSICIAN 22 ASSISTANT'S PRACTICE IN THE SAME SPECIALTY UNDER THE 23 24 SUPERVISION OF THE APPROVED PHYSICIAN, UNLESS THE 25 PHYSICIAN ASSISTANT HAS MULTIPLE APPROVED PHYSICIANS AND PRACTICED UNDER THE SUPERVISION OF AT LEAST ONE OF THOSE 26 APPROVED PHYSICIANS FOR SIX MONTHS. 27 28 (2) IN THE CASE OF A PHYSICIAN ASSISTANT WHO IS NOT 29 SUBJECT TO 100% REVIEW OF THE PHYSICIAN ASSISTANT'S PATIENT RECORDS PURSUANT TO PARAGRAPH (1), THE APPROVED PHYSICIAN 30

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1	SHALL PERSONALLY REVIEW ON A REGULAR BASIS A SELECTED NUMBER
2	OF THE PATIENT RECORDS COMPLETED BY THE PHYSICIAN ASSISTANT.
3	THE APPROVED PHYSICIAN SHALL SELECT PATIENT RECORDS FOR
4	REVIEW ON THE BASIS OF WRITTEN CRITERIA ESTABLISHED BY THE
5	APPROVED PHYSICIAN AND THE PHYSICIAN ASSISTANT. THE NUMBER OF
6	PATIENT RECORDS REVIEWED SHALL BE SUFFICIENT TO ASSURE
7	ADEQUATE REVIEW OF THE PHYSICIAN ASSISTANT'S SCOPE OF
8	PRACTICE.]
9	(3) THE PRIMARY SUPERVISING PHYSICIAN SHALL DETERMINE
10	COUNTERSIGNATURE REQUIREMENTS OF PATIENT RECORDS COMPLETED BY
11	THE PHYSICIAN ASSISTANT IN A WRITTEN AGREEMENT, EXCEPT AS
12	PROVIDED FOR IN PARAGRAPH (4).
13	(4) THE PRIMARY SUPERVISING PHYSICIAN SHALL COUNTERSIGN
14	100% OF PATIENT RECORDS COMPLETED BY THE PHYSICIAN ASSISTANT
15	WITHIN A REASONABLE TIME, WHICH SHALL NOT EXCEED TEN DAYS FOR
16	THE FIRST 12 MONTHS OF THE PHYSICIAN ASSISTANT'S PRACTICE
17	POST GRADUATION AND AFTER THE PHYSICIAN ASSISTANT HAS
18	FULFILLED THE CRITERIA FOR LICENSURE SET FORTH IN SECTION
19	<u>36(C).</u>
20	(E) WRITTEN AGREEMENTA PHYSICIAN ASSISTANT SHALL [NOT
21	PROVIDE A MEDICAL SERVICE WITHOUT A WRITTEN AGREEMENT WITH ONE
22	OR MORE PHYSICIANS] <u>PROVIDE MEDICAL SERVICES ACCORDING TO A</u>
23	WRITTEN AGREEMENT WHICH PROVIDES FOR ALL OF THE FOLLOWING:
24	(1) IDENTIFIES AND IS SIGNED BY [EACH PHYSICIAN THE
25	PHYSICIAN ASSISTANT WILL BE ASSISTING] THE PRIMARY
26	SUPERVISING PHYSICIAN.
27	(2) DESCRIBES THE [MANNER IN WHICH THE PHYSICIAN
28	ASSISTANT WILL BE ASSISTING EACH NAMED PHYSICIAN. THE WRITTEN
29	AGREEMENT AND DESCRIPTION MAY BE PREPARED AND SUBMITTED BY
30	THE PRIMARY SUPERVISING PHYSICIAN, THE PHYSICIAN ASSISTANT OR
	100000000000000000000000000000000000000

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1 A DELEGATE OF THE PRIMARY SUPERVISING PHYSICIAN AND THE 2 PHYSICIAN ASSISTANT. IT SHALL NOT BE A DEFENSE IN ANY 3 ADMINISTRATIVE OR CIVIL ACTION THAT THE PHYSICIAN ASSISTANT 4 ACTED OUTSIDE THE SCOPE OF THE BOARD-APPROVED DESCRIPTION OR 5 THAT THE SUPERVISING PHYSICIAN UTILIZED THE PHYSICIAN ASSISTANT OUTSIDE THE SCOPE OF THE BOARD-APPROVED DESCRIPTION 6 7 BECAUSE THE SUPERVISING PHYSICIAN OR PHYSICIAN ASSISTANT 8 PERMITTED ANOTHER PERSON TO REPRESENT TO THE BOARD THAT THE 9 DESCRIPTION HAD BEEN APPROVED BY THE SUPERVISING PHYSICIAN OR 10 PHYSICIAN ASSISTANT] PHYSICIAN ASSISTANT'S SCOPE OF PRACTICE. DESCRIBES THE NATURE AND DEGREE OF SUPERVISION [AND 11 (3) 12 DIRECTION EACH NAMED PHYSICIAN WILL PROVIDE THE PHYSICIAN 13 ASSISTANT, INCLUDING, BUT NOT LIMITED TO, THE NUMBER AND 14 FREQUENCY OF THE PATIENT RECORD REVIEWS REQUIRED BY 15 SUBSECTION (D.1) AND THE CRITERIA FOR SELECTING PATIENT 16 RECORDS FOR REVIEW WHEN 100% REVIEW IS NOT REOUIRED] THE 17 PRIMARY SUPERVISING PHYSICIAN WILL PROVIDE THE PHYSICIAN 18 ASSISTANT. DESIGNATES ONE OF THE NAMED PHYSICIANS AS HAVING 19 (4) 20 THE PRIMARY RESPONSIBILITY FOR SUPERVISING AND DIRECTING THE PHYSICIAN ASSISTANT.] IS PREPARED AND SUBMITTED BY THE 21 22 PRIMARY SUPERVISING PHYSICIAN, THE PHYSICIAN ASSISTANT OR A 23 DELEGATE OF THE PRIMARY SUPERVISING PHYSICIAN AND THE 24 PHYSICIAN ASSISTANT. IT SHALL NOT BE A DEFENSE IN ANY 25 ADMINISTRATIVE OR CIVIL ACTION THAT THE PHYSICIAN ASSISTANT ACTED OUTSIDE THE SCOPE OF THE BOARD-FILED DESCRIPTION OR 26 27 THAT THE SUPERVISING PHYSICIAN UTILIZED THE PHYSICIAN 28 ASSISTANT OUTSIDE THE SCOPE OF THE BOARD-FILED DESCRIPTION 29 BECAUSE THE SUPERVISING PHYSICIAN OR PHYSICIAN ASSISTANT PERMITTED ANOTHER PERSON TO REPRESENT TO THE BOARD THAT THE 30

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1 DESCRIPTION HAD BEEN APPROVED BY THE SUPERVISING PHYSICIAN OR

2 <u>PHYSICIAN ASSISTANT.</u>

3 [(5) HAS BEEN APPROVED BY THE BOARD AS SATISFYING THE FOREGOING AND AS CONSISTENT WITH THE RESTRICTIONS CONTAINED 4 5 IN OR AUTHORIZED BY THIS SECTION. UPON SUBMISSION OF THE APPLICATION, BOARD STAFF SHALL REVIEW THE APPLICATION ONLY 6 7 FOR COMPLETENESS AND SHALL ISSUE A LETTER TO THE SUPERVISING 8 PHYSICIAN PROVIDING THE TEMPORARY AUTHORIZATION FOR THE 9 PHYSICIAN ASSISTANT TO BEGIN PRACTICE. IF THE APPLICATION IS 10 NOT COMPLETE, INCLUDING, BUT NOT LIMITED TO, REQUIRED INFORMATION OR SIGNATURES NOT BEING PROVIDED OR THE FEE NOT 11 BEING SUBMITTED, A TEMPORARY AUTHORIZATION FOR THE PHYSICIAN 12 13 ASSISTANT TO BEGIN PRACTICING SHALL NOT BE ISSUED. THE 14 TEMPORARY AUTHORIZATION, WHEN ISSUED, SHALL PROVIDE A PERIOD OF 120 DAYS DURING WHICH THE PHYSICIAN ASSISTANT MAY PRACTICE 15 16 UNDER THE TERMS SET FORTH IN THE WRITTEN AGREEMENT AS SUBMITTED TO THE BOARD. WITHIN 120 DAYS THE BOARD SHALL 17 NOTIFY THE SUPERVISING PHYSICIAN OF THE FINAL APPROVAL OR 18 19 DISAPPROVAL OF THE APPLICATION. IF APPROVED, A FINAL APPROVAL OF THE WRITTEN AGREEMENT SHALL BE ISSUED TO THE SUPERVISING 20 21 PHYSICIAN. IF THERE ARE DISCREPANCIES THAT HAVE NOT BEEN CORRECTED WITHIN THE 120-DAY PERIOD, THE TEMPORARY 22 23 AUTHORIZATION TO PRACTICE SHALL EXPIRE.] 24 (6) BECOMES EFFECTIVE UPON SUBMISSION BY THE PRIMARY 25 SUPERVISING PHYSICIAN, THE PHYSICIAN ASSISTANT OR A DELEGATE OF THE PRIMARY SUPERVISING PHYSICIAN AND THE PHYSICIAN 26 ASSISTANT TO THE BOARD. THE BOARD MAY DEVELOP AUDIT 27 28 PROCEDURES TO ENSURE SUPERVISION AND SCOPE OF PRACTICE 29 PROTECTIONS ARE MAINTAINED IN ACCORDANCE WITH THIS ACT. THE 30 AUDIT SHALL NOT INCLUDE MORE THAN 10% OF ALL WRITTEN

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1AGREEMENTS ON AN ANNUAL BASIS. A WRITTEN AGREEMENT SUBJECT TO2AN AUDIT SHALL REMAIN IN EFFECT FOR TWO WEEKS AFTER THE BOARD3NOTIFIES THE PRIMARY SUPERVISING PHYSICIAN AND THE PHYSICIAN4ASSISTANT WITH REMEDIES, IF NECESSARY, ON THE OUTCOME OF THE5AUDIT. THE PRIMARY SUPERVISING PHYSICIAN, PHYSICIAN ASSISTANT6OR DELEGATE TO THE PRIMARY SUPERVISING PHYSICIAN AND

PHYSICIAN ASSISTANT MUST SUBMIT A NEW WRITTEN AGREEMENT WHICH
 SHALL BE EFFECTIVE UPON SUBMISSION TO THE BOARD.

9 A PHYSICIAN ASSISTANT SHALL NOT ASSIST A PHYSICIAN IN A MANNER 10 NOT DESCRIBED IN THE AGREEMENT OR WITHOUT THE NATURE AND DEGREE OF SUPERVISION [AND DIRECTION] DESCRIBED IN THE AGREEMENT. THERE 11 SHALL BE NO MORE THAN [FOUR] SIX PHYSICIAN ASSISTANTS FOR WHOM A 12 13 PHYSICIAN HAS RESPONSIBILITY OR SUPERVISES PURSUANT TO A WRITTEN 14 AGREEMENT AT ANY TIME. IN HEALTH CARE FACILITIES LICENSED UNDER 15 THE ACT OF JULY 19, 1979 (P.L.130, NO.48), KNOWN AS THE HEALTH 16 CARE FACILITIES ACT, A PHYSICIAN ASSISTANT SHALL BE UNDER THE SUPERVISION [AND DIRECTION] OF A PHYSICIAN OR PHYSICIAN GROUP 17 18 PURSUANT TO A WRITTEN AGREEMENT, PROVIDED THAT A PHYSICIAN 19 SUPERVISES NO MORE THAN [FOUR] SEVEN PHYSICIAN ASSISTANTS AT ANY 20 TIME. A PHYSICIAN MAY APPLY FOR A WAIVER TO EMPLOY OR SUPERVISE MORE [THAN FOUR] PHYSICIAN ASSISTANTS AT ANY TIME UNDER THIS 21 SECTION FOR GOOD CAUSE, AS DETERMINED BY THE BOARD. 22

23 * * *

24 (G) SUPERVISION.--A PHYSICIAN ASSISTANT MAY BE EMPLOYED BY A 25 HEALTH CARE FACILITY LICENSED UNDER THE HEALTH CARE FACILITIES 26 ACT UNDER THE SUPERVISION [AND DIRECTION] OF AN APPROVED PHYSICIAN OR GROUP OF SUCH PHYSICIANS, PROVIDED ONE OF THOSE 27 28 PHYSICIANS IS DESIGNATED AS HAVING THE PRIMARY RESPONSIBILITY 29 FOR SUPERVISING [AND DIRECTING] THE PHYSICIAN ASSISTANT. IN HEALTH CARE FACILITIES LICENSED UNDER THE HEALTH CARE FACILITIES 30 20210SB0398PN0871 - 12 -

ACT, THE ATTENDING PHYSICIAN OF RECORD FOR A PARTICULAR PATIENT
 SHALL ACT AS THE PRIMARY SUPERVISING PHYSICIAN FOR THE PHYSICIAN
 ASSISTANT WHILE THAT PATIENT IS UNDER THE CARE OF THE ATTENDING
 PHYSICIAN.

5 * * *

6 Section 3 4. The State Board of Medicine shall promulgate <--
7 rules and regulations necessary to carry out this act within 180
8 days of the effective date of this section.

9 SECTION 5. ANY AND ALL REGULATIONS AT 49 PA. CODE §\$ <--
10 18.142(5), 18.153(C), 18.158(B)(4) AND 18.161(B) AND OTHER
11 PROVISIONS OF 49 PA. CODE CH. 18 ARE ABROGATED TO THE EXTENT OF
12 ANY INCONSISTENCY WITH THIS ACT.

13 Section 4 6. This act shall take effect in 60 days. <--