Sponsor: SENATOR PITTMAN

Printer's No. 386

- Amend Bill, page 1, line 9, by inserting after "for" 1
- 2 definitions, for
- 3 Amend Bill, page 1, line 10, by inserting after "assistants"
- ; and abrogating regulations
- 5 Amend Bill, page 1, lines 13 through 15, by striking out all
- of said lines and inserting
- 7 Section 1. The definition of "primary supervising physician"
- in section 2 of the act of December 20, 1985 (P.L.457, No.112),
- known as the Medical Practice Act of 1985, is amended to read: 9
- Section 2. Definitions. 10
- 11 The following words and phrases when used in this act shall
- have the meanings given to them in this section unless the 12
- 13 context clearly indicates otherwise:
- 14
- "Primary supervising physician." A medical doctor who is 15
- registered with the board and designated in a written agreement 16
- 17 with a physician assistant under section 13(e) as having primary
- 18 responsibility for [directing and personally] supervising the
- physician assistant. 19
- 20
- 2.1 Section 2. Section 3(a) and (b) of the act are amended to
- 22 read:
- 23 Amend Bill, page 1, line 18, by inserting a bracket before
- 24 "his"
- 25 Amend Bill, page 1, line 18, by inserting after "his"
- 26] the commissioner's
- 27 Amend Bill, page 1, line 19, by inserting a bracket before
- "his" 28
- Amend Bill, page 1, line 19, by inserting after "his" 29

- 1 <u>the Secretary of Health's</u>
- 2 Amend Bill, page 1, line 21, by striking out "eight" and
- 3 inserting
- 4 <u>nine</u>
- 5 Amend Bill, page 1, line 21; page 2, line 1; by striking out
- 6 "one of whom" in line 21 on page 1 and "shall be a physician
- 7 <u>assistant,</u>" in line 1 on page 2
- 8 Amend Bill, page 2, line 1, by inserting a bracket before
- 9 "six"
- 10 Amend Bill, page 2, line 1, by inserting after "six"
- 11 <u>one of whom shall be a physician assistant, seven</u>
- 12 Amend Bill, page 2, line 12, by inserting a bracket before
- 13 "his"
- 14 Amend Bill, page 2, line 13, by inserting after "her"
- 15] <u>a</u>
- Amend Bill, page 2, line 16, by inserting a bracket before
- 17 "his"
- Amend Bill, page 2, line 16, by inserting after "her"
- 19 <u>the member's</u>
- 20 Amend Bill, page 2, lines 29 and 30; pages 3 through 5, lines
- 21 1 through 30; page 6, lines 1 through 24; by striking out all of
- 22 said lines on said pages and inserting
- Section 3. Section 13(c.1) introductory paragraph, (c.2)(1),
- 24 (d), (d.1), (e) and (g) of the act are amended to read:
- 25 Section 13. Physician assistants.
- 26 * * *
- 27 (c.1) Except as limited by subsection (c.2), and in addition
- 28 to existing authority, a physician assistant shall have
- 29 authority to do all of the following, provided that the
- 30 physician assistant is acting within the supervision [and
- 31 direction] of the supervising physician:
- 32 * * *
- 33 (c.2) Nothing in this section shall be construed to:
- 34 (1) Supersede the authority of the Department of Health

and the Department of [Public Welfare] <u>Human Services</u> to regulate the types of health care professionals who are eligible for medical staff membership or clinical privileges.

- (d) Supervision.--[A physician assistant shall not perform a medical service without the supervision and personal direction of an approved physician. The board shall promulgate regulations which define the supervision and personal direction required by the standards of acceptable medical practice embraced by the medical doctor community in this Commonwealth.] The supervising physician shall be responsible for the medical services that a physician assistant renders. Supervision shall not require the onsite presence or personal direction of the supervising physician.
 - (d.1) Patient record review. --
 - [(1) The approved physician shall countersign 100% of the patient records completed by the physician assistant within a reasonable time, which shall not exceed ten days, during each of the following time periods:
 - (i) The first 12 months of the physician assistant's practice post graduation and after the physician assistant has fulfilled the criteria for licensure set forth in section 36(c).
 - (ii) The first 12 months of the physician assistant's practice in a new specialty in which the physician assistant is practicing.
 - (iii) The first six months of the physician assistant's practice in the same specialty under the supervision of the approved physician, unless the physician assistant has multiple approved physicians and practiced under the supervision of at least one of those approved physicians for six months.
 - (2) In the case of a physician assistant who is not subject to 100% review of the physician assistant's patient records pursuant to paragraph (1), the approved physician shall personally review on a regular basis a selected number of the patient records completed by the physician assistant. The approved physician shall select patient records for review on the basis of written criteria established by the approved physician and the physician assistant. The number of patient records reviewed shall be sufficient to assure adequate review of the physician assistant's scope of practice.]
 - (3) The primary supervising physician shall determine countersignature requirements of patient records completed by the physician assistant in a written agreement, except as provided for in paragraph (4).
 - (4) The primary supervising physician shall countersign 100% of patient records completed by the physician assistant within a reasonable time, which shall not exceed ten days for the first 12 months of the physician assistant's practice

post graduation and after the physician assistant has fulfilled the criteria for licensure set forth in section 36(c).

- (e) Written agreement.——A physician assistant shall [not provide a medical service without a written agreement with one or more physicians] provide medical services according to a written agreement which provides for all of the following:
 - (1) Identifies and is signed by [each physician the physician assistant will be assisting] the primary supervising physician.
 - assistant will be assisting each named physician. The written agreement and description may be prepared and submitted by the primary supervising physician, the physician assistant or a delegate of the primary supervising physician and the physician assistant. It shall not be a defense in any administrative or civil action that the physician assistant acted outside the scope of the board-approved description or that the supervising physician utilized the physician assistant outside the scope of the board-approved description because the supervising physician or physician assistant permitted another person to represent to the board that the description had been approved by the supervising physician or physician assistant] physician assistant's scope of practice.
 - (3) Describes the nature and degree of supervision [and direction each named physician will provide the physician assistant, including, but not limited to, the number and frequency of the patient record reviews required by subsection (d.1) and the criteria for selecting patient records for review when 100% review is not required] the primary supervising physician will provide the physician assistant.
 - (4) [Designates one of the named physicians as having the primary responsibility for supervising and directing the physician assistant.] Is prepared and submitted by the primary supervising physician, the physician assistant or a delegate of the primary supervising physician and the physician assistant. It shall not be a defense in any administrative or civil action that the physician assistant acted outside the scope of the board-filed description or that the supervising physician utilized the physician assistant outside the scope of the board-filed description because the supervising physician or physician assistant permitted another person to represent to the board that the description had been approved by the supervising physician or physician assistant.
 - [(5) Has been approved by the board as satisfying the foregoing and as consistent with the restrictions contained in or authorized by this section. Upon submission of the application, board staff shall review the application only for completeness and shall issue a letter to the supervising

 physician providing the temporary authorization for the physician assistant to begin practice. If the application is not complete, including, but not limited to, required information or signatures not being provided or the fee not being submitted, a temporary authorization for the physician assistant to begin practicing shall not be issued. The temporary authorization, when issued, shall provide a period of 120 days during which the physician assistant may practice under the terms set forth in the written agreement as submitted to the board. Within 120 days the board shall notify the supervising physician of the final approval or disapproval of the application. If approved, a final approval of the written agreement shall be issued to the supervising physician. If there are discrepancies that have not been corrected within the 120-day period, the temporary authorization to practice shall expire.]

(6) Becomes effective upon submission by the primary supervising physician, the physician assistant or a delegate of the primary supervising physician and the physician assistant to the board. The board may develop audit procedures to ensure supervision and scope of practice protections are maintained in accordance with this act. The audit shall not include more than 10% of all written agreements on an annual basis. A written agreement subject to an audit shall remain in effect for two weeks after the board notifies the primary supervising physician and the physician assistant with remedies, if necessary, on the outcome of the audit. The primary supervising physician, physician assistant or delegate to the primary supervising physician and physician assistant must submit a new written agreement which shall be effective upon submission to the board.

A physician assistant shall not assist a physician in a manner not described in the agreement or without the nature and degree of supervision [and direction] described in the agreement. There shall be no more than [four] six physician assistants for whom a physician has responsibility or supervises pursuant to a written 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] seven 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.

* * *

(g) Supervision.—A physician assistant may be employed by a health care facility licensed under the Health Care Facilities Act under the supervision [and direction] of an approved physician or group of such physicians, provided one of those physicians is designated as having the primary responsibility

- 1 for supervising [and directing] the physician assistant. In
- 2 health care facilities licensed under the Health Care Facilities
- 3 Act, the attending physician of record for a particular patient
- 4 shall act as the primary supervising physician for the physician
- 5 assistant while that patient is under the care of the attending
- 6 physician.
- 7 * * *
- 8 Amend Bill, page 6, line 25, by striking out "3" and
- 9 inserting
- 10 4
- 11 Amend Bill, page 6, by inserting between lines 27 and 28
- 12 Section 5. Any and all regulations at 49 Pa. Code §§
- 13 18.142(5), 18.153(c), 18.158(b)(4) and 18.161(b) and other
- 14 provisions of 49 Pa. Code Ch. 18 are abrogated to the extent of
- 15 any inconsistency with this act.
- Amend Bill, page 6, line 28, by striking out "4" and
- 17 inserting
- 18 6