
THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 2088 Session of
2007

INTRODUCED BY ADOLPH, YUDICHAK, BARRAR, KILLION, BRENNAN,
CLYMER, GEORGE, HENNESSEY, W. KELLER, R. MILLER, MILNE,
MOYER, MUNDY, MURT, MUSTIO, O'NEILL, PALLONE, PAYNE, PETRI,
REICHLEY, ROSS, RUBLEY, SAYLOR, SEIP, SONNEY, J. TAYLOR,
WATSON, PETRONE AND HELM, DECEMBER 11, 2007

SENATOR ARMSTRONG, APPROPRIATIONS, IN SENATE, RE-REPORTED AS
AMENDED, JUNE 28, 2008

AN ACT

1 Amending the act of October 5, 1978 (P.L.1109, No.261), entitled
2 "An act requiring the licensing of practitioners of
3 osteopathic medicine and surgery; regulating their practice;
4 providing for certain funds and penalties for violations and
5 repeals," further providing for definitions, for the State
6 Board of Osteopathic Medicine, FOR PROHIBITION ON PRACTICE ←
7 WITHOUT LICENSE, FOR PHYSICIAN ASSISTANTS, for respiratory
8 care practitioners, for respiratory care practitioner
9 certificates and permits and for reasons for refusal,
10 revocation or suspension of license; and providing for
11 regulations.

12 The General Assembly of the Commonwealth of Pennsylvania
13 hereby enacts as follows:

14 Section 1. The definitions of "board-regulated practitioner"
15 and "respiratory care practitioner" in section 2 of the act of
16 October 5, 1978 (P.L.1109, No.261), known as the Osteopathic
17 Medical Practice Act, amended or added July 2, 1993 (P.L.418,
18 No.59) and December 10, 2001 (P.L.863, No.93), are amended to
19 read:

20 Section 2. Definitions.

1 The following words and phrases when used in this act shall
2 have, unless the context clearly indicates otherwise, the
3 meanings given to them in this section:

4 * * *

5 "Board-regulated practitioner." An osteopathic physician,
6 physician assistant, respiratory [care practitioner] therapist
7 or certified athletic trainer or an applicant for a license or
8 certificate issued by the board.

9 * * *

10 "Respiratory [care practitioner] therapist." An individual
11 who is [certified] licensed to practice respiratory care by the
12 State Board of Osteopathic Medicine.

13 * * *

14 Section 2. Section 2.1(a) of the act, amended ~~December 10,~~ <—
15 ~~2001 (P.L.863, No.93)~~ JUNE 11, 2008 (P.L.161, NO.20), is amended <—
16 to read:

17 Section 2.1. State Board of Osteopathic Medicine.

18 (a) The State Board of Osteopathic Medicine shall consist of
19 the Commissioner of Professional and Occupational Affairs or his
20 designee; the Secretary of Health or his designee; two members
21 appointed by the Governor who shall be persons representing the
22 public at large; one member appointed by the Governor who shall
23 be a respiratory [care practitioner] therapist, A PERFUSIONIST, <—
24 a physician assistant or a certified athletic trainer; and six
25 members appointed by the Governor who shall be graduates of a
26 legally incorporated and reputable college of ~~osteopathy~~ <—
27 OSTEOPATHIC MEDICINE and shall have been licensed to practice <—
28 osteopathic medicine under the laws of this Commonwealth and
29 shall have been engaged in the practice of osteopathy in this
30 Commonwealth for a period of at least five years. All

1 professional and public members of the board shall be appointed
2 by the Governor with the advice and consent of a majority of the
3 members elected to the Senate. The Governor shall assure that
4 respiratory [care practitioners] therapists, PERFUSIONISTS, ←
5 physician assistants and certified athletic trainers ARE ←
6 APPOINTED TO FOUR-YEAR TERMS on a rotating basis.

7 * * *

8 SECTION 3. SECTION 3 OF THE ACT, AMENDED JULY 2, 2004 ←
9 (P.L.486, NO.56), IS AMENDED TO READ:

10 SECTION 3. PRACTICE OF OSTEOPATHIC MEDICINE AND SURGERY WITHOUT
11 LICENSE PROHIBITED.

12 (A) IT SHALL BE UNLAWFUL FOR ANY PERSON TO ENGAGE IN THE
13 PRACTICE OF OSTEOPATHIC MEDICINE AND SURGERY, OR PRETEND TO A
14 KNOWLEDGE OF ANY BRANCH OR BRANCHES OF OSTEOPATHIC MEDICINE AND
15 SURGERY, OR TO HOLD HIMSELF OUT AS A PRACTITIONER IN OSTEOPATHIC
16 MEDICINE AND SURGERY, OR TO ASSUME THE TITLE OF DOCTOR OF
17 OSTEOPATHIC MEDICINE AND SURGERY OR DOCTOR OF ANY SPECIFIC
18 DISEASE, OR TO DIAGNOSE DISEASES OR TO TREAT DISEASES BY THE USE
19 OF OSTEOPATHIC MEDICINE AND SURGERY OR BY ANY OTHER MEANS, OR TO
20 SIGN ANY BIRTH OR DEATH CERTIFICATE UNLESS OTHERWISE AUTHORIZED
21 BY LAW, OR TO HOLD HIMSELF OUT AS ABLE TO DO SO, UNLESS HE HAS
22 RECEIVED A CERTIFICATE OF LICENSURE OR PERMISSION FROM THE BOARD
23 WHICH LICENSE SHALL BE RECORDED IN THE OFFICE OF THE BOARD.

24 (B) NOTHING IN THIS ACT SHALL BE CONSTRUED TO PROHIBIT
25 SERVICES AND ACTS RENDERED BY A QUALIFIED PHYSICIAN ASSISTANT,
26 TECHNICIAN OR OTHER ALLIED MEDICAL PERSON IF SUCH SERVICES AND
27 ACTS ARE RENDERED UNDER THE SUPERVISION, DIRECTION OR CONTROL OF
28 A LICENSED PHYSICIAN. IT SHALL BE UNLAWFUL FOR ANY PERSON TO
29 PRACTICE AS A PHYSICIAN ASSISTANT UNLESS LICENSED AND APPROVED
30 BY THE BOARD. IT SHALL ALSO BE UNLAWFUL FOR ANY PHYSICIAN

1 ASSISTANT TO RENDER MEDICAL CARE AND SERVICES EXCEPT UNDER THE
2 SUPERVISION AND DIRECTION OF THE SUPERVISING PHYSICIAN. A
3 PHYSICIAN ASSISTANT MAY USE THE TITLE PHYSICIAN ASSISTANT OR AN
4 APPROPRIATE ABBREVIATION FOR THAT TITLE, SUCH AS "P.A.-C."

5 SECTION 4. SECTION 10(F) OF THE ACT, AMENDED JULY 2, 2004
6 (P.L.486, NO.56), IS AMENDED AND THE SECTION IS AMENDED BY
7 ADDING SUBSECTIONS TO READ:

8 SECTION 10. LICENSES; EXEMPTIONS; NONRESIDENT PRACTITIONERS;
9 GRADUATE STUDENTS; BIENNIAL REGISTRATION AND
10 CONTINUING MEDICAL EDUCATION.

11 * * *

12 (F) THE BOARD SHALL GRANT LICENSURE TO PHYSICIAN ASSISTANTS
13 WHICH LICENSURE SHALL BE SUBJECT TO BIENNIAL RENEWAL BY THE
14 BOARD. AS PART OF BIENNIAL RENEWAL, A PHYSICIAN ASSISTANT SHALL
15 COMPLETE CONTINUING MEDICAL EDUCATION AS REQUIRED BY THE
16 NATIONAL COMMISSION ON CERTIFICATION OF PHYSICIAN ASSISTANTS.

17 THE BOARD SHALL GRANT LICENSURE TO APPLICANTS WHO HAVE FULFILLED
18 THE FOLLOWING CRITERIA:

19 (1) SATISFACTORY PERFORMANCE ON A PROFICIENCY
20 EXAMINATION APPROVED BY THE BOARD.

21 (2) SATISFACTORY COMPLETION OF A CERTIFIED PROGRAM FOR
22 THE TRAINING AND EDUCATION OF PHYSICIAN ASSISTANTS APPROVED
23 BY THE BOARD.

24 (3) FOR CANDIDATES FOR INITIAL LICENSURE AFTER JANUARY
25 1, 2005, OBTAINMENT OF A BACCALAUREATE OR HIGHER DEGREE FROM
26 A COLLEGE OR UNIVERSITY AND COMPLETION OF NOT FEWER THAN 60
27 CLOCK HOURS OF DIDACTIC INSTRUCTION IN PHARMACOLOGY OR OTHER
28 RELATED COURSES AS THE BOARD MAY APPROVE BY REGULATION.

29 IN THE EVENT THAT COMPLETION OF A FORMAL TRAINING AND
30 EDUCATIONAL PROGRAM IS A PREREQUISITE TO TAKING THE PROFICIENCY

1 EXAMINATION, THE BOARD SHALL HAVE THE POWER, IF IT DETERMINES
2 THAT THE EXPERIENCE OF THE APPLICANT IS OF SUCH MAGNITUDE AND
3 SCOPE SO AS TO RENDER FURTHER FORMAL TRAINING AND EDUCATION
4 NONESSENTIAL TO THE APPLICANT IN ASSISTING A PHYSICIAN IN THE
5 PROVISION OF MEDICAL CARE AND SERVICES, TO WAIVE THE TRAINING
6 AND EDUCATION REQUIREMENTS UNDER THIS SECTION.

7 * * *

8 (G.2) (1) EXCEPT AS LIMITED BY PARAGRAPH (2), AND IN
9 ADDITION TO EXISTING AUTHORITY, A PHYSICIAN ASSISTANT SHALL
10 HAVE AUTHORITY TO DO ALL OF THE FOLLOWING, PROVIDED THAT THE
11 PHYSICIAN ASSISTANT IS ACTING WITHIN THE SUPERVISION AND
12 DIRECTION OF THE SUPERVISING PHYSICIAN:

13 (I) ORDER DURABLE MEDICAL EQUIPMENT.

14 (II) ISSUE ORAL ORDERS TO THE EXTENT PERMITTED BY A
15 HEALTH CARE FACILITY'S BYLAWS, RULES, REGULATIONS OR
16 ADMINISTRATIVE POLICIES AND GUIDELINES.

17 (III) ORDER PHYSICAL THERAPY AND DIETITIAN
18 REFERRALS.

19 (IV) ORDER RESPIRATORY AND OCCUPATIONAL THERAPY
20 REFERRALS.

21 (V) PERFORM DISABILITY ASSESSMENTS FOR THE PROGRAM
22 PROVIDING TEMPORARY ASSISTANCE TO NEEDY FAMILIES (TANF).

23 (VI) ISSUE HOMEBOUND SCHOOLING CERTIFICATIONS.

24 (VII) PERFORM AND SIGN THE INITIAL ASSESSMENT OF
25 METHADONE TREATMENT EVALUATIONS IN ACCORDANCE WITH
26 FEDERAL AND STATE LAW, PROVIDED THAT ANY ORDER FOR
27 METHADONE TREATMENT SHALL BE MADE ONLY BY A PHYSICIAN.

28 (2) NOTHING IN THIS SUBSECTION SHALL BE CONSTRUED TO:

29 (I) SUPERSEDE THE AUTHORITY OF THE DEPARTMENT OF
30 HEALTH AND THE DEPARTMENT OF PUBLIC WELFARE TO REGULATE

1 THE TYPES OF HEALTH CARE PROFESSIONALS WHO ARE ELIGIBLE
2 FOR MEDICAL STAFF MEMBERSHIP OR CLINICAL PRIVILEGES.

3 (II) RESTRICT THE AUTHORITY OF A HEALTH CARE
4 FACILITY TO DETERMINE THE SCOPE OF PRACTICE AND
5 SUPERVISION OR OTHER OVERSIGHT REQUIREMENTS FOR HEALTH
6 CARE PROFESSIONALS PRACTICING WITHIN THE FACILITY.

7 (G.3) PROFESSIONAL LIABILITY.--

8 (1) A LICENSED PHYSICIAN ASSISTANT IN THIS COMMONWEALTH
9 SHALL MAINTAIN A LEVEL OF PROFESSIONAL LIABILITY INSURANCE
10 COVERAGE IN THE MINIMUM AMOUNT OF \$1,000,000 PER OCCURRENCE
11 OR CLAIMS MADE. FAILURE TO MAINTAIN INSURANCE COVERAGE AS
12 REQUIRED SHALL SUBJECT THE LICENSEE TO DISCIPLINARY
13 PROCEEDINGS. THE BOARD SHALL ACCEPT FROM PHYSICIAN ASSISTANTS
14 AS SATISFACTORY EVIDENCE OF INSURANCE COVERAGE ANY OF THE
15 FOLLOWING:

16 (I) SELF-INSURANCE;

17 (II) PERSONALLY PURCHASED LIABILITY INSURANCE; OR

18 (III) PROFESSIONAL LIABILITY INSURANCE COVERAGE
19 PROVIDED BY THE PHYSICIAN ASSISTANT'S EMPLOYER OR SIMILAR
20 INSURANCE COVERAGE ACCEPTABLE TO THE BOARD.

21 (2) A LICENSE APPLICANT SHALL PROVIDE PROOF THAT THE
22 APPLICANT HAS OBTAINED PROFESSIONAL LIABILITY INSURANCE IN
23 ACCORDANCE WITH PARAGRAPH (1). IT IS SUFFICIENT IF THE
24 APPLICANT FILES WITH THE APPLICATION A COPY OF A LETTER FROM
25 THE APPLICANT'S PROFESSIONAL LIABILITY INSURANCE CARRIER
26 INDICATING THAT THE APPLICANT WILL BE COVERED AGAINST
27 PROFESSIONAL LIABILITY IN THE REQUIRED AMOUNTS EFFECTIVE UPON
28 THE ISSUANCE OF THE APPLICANT'S LICENSE TO PRACTICE AS A
29 PHYSICIAN ASSISTANT IN THIS COMMONWEALTH. UPON ISSUANCE OF
30 THE LICENSE, THE LICENSEE HAS 30 DAYS TO SUBMIT TO THE BOARD

1 THE CERTIFICATE OF INSURANCE OR A COPY OF THE POLICY

2 DECLARATION PAGE.

3 * * *

4 Section 3 5. Section 10.1 of the act, added July 2, 1993 <—
5 (P.L.418, No.59), is amended to read:

6 Section 10.1. Respiratory [care practitioners] therapists.

7 [(a) Eighteen months after the effective date of this
8 section, it shall be unlawful for any person to hold himself out
9 to the public as a respiratory care practitioner and to practice
10 or offer to practice respiratory care unless he holds a valid,
11 current temporary permit or certificate issued by the board.

12 (b) A respiratory care practitioner who holds a valid,
13 current temporary permit or certificate issued by the board may
14 use the title respiratory care practitioner or respiratory care
15 practitioner-certified or an appropriate abbreviation of that
16 title, such as "R.C.P." or "R.C.P.-C."]

17 (a) An individual shall be eligible to apply for licensure
18 as a respiratory therapist if that individual satisfies all of
19 the following:

20 (1) Submits evidence satisfactory to the board, on forms
21 approved by the board, that the applicant has met one or more
22 of the following criteria:

23 (i) Has graduated from a respiratory care program
24 approved by the Committee on Accreditation for
25 Respiratory Care and passed the entry level examination
26 as determined by the National Board for Respiratory Care.

27 (ii) Holds a valid license, certificate or
28 registration as a respiratory therapist in another state,
29 territory or the District of Columbia which has been
30 issued based on requirements substantially similar to

1 those required by this Commonwealth, including having
2 successfully passed an examination.

3 (2) Has paid the licensure fee as established by the
4 board by regulation.

5 (3) Has proved to the satisfaction of the board that the
6 individual is of good moral character and is not unfit or
7 unable to practice as a respiratory therapist by reason of
8 physical or mental impairment.

9 (a.1) It shall be unlawful for any individual to hold
10 himself out to the public as a respiratory therapist or to
11 practice or offer to practice respiratory care unless the
12 individual holds a valid, current license issued by the board or
13 the State Board of Medicine.

14 (a.2) It shall be unlawful for an individual to use the
15 title of "licensed respiratory therapist" or to use the letters
16 "L.R.T." or "R.T." or to hold oneself out as a licensed
17 respiratory therapist unless that individual is licensed to
18 practice respiratory care as provided under this act or the act
19 of December 20, 1985 (P.L.457, No.112), known as the Medical
20 Practice Act of 1985.

21 (b) For a period of two years following the effective date
22 of this subsection, an individual shall be eligible to apply for
23 licensure without examination if the individual meets the
24 qualifications for licensure under section 10.2 and holds valid
25 certification as a respiratory care practitioner as issued by
26 the board or the State Board of Medicine.

27 (c) The board is authorized to promulgate regulations to
28 implement this section.

29 (d) A respiratory [care practitioner certified] therapist
30 licensed by the board may implement direct respiratory care to

1 an individual being treated by either a licensed medical doctor
2 or a licensed doctor of osteopathic medicine upon physician
3 prescription or referral BY A PHYSICIAN, CERTIFIED REGISTERED ←
4 NURSE PRACTITIONER OR PHYSICIAN ASSISTANT or under medical
5 direction and approval consistent with standing orders or
6 protocols of an institution or health care facility. This care
7 may constitute indirect services, such as consultation or
8 evaluation of an individual, and also includes, but is not
9 limited to, the following services:

- 10 (1) Administration of medical gases.
- 11 (2) Humidity and aerosol therapy.
- 12 (3) Administration of aerosolized medications.
- 13 (4) Intermittent positive pressure breathing.
- 14 (5) Incentive spirometry.
- 15 (6) Bronchopulmonary hygiene.
- 16 (7) Management and maintenance of natural airways.
- 17 (8) Maintenance and insertion of artificial airways.
- 18 (9) Cardiopulmonary rehabilitation.
- 19 (10) Management and maintenance of mechanical
20 ventilation.
- 21 (11) Measurement of ventilatory flows, volumes and
22 pressures.
- 23 (12) Analysis of ventilatory gases and blood gases.

24 (e) This section shall not prevent or restrict the
25 practices, services or activities of:

- 26 (1) A person licensed or certified in this Commonwealth
27 to provide another health care service, including, but not
28 limited to, physicians, physical therapists, chiropractors,
29 nurses, dentists, physician assistants and podiatrists.
- 30 (2) A person rendering respiratory care services

1 pursuant to employment by a Federal agency.

2 (3) A person pursuing a course of study leading to a
3 degree or certificate in respiratory care in an accredited
4 educational program if he is clearly designated as a student
5 and provides care under supervision implemented through that
6 program.

7 (4) A person executing or conveying medical orders
8 pursuant to lawful delegation by a physician.

9 (5) A person who, pursuant to lawful delegation by a
10 physician, delivers, installs, monitors or maintains a device
11 which enables an individual to self-administer respiratory
12 care.

13 (6) A person qualified by academic and clinical
14 education to operate extracorporeal circulation equipment in
15 a medical or surgical setting which requires support to or
16 the temporary replacement of a patient's circulatory or
17 respiratory functions.

18 (f) Information or allegations filed with the board against
19 a respiratory [care practitioner certified] therapist licensed
20 by the State Board of Medicine shall be referred to that board
21 for appropriate action.

22 Section 4 6. Section 10.2 of the act, amended or added July <—
23 2, 1993 (P.L.418, No.59) and July 2, 2004 (P.L.486, No.56), is
24 amended to read:

25 Section 10.2. Respiratory [care practitioner certificates]
26 therapist licenses and permits.

27 (a) A respiratory [care practitioner certificate] therapist
28 license issued by the board empowers the holder to practice
29 respiratory care under the supervision of a licensed medical
30 doctor or a licensed doctor of osteopathic medicine. In a health

1 care facility, that supervision may consist of standing orders
2 or protocols approved by the institution consistent with
3 acceptable and prevailing medical standards which may include
4 services rendered directly to the patient in his home or other
5 residence.

6 (b) The board shall issue temporary permits for the practice
7 of respiratory care to individuals who have applied for
8 [certification] licensure from the board and who meet any of the
9 following requirements:

10 (1) Graduation from an accredited respiratory care
11 training program recognized by the board.

12 (2) Enrollment in an accredited respiratory care
13 training program recognized by the board if the individual is
14 expected to graduate within 30 days from the date of
15 application.

16 (3) [Designation as a "Certified Respiratory Therapist"
17 or a "Registered Respiratory Therapist" by a nationally
18 recognized credentialing agency approved by the board.

19 (4) Continuous provision of respiratory care services
20 for a minimum of 12 months immediately preceding the
21 effective date of this section.

22 (5) Holding certification, licensure or registration as
23 a respiratory care practitioner issued by another state, the
24 District of Columbia or a territory of the United States
25 where the requirements for licensure, registration or
26 certification are substantially similar to those required by
27 the board.] Recognition as a credentialed respiratory
28 therapist as approved by the board.

29 (c) Temporary permits shall be valid for 12 months and for
30 such additional period as the board may, in each case, specially

1 determine, except that a temporary permit shall expire if the
2 holder fails the examination. An appropriate fee for a temporary
3 permit shall be established by the board by regulation. If [he]
4 the temporary permit holder is not in violation of any other
5 provision of this act, a holder of a temporary permit qualifies
6 for admission to the examination and shall apply for the next
7 regularly scheduled [certification] licensure examination
8 administered by the board. The board is authorized to promulgate
9 regulations to establish procedures for application, credentials
10 verification, examination and [certification] licensure,
11 together with appropriate fees.

12 (d) Pursuant to section 812.1 of the act of April 9, 1929
13 (P.L.177, No.175), known as The Administrative Code of 1929, the
14 board shall contract for the development and administration of
15 an examination for the [certification] licensure of respiratory
16 [care practitioners] therapists. [At least one administration of
17 this examination shall be given within 12 months of the
18 effective date of this section, and the] The examination shall
19 [thereafter] be given at least twice per year. [An individual
20 qualifying for a temporary permit under subsection (b)(5) shall
21 be issued a certificate by the board without examination. An
22 individual qualifying for a temporary permit under subsection
23 (b)(3) shall be issued a certificate by the board without
24 examination if the individual passed an examination in order to
25 obtain designation as a "Certified Respiratory Therapy
26 Technician" or a "Registered Respiratory Therapist" and that
27 examination was comparable to the examination developed and
28 administered pursuant to this subsection.]

29 (e) A respiratory [care practitioner certificate] therapist
30 license shall be renewed biennially upon application on a form

1 prescribed by the board and upon payment of a renewal fee
2 adopted by the board by regulation.

3 (f) (1) The board shall adopt, promulgate and enforce rules
4 and regulations consistent with the provisions of this act
5 establishing requirements of continuing education to be met
6 by individuals holding [certification] licensure as
7 respiratory [care practitioners] therapists under this act as
8 a condition for [certificate] biennial license renewal. The
9 regulations shall include any fees necessary for the board to
10 carry out its responsibilities under this section.

11 (2) Beginning with the first biennial license renewal
12 period [designated by regulation, certificate] following
13 promulgation of regulations, license holders shall be
14 required to attend and complete [20] 30 hours of mandatory
15 continuing education during each two-year [certificate]
16 licensure period. At least one credit hour shall be in
17 ethics, and one credit hour shall be in patient safety.

18 (3) An individual applying for the first time for
19 [certification] licensure in this Commonwealth shall be
20 exempted from the continuing education requirement for the
21 biennial renewal period [following initial certification] in
22 which licensure is obtained.

23 (4) [The board may waive all or a portion of the
24 continuing education requirement for biennial renewal for a
25 certificate holder who shows to the satisfaction of the board
26 that the individual was unable to complete the requirements
27 due to serious illness, military service or other
28 demonstrated hardship. The request shall be made in writing,
29 with appropriate documentation, and shall include a
30 description of circumstances sufficient to show why the

1 certificate holder is unable to comply with the continuing
2 education requirement. Waiver requests shall be evaluated by
3 the board on a case-by-case basis. The board shall send the
4 certificate holder written notification of its approval or
5 denial of a waiver request.] The board shall, by regulation,
6 provide for the waiver of continuing education requirements
7 in case of illness, hardship and armed service duties. A
8 request for waiver shall be evaluated on a case-by-case
9 basis.

10 (5) A [certificate holder] licensee seeking to reinstate
11 an inactive or lapsed [certificate] license shall show proof
12 of compliance with the continuing education requirement for
13 the preceding biennium.

14 (6) All courses, locations, instructors and providers
15 shall be approved by the board. No credit shall be given for
16 any course in office management or practice building.

17 [(7) The board shall initiate the promulgation of
18 regulations to carry out the provisions of this section
19 within one year of the effective date of this subsection.]

20 Section ~~5~~ 7. Section 15(b) of the act, amended July 2, 2004 ←
21 (P.L.486, No.56), is amended to read:

22 Section 15. Reasons for refusal, revocation or suspension of
23 license.

24 * * *

25 (b) The board shall have authority to refuse, revoke or
26 suspend the license of a physician assistant or respiratory
27 therapist, or the certification of a [respiratory care
28 practitioner or] certified athletic trainer for any or all of
29 the following reasons:

30 (1) Failing to demonstrate the qualification for

1 licensure or certification contained in this act or
2 regulations of the board.

3 (2) Making misleading, deceptive, untrue or fraudulent
4 representations in his serving as a physician assistant;
5 practicing fraud or deceit in obtaining a license to serve as
6 a physician assistant; or making a false or deceptive
7 biennial registration with the board.

8 (3) Conviction of a felony in this Commonwealth or any
9 other state, territory or country. Conviction as used in this
10 paragraph shall include a finding or verdict of guilt, an
11 admission of guilt or a plea of nolo contendere, or receiving
12 probation without verdict, disposition in lieu of trial, or
13 an Accelerated Rehabilitative Disposition in the disposition
14 of felony charges.

15 (4) Having his license to serve as a physician assistant
16 revoked or suspended or having other disciplinary action
17 taken, or his application for licensure refused, revoked or
18 suspended by the proper certifying authority of another
19 state, territory or country.

20 (5) Being unable to serve as a physician assistant with
21 reasonable skill and safety to the physician's patients by
22 reason of illness, drunkenness, excessive use of drugs,
23 narcotics, chemicals, or any other type of material, or as a
24 result of any mental or physical condition.

25 (6) In enforcing paragraph (5), the board shall, upon
26 probable cause, have authority to compel a physician
27 assistant to submit to a mental or physical examination by
28 physicians designated by it. Failure of a physician assistant
29 to submit to such examination shall constitute an admission
30 of the allegations against him unless the failure is due to

1 circumstances beyond his control, consequent upon which a
2 default and final order may be entered without the taking of
3 testimony or presentation of evidence. A physician assistant
4 affected under this paragraph shall at reasonable intervals
5 be afforded an opportunity to demonstrate that he can resume
6 the competent assistance of a physician in the physician's
7 practice of medicine, with reasonable skill and safety to the
8 physician's patients.

9 (7) Violating a lawful regulation promulgated by the
10 board or violating a lawful order of the board, previously
11 entered by the board in a disciplinary proceeding.

12 (8) Knowingly rendering medical care and services except
13 under the supervision and direction of the supervising
14 physician.

15 (9) Being guilty of immoral or unprofessional conduct
16 shall include any departure from, or the failure to conform
17 to, the standards of acceptable and prevailing practice for
18 physician assistants, in which proceeding actual injury to a
19 patient need not be established.

20 * * *

21 Section ~~6-~~ 8. (A) The State Board of Osteopathic Medicine <—
22 and the State Board of Medicine shall jointly promulgate
23 regulations to implement the amendment of sections 2, 2.1(a),
24 10.1, 10.2 and 15(b) of the act within 18 months of the
25 effective date of this section.

26 (B) THE STATE BOARD OF OSTEOPATHIC MEDICINE, THE DEPARTMENT <—
27 OF PUBLIC WELFARE AND THE DEPARTMENT OF HEALTH SHALL PROMULGATE
28 REGULATIONS TO IMPLEMENT THE ADDITION OF SECTION 10(G.2) OF THE
29 ACT WITHIN 18 MONTHS OF THE EFFECTIVE DATE OF THIS SECTION.

30 SECTION 9. THE FOLLOWING ACTS ARE REPEALED INSOFAR AS THEY

1 ARE INCONSISTENT WITH THE ADDITION OF SECTION 10(G.2) OF THE
2 ACT:

3 (1) SECTION 9(A) OF THE ACT OF OCTOBER 10, 1975
4 (P.L.383, NO.110), KNOWN AS THE PHYSICAL THERAPY PRACTICE
5 ACT.

6 (2) SECTION 14 OF THE ACT OF JUNE 15, 1982 (P.L.502,
7 NO.140), KNOWN AS THE OCCUPATIONAL THERAPY PRACTICE ACT.

8 Section ~~7~~ 10. This act shall take effect as follows: <—

9 (1) This section shall take effect immediately.

10 (2) Section ~~6~~ 8 of this act shall take effect <—
11 immediately.

12 (3) The remainder of this act shall take effect in 60
13 days.