
THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILL

No. 397 Session of
2021

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

REFERRED TO CONSUMER PROTECTION AND PROFESSIONAL LICENSURE,
MARCH 11, 2021

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 State Board
6 of Osteopathic Medicine and for licenses, exemptions,
7 nonresident practitioners, graduate students, biennial
8 registration and continuing medical education.

9 The General Assembly of the Commonwealth of Pennsylvania
10 hereby enacts as follows:

11 Section 1. The definition of "physician assistant" in
12 section 2 of the act of October 5, 1978 (P.L.1109, No.261),
13 known as the Osteopathic Medical Practice Act, is amended to
14 read:

15 Section 2. Definitions.

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

19 * * *

20 "Physician assistant." [A person licensed by the board to

1 assist a physician or group of physicians in the provision of
2 medical care and services and under the supervision and
3 direction of the physician or group of physicians.] An
4 individual who is licensed as a physician assistant by the
5 board.

6 * * *

7 Section 2. Section 2.1(a) of the act is amended to read:

8 Section 2.1. State Board of Osteopathic Medicine.

9 (a) The State Board of Osteopathic Medicine shall consist of
10 the Commissioner of Professional and Occupational Affairs or his
11 designee; the Secretary of Health or his designee; two members
12 appointed by the Governor who shall be persons representing the
13 public at large; one member appointed by the Governor who is a
14 physician assistant; one member appointed by the Governor who
15 shall be a respiratory therapist, a perfusionist[, a physician
16 assistant] or a licensed athletic trainer; and six members
17 appointed by the Governor who shall be graduates of a legally
18 incorporated and reputable college of osteopathic medicine and
19 shall have been licensed to practice osteopathic medicine under
20 the laws of this Commonwealth and shall have been engaged in the
21 practice of osteopathy in this Commonwealth for a period of at
22 least five years. All professional and public members of the
23 board shall be appointed by the Governor with the advice and
24 consent of a majority of the members elected to the Senate. The
25 Governor shall assure that respiratory therapists,
26 perfusionists[, physician assistants] and certified athletic
27 trainers are appointed to four-year terms on a rotating basis.

28 * * *

29 Section 3. Section 10(g) and (j.1) of the act, amended July
30 2, 2019 (P.L.415, No.69), are amended and the section is amended

1 by adding a subsection to read:

2 Section 10. Licenses; exemptions; nonresident practitioners;
3 graduate students; biennial registration and
4 continuing medical education.

5 * * *

6 (g) The supervising physician shall file, or cause to be
7 filed, with the board [an application to utilize a physician
8 assistant including a written agreement containing a description
9 of] a written agreement that identifies the manner in which the
10 physician assistant will assist the supervising physician in his
11 practice[,] and the method and frequency of supervision. [,]
12 including, but not limited to, the number and frequency of the
13 patient record reviews required by subsection (j.1) and the
14 criteria for selecting patient records for review when 100%
15 review is not required, and the geographic location of the
16 physician assistant. The written agreement and description may
17 be prepared and submitted by the primary supervising physician,
18 the physician assistant or a delegate of the primary supervising
19 physician and the physician assistant. It shall not be a defense
20 in any administrative or civil action that the physician
21 assistant acted outside the scope of the board-approved
22 description or that the supervising physician utilized the
23 physician assistant outside the scope of the board-approved
24 description because the supervising physician or physician
25 assistant permitted another person to represent to the board
26 that the description had been approved by the supervising
27 physician or physician assistant. Upon submission of the
28 application, board staff shall review the application only for
29 completeness and shall issue a letter to the supervising
30 physician providing the temporary authorization for the

1 physician assistant to begin practice. If the application is not
2 complete, including, but not limited to, required information or
3 signatures not being provided or the fee not being submitted, a
4 temporary authorization for the physician assistant to begin
5 practicing shall not be issued. The temporary authorization,
6 when issued, shall provide a period of 120 days during which the
7 physician assistant may practice under the terms set forth in
8 the written agreement as submitted to the board. Within 120 days
9 the board shall notify the supervising physician of the final
10 approval or disapproval of the application. If approved, a final
11 approval of the written agreement shall be issued to the
12 supervising physician. If there are discrepancies that have not
13 been corrected within the 120-day period, the temporary
14 authorization to practice shall expire. There shall be no more
15 than four physician assistants for whom a physician has
16 responsibility or supervises pursuant to a written agreement at
17 any time. In health care facilities licensed under the act of
18 act of July 19, 1979 (P.L.130, No.48), known as the "Health Care
19 Facilities Act," a physician assistant shall be under the
20 supervision and direction of a physician or physician group
21 pursuant to a written agreement, provided that a physician
22 supervises no more than four physician assistants at any time. A
23 physician may apply for a waiver to employ or supervise more
24 than four physician assistants at any time under this section
25 for good cause, as determined by the board. In cases where a
26 group of physicians will supervise a physician assistant, the
27 names of all supervisory physicians shall be included on the
28 application.] The supervising physician shall determine the
29 number of physician assistants supervised at any one time. The
30 supervising physician shall be responsible for the medical

1 services that a physician assistant renders. Supervision shall
2 not require the onsite presence or the personal direction of the
3 supervising physician.

4 * * *

5 (g.4) A physician assistant shall provide medical services
6 according to a written agreement which provides for all of the
7 following:

8 (1) Identifies and is signed by the primary supervising
9 physician.

10 (2) Describes the physician assistant's scope of
11 practice.

12 (3) Describes the nature and degree of supervision the
13 supervising physician will provide the physician assistant.

14 (4) Designates one physician as having the primary
15 responsibility for supervising the physician assistant.

16 (5) Is maintained by the supervising physician at the
17 practice or health care facility and available to the board
18 upon request. The written agreement shall be supplied to the
19 board within 30 days of the request. A physician assistant
20 shall provide medical services in a manner as described in
21 the agreement.

22 * * *

23 [(j.1) (1) The approved physician shall countersign 100% of
24 the patient records completed by the physician assistant
25 within a reasonable time, which shall not exceed ten days,
26 during each of the following time periods:

27 (i) The first 12 months of the physician assistant's
28 practice post graduation and after the physician
29 assistant has fulfilled the criteria for licensure set
30 forth in subsection (f).

1 (ii) The first 12 months of the physician
2 assistant's practice in a new specialty in which the
3 physician assistant is practicing.

4 (iii) The first six months of the physician
5 assistant's practice in the same specialty under the
6 supervision of the approved physician, unless the
7 physician assistant has multiple approved physicians and
8 practiced under the supervision of at least one of those
9 approved physicians for six months.

10 (2) In the case of a physician assistant who is not
11 subject to 100% review of the physician assistant's patient
12 records pursuant to paragraph (1), the approved physician
13 shall personally review on a regular basis a selected number
14 of the patient records completed by the physician assistant.
15 The approved physician shall select patient records for
16 review on the basis of written criteria established by the
17 approved physician and the physician assistant. The number of
18 patient records reviewed shall be sufficient to assure
19 adequate review of the physician assistant's scope of
20 practice.]

21 * * *

22 Section 4. The State Board of Medicine shall promulgate
23 rules and regulations necessary to carry out this act within 180
24 days of the effective date of this section.

25 Section 5. This act shall take effect in 60 days.