
THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 1998 Session of
2020

INTRODUCED BY SONNEY, BARRAR, BERNSTINE, DeLUCA, DIAMOND, FRITZ,
HARKINS, HARRIS, IRVIN, JOZWIAK, M. K. KELLER, MASSER,
METCALFE, PICKETT, PYLE, QUINN, SANKEY, TOPPER, WARNER AND
WHEELAND, JANUARY 17, 2020

REFERRED TO COMMITTEE ON PROFESSIONAL LICENSURE,
JANUARY 17, 2020

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 * * *

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

7 * * *

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

9 Section 2.1. State Board of Osteopathic Medicine.

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

29 * * *

30 Section 3. Section 10(g) and (j.1) of the act, amended July

1 2, 2019 (P.L.415, No.69), are amended and the section is amended
2 by adding a subsection to read:

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

6 * * *

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

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

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

5 * * *

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

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

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

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

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

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

23 * * *

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

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

1 forth in subsection (f).

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

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

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

22 * * *

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

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