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Independent Regulatory
Review Commission

 From:
 Dustin Yothers

 To:
 ST, RegulatoryCounsel

 Subject:
 [External] 16-4955

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I am writing in support of the Proposed Rulemaking 16-4955 in reference to Physician Assistants as written. The changes in these regulations will modernize the delivery of patient care by the Physician – PA teams in Pennsylvania.

For your reference, the following list is the significant proposed new revisions.

TITLE 59 PART 1 Subpart 1 CHAPTER 18	PROPOSED NEW REVISIONS
Section 18.122 Definitions	Addition of definition of scope of practice for a PA: The medical services within a physician assistant's skills, training, and experience that a physician assistant may perform as set forth in the written agreement.
Section 18.142 Written agreements	<ul> <li>No longer need to name each substitute physician the PA would work with.</li> <li>No longer need to list all delegated functions the PA can perform. The new requirement is to describe the PA's scope of practice.</li> <li>No longer need to describe the frequency of the personal contact the physician will have with the PA. The new requirement is to describe the nature and degree of supervision.</li> </ul>

	<ul> <li>Additional language added to outline the ability for a delegate to complete the written agreement.</li> <li>Requires only one primary practice setting be listed.</li> </ul>
Section 18.144 Responsibility of primary supervising physician	<ul> <li>The physician is no longer required to see a hospitalized patient at least once.</li> <li>Clarifies the list of additional substitute supervising physicians. It only needs to be kept at the practice level.</li> </ul>
Section 18.151 Role of the physician assistant	<ul> <li>Outlines that PAs may provide medical services when they are within the PA's scope of practice.</li> <li>Clarifies the PA may determine the cause of death.</li> </ul>
Section 18.152 Prohibitions	<ul> <li>The PA is now permitted to independently bill.</li> <li>Provides an option for the supervising physician to apply to primarily supervise more than 6 PAs.</li> </ul>
Section 18.153 Executing and relaying medical regimens	The PA is no longer required to notify their supervising physician within 36 hours when a medical regimen is executed or relayed when the physician is off-site.
Section 18.154 Substitute supervising physician	Adds a provision for the substitute supervising physician to assume primary responsibility for 30 days if the primary is permanently unable to supervise while a new written agreement is being filed.
Section 18.155 Satellite locations	The registration of a satellite location is no longer required. This section has been completely removed.
Section 18.158 Prescribing and dispensing drugs, pharmaceutical aids,	<ul> <li>Clarified that electronic prescriptions are permitted.</li> <li>Removes requirement for the PA to notify the</li> </ul>

and devices	supervising physician when a medication is prescribed or dispensed within 36 hours if the physician is off-site.
Section 18.161 Physician assistants employed by health care facilities	Restriction removed that a PA could only be responsible to three supervising physicians in a medical care facility

The full explanation for the revisions as well as the revised language can be found at this link:

## Pennsylvania Bulletin (pacodeandbulletin.gov)

The wording in the revised language that is between brackets [] is removed. New language that is added is **underlined and bolded**.

If you have questions about the proposed rulemaking, please reach out to the PSPA Governmental Affairs Committee at <a href="mailto:pspa@pspa.net">pspa@pspa.net</a>.

Dustin Yothers, PA-C