



**From:** [Ramon Torres](#)  
**To:** [ST\\_RegulatoryCounsel](#)  
**Subject:** [External] Physician Assistant Revision in Pennsylvania  
**Date:** Monday, January 15, 2024 8:05:38 AM

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Dear Sir/Madam

Board Counsel Dana Wucinski  
State Board of Medicine  
P.O. Box 69523  
Harrisburg, PA 17106-5923

***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***

***Thank You,***

***Ramon Torres, PA-C***

***Physician Assistant***

***Easton, PA***

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	<ul style="list-style-type: none"> <li>• No longer need to name each substitute</li> </ul>

<p>agreements</p>	<p>physician the PA would work with.</p> <ul style="list-style-type: none"> <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> <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>
<p>Section 18.144 Responsibility of primary supervising physician</p>	<ul style="list-style-type: none"> <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>
<p>Section 18.151 Role of the physician assistant</p>	<ul style="list-style-type: none"> <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>
<p>Section 18.152 Prohibitions</p>	<ul style="list-style-type: none"> <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>
<p>Section 18.153 Executing and relaying medical regimens</p>	<p>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.</p>

<p>Section 18.154 Substitute supervising physician</p>	<p>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.</p>
<p>Section 18.155 Satellite locations</p>	<p>The registration of a satellite location is no longer required. This section has been completely removed.</p>
<p>Section 18.158 Prescribing and dispensing drugs, pharmaceutical aids, and devices</p>	<ul style="list-style-type: none"> <li>• Clarified that electronic prescriptions are permitted.</li> <li>• Removes requirement for the PA to notify the supervising physician when a medication is prescribed or dispensed within 36 hours if the physician is off-site.</li> </ul>
<p>Section 18.161 Physician assistants employed by health care facilities</p>	<p>Restriction removed that a PA could only be responsible to three supervisin</p>