

State Board of Medicine Regulations Question & Answer

By: Mark DeSantis, PA-C

Question

1. How are PAs regulated in Pennsylvania?

Answer

PAs are regulated by two Boards. The Allopathic Board and the Osteopathic Board

Question

2. How are the regulations from the Allopathic Board different from the Osteopathic Board?

Answer

The State Board of Medicine regulates physician assistants supervised by a MD. The State Board of Osteopathic Medicine regulates physician assistant supervised by a DO. There are several differences between the regulations, most importantly that there presently is no delegated prescriptive authority under Osteopathic regulations.

Question

3. Which is being addressed today?

Answer

We will be specifically addressing the new allopathic regulation revisions adopted in November 2006.

Question

4. Can you give a brief history leading to these regulation changes?

Answer

In 1993, allopathic physicians were given delegated prescriptive authority to allow their physician assistants to prescribe should they so desire. The language in those regulations contained barriers that made it difficult for the physician/PA team to practice effectively. Several of the key problems were the inability to prescribe sympathomimetic drugs such as albuterol and medications that contained Sudafed. There were also restrictions on the number of times a PA could see a patient before the supervising physician needed to evaluate that patient. This was known as the every third visit/ once a year rule. We were also unable to order blood products and anticoagulants and pronounce death. These were all problems that were identified early on, but we had to accept at the time in order to be able to obtain prescriptive privileges. We began talking with both the Pennsylvania Medical Society and the Pennsylvania Medical Board about introducing new language into the regulatory process. It took approximately 5 years to complete, but the process strengthened our relationship and credibility with the Medical Board and the Pennsylvania Medical Society.

Question

5. What is the difference between the Medical Practice Act and the State Board of Medicine regulations?

Answer

The Medical Practice Act sets the official laws for all medical practitioners in the state. Physician assistants are included in the Act under Chapter 18 the regulations are what implement the laws of the Act. In other words, it outlines the rules for practice and how they are to be followed. Regulatory language cannot supersede anything in the Act.

Question

6. What is the largest change in the regulations?

Answer

It would have to be section 18.158. That section lists the rules for prescribing. We are now going to a negative formulary. Before we needed to list the categories of medications that we wished to prescribe from. Now we will only list what we will not be prescribing. All categories are from the American Hospital Formulary. The easiest way to come up with that list would be to look at your specialty and list things that wouldn't be used. For example, neurosurgical PAs wouldn't likely be prescribing infant vaccines. It also now allows us to prescribe sympathomimetic drugs including albuterol inhalers and Sudafed. We can also prescribe gout medications along with fluoride and immunotherapy medications such as flu vaccines. There has been expansion of narcotics to include schedule II's up to an initial 72 hours of therapy and up to a 30 day supply for ongoing therapy if approved by the supervising physician. The physician assistant must notify his supervisor of initiating a schedule II prescription within 24 hours. The prescription must state on it whether it is initial vs. ongoing therapy. Examples of schedule II narcotics are oxycontin, morphine, fentanyl to name a few. You will need to revise your DEA registration to add schedule II's. That form can be found online and printed down to be mailed in to the DEA. You cannot do this process online. A Physician Assistant writing for schedule III-IV is already required to have a DEA number.

Question

7. How has the scope of practice for the physician assistant changed?

Answer

The role of the physician assistant has been simplified. The long laundry list of duties has been replaced with a comprehensive definition instead that reads:

The physician assistant may provide any medical service as directed by the supervising physician when the service is within the physician assistant's skills, training and experience, forms a component of the physician's scope of practice, is included in the written agreement and is provided with the amount of supervision in keeping with the accepted standards of medical practice.

Question

8. Were there any changes in regards to the every third visit rule?

Answer

It has been eliminated. The new language now reads that the physician will:

“Review directly with the patient the progress of the patient's care as needed based upon the patient's medical condition and prognosis or as requested by the patient.”

Question

9. Are there any prohibitions listed in the regulations?

Answer

PAs may not practice independently or independently advertise their services. A Physician Assistant cannot perform a medical service without the supervision of a supervising physician.

Question

10. Do you still need to notify a physician of prescribing medical regimens (defined as a therapeutic, corrective or diagnostic measure performed or ordered by a physician assistant) if the supervising physician is not in the office?

Answer

Yes, but you now have 36 hours instead of 12 hours to notify your supervising physician.

Question

11. What changes occurred in the satellite clinic setting?

Answer

Supervision and countersignature changes were modified to remove barriers. The regulations now say that the supervising physician shall review directly with the patient the progress of the patient's care as needed based upon the patient's medical condition and prognosis or as requested by the patient. The supervising physician will visit the satellite location at least once every 10 days and devote enough time onsite to provide supervision and personally review the records of selected patients seen by the physician assistant in this setting. The supervising physician shall notate those patient records as reviewed.

Question

12. Can a PA now order blood and blood products?

Answer

Yes. Blood and blood products can now be ordered and administered. We are also permitted to manage anticoagulant therapy.

Question

13. Have there been any changes to countersignature?

Answer

Countersignature has gone from every three days to a time frame not to exceed 10 days in both the office and satellite locations. Hospitals continue to have the ability to restrict this time frame as they deem appropriate. In satellite clinics, only "selected" charts will need countersignature.

Question

14. What has changed about hospital use of PAs?

Answer

A physician still must see the patient at least once during their admission. The PA still must be credentialed by the hospital. Hospitals now have a bigger role in how they wish to utilize their physician assistants. We recommend that PAs review their hospitals' bylaws and compare it to AAPA's model hospital bylaws language recommendations. Then get involved on the hospitals bylaws committee to enact the necessary changes.

Question

15. Are there any changes in the emergency room?

Answer

Yes. Direct supervision is no longer needed in the emergency room.

Question

16. Do these new regulations address PAs being utilized in a state of emergency or in a disaster?

Answer

Yes. PAs are now permitted to participate in disaster relief/management in or out of Pennsylvania. Your supervising physician need not be present in order to administer medical treatments in a disaster. PAs from any state, as long as they are licensed in that state are eligible to participate in disasters in Pennsylvania as well.

Question

17. What notification must be posted where a physician assistant is utilized?

Answer

A notice defining the role of the physician assistant, the physician assistant's license and the supervisor's registration to supervise.

Question

18. Can PAs sign for samples?

Answer

Yes. PAs are now able to sign for drug samples.

Question

19. Can PAs sign forms?

Answer

Yes. PAs are now able to authenticate with their signature any form that a physician may authenticate as long as not restricted by federal or state law.

Question

20. Can a Physician Assistant now pronounce someone dead?

Answer

Yes. A PA may now pronounce death, but not the cause of death, and may sign any form related to pronouncing death.

Question

21. How many Physician Assistants can a primary supervisor oversee in an office and hospital?

Answer

A primary supervisor may supervise four PAs in an office or hospital.

Question

22. How did the PSPA work to change these ratios?

Answer

The PSPA changed these ratios by getting legislation approved by the Pennsylvania state legislature. These ratios were originally in the Medical Practice Act, so they can not be changed through the regulation process.

Question

23. Does the State Board of Medicine still need to approve a supervising physician's written agreement? Or can it just be filed with the board?

Answer

At the present time, the State Board of Medicine still needs to approve a supervising physician's application. This is required by Medical Practice Act. The PSPA will also seek legislative relief for this as well, by changing the process to filing.

Question

24. What does a Physician Assistant have to do to expand their prescribing formulary or their scope of practice to include tasks that are part of the new regulations.?

Answer

The State Board of Medicine has a supervising physician change form on their website that needs to be completed. Go to the State Board of Medicine website. Click licensure information. Then click board forms

Question

25. Does the Physician Assistant need to wait to begin practicing until their primary supervising physician revised application is approved?

Answer

Yes. The physician will receive a letter of approval.

Question

26. Do all Physician Assistants; even if they do not want to change their prescribing formulary have to fill out a new written agreement with the State Board of Medicine?

Answer

No, new written agreement form is only required for someone who is taking a new job with a new supervisor.

Question

27. What information does the primary supervising physician need to provide for new written agreement?

Answer

A list of functions or task to be delegated to the PA, the time, place and manner of supervision and direction you will provide, list of locations where the PA will work, indicate if the PA will be prescribing or dispensing scheduled or unscheduled drugs, and a list of any categories will not be permitted to prescribe.

Question

28. What documents does a PA need to supply the State Board of Medicine to become initially licensed?

Answer

A verification of education from your PA school, original documents showing proof of certification, letters of good standing from any other states the PA has been licensed in, and a curriculum vitae.

Question

29. Are there specific education requirements to become licensed as a physician assistant?

Answer

The physician assistant must graduate from an accredited PA program. They must obtain a baccalaureate or higher degree from a college or university and must complete not less than 60 clock hours of didactic instruction in pharmacology or other related courses.

Question

30. Can a Physician Assistant work as a new graduate before becoming certified under the allopathic board?

Answer

Yes. A new graduate may apply for a temporary license. As a new graduate, they can not prescribe and their supervising physician must always be on site. The new graduate must take the first available NCCPA examination after graduation from the physician assistant program. Temporary permits will expire within 12 months of being issued or upon failure of the NCCPA exam, which ever occurs first. The physician assistant is responsible for contacting the NCCPA to request original test scores be sent to the State Board of Medicine. When the board receives your passing exam scores, your temporary permit will automatically be transferred to a license.

Question

31. If a Physician Assistant has an MD as a primary supervisor and a DO as a substitute, what board does the Physician Assistant need to register with?

Answer

The PA only needs to register with the board of the primary supervisor, in this case the State Board of Medicine. During the time the DO is actively supervising the physician assistant, the PA will not be permitted to prescribe or dispense medications.

Question

32. How can a Physician Assistant contact the State Board of Medicine?

Answer

State Board of Medicine
PO Box 2649
Harrisburg, PA 17105

Or

State Board of Medicine
2601 North Third Street
Harrisburg, PA 17110
(717) 787-2381

www.dos.state.pa.us/med

email: st_medicine@state.pa.us

Question

33. How can a Physician Assistant contact the DEA and do they have a website to download or print the needed forms?

Answer

DEA Philadelphia Office
600 Arch Street
Philadelphia, PA 19106
phone: (215) 597-9536
fax: (215) 597-0106

www.deadiversion.usdoj.gov