Unprecedented measure on PA oversight fails to reach floor

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What’s the news: A state measure to give physician assistants (PAs) unprecedented ability to practice independent of physician supervision has failed to progress beyond its committee of jurisdiction.

South Dakota House Bill 1163 would allow PAs to diagnose and treat patients and prescribe substances without any physician involvement. The bill would replace physician supervision with a weakened definition of collaboration with a doctor or another physician assistant, only requiring for PAs with less than 1,040 practice hours.

“These parameters are woefully inadequate to maintain patient safety and place South Dakota apart from any other state in the nation,” AMA Executive Vice President and CEO James L. Madara, MD, wrote in a letter to the chair of the South Dakota House’s Health and Human Services Committee.

Why it’s important: Had the bill become law, it would have made South Dakota unique. Forty states require physician supervision of PAs. Of the other 10 states, one requires a PAs to have a written practice agreement with a doctor. In the other nine states, PAs must collaborate with physicians, typically through a written agreement.

The 1,040-hour-collaboration requirement in the bill “translates to six months for a full-time position,” noted AMA President Susan R. Bailey, MD, in testimony before the South Dakota House committee. “After this time, physician assistants can practice medicine or surgery. Not only is this drastically less than the 10,000 hours physicians complete during their three-to-seven years of residency, but it is vastly different from any other state.”

Dr. Bailey noted that “only three states limit the collaboration to a specific length of time, all much longer than six months. And unlike HB 1163, these states require this collaboration with a physician—not another physician assistant.”

The South Dakota bill, she added, “moves health care in the wrong direction by removing physicians
from the care teams. And when you remove the most highly educated and trained health care professional from the care team—you put patients at risk.”

She cited research data showing that nurse practitioners and physician assistants in states with independent prescription authority for schedule II opioids were 20 times more likely to overprescribe opioids, compared with their counterparts in states that required physician involvement to prescribe.

**Learn more:** The South Dakota House Health and Human Services Committee voted 7–6 to move the bill’s consideration until the day after the legislative session ends, effectively killing it in committee.

Patients deserve care led by physicians—the most highly educated, trained and skilled health professionals. Through research, advocacy and education, the AMA vigorously defends the practice of medicine against scope-of-practice expansions that threaten patient safety.