

# STATE OF NEW YORK

7981

2025-2026 Regular Sessions

## IN SENATE

May 15, 2025

Introduced by Sen. RIVERA -- read twice and ordered printed, and when printed to be committed to the Committee on Higher Education

AN ACT to amend the education law and the public health law, in relation to the performance of medical services by physician assistants

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

1 Section 1. Subdivisions 1, 2, 3, 4 and 5 of section 6542 of the educa-  
2 tion law, as amended by chapter 520 of the laws of 2024, are amended and  
3 two new subdivisions 1-a and 9 are added to read as follows:

4 1. Notwithstanding any other provision of law, a physician assistant  
5 may perform medical services, but only when under the supervision of a  
6 physician and only when such acts and duties as are assigned to such  
7 physician assistant are within the scope of practice of such supervising  
8 physician unless otherwise permitted by this section.

9 1-a. A physician assistant may practice without the supervision of a  
10 physician under the following circumstances:

11 (a) Such physician assistant is employed by a health system or hospi-  
12 tal established under article twenty-eight of the public health law,  
13 such physician assistant meets the qualifications of the medical staff  
14 bylaws of and is credentialed by such health system or hospital, and  
15 such health system or hospital gives such physician assistant privi-  
16 leges; or

17 (b) Such physician assistant, licensed under section sixty-five  
18 hundred forty-one of this article:

19 (i) has practiced for more than six thousand hours;

20 (ii) is practicing in primary care, which for the purposes of this  
21 paragraph shall mean general pediatrics, general adult medicine, general  
22 geriatric medicine, general internal medicine, mental health services or  
23 psychiatry, obstetrics and gynecology, family medicine, emergency medi-  
24 cine, urgent care, or such other related areas as determined by the  
25 commissioner of health; and

EXPLANATION--Matter in italics (underscored) is new; matter in brackets  
[-] is old law to be omitted.

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1 (iii) is performing any of the following functions:

2 (1) taking patient histories;

3 (2) performing physical examinations;

4 (3) triaging patients based on recognition of abnormal vital signs,  
5 examination findings, and/or general observations;

6 (4) ordering, performing, reviewing and interpreting diagnostic,  
7 radiology, toxicology and laboratory tests and screenings;

8 (5) formulating diagnoses;

9 (6) administering clinical interventions with informed consent;

10 (7) referring patients to other professionals;

11 (8) counseling patients and family, guardians and caregivers on  
12 preventable conditions and lifestyle modifications, promoting early  
13 detection and prevention of medical conditions;

14 (9) identifying and reporting signs of abuse and neglect and/or traf-  
15 ficking;

16 (10) following best practice immunization standards for every patient  
17 population;

18 (11) managing end of life and palliative care in accordance with the  
19 patient's preferences and autonomy, including advanced directives;

20 (12) formulating and implementing treatment plans in accordance with  
21 applicable practice guidelines;

22 (13) recognizing and treating life-threatening conditions;

23 (14) providing virtual care via telehealth for patients, including  
24 conducting assessments and managing acute and chronic conditions remote-  
25 ly;

26 (15) providing remote monitoring and follow-up care, utilizing tech-  
27 nology to track patient outcomes, medication adherence, and ongoing  
28 management of health conditions;

29 (16) prescribing, administering and dispensing pharmacological or  
30 diagnostic therapies, including controlled substances, and monitoring  
31 and follow-up of pharmacologic regimens, including assessing patient  
32 adherence to prescribed drug regimens and adjusting treatments as neces-  
33 sary to ensure optimal outcomes; or

34 (17) such other functions as the commissioner of health may determine.

35 2. [~~Supervision~~] Where supervision is required by this section, it  
36 shall be continuous but shall not be construed as necessarily requiring  
37 the physical presence of the supervising physician at the time and place  
38 where such services are performed.

39 3. [~~No~~] Where supervision is required by this section, no physician  
40 shall employ or supervise more than six physician assistants in such  
41 physician's private practice at one time.

42 4. Nothing in this article shall prohibit a hospital from employing  
43 physician assistants, provided that they work under the supervision of a  
44 physician designated by the hospital and not beyond the scope of prac-  
45 tice of such physician, where such supervision is required by this  
46 section. The numerical limitation of subdivision three of this section  
47 shall not apply to services performed in a hospital.

48 5. Notwithstanding any other provision of this article, nothing shall  
49 prohibit a physician employed by or rendering services to the department  
50 of corrections and community supervision under contract from supervising  
51 no more than eight physician assistants in such physician's practice for  
52 the department of corrections and community supervision at one time,  
53 where such supervision is required by this section.

54 9. The commissioner and the commissioner of health are authorized to  
55 promulgate and update regulations pursuant to this section.

1 § 2. Subdivision 1 of section 3701 of the public health law, as  
2 amended by chapter 48 of the laws of 2012, is amended to read as  
3 follows:

4 1. to promulgate regulations defining and restricting the duties  
5 [~~which may be assigned to~~] of physician assistants [~~by their supervising~~  
6 ~~physician, the degree of supervision required and the manner in which~~  
7 ~~such duties may be performed~~] consistent with section sixty-five hundred  
8 forty-two of the education law;

9 § 3. Section 3703 of the public health law, as amended by chapter 48  
10 of the laws of 2012, is amended to read as follows:

11 § 3703. Statutory construction. A physician assistant may perform any  
12 function in conjunction with a medical service lawfully performed by the  
13 physician assistant, in any health care setting, that a statute author-  
14 izes or directs a physician to perform and that is appropriate to the  
15 education, training and experience of the licensed physician assistant  
16 and within the ordinary practice of the supervising physician, as appli-  
17 cable pursuant to section sixty-five hundred forty-two of the education  
18 law. This section shall not be construed to increase or decrease the  
19 lawful scope of practice of a physician assistant under the education  
20 law.

21 § 4. Paragraph a of subdivision 2 of section 902 of the education law,  
22 as amended by chapter 376 of the laws of 2015, is amended to read as  
23 follows:

24 a. The board of education, and the trustee or board of trustees of  
25 each school district, shall employ, at a compensation to be agreed upon  
26 by the parties, a qualified physician, a physician assistant, or a nurse  
27 practitioner to the extent authorized by the nurse practice act and  
28 consistent with subdivision three of section six thousand nine hundred  
29 two of this chapter, to perform the duties of the director of school  
30 health services, including any duties conferred on the school physician  
31 or school medical inspector under any provision of law, to perform and  
32 coordinate the provision of health services in the public schools and to  
33 provide health appraisals of students attending the public schools in  
34 the city or district. The physicians, physician assistants, or nurse  
35 practitioners so employed shall be duly licensed pursuant to applicable  
36 law.

37 § 5. This act shall take effect on the one hundred twentieth day after  
38 it shall have become a law.