

311.854 Approval of supervising physician -- Requirements -- Supervision agreement -- Alternative filing method -- Alternate supervising physicians -- Number of assistants -- Restrictions on practice and supervision -- Administrative regulations.

- (1) A physician shall not supervise a physician assistant without approval of the board. Failure to obtain board approval as a supervising physician or failure to comply with the requirements of KRS 311.840 to 311.862 or related administrative regulations shall be considered unprofessional conduct and shall be subject to disciplinary action by the board that may include revocation, suspension, restriction, or placing on probation the supervising physician's right to supervise a physician assistant.
- (2) To be approved by the board as a supervising physician, a physician shall:
 - (a) Be currently licensed and in good standing with the board;
 - (b) Maintain a practice primarily within this Commonwealth. The board in its discretion may modify or waive this requirement;
 - (c) Submit a completed application and the required fee to the board. The application shall include but is not limited to:
 1. A description of the nature of the physician's practice; and
 2. A statement of assurance by the supervising physician that the scope of medical services and procedures of the physician assistant shall not exceed the normal scope of practice of the supervising physician.
- (3) A physician assistant shall not render any medical service or procedure unless the required supervision agreement is completed and signed by the supervising physician and physician assistant, and in effect. The supervision agreement shall include but is not limited to:
 - (a) The scope of medical services and procedures approved by the supervising physician to be performed by the physician assistant;
 - (b) The level and method of supervision to be provided by the supervising physician;
 - (c) Any applicable requirements for review and countersignature of the physician assistant's medical notes, orders, or prescriptions;
 - (d) Procedures governing communications and clinical decision-making between the supervising physician and the physician assistant;
 - (e) The primary practice location and any additional sites where the physician assistant is authorized to provide services; and
 - (f) Any alternate physician supervision arrangements authorized under KRS 311.840 to 311.862.
- (4)
 - (a) The board shall develop and make available a standardized supervision agreement form to be used by supervising physicians and physician assistants.
 - (b) A copy of the completed and signed supervision agreement, and any subsequent amendments, shall be furnished to and maintained on file by the board and shall be maintained, in a readily accessible physical or electronic form, at the primary practice location where the physician assistant provides

patient care.

- (5) The supervision agreement may be amended at any time upon the mutual agreement of the supervising physician and physician assistant. All amendments shall be submitted to the board and maintained in accordance with this section.
- (6) A licensed health care facility utilizing alternate supervising physicians may satisfy the filing requirements of this section through an alternative filing method approved by the board. Compliance with a board-approved alternative filing method shall be deemed compliant with the filing and amendment requirements of this section.
- (7) A licensed health care facility may designate one (1) or more physicians to serve as alternate supervising physicians for the purpose of providing supervision to one (1) or more physician assistants when the primary supervising physician is unavailable. A health care facility's designation of alternate supervising physicians may be structured to allow for rotating, shift-based, or department-based supervision, provided that all supervising physicians:
 - (a) Are licensed and in good standing with the board;
 - (b) Have been designated in the applicable supervision agreement described in this section; and
 - (c) Fulfill the responsibilities of a supervising physician under this section and KRS 311.856.
- (8) A supervision agreement shall not be required to name an alternate supervising physician. Alternate supervising physician designations shall comply with administrative regulations promulgated by the board in accordance with KRS Chapter 13A and the supervision agreement.
- (9) A physician who has been supervising a physician assistant prior to July 15, 2002, may continue supervision and the physician assistant may continue to perform all medical services and procedures that were provided by the physician assistant prior to July 15, 2002. The supervising physician shall submit the initial application and any supplemental application as required in this section by October 15, 2002.
- (10) A physician may enter into supervision agreements with no more than four (4) physician assistants and shall not supervise more than four (4) physician assistants at any one (1) time. Application for board approval to be a supervising physician shall be obtained individually for each physician assistant.
- (11) The board shall promulgate administrative regulations in accordance with KRS Chapter 13A to implement and enforce this section, including:
 - (a) Procedures for the submission, review, modification, and renewal of supervision agreements; and
 - (b) Alternative filing methods for licensed health care facilities to utilize alternate supervising physicians.

Effective: July 15, 2026

History: Amended 2026 Ky. Acts ch. 94, sec. 4, effective July 15, 2026. -- Amended 2024 Ky. Acts ch. 30, sec. 3, effective July 15, 2024. -- Amended 2016 Ky. Acts ch. 88, sec. 1, effective July 15, 2016. -- Amended 2015 Ky. Acts ch. 123, sec. 1, effective June 24, 2015. -- Created 2002 Ky. Acts ch. 130, sec. 30, effective July 15, 2002.