

**SUPREME COURT OF PENNSYLVANIA
DOMESTIC RELATIONS PROCEDURAL RULES COMMITTEE**

PUBLICATION REPORT

The Domestic Relations Procedural Rules Committee (Committee) is proposing the amendment of the Pennsylvania Rule of Civil Procedure 1910.29. This rule pertains to evidence in support matters and provides a Physician Verification Form for use in providing information to the court on a party's medical condition.

23 Pa.C.S. § 4342 provides for expedited procedures for the determination and enforcement of support. 23 Pa.C.S. § 4342(f) creates a hearsay exception in support actions to permit statements contained in a verified petition, affidavit, document, or a document incorporated by reference in any of them, to be admitted into evidence, provided it would not otherwise be excluded as hearsay if the declarant testified in person, *i.e.*, hearsay within hearsay. Rule 1910.29 expands this exception to permit a Physician's Verification Form to be used for reporting a party's medical condition in lieu of the physician appearing as a witness and testifying. The rule requires that notice of the documents to be admitted be given to the other party prior to the hearing and it sets forth the procedures for raising an objection to the admission of those documents and any statements contained therein.

Initially, the Committee received correspondence requesting revisions to the Physician Verification Form. Concerns related to the current form include its failure to request a description of the limitations on employability and whether the condition affects a party's ability to work light duty, full-time, or part-time. Parties use the form in cases where an appropriate order is being established, as well as to defend against a contempt charge. Without the ability to assess the extent of the disability, the form may act as a shield to one party to be held to a reasonable earning capacity or found to have the ability to pay support.

To address these concerns, the Committee proposes that the form be revised to include the option to select "Fully Disabled," "Partially Disabled," "Able to Work Light Duty Full-Time," or "Able to Work Part-time," as well as the ability to indicate the number of hours per day the individual can work.

Concerns were also expressed about the requirement that the form be completed only by a physician. This concern is related to cost and limited access to physicians in some areas, particularly in rural areas. Accordingly, the Committee proposes that, in lieu of only allowing physicians to complete the form, "advanced practice providers," including nurse practitioners and physician assistants, should be permitted to complete the form. As a result, it is proposed that the term "physician" be replaced by the name "provider"

and the name of the form be revised to “Advanced Practice Provider Verification Form.” It is also proposed that “advanced practice provider” be defined in subdivision (c)(1).

Additional revisions were requested to make the form more “user-friendly” for practitioners and self-represented parties. The Committee proposes that the structure of the rule be revised stylistically to a bullet point format, for ease of reading. It is also proposed that the Explanatory Comment be renamed as a Comment and commentary reiterative of the rule text and statute be removed.

The Committee invites comments, concerns, and suggestions regarding this rulemaking proposal.