

ENROLLED SENATE
BILL NO. 334

By: Robinson, Muegge and Long
(Ed) of the Senate

and

Hamilton (Jeff) and Reese
of the House

An Act relating to professions and occupations; providing short title; defining terms; creating Physician Assistant Committee; providing for appointment of members, qualifications, terms of office, meetings, officers, representation on certain board and quorum; adding powers and duties to the State Board of Medical Licensure and Supervision; stating powers and duties of State Board of Medical Licensure and Supervision; stating eligibility for certification as physician assistant; providing for issuance of temporary certificates; prohibiting performance of certain health care services in certain circumstances; providing for application and approval procedures; requiring certain information clarifying extent of supervision required; authorizing physician assistant to provide health care services in certain settings under certain conditions; requiring supervising physician to provide methods of supervising physician assistants and delineating certain methods; requiring scheduling of certain patients with physician within certain time period; designating physician assistant as agent of physician and authorizing and prohibiting certain acts; requiring prior approval to practice in remote patient care setting, stating requirement for approval and providing for waiver of requirement; requiring posting of certain notice; providing for temporary approval to practice under certain conditions and providing for review, approval, extension and rejection of temporary approval; providing for annual renewal of certificate upon completion of certain continuing education requirements; authorizing certain fees; requiring certain persons be granted certificate as physician assistant; prohibiting certain actions; making certain actions unlawful; providing penalty; construing act; interpreting act; allowing hospitals to require certain personnel to meet and maintain certain qualifications for certain privileges; repealing 59 O.S. 1991, Sections 519, 520, 522 and 523, which relate to certification and services of physician assistants; providing for codification; and declaring an emergency.

BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

SECTION 1. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 519.1 of Title 59, unless there is created a duplication in numbering, reads as follows:

The provisions of this act shall be known and may be cited as the "Physician Assistant Act".

SECTION 2. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 519.2 of Title 59, unless there is created a duplication in numbering, reads as follows:

As used in this act:

1. "Board" means the State Board of Medical Licensure and Supervision;
2. "Committee" means the Physician Assistant Committee;
3. "Health care services" means services which require training in the diagnosis, treatment and prevention of disease, including the use and administration of drugs, and which are performed by physician assistants under the supervision and at the direction of physicians. Such services include:
 - a. initially approaching a patient of any age group in a patient care setting to elicit a detailed history, performing a physical examination, delineating problems and recording the data,
 - b. assisting the physician in conducting rounds in acute and long-term inpatient care settings, developing and implementing patient management plans, recording progress notes and assisting in the provision of continuity of care in other patient care settings,
 - c. ordering, performing or interpreting, at least to the point of recognizing deviations from the norm, common laboratory, radiological, cardiographic and other routine diagnostic procedures used to identify pathophysiologic processes,
 - d. ordering or performing routine procedures such as injections, immunizations, suturing and wound care, and managing simple conditions produced by infection, trauma or other disease processes,
 - e. assisting in the management of more complex illness and injuries, which may include assisting surgeons in the conduct of operations and taking initiative in performing evaluation and therapeutic procedures in response to life-threatening situations,
 - f. instructing and counseling patients regarding compliance with prescribed therapeutic regimens, normal growth and development, family planning, emotional problems of daily living and health maintenance, and
 - g. facilitating the referral of patients to the community's health and social service agencies when appropriate;
4. "Patient care setting" means a physician's office, clinic, hospital, nursing home, extended care facility or a patient's home;
5. "Physician assistant" means a health care professional, qualified by academic and clinical education and certified by the State Board of Medical Licensure and Supervision, to provide health care services in any patient care setting at the direction and under the supervision of a physician or group of physicians;

6. "Physician Assistant Drug Formulary" means a list of drugs and other medical supplies, approved by the State Board of Medical Licensure and Supervision after consultation with the State Board of Pharmacy, for which physician assistants are permitted to transmit written and oral prescriptions and order on behalf of their supervising physicians;

7. "Remote patient care setting" means an outpatient clinic or physician's office that qualifies as a Rural Health Clinic, Federally Qualified Health Center, other nonprofit community-based health center, or other patient care setting approved by the State Board of Medical Licensure and Supervision, and which provides service to a medically underserved population, as defined by the appropriate government agency;

8. "Supervising physician" means an individual holding a license as a physician from the State Board of Medical Licensure and Supervision or the State Board of Osteopathic Examiners, who supervises physician assistants; and

9. "Supervision" means overseeing and accepting the responsibility for the health care services performed by a physician assistant.

SECTION 3. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 519.3 of Title 59, unless there is created a duplication in numbering, reads as follows:

A. There is hereby created the Physician Assistant Committee, which shall be composed of seven (7) members. Two members of the Committee shall be physician assistants appointed by the State Board of Medical Licensure and Supervision from a list of qualified individuals submitted by the Oklahoma Academy of Physician Assistants. One member shall be a physician appointed by the Board from its membership. One member shall be a physician appointed by the Board from a list of qualified individuals submitted by the Oklahoma State Medical Association and who is not a member of the Board. One member shall be a physician appointed by the State Board of Osteopathic Examiners from its membership. One member shall be a physician appointed by the State Board of Osteopathic Examiners from a list of qualified individuals submitted by the Oklahoma Osteopathic Association and who is not a member of said board. One member shall be a licensed pharmacist appointed by the Board of Pharmacy.

B. The term of office for each member of the Committee shall be five (5) years. Provided, of those members initially appointed to the Committee by the Board, two shall serve three-year terms and two shall serve five-year terms, as designated by the Board; of those members initially appointed to the Committee by the State Board of Osteopathic Examiners, one shall serve a two-year term and one shall serve a four-year term, as designated by said board; and the member initially appointed by the Board of Pharmacy shall serve a five-year term.

C. The Committee shall meet at least quarterly. At the initial meeting of the Committee, members shall elect a chairperson. The chairperson shall represent the Committee at all meetings of the Board. Four members shall constitute a quorum for the purpose of conducting official business of the Committee.

D. The State Board of Medical Licensure and Supervision is hereby granted the power and authority to promulgate rules, which are in accordance with the provisions of this act, governing the requirements for certification as a physician assistant, as well as to establish standards for training, approve institutions for training, and regulate the standards of practice of a physician

assistant after certification, including the power of revocation of a certificate.

E. The State Board of Medical Licensure and Supervision is hereby granted the power and authority to investigate all complaints, hold hearings, subpoena witnesses and initiate prosecution concerning violations of this act. When such complaints involve physicians licensed by the State Board of Osteopathic Examiners, the State Board of Osteopathic Examiners shall be officially notified of such complaints.

F. 1. The Committee shall advise the Board on matters pertaining to physician assistants, including, but not limited to:

- a. educational standards required to practice as a physician assistant,
- b. certification requirements required to practice as a physician assistant,
- c. methods and requirements to assure the continued competence of physician assistants after certification,
- d. the drugs and other medical supplies for which physician assistants are permitted to transmit prescriptions and order on behalf of their supervising physicians,
- e. the grounds for revocation or suspension of a certificate for a physician assistant,
- f. education and experience requirements to receive approval to practice in remote patient care settings, and
- g. all other matters which may pertain to the practice of physician assistants.

2. The Committee shall review and make recommendations to the Board on all applications for certification as a physician assistant and all applications to practice which shall be approved by the Board. When considering applicants for certification, to establish standards of training or approve institutions for training, the Committee shall include the Director, or designee, of all Physician Assistant educational programs conducted by institutions of higher education in the state as members.

3. The Committee shall assist and advise the Board in all hearings involving physician assistants who are deemed to be in violation of this act or the rules of the Board.

SECTION 4. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 519.4 of Title 59, unless there is created a duplication in numbering, reads as follows:

To be eligible for certification as a physician assistant pursuant to the provisions of this act an applicant shall:

1. Be of good moral character;
2. Have graduated from an accredited physician assistant program recognized by the State Board of Medical Licensure and Supervision; and

3. Successfully pass an examination for physician assistants recognized by the Board.

SECTION 5. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 519.5 of Title 59, unless there is created a duplication in numbering, reads as follows:

The Secretary of the State Board of Medical Licensure and Supervision is authorized to grant temporary authorization to any individual, except for individuals who have taken and failed to successfully complete the examination, to practice as a physician assistant who otherwise meets the requirements for certification as a physician assistant except for successful completion of the

examination. The temporary authorization shall be valid for a period of one (1) year from the date of issuance or until the results of the applicant's examination are available, whichever occurs first.

SECTION 6. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 519.6 of Title 59, unless there is created a duplication in numbering, reads as follows:

A. No health care services may be performed by a physician assistant unless a current application to practice, jointly filed by the supervising physician and physician assistant, is on file with and approved by the State Board of Medical Licensure and Supervision. The application shall include a description of the physician's practice, methods of supervising and utilizing the physician assistant, and names of alternate supervising physicians who will supervise the physician assistant in the absence of the primary supervising physician.

B. The supervising physician need not be physically present nor be specifically consulted before each delegated patient care service is performed by a physician assistant, so long as the supervising physician and physician assistant are or can be easily in contact with one another by radio, telephone or other means of telecommunication. In all patient care settings, the supervising physician shall provide appropriate methods of supervising the health care services provided by the physician assistant including:

- a. being responsible for the formulation or approval of all orders and protocols, whether standing orders, direct orders or any other orders or protocols, which direct the delivery of health care services provided by a physician assistant, and periodically reviewing such orders and protocols,
- b. regularly reviewing the health care services provided by the physician assistant and any problems or complications encountered,
- c. being available physically or through direct telecommunications for consultation, assistance with medical emergencies or patient referral, and
- d. being on-site to provide medical care to patients a minimum of one-half (1/2) day per week. Additional on-site supervision may be required at the recommendation of the Physician Assistant Committee and approved by the Board.

C. In patients with newly diagnosed chronic or complex illnesses, the physician assistant shall contact the supervising physician within forty-eight (48) hours of the physician assistant's initial examination or treatment and schedule the patient for appropriate evaluation by the supervising physician as directed by the physician.

D. A physician assistant acts as the agent of the physician and may transmit written and oral prescriptions and orders for, but not dispense, drugs and medical supplies, as delegated by and on behalf of the supervising physician and as approved by the State Board of Medical Licensure and Supervision after consultation with the State Board of Pharmacy on the Physician Assistant Drug Formulary; provided, however, the provisions of this subsection shall not prohibit the dispensing of drugs as authorized in subsections D and E of Section 355.1 of this title.

E. A physician assistant may perform health care services in any patient care setting in which the supervising physician routinely and regularly provides health care services. A physician assistant may provide health care services in remote patient care

settings when such settings are under the medical direction of the supervising physician and when such facilities are located in a medically underserved area as designated by the appropriate governmental agency.

F. A physician assistant shall obtain approval from the State Board of Medical Licensure and Supervision prior to practicing in remote patient care settings. Such approval requires documented experience in providing a comprehensive range of primary care services, under responsible physician supervision, for at least one (1) year prior to practicing in such settings and such other requirement as the Board may require. The Board is granted the authority to waive this requirement for those applicants possessing equivalent experience and training as recommended by the Committee.

G. In patient care settings, the facility shall post public notice that the physician assistant is delivering care under the supervision of the responsible physician. Such public notice shall bear the names of the physician assistant and the supervising physician or physicians.

SECTION 7. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 519.7 of Title 59, unless there is created a duplication in numbering, reads as follows:

The Secretary of the State Board of Medical Licensure and Supervision is authorized to grant temporary approval of an application to practice to any physician and physician assistant who have jointly filed an application to practice which meets the requirements set forth by the Board. Such temporary approval to practice shall be reviewed at the next regularly scheduled meeting of the Board. The temporary approval may be approved, extended or rejected by the Board. If rejected, the temporary approval shall expire immediately.

SECTION 8. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 519.8 of Title 59, unless there is created a duplication in numbering, reads as follows:

A. Certificates issued to physician assistants shall be renewed annually on a date determined by the State Board of Medical Licensure and Supervision. Each application for renewal shall document that the physician assistant has earned at least twenty (20) hours of continuing medical education during the preceding calendar year.

B. The Board shall promulgate, in the manner established by its rules, fees for the following:

1. Initial certificate fee;
2. Certificate renewal fee;
3. Late certificate renewal fee;
4. Application to practice fee; and
5. Disciplinary hearing fee.

SECTION 9. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 519.9 of Title 59, unless there is created a duplication in numbering, reads as follows:

Any person who holds a certificate as a physician assistant from the State Board of Medical Licensure and Supervision prior to the effective date of this act shall be granted a certificate as a physician assistant under the provisions of this act.

SECTION 10. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 519.10 of Title 59, unless there is created a duplication in numbering, reads as follows:

Any person who holds himself out as a physician assistant or uses the title "Physician Assistant" unless certified or who otherwise violates the provisions of this act shall be guilty of a misdemeanor and, upon conviction, shall be punished by a fine of not

less than Fifty Dollars (\$50.00), nor more than Five Hundred Dollars (\$500.00), or by imprisonment in the county jail for not less than five (5) days nor more than thirty (30) days, or by both such fine and imprisonment. Each day a violation of this act is continuing shall be punishable as a separate offense. Conviction shall also be grounds for the suspension or revocation of the physician assistant certificate.

SECTION 11. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 519.11 of Title 59, unless there is created a duplication in numbering, reads as follows:

A. Nothing in this act shall be construed to prevent or restrict the practice, services or activities of any persons of other licensed professions or personnel supervised by licensed professions in this state from performing work incidental to the practice of their profession or occupation, if that person does not represent himself as a physician assistant.

B. Nothing stated in this act shall prevent any hospital from requiring the physician assistant and/or the supervising physician to meet and maintain certain staff appointment and credentialing qualifications for the privilege of practicing as, or utilizing, a physician assistant in the hospital.

C. Nothing in this act shall be construed to permit a physician assistant to practice medicine or prescribe drugs and medical supplies in this state except when such actions are performed under the supervision and at the direction of a physician approved by the State Board of Medical Licensure and Supervision.

SECTION 12. REPEALER 59 O.S. 1991, Sections 519, 520, 522 and 523, are hereby repealed.

SECTION 13. It being immediately necessary for the preservation of the public peace, health and safety, an emergency is hereby declared to exist, by reason whereof this act shall take effect and be in full force from and after its passage and approval.

Passed the Senate the 11th day of May, 1993.

President of the Senate

Passed the House of Representatives the 24th day of May, 1993.

Speaker of the House of Representatives