

CS for SB 33

1 THE STATE SENATE
2 Tuesday, February 27, 2001

3 Committee Substitute for
4 Senate Bill No. 33

5 COMMITTEE SUBSTITUTE FOR SENATE BILL NO. 33 - By: ROBINSON of the
6 Senate and ASKINS of the House.

7 An Act relating to professions and occupations and to public
8 health and safety; amending Section 2, Chapter 289, O.S.L.
9 1993, as last amended by Section 2, Chapter 128, O.S.L.
10 1998, Section 3, Chapter 289, O.S.L. 1993, as last amended
11 by Section 3, Chapter 128, O.S.L. 1998, Section 6, Chapter
12 289, O.S.L. 1993, as amended by Section 4, Chapter 128,
13 O.S.L. 1998, Section 7, Chapter 289, O.S.L. 1993, and
14 Section 10, Chapter 289, O.S.L. 1993, as amended by Section
15 7, Chapter 47, O.S.L. 1997 (59 O.S. Supp. 2000, Sections
16 519.2, 519.3, 519.6, 519.7 and 519.10), which relate to the
17 Physician Assistant Act; amending 63 O.S. 1991, Section 2-
18 312, as last amended by Section 6, Chapter 128, O.S.L. 1998
19 (63 O.S. Supp. 2000, Section 2-312), which relates to
20 prescriptions; deleting, modifying, and adding definitions;
21 allowing physician assistants to provide delegated health
22 care services; providing for construction of act; increasing
23 size of Physician Assistant Committee; specifying additional
24 qualifications for members of Committee; deleting obsolete
25 language; modifying eligibility to serve as chair;
26 increasing number required for quorum; updating references;
27 stating conditions for writing of prescriptions and orders
28 for Schedule II drugs by physician assistants; modifying
29 circumstances under which physician assistants may perform
30 services; requiring retention of license and identification
31 as physician assistant; increasing misdemeanor penalties;
32 modifying controlled dangerous substance schedules physician
33 assistants may prescribe and administer; and providing an
34 effective date.

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

1 SECTION 1. AMENDATORY Section 2, Chapter 289, O.S.L.
2 1993, as last amended by Section 2, Chapter 128, O.S.L. 1998 (59
3 O.S. Supp. 2000, Section 519.2), is amended to read as follows:

4 Section 519.2 As used in the Physician Assistant Act:

- 5 1. "Board" means the State Board of Medical Licensure and
6 Supervision;
- 7 2. "Committee" means the Physician Assistant Committee;
- 8 3. "Health care services" means services which require training
9 in the diagnosis, treatment and prevention of disease, including the
10 use and administration of drugs, and which are performed by
11 physician assistants under the supervision and at the direction of
12 physicians. ~~Such services include:~~
 - 13 a. ~~initially approaching a patient of any age group in a~~
14 ~~patient care setting to elicit a detailed history,~~
15 ~~performing a physical examination, delineating~~
16 ~~problems and recording the data,~~
 - 17 b. ~~assisting the physician in conducting rounds in acute~~
18 ~~and long-term inpatient care settings, developing and~~
19 ~~implementing patient management plans, recording~~
20 ~~progress notes and assisting in the provision of~~
21 ~~continuity of care in other patient care settings,~~
 - 22 c. ~~ordering, performing or interpreting, at least to the~~
23 ~~point of recognizing deviations from the norm, common~~

1 ~~laboratory, radiological, cardiographic and other~~
2 ~~routine diagnostic procedures used to identify~~
3 ~~pathophysiologic processes,~~
4 ~~d. ordering or performing routine procedures such as~~
5 ~~injections, immunizations, suturing and wound care,~~
6 ~~and managing simple conditions produced by infection,~~
7 ~~trauma or other disease processes,~~
8 ~~e. assisting in the management of more complex illness~~
9 ~~and injuries, which may include assisting surgeons in~~
10 ~~the conduct of operations and taking initiative in~~
11 ~~performing evaluation and therapeutic procedures in~~
12 ~~response to life-threatening situations,~~
13 ~~f. instructing and counseling patients regarding~~
14 ~~compliance with prescribed therapeutic regimens,~~
15 ~~normal growth and development, family planning,~~
16 ~~emotional problems of daily living and health~~
17 ~~maintenance, and~~
18 ~~g. facilitating the referral of patients to the~~
19 ~~community's health and social service agencies when~~
20 ~~appropriate~~

21 Physician assistants may provide any health care service which
22 is delegated by the supervising physician when the service is within
23 the physician assistant's skill, forms a component of the

1 physician's scope of practice, and is provided with supervision,
2 including authenticating with the signature any form that may be
3 authenticated by the supervising physician's signature with prior
4 delegation by the physician. Nothing in this act shall be construed
5 to permit physician assistants to provide health care services
6 independent of physician supervision;

7 4. "Patient care setting" means a physician's office, clinic,
8 hospital, nursing home, extended care facility, patient's home,
9 ambulatory surgical center or any other setting authorized by the
10 supervising physician;

11 5. "Physician assistant" means a health care professional,
12 qualified by academic and clinical education and licensed by the
13 State Board of Medical Licensure and Supervision, to provide health
14 care services in any patient care setting at the direction and under
15 the supervision of a physician or group of physicians;

16 6. "Physician Assistant Drug Formulary" means a list of drugs
17 and other medical supplies, approved by the State Board of Medical
18 Licensure and Supervision after consultation with the State Board of
19 Pharmacy, for which physician assistants are permitted to prescribe
20 and order under the direction of their supervising physicians;

21 7. "Remote patient care setting" means an outpatient clinic or
22 physician's office that qualifies as a Rural Health Clinic,
23 Federally Qualified Health Center, other nonprofit community-based

1 health center, or other patient care setting approved by the State
2 Board of Medical Licensure and Supervision, and which provides
3 service to a medically underserved population, as defined by the
4 appropriate government agency;

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

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

12 10. "Application to Practice" means a written description that
13 defines the scope of practice and terms of supervision of a
14 physician assistant in a medical practice.

15 SECTION 2. AMENDATORY Section 3, Chapter 289, O.S.L.
16 1993, as last amended by Section 3, Chapter 128, O.S.L. 1998 (59
17 O.S. Supp. 2000, Section 519.3), is amended to read as follows:

18 Section 519.3 A. There is hereby created the Physician
19 Assistant Committee, which shall be composed of ~~seven (7)~~ nine (9)
20 members. ~~Two~~ Three members of the Committee shall be physician
21 assistants appointed by the State Board of Medical Licensure and
22 Supervision from a list of qualified individuals submitted by the
23 Oklahoma Academy of Physician Assistants. The Committee shall

1 include one Director, or designee, representing all physician
2 assistant higher education programs in the state. One member shall
3 be a physician appointed by the Board from its membership. One
4 member shall be a physician who has supervised a physician assistant
5 and who is appointed by the Board from a list of qualified
6 individuals submitted by the Oklahoma State Medical Association and
7 who is not a member of the Board. One member shall be a physician
8 appointed by the State Board of Osteopathic Examiners from its
9 membership. One member shall be a physician who has supervised a
10 physician assistant and who is appointed by the State Board of
11 Osteopathic Examiners from a list of qualified individuals submitted
12 by the Oklahoma Osteopathic Association and who is not a member of
13 said board. One member shall be a licensed pharmacist appointed by
14 the Board of Pharmacy.

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

1 C. The Committee shall meet at least quarterly. At the ~~initial~~
2 first meeting of each year, the Committee, ~~members~~ shall elect a
3 chair from its membership. The chair or the chair's designee shall
4 represent the Committee at all meetings of the Board. ~~Four~~ Five
5 members shall constitute a quorum for the purpose of conducting
6 official business of the Committee.

7 D. The State Board of Medical Licensure and Supervision is
8 hereby granted the power and authority to promulgate rules, ~~which~~
9 are and issue a license to physician assistants in accordance with
10 the provisions of Section 519.1 et seq. of this title, ~~governing~~
11 govern the requirements for licensure as a physician assistant, as
12 well as to establish standards for training, approve institutions
13 for training, and regulate the standards of practice of a physician
14 assistant after licensure, including the power of revocation of a
15 license.

16 E. The State Board of Medical Licensure and Supervision is
17 hereby granted the power and authority to investigate all
18 complaints, hold hearings, subpoena witnesses and initiate
19 prosecution concerning violations of Section 519.1 et seq. of this
20 title. When such complaints involve physicians licensed by the
21 State Board of Osteopathic Examiners, the State Board of Osteopathic
22 Examiners shall be officially notified of such complaints.

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

3 a. ~~educational~~

4 1. Educational standards required to practice as a physician
5 assistant~~;~~

6 b. ~~licensure~~

7 2. Licensure requirements required to practice as a physician
8 assistant~~;~~

9 c. ~~methods~~

10 3. Methods and requirements to assure the continued competence
11 of physician assistants after licensure~~;~~

12 d. ~~the~~

13 4. The drugs and other medical supplies for which physician
14 assistants are permitted to prescribe and order under the direction
15 of their supervising physicians~~;~~

16 e. ~~the~~

17 5. The grounds for revocation or suspension of a license for a
18 physician assistant~~;~~

19 f. ~~education~~

20 6. Education and experience requirements to receive approval to
21 practice in remote patient care settings~~;~~ and

22 g. ~~all~~

1 7. All other matters which may pertain to the practice of
2 physician assistants.

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

11 ~~3. H.~~ The Committee shall assist and advise the Board in all
12 hearings involving physician assistants who are deemed to be in
13 violation of Section 519.1 et seq. of this title or the rules of the
14 Board.

15 SECTION 3. AMENDATORY Section 6, Chapter 289, O.S.L.
16 1993, as amended by Section 4, Chapter 128, O.S.L. 1998 (59 O.S.
17 Supp. 2000, Section 519.6), is amended to read as follows:

18 Section 519.6 A. No health care services may be performed by a
19 physician assistant unless a current application to practice,
20 jointly filed by the supervising physician and physician assistant,
21 is on file with and approved by the State Board of Medical Licensure
22 and Supervision. The application shall include a description of the
23 physician's practice, methods of supervising and utilizing the

1 physician assistant, and names of alternate supervising physicians
2 who will supervise the physician assistant in the absence of the
3 primary supervising physician.

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

- 12 a. being responsible for the formulation or approval of
13 all orders and protocols, whether standing orders,
14 direct orders or any other orders or protocols, which
15 direct the delivery of health care services provided
16 by a physician assistant, and periodically reviewing
17 such orders and protocols,
- 18 b. regularly reviewing the health care services provided
19 by the physician assistant and any problems or
20 complications encountered,
- 21 c. being available physically or through direct
22 telecommunications for consultation, assistance with
23 medical emergencies or patient referral, and

1 d. being on-site to provide medical care to patients a
2 minimum of one-half (1/2) day per week. Additional
3 on-site supervision may be required at the
4 recommendation of the Physician Assistant Committee
5 and approved by the Board.

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

12 D. A physician assistant under the direction of a supervising
13 physician may prescribe written and oral prescriptions and orders.
14 The physician assistant may prescribe drugs, including controlled
15 medications in Schedules ~~III~~ II through V pursuant to Section 2-312
16 of Title 63 of the Oklahoma Statutes, and medical supplies and
17 services as delegated by the supervising physician and as approved
18 by the State Board of Medical Licensure and Supervision after
19 consultation with the State Board of Pharmacy on the Physician
20 Assistant Drug Formulary. Prescriptions and orders for Schedule II
21 drugs written by a physician assistant must be included on a written
22 protocol determined by the supervising physician or by direct verbal
23 order. Physician assistants may not dispense drugs, but may

1 request, receive, and sign for professional samples and may
2 distribute professional samples to patients.

3 E. A physician assistant may perform health care services in
4 any patient care setting ~~in which the supervising physician~~
5 ~~routinely and regularly provides health care services. A physician~~
6 ~~assistant may provide health care services in remote patient care~~
7 ~~settings when such settings are under the medical direction of the~~
8 ~~supervising physician and when such facilities are located in a~~
9 ~~medically underserved area as designated by the appropriate~~
10 ~~governmental agency~~ authorized by the supervising physician.

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

21 G. ~~In patient care settings, the facility shall post public~~
22 ~~notice that the physician assistant is delivering care under the~~
23 ~~direction of a supervising physician. Such public notice shall bear~~

1 ~~the names of the physician assistant and the supervising physician~~
2 ~~or physicians~~ Each physician assistant licensed under the Physician
3 Assistant Act shall keep his or her license available for inspection
4 at the primary place of business and shall, when engaged in
5 professional activities, identify himself or herself as a physician
6 assistant.

7 SECTION 4. AMENDATORY Section 7, Chapter 289, O.S.L.
8 1993 (59 O.S. Supp. 2000, Section 519.7), is amended to read as
9 follows:

10 Section 519.7 The Secretary of the State Board of Medical
11 Licensure and Supervision is authorized to grant temporary approval
12 of ~~an~~ a license and application to practice to any physician and
13 physician assistant who have jointly filed ~~an~~ a license and
14 application to practice which meets the requirements set forth by
15 the Board. Such temporary approval to practice shall be reviewed at
16 the next regularly scheduled meeting of the Board. The temporary
17 approval may be approved, extended or rejected by the Board. If
18 rejected, the temporary approval shall expire immediately.

19 SECTION 5. AMENDATORY Section 10, Chapter 289, O.S.L.
20 1993, as amended by Section 7, Chapter 47, O.S.L. 1997 (59 O.S.
21 Supp. 2000, Section 519.10), is amended to read as follows:

22 Section 519.10 Any person who holds herself or himself out as a
23 physician assistant or uses the title "Physician Assistant" without

1 being licensed, or who otherwise violates the provisions of Section
2 519.1 et seq. of this title shall be guilty of a misdemeanor and,
3 upon conviction, shall be punished by a fine of not less than ~~Fifty~~
4 ~~Dollars (\$50.00)~~ One Hundred Dollars (\$100.00), nor more than ~~Five~~
5 ~~Hundred Dollars (\$500.00)~~ One Thousand Dollars (\$1,000.00), by
6 imprisonment in the county jail for not less than ~~five (5)~~ thirty
7 (30) days, nor more than ~~thirty (30)~~ ninety (90) days, or by both
8 such fine and imprisonment. Each day of a violation of the
9 provisions of Section 519.1 et seq. of this title shall constitute a
10 separate and distinct offense. Conviction shall also be grounds for
11 the suspension or revocation of the license of a duly licensed
12 physician assistant.

13 SECTION 6. AMENDATORY 63 O.S. 1991, Section 2-312, as
14 last amended by Section 6, Chapter 128, O.S.L. 1998 (63 O.S. Supp.
15 2000, Section 2-312), is amended to read as follows:

16 Section 2-312. A. A physician, podiatrist, optometrist or a
17 dentist who has complied with the registration requirements of the
18 Uniform Controlled Dangerous Substances Act, Section 2-101 et seq.
19 of this title, in good faith and in the course of such person's
20 professional practice only, may prescribe and administer controlled
21 dangerous substances, or may cause the same to be administered by
22 medical or paramedical personnel acting under the direction and
23 supervision of the physician, podiatrist, optometrist or dentist,

1 and only may dispense controlled dangerous substances pursuant to
2 the provisions of Sections 355, 355.1 and 355.2 of Title 59 of the
3 Oklahoma Statutes.

4 B. A veterinarian who has complied with the registration
5 requirements of the Uniform Controlled Dangerous Substances Act,
6 Section 2-101 et seq. of this title, in good faith and in the course
7 of the professional practice of the veterinarian only, and not for
8 use by a human being, may prescribe, administer, and dispense
9 controlled dangerous substances and may cause them to be
10 administered by an assistant or orderly under the direction and
11 supervision of the veterinarian.

12 C. An advanced practice nurse who is recognized to prescribe by
13 the Oklahoma Board of Nursing as an advanced registered nurse
14 practitioner, clinical nurse specialist or certified nurse-midwife,
15 who is subject to medical direction by a supervising physician,
16 pursuant to Section 567.3a of Title 59 of the Oklahoma Statutes, and
17 who has complied with the registration requirements of the Uniform
18 Controlled Dangerous Substances Act, in good faith and in the course
19 of professional practice only, may prescribe and administer Schedule
20 III, IV and V controlled dangerous substances.

21 D. An advanced practice nurse who is recognized to order,
22 select, obtain and administer drugs by the Oklahoma Board of Nursing
23 as a certified registered nurse anesthetist pursuant to Section 1 of

1 this act and who has complied with the registration requirements of
2 the Uniform Controlled Dangerous Substances Act, in good faith and
3 in the course of such practitioner's professional practice only, may
4 order, select, obtain and administer Schedules II through V
5 controlled dangerous substances in a preanesthetic preparation or
6 evaluation; anesthesia induction, maintenance or emergence; or
7 postanesthesia care setting only. A certified registered nurse
8 anesthetist may order, select, obtain and administer such drugs only
9 during the perioperative or periobstetrical period.

10 E. A physician assistant who is recognized to prescribe by the
11 State Board of Medical Licensure and Supervision under the medical
12 direction of a supervising physician, pursuant to subsection D of
13 Section 519.6 of Title 59 of the Oklahoma Statutes, and who has
14 complied with the registration requirements of the Uniform
15 Controlled Dangerous Substances Act, in good faith and in the course
16 of professional practice only, may prescribe and administer Schedule
17 ~~III, IV, and~~ II through V controlled dangerous substances.

18 SECTION 7. This act shall become effective November 1, 2001.

19 COMMITTEE REPORT BY: COMMITTEE ON HUMAN RESOURCES, dated 02-22-01 -
20 DO PASS, As Amended and Coauthored.