

1 2. "Committee" means the Physician Assistant Committee;

2 3. ~~"Health care services Practice of medicine"~~ means services
3 which require training in the diagnosis, treatment and prevention of
4 disease, including the use and administration of drugs, and which
5 are performed by physician assistants ~~under the supervision and at~~
6 ~~the direction of physicians.~~ Such services include, but are not
7 ~~limited to:~~

- 8 a. ~~initially approaching a patient of any age group in a~~
9 ~~patient care setting to elicit a detailed history,~~
10 ~~performing a physical examination, delineating~~
11 ~~problems and recording the data,~~
- 12 b. ~~assisting the physician in conducting rounds in acute~~
13 ~~and long term inpatient care settings, developing and~~
14 ~~implementing patient management plans, recording~~
15 ~~progress notes and assisting in the provision of~~
16 ~~continuity of care in other patient care settings,~~
- 17 c. ~~ordering, performing or interpreting, at least to the~~
18 ~~point of recognizing deviations from the norm, common~~
19 ~~laboratory, radiological, cardiographic and other~~
20 ~~routine diagnostic procedures used to identify~~
21 ~~pathophysiologic processes,~~
- 22 d. ~~ordering or performing routine procedures such as~~
23 ~~injections, immunizations, suturing and wound care,~~
- 24

1 and managing simple conditions produced by infection,
2 trauma or other disease processes,

3 e. assisting in the management of more complex illness
4 and injuries, which may include assisting surgeons in
5 the conduct of operations and taking initiative in
6 performing evaluation and therapeutic procedures in
7 response to life-threatening situations,

8 f. instructing and counseling patients regarding
9 compliance with prescribed therapeutic regimens,
10 normal growth and development, family planning,
11 emotional problems of daily living and health
12 maintenance,

13 g. facilitating the referral of patients to the
14 community's health and social service agencies when
15 appropriate, and

16 h. providing health care services which are delegated by
17 the supervising physician when the service:

18 ~~(1)~~ is so long as such services are within the
19 physician ~~assistant's~~ assistants' skill,

20 ~~(2)~~ ~~forms~~ form a component of the physician's scope
21 of practice, and

22 ~~(3)~~ is are provided with supervision, including
23 authenticating with the signature any form that
24 may be authenticated by the supervising

1 physician's signature with prior delegation by
2 the physician.

3 Nothing in the Physician Assistant Act shall be construed to permit
4 physician assistants to provide health care services independent of
5 physician supervision;

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

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

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, that physician assistants are permitted to prescribe and~~
20 ~~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, a~~
23 ~~Federally Qualified Health Center, a nonprofit community-based~~
24 ~~health center, or any other patient care setting approved by the~~

1 ~~State Board of Medical Licensure and Supervision, and that provides~~
2 ~~service to a medically underserved population, as defined by the~~
3 ~~appropriate government agency;~~

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

8 ~~9.~~ 7. "Supervision" means overseeing the activities of, and
9 accepting ~~the~~ responsibility for, the health care medical services
10 ~~performed rendered~~ by a physician assistant. The constant physical
11 presence of the supervising physician is not required as long as the
12 supervising physician and physician assistant are or can be easily
13 in contact with each other by telecommunication; and

14 ~~10.~~ 8. "Telecommunication" means the use of electronic
15 technologies to transmit words, sounds or images for interpersonal
16 communication, clinical care (telemedicine) and review of electronic
17 health records; and

18 9. "Application to practice" means a written description that
19 defines the scope of practice and the terms of supervision of a
20 physician assistant in a medical practice.

21 SECTION 2. AMENDATORY 59 O.S. 2011, Section 519.3, is
22 amended to read as follows:

23 Section 519.3. A. There is hereby created the Physician
24 Assistant Committee, which shall be composed of seven (7) members.

1 ~~Two~~ Three members of the Committee shall be physician assistants
2 appointed by the State Board of Medical Licensure and Supervision
3 from a list of qualified individuals submitted by the Oklahoma
4 Academy of Physician Assistants. One member shall be a physician
5 appointed by the Board from its membership. One member shall be a
6 physician appointed by the Board from a list of qualified
7 individuals submitted by the Oklahoma State Medical Association and
8 who is not a member of the Board. One member shall be a physician
9 appointed by the State Board of Osteopathic Examiners from its
10 membership. One member shall be a physician appointed by the State
11 Board of Osteopathic Examiners from a list of qualified individuals
12 submitted by the Oklahoma Osteopathic Association and who is not a
13 member of said board. ~~One member shall be a licensed pharmacist
14 appointed by 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 meeting of each calendar year, the Committee, members shall elect a
3 chair. The chair or his or her designee shall represent the
4 Committee at all meetings of the Board. Four members shall
5 constitute a quorum for the purpose of conducting official business
6 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 in accordance with the provisions of Section 519.1 et seq. of
10 this title, governing the requirements for licensure as a physician
11 assistant, as well as to establish standards for training, approve
12 institutions for training, and regulate the standards of practice of
13 a physician assistant after licensure, including the power of
14 revocation of a license.

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

22 F. 1. The Committee shall advise the Board on all matters
23 pertaining to the practice of physician assistants, ~~including, but~~
24 ~~not limited to:~~

- ~~a. educational standards required to practice as a physician assistant,~~
- ~~b. licensure requirements required to practice as a physician assistant,~~
- ~~c. methods and requirements to assure the continued competence of physician assistants after licensure,~~
- ~~d. the drugs and other medical supplies for which physician assistants are permitted to prescribe and order under the direction of their supervising physicians,~~
- ~~e. the grounds for revocation or suspension of a license 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 licensure as a physician assistant and all applications to practice which shall be approved by the Board. When considering applicants for licensure, to establish standards of training or approve institutions for training, the Committee shall include the Director, or designee, of all Physician Assistant

1 educational programs conducted by institutions of higher education
2 in the state as members.

3 3. The Committee shall assist and advise the Board in all
4 hearings involving physician assistants who are deemed to be in
5 violation of Section 519.1 et seq. of this title or the rules of the
6 Board.

7 SECTION 3. AMENDATORY 59 O.S. 2011, Section 519.6, is
8 amended to read as follows:

9 Section 519.6. A. No health care services may be performed by
10 a physician assistant unless a current application to practice,
11 jointly filed by the supervising physician and physician assistant,
12 is on file with and approved by the State Board of Medical Licensure
13 and Supervision. The application shall include a description of the
14 physician's practice, methods of supervising and utilizing the
15 physician assistant, and names of alternate supervising physicians
16 who will supervise the physician assistant in the absence of the
17 primary supervising physician.

18 B. The supervising physician need not be physically present nor
19 be specifically consulted before each delegated patient care service
20 is performed by a physician assistant, so long as the supervising
21 physician and physician assistant are or can be easily in contact
22 with one another by ~~radio, telephone or other~~ means of
23 telecommunication. In all patient care settings, the supervising
24

1 physician shall provide appropriate methods of supervising the
2 health care services provided by the physician assistant including:

- 3 a. being responsible for the formulation or approval of
4 all orders and protocols, whether standing orders,
5 direct orders or any other orders or protocols, which
6 direct the delivery of health care services provided
7 by a physician assistant, and periodically reviewing
8 such orders and protocols,
- 9 b. regularly reviewing the health care services provided
10 by the physician assistant and any problems or
11 complications encountered,
- 12 c. being available physically or through telemedicine or
13 direct telecommunications for consultation, assistance
14 with medical emergencies or patient referral, ~~and~~
- 15 d. ~~being on-site to provide medical care to patients a~~
16 ~~minimum of one-half (1/2) day per week. Additional~~
17 ~~on-site supervision may be required at the~~
18 ~~recommendation of the Physician Assistant Committee~~
19 ~~and approved by the Board;~~ reviewing a sample of
20 outpatient medical records. Such reviews shall take
21 place at the practice site as determined by the
22 supervising physician and with approval of the State
23 Board of Medical Licensure and Supervision, and

1 e. that it remains clear that the physician assistant is
2 an agent of the supervising physician; but, in no
3 event shall the supervising physician be an employee
4 of the physician assistant.

5 C. In patients with newly diagnosed ~~chronic or~~ complex
6 illnesses, the physician assistant shall contact the supervising
7 physician within forty-eight (48) hours of the physician assistant's
8 initial examination or treatment and schedule the patient for
9 appropriate evaluation by the supervising physician as directed by
10 the physician. The supervising physician shall determine which
11 conditions qualify as complex illnesses based on the clinical
12 setting and the skill and experience of the physician assistant.

13 D. 1. A physician assistant under the direction of a
14 supervising physician may prescribe written and oral prescriptions
15 and orders. The physician assistant may prescribe drugs, including
16 controlled medications in Schedules II through V pursuant to Section
17 2-312 of Title 63 of the Oklahoma Statutes, and medical supplies and
18 services as delegated by the supervising physician and as approved
19 by the State Board of Medical Licensure and Supervision after
20 consultation with the State Board of Pharmacy on the Physician
21 Assistant Drug Formulary.

22 2. A physician assistant may write an order for a Schedule II
23 drug for immediate or ongoing administration on site. Prescriptions
24 and orders for Schedule II drugs written by a physician assistant

1 must be included on a written protocol determined by the supervising
2 physician and approved by the medical staff committee of the
3 facility or by direct verbal order of the supervising physician.
4 Physician assistants may not dispense drugs, but may request,
5 receive, and sign for professional samples and may distribute
6 professional samples to patients.

7 E. A physician assistant may perform health care services in
8 patient care settings as authorized by the supervising physician.

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

19 ~~G.~~ Each physician assistant licensed under the Physician
20 Assistant Act shall keep his or her license available for inspection
21 at the primary place of business and shall, when engaged in
22 professional activities, identify himself or herself as a physician
23 assistant.
24

1 SECTION 4. AMENDATORY 59 O.S. 2011, Section 519.10, is
2 amended to read as follows:

3 Section 519.10. Any person ~~who holds herself or himself out as~~
4 ~~a physician assistant or uses the title "Physician Assistant"~~
5 ~~without being licensed, or who otherwise violates the provisions of~~
6 ~~Section 519.1 et seq. of this title shall be guilty of a misdemeanor~~
7 ~~and, upon conviction, shall be punished by a fine of not less than~~
8 ~~Fifty Dollars (\$50.00), nor more than Five Hundred Dollars~~
9 ~~(\$500.00), by imprisonment in the county jail for not less than five~~
10 ~~(5) days, nor more than thirty (30) days, or by both such fine and~~
11 ~~imprisonment. Each day of a violation of the provisions of Section~~
12 ~~519.1 et seq. of this title shall constitute a separate and distinct~~
13 ~~offense. Conviction shall also be grounds for the suspension or~~
14 ~~revocation of the license of a duly licensed physician assistant not~~
15 ~~licensed under the Physician Assistant Act is guilty of a~~
16 ~~misdemeanor and is subject to penalties applicable to the unlicensed~~
17 ~~practice of medicine if he or she:~~

- 18 1. Holds himself or herself out as a physician assistant;
19 2. Uses any combination or abbreviation of the term "physician
20 assistant" to indicate or imply that he or she is a physician
21 assistant; or
22 3. Acts as a physician assistant without being licensed by the
23 State Board of Medical Licensure and Supervision.
24

1 An unlicensed physician shall not be permitted to use the title
2 of "physician assistant" or to practice as a physician assistant
3 unless he or she fulfills the requirements of Section 519.1 et seq.
4 of this title.

5 SECTION 5. AMENDATORY 59 O.S. 2011, Section 519.11, is
6 amended to read as follows:

7 Section 519.11. A. Nothing in ~~this act~~ the Physician Assistant
8 Act shall be construed to prevent or restrict the practice, services
9 or activities of any persons of other licensed professions or
10 personnel supervised by licensed professions in this state from
11 performing work incidental to the practice of their profession or
12 occupation, if that person does not represent himself as a physician
13 assistant.

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

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

1 D. Nothing herein shall be construed to require licensure under
2 this act of a physician assistant student enrolled in a physician
3 assistant educational program accredited by the Accreditation Review
4 Commission on Education for the Physician Assistant.

5 E. Notwithstanding any other provision of law, no one who is
6 not a physician licensed to practice medicine in the state of
7 Oklahoma may perform acts restricted to such physicians pursuant to
8 the provisions of Section 1-731 of Title 63 of the Oklahoma
9 Statutes. This paragraph is inseverable.

10 SECTION 6. This act shall become effective November 1, 2015.

11
12 COMMITTEE REPORT BY: COMMITTEE ON APPROPRIATIONS AND BUDGET, dated
13 04/09/2015 - DO PASS.