## **House Study Bill 683**

## **Bill Text**

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           Section 1. Section 147.14, subsection 12, Code Supplement
  1 2 1999, is amended to read as follows:
         12. For the board of physician assistant examiners,
 three
    4 <u>five</u> members licensed to practice as physician assistants, at
  1 5 least two of whom practice in counties with a population of
  1 6 less than fifty thousand, one member licensed to practice
    7 medicine and surgery who supervises a physician assistant, one
  1 8 member licensed to practice osteopathic medicine and surgery
  1 9 who supervises a physician assistant, and two members who are
  1 10 not licensed to practice either medicine and surgery or
  1 11 osteopathic medicine and surgery or licensed as a physician
  1 12 assistant and who shall represent the general public. At
  1 13 least one of the physician members shall be in practice in a
  1 14 county with a population of less than fifty thousand. A
  1 15 majority of members of the board constitutes a quorum.
         Sec. 2. Section 147.74, subsection 16, Code Supplement
  1 17 1999, is amended to read as follows:
         16. A physician assistant
 registered or

    licensed under

  1 19 chapter 148C may use the words "physician assistant" after the
  1 20 person's name or signify the same by the use of the letters
  1 21 "P. A." after the person's name.
         Sec. 3. Section 147.80, subsection 5, Code 1999, is
  1 22
  1 23 amended to read as follows:
          5. Application for a license to practice as a physician
  1 25 assistant, issuance of a license to practice as a physician
  1 26 assistant issued upon the basis of an examination given or
  1 27 approved by the board of physician assistant examiners,
  1 28 issuance of a license to practice as a physician assistant
  1 29 issued under a reciprocal agreement, renewal of a license to
  1 30 practice as a physician assistant, temporary license to
  1 31 practice as a physician assistant
    registration of a physician
  1 32
  1 33
         Sec. 4. Section <u>147.107</u>, subsection 5, Code 1999, is
  1 35 amended to read as follows:
          5. Notwithstanding subsection 1 and any other provision of
    2 this section to the contrary, a physician may delegate the
    3 function of prescribing drugs, controlled substances, and
    4 medical devices to a physician assistant licensed pursuant to
  2 5 chapter 148C. When delegated prescribing occurs, the
  2 6 supervising physician's name shall be used, recorded, or
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7 otherwise indicated in connection with each individual 2 8 prescription so that the individual who dispenses or 2 9 administers the prescription knows under whose delegated 2 10 authority the physician assistant is prescribing. Rules 2 11 relating to the authority of physician assistants to prescribe 2 12 drugs, controlled substances, and medical devices pursuant to 2 13 this subsection shall be adopted by the board of physician 2 14 assistant examiners, after consultation with the board of 2 15 medical examiners and the board of pharmacy examiners, as soon 2 16 as possible after July 1, 1991. The rules shall be reviewed 2 17 and approved by the physician assistant rules review group 2 18 created under subsection 7 and shall be adopted in final form 2 19 by January 1, 1993. However, the rules shall prohibit the 2 20 prescribing of schedule II controlled substances which are 2 21 listed as stimulants or depressants pursuant to chapter 124. 2 22 If rules are not reviewed and approved by the physician 2 23 assistant rules review group created under subsection 7 and 2 24 adopted in final form by January 1, 1993, a physician 2 25 assistant may prescribe drugs as a delegated act of a 2 26 supervising physician under rules adopted by the board of 2 27 physician assistant examiners

## and subject to the rules review

2 28

3

## process established in section 148C.7

-. The board of physician

2 29 assistant examiners shall be the only board to regulate the 2 30 practice of physician assistants relating to prescribing and 2 31 supplying prescription drugs, controlled substances and 2 32 medical devices, notwithstanding section 148C.6A. Sec. 5. Section 148.13, subsections 1 and 4, Code 1999, 2 34 are amended by striking the subsections.

Sec. 6. Section <u>148C.1</u>, Code 1999, is amended by striking 1 the section and inserting in lieu thereof the following: 148C.1 DEFINITIONS.

1. "Approved program" means a program for the education of 4 physician assistants which has been accredited by the 5 committee on accreditation of allied health educational 6 programs, by its successor, the commission on accreditation of

8 2. "Board" means the board of physician assistant 3 9 examiners.

7 allied health educational programs, or by its successor.

3 10 3. "Licensed physician assistant" means a person who is 3 11 licensed as a physician assistant by the board to practice 3 12 medicine with the supervision of one or more physicians.

4. "Physician" means a person who is currently licensed in 3 13 3 14 Iowa to practice medicine and surgery, osteopathic medicine 3 15 and surgery, or osteopathy.

5. "Physician assistant" means a person who has graduated 3 17 from an approved physician assistant or surgeon assistant 3 18 program or a person who has passed the certifying examination 3 19 administered by the national commission on certification of 3 20 physician assistants or its successor.

Sec. 7. Section 148C.3, Code 1999, is amended by striking 3 22 the section and inserting in lieu thereof the following: 3 23 148C.3 LICENSURE.

1. The board shall adopt rules to govern the licensure of 3 25 persons who qualify as physician assistants. An applicant for 3 26 licensure shall submit the fee prescribed by the board and 3 27 shall meet the requirements established by the board with 3 28 respect to each of the following:

3 29 a. Academic qualifications, including evidence of 3 30 graduation from an approved program. However, if the board 3 31 determines that a person has sufficient knowledge and 3 32 experience to qualify as a physician assistant, the board may

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3 34 1, 2001, without requiring the applicant to have completed an
 3 35 approved program or to have passed the examination for
    1 physician assistants conducted by the national commission on
 4 2 the certification of physician assistants or its successor.
    3 On or after July 1, 2001, a physician assistant who is not yet
    4 licensed pursuant to this chapter shall be required to have
   5 graduated from an approved program or to have passed the
    6 examination for physician assistants conducted by the national
    7 commission on the certification of physician assistants or its
    8 successor.
 4 9
         b. Hours of continuing medical education necessary to
 4 10 become or remain licensed.
 4 11
         2. Rules shall be adopted by the board pursuant to this
 4 12 chapter permitting licensed physicians to supervise licensed
 4 13 physician assistants.
 4 14
         3. A licensed physician assistant shall perform only those
 4 15 services for which the licensed physician assistant is
 4 16 qualified by training.
         4. The board may issue an inactive license under
 4 18 conditions prescribed by rules adopted by the board.
 4 19
         Sec. 8. Section 148C.4, Code 1999, is amended to read as
 4 20 follows:
         148C.4 SERVICES PERFORMED BY PHYSICIAN ASSISTANTS.
         A physician assistant may perform medical services when the
 4 23 services are rendered under the supervision of
 the

    a licensed

 4 24 physician
 or physicians specified in the physician
 4 25
 license approved by the board
 trainee
- physician assistant
 4 26 student may perform medical services when the services are
 4 27 rendered within the scope of an approved program.
 4 28
         Sec. 9. Section 148C.11, Code 1999, is amended to read as
 4 29 follows:
 4 30 148C.11 PROHIBITION CRIME.
 4 31 A person not
 registered and

    licensed as required by this

 4 32 chapter who practices as a physician assistant
without having
 4 33
 obtained the appropriate approval under this chapter,
 4 34 guilty of a serious misdemeanor.
        Sec. 10. PHYSICIAN ASSISTANTS RULES. The board shall
    1 adopt new rules pursuant to chapter 17A to administer chapter
 5 2 148C no later than January 1, 2001. The rules shall be
   3 designed to encourage the utilization of physician assistants
   4 in a manner that is consistent with the provision of quality
 5 5 health care and medical services for the citizens of Iowa
 5 6 through better utilization of available physicians and the
    7 development of sound programs for the education and training
 5 8 of skilled physician assistants well qualified to assist
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3 33 approve an application for licensure submitted prior to July

5 9 physicians in providing health care and medical services. 5 10 Sec. 11. Sections 148C.2, 148C.5A, 148C.6A, and 148C.7, 5 11 Code 1999, are repealed. Sec. 12. EFFECTIVE DATE. This Act, being deemed of 5 13 immediate importance, takes effect upon enactment. EXPLANATION 5 15 This bill modifies licensure requirements for physician 5 16 assistants. 5 17 The bill provides for an increase in the number of members 5 18 of the board of physician assistant examiners to add two 5 19 additional members licensed to practice as physician 5 20 assistants. This increase results in a total of nine members 5 21 serving on the board. The bill eliminates provisions relating 5 22 to registration as a physician assistant, and also eliminates 5 23 the physician assistant rules review group established in Code 5 24 section 148C.7, which functions to review and either approve 5 25 or disapprove proposed rules by the board of physician 5 26 assistant examiners. The bill further eliminates provisions 5 27 regarding the adoption of rules by December 31, 1988, relating 5 28 to the eligibility of a physician to serve as a supervising 5 29 physician, and regarding appeals to the board of medical 5 30 examiners of decisions of the board of physician assistant 5 31 examiners in a contested case involving discipline of a 5 32 licensed physician assistant. The bill provides for several changes to the definitions 5 34 applicable to physician assistants pursuant to Code chapter 5 35 148C. The bill provides that an approved physician assistant 1 program refers to a program accredited by the committee on 2 accreditation of allied health educational programs, its 3 successor, the commission on accreditation of allied health 4 educational programs, or its successor, rather than pursuant 5 to rules as currently defined. The bill also provides that a 6 6 physician assistant refers to a person who has graduated from 7 an approved physician assistant or surgeon assistant program, 6 6 8 or a person who has passed the certifying examination 6 9 administered by the national commission on certification of 6 10 physician assistants or its successor, rather than the current 6 11 definition providing for passing or completing a board-6 12 approved examination or program. The bill provides that a 6 13 licensed physician assistant practices medicine with the 6 14 supervision of physicians, as opposed to the current 6 15 definition indicating a physician assistant practices under 6 16 the supervision of physicians specified on the license. 6 17 The bill provides for modifications regarding requirements 6 18 for licensure as a physician assistant consistent with the 6 19 revised definitions and elimination of registration as a 6 20 physician assistant. The bill provides that if the board 6 21 determines that a person has sufficient knowledge and 6 22 experience to qualify as a physician assistant, the board may 6 23 approve an application for licensure submitted prior to July 6 24 1, 2001, without requiring the completion of an approved 6 25 program or the passing of an examination, but that on or after 6 26 July 1, 2001, a physician assistant who is not yet licensed 6 27 will be required to have graduated from an approved program or 6 28 have passed the previously explained examination. The bill further requires that the board of physician 6 30 assistant examiners adopt new rules relating to administration 6 31 of Code chapter 148C on or before January 1, 2001. The bill takes effect upon enactment.

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