

**MINUTES OF THE APRIL 20, 2015, SPECIAL MEETING
OF THE
ADMINISTRATIVE RULES REVIEW COMMITTEE**

- Date of meeting: A special meeting of the Administrative Rules Review Committee (ARRC) was held on Monday, April 20, 2015, at 11 a.m. in Room 116, State Capitol, Des Moines, Iowa.
- Members present: Representative Dawn Pettengill, Chair, and Senator Wally Horn, Vice Chair; Senators Mark Chelgren, Mark Costello, and Pam Jochum; Representatives Lisa Heddens, Megan Jones, Rick Olson, and Guy Vander Linden were present. Senator Thomas Courtney was not present.
- Also present: Jack Ewing and Tim Reilly, Legal Counsel; Stephanie A. Hoff, Administrative Code Editor; Larry Johnson, Deputy Legal Counsel, Office of the Governor; and other interested parties.
- Convened Rep. Pettengill convened the meeting at 11:03 a.m. The committee agreed to receive further public comment on ARC 1909C.

PROFESSIONAL LICENSURE DIVISION Tony Alden represented the division. Other interested parties included Ed Friedmann, PA, on behalf of the Iowa Association of Rural Health Clinics; Darcy Rubenking, PA, of Lenox, Iowa; Theresa Ludeking, PA, of Williamsburg, Iowa; Dennis Tibben of the Iowa Medical Society; and Mark Bowden of the medicine board.

ARC 1909C At its regular, statutory meeting held Friday, April 10, 2015, the committee agreed to hold a special meeting to further review the amendments to 327.4(2), which remove the requirement that every two weeks, a supervising physician visit a practicing physician assistant (PA) at a remote medical site. Mr. Alden stated that 12 comments had been received during the rule-making process. He explained that comments in opposition were centered on the belief that an on-site visit by the supervising physician every two weeks is an absolute minimum and that the requirement is not a burden on the supervising physician. He stated that comments in support noted the removal of the federal requirement for biweekly on-site visits every two weeks and the need for access to health care in rural areas.

Mr. Friedmann stated that detailed statutory supervision requirements are in place; that PAs, who have education comparable to that of advanced registered nurse practitioners (ARNPs), should be allowed the same independence from an on-site visit requirement as ARNPs; that the supervising physician should be allowed to evaluate the PA's skills and ability and then delegate to the PA appropriate tasks related to patient care; and that national physician groups support more flexible regulation of PA supervision. Ms. Rubenking stated that the biweekly visit by the supervising physician allows for case review and a good supervising physician-PA working relationship and noted that the biweekly visits were most likely instituted when charts were physically carried to the remote site by the supervising physician. Ms. Ludeking stated the on-site visit requirement influences decisions by clinic administrators in the hiring of ARNPs instead of PAs. Ms. Ludeking also summarized the educational requirements for PAs.

Mr. Tibben stated that supervising physicians do not view the required on-site visit as a burden and that an on-site visit provides an opportunity for supervising physician-PA collaboration that enhances the quality of health care. In addition, he stated that neither state legislation nor directives by the Centers for Medicare and Medicaid Services (CMS) are the basis for the amendments and that a change in the on-site visit requirement should be addressed through the legislative process. Mr. Bowden asserted that the states regulate the practice of medicine, including the scope of practice and licensure of practitioners; that the on-site visit allows for monitoring of a PA's medical practice by the supervising physician; that the public expects PAs to be supervised; and that a review of the rules for supervision of PAs is necessary.

Professional Licensure Division (continued)

In response to committee members' questions, the following topics were discussed: the vote by the board of physician assistants to approve the amendment; the consequences for failure by supervising physicians to meet the on-site supervision requirement; the educational requirements for PAs and ARNPs and alternatives to the requirements, if any; the prevalence of PA-led rural health clinics; and liability issues related to supervision. In addition, Sen. Chelgren inquired about and expressed an interest in researching whether there are in Iowa any specially equipped vehicles used as mobile remote medical sites.

Sen. Chelgren stated that the boards of medicine and physician assistants are entrusted by the legislature with the autonomy and decision-making authority to promulgate rules to regulate their respective practices of medicine. Because the boards are unable to agree on the rule regarding on-site supervision every two weeks, Sen. Chelgren cautioned them that as a result of a session delay, the legislature may impose a statutory change that is not satisfactory to the boards. Mr. Bowden suggested that Iowa Code section 148.13 had been written to address the concern expressed by Sen. Chelgren.

Motion to delay

Rep. Vander Linden moved a session delay on 327.4(2).

Motion carried

On a voice vote of 7 to 1, the motion carried. [Note: Because the session delay has occurred during the 2015 General Assembly, it will not expire until the adjournment of the 2016 General Assembly.]

Adjourned

The meeting was adjourned at 11:47 a.m.

Respectfully submitted,

Stephanie A. Hoff

APPROVED:

Chair Dawn Pettengill

Vice Chair Wally Horn