

1 STATE OF OKLAHOMA

2 1st Session of the 55th Legislature (2015)

3 SENATE BILL 753

By: David

4  
5 AS INTRODUCED

6 An Act relating to public health and safety; amending  
7 59 O.S. 2011, Sections 519.2, 519.3, 519.6, 519.10  
8 and 519.11, which relate to the Physician Assistant  
9 Act; modifying and adding certain terms; modifying  
10 composition of membership on Physician Assistant  
11 Committee; permitting supervising physician to be  
12 available to physician assistant by telemedicine;  
13 requiring supervising physician to review sample of  
14 certain records; requiring supervising physician to  
15 make certain determination based on certain  
16 conditions; deleting requirement that physician  
17 assistant obtain certain approval prior to practicing  
18 in remote patient care settings; modifying violations  
19 and penalties concerning unlicensed practice of  
20 medicine; providing for certain interpretation; and  
21 providing an effective date.

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

23 SECTION 1. AMENDATORY 59 O.S. 2011, Section 519.2, is  
24 amended to read as follows:

Section 519.2. As used in the Physician Assistant Act:

1. "Board" means the State Board of Medical Licensure and  
Supervision;

2. "Committee" means the Physician Assistant Committee;

3. "~~Health care services~~ Practice of medicine" means services  
which require training in the diagnosis, treatment and prevention of  
disease, including the use and administration of drugs, and which

1 are performed by physician assistants ~~under the supervision and at~~  
2 ~~the direction of physicians. Such services include, but are not~~  
3 ~~limited to:~~

- 4 a. ~~initially approaching a patient of any age group in a~~  
5 ~~patient care setting to elicit a detailed history,~~  
6 ~~performing a physical examination, delineating~~  
7 ~~problems and recording the data,~~
- 8 b. ~~assisting the physician in conducting rounds in acute~~  
9 ~~and long term inpatient care settings, developing and~~  
10 ~~implementing patient management plans, recording~~  
11 ~~progress notes and assisting in the provision of~~  
12 ~~continuity of care in other patient care settings,~~
- 13 c. ~~ordering, performing or interpreting, at least to the~~  
14 ~~point of recognizing deviations from the norm, common~~  
15 ~~laboratory, radiological, cardiographic and other~~  
16 ~~routine diagnostic procedures used to identify~~  
17 ~~pathophysiologic processes,~~
- 18 d. ~~ordering or performing routine procedures such as~~  
19 ~~injections, immunizations, suturing and wound care,~~  
20 ~~and managing simple conditions produced by infection,~~  
21 ~~trauma or other disease processes,~~
- 22 e. ~~assisting in the management of more complex illness~~  
23 ~~and injuries, which may include assisting surgeons in~~  
24 ~~the conduct of operations and taking initiative in~~

1 ~~performing evaluation and therapeutic procedures in~~  
2 ~~response to life-threatening situations,~~

3 f. ~~instructing and counseling patients regarding~~  
4 ~~compliance with prescribed therapeutic regimens,~~  
5 ~~normal growth and development, family planning,~~  
6 ~~emotional problems of daily living and health~~  
7 ~~maintenance,~~

8 g. ~~facilitating the referral of patients to the~~  
9 ~~community's health and social service agencies when~~  
10 ~~appropriate, and~~

11 h. ~~providing health care services which are delegated by~~  
12 ~~the supervising physician when the service:~~

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

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

17 ~~(3) is are provided with supervision, including~~  
18 ~~authenticating with the signature any form that~~  
19 ~~may be authenticated by the supervising~~  
20 ~~physician's signature with prior delegation by~~  
21 ~~the physician.~~

22 Nothing in the Physician Assistant Act shall be construed to permit  
23 physician assistants to provide health care services independent of  
24 physician supervision;

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

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

11 6. ~~"Physician Assistant Drug Formulary" means a list of drugs~~  
12 ~~and other medical supplies, approved by the State Board of Medical~~  
13 ~~Licensure and Supervision after consultation with the State Board of~~  
14 ~~Pharmacy, that physician assistants are permitted to prescribe and~~  
15 ~~order under the direction of their supervising physicians;~~

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

23 8. "Supervising physician" means an individual holding a  
24 license as a physician from the State Board of Medical Licensure and

1 Supervision or the State Board of Osteopathic Examiners, who  
2 supervises physician assistants;

3 ~~9.~~ 7. "Supervision" means overseeing the activities of, and  
4 accepting ~~the~~ responsibility for, ~~the health-care~~ medical services  
5 ~~performed~~ rendered by a physician assistant. The constant physical  
6 presence of the supervising physician is not required as long as the  
7 supervising physician and physician assistant are or can be easily  
8 in contact with each other by telecommunication; and

9 ~~10.~~ 8. "Telecommunication" means the use of electronic  
10 technologies to transmit words, sounds or images for interpersonal  
11 communication, clinical care (telemedicine) and review of electronic  
12 health records; and

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

16 SECTION 2. AMENDATORY 59 O.S. 2011, Section 519.3, is  
17 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) members.  
20 ~~Two~~ Three members of the Committee shall be physician assistants  
21 appointed by the State Board of Medical Licensure and Supervision  
22 from a list of qualified individuals submitted by the Oklahoma  
23 Academy of Physician Assistants. One member shall be a physician  
24 appointed by the Board from its membership. One member shall be a

1 physician appointed by the Board from a list of qualified  
2 individuals submitted by the Oklahoma State Medical Association and  
3 who is not a member of the Board. One member shall be a physician  
4 appointed by the State Board of Osteopathic Examiners from its  
5 membership. One member shall be a physician appointed by the State  
6 Board of Osteopathic Examiners from a list of qualified individuals  
7 submitted by the Oklahoma Osteopathic Association and who is not a  
8 member of said board. ~~One member shall be a licensed pharmacist~~  
9 ~~appointed by the Board of Pharmacy.~~

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

19 C. The Committee shall meet at least quarterly. At the initial  
20 meeting of each calendar year, the Committee, members shall elect a  
21 chair. The chair or his or her designee shall represent the  
22 Committee at all meetings of the Board. Four members shall  
23 constitute a quorum for the purpose of conducting official business  
24 of the Committee.

1 D. The State Board of Medical Licensure and Supervision is  
2 hereby granted the power and authority to promulgate rules, which  
3 are in accordance with the provisions of Section 519.1 et seq. of  
4 this title, governing the requirements for licensure as a physician  
5 assistant, as well as to establish standards for training, approve  
6 institutions for training, and regulate the standards of practice of  
7 a physician assistant after licensure, including the power of  
8 revocation of a license.

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

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

- 19 a. ~~educational standards required to practice as a~~  
20 ~~physician assistant,~~
- 21 b. ~~licensure requirements required to practice as a~~  
22 ~~physician assistant,~~
- 23 c. ~~methods and requirements to assure the continued~~  
24 ~~competence of physician assistants after licensure,~~

- 1           ~~d. the drugs and other medical supplies for which~~  
2           ~~physician assistants are permitted to prescribe and~~  
3           ~~order under the direction of their supervising~~  
4           ~~physicians,~~
- 5           ~~e. the grounds for revocation or suspension of a license~~  
6           ~~for a physician assistant,~~
- 7           ~~f. education and experience requirements to receive~~  
8           ~~approval to practice in remote patient care settings,~~  
9           ~~and~~
- 10          ~~g. all other matters which may pertain to the practice of~~  
11          ~~physician assistants.~~

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

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



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

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

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

- 20 a. being responsible for the formulation or approval of  
21 all orders and protocols, whether standing orders,  
22 direct orders or any other orders or protocols, which  
23 direct the delivery of health care services provided

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1 by a physician assistant, and periodically reviewing  
2 such orders and protocols,

3 b. regularly reviewing the health care services provided  
4 by the physician assistant and any problems or  
5 complications encountered,

6 c. being available physically or through telemedicine or  
7 direct telecommunications for consultation, assistance  
8 with medical emergencies or patient referral, ~~and~~

9 ~~d. being on-site to provide medical care to patients a~~  
10 ~~minimum of one-half (1/2) day per week. Additional~~  
11 ~~on-site supervision may be required at the~~  
12 ~~recommendation of the Physician Assistant Committee~~  
13 ~~and approved by the Board; reviewing a sample of~~  
14 ~~outpatient medical records. Such reviews may take~~  
15 ~~place at the practice site, or via telecommunication,~~  
16 and

17 e. that it remains clear that the physician assistant is  
18 an agent of the supervising physician; but, in no  
19 event shall the supervising physician be an employee  
20 of the physician assistant.

21 C. In patients with newly diagnosed ~~chronic or~~ complex  
22 illnesses, the physician assistant shall contact the supervising  
23 physician within forty-eight (48) hours of the physician assistant's  
24 initial examination or treatment and schedule the patient for

1 appropriate evaluation by the supervising physician as directed by  
2 the physician. The supervising physician shall determine which  
3 conditions qualify as complex illnesses based on the clinical  
4 setting and the skill and experience of the physician assistant.

5 D. 1. A physician assistant under the direction of a  
6 supervising physician may prescribe written and oral prescriptions  
7 and orders. The physician assistant may prescribe drugs, including  
8 controlled medications in Schedules II through V pursuant to Section  
9 2-312 of Title 63 of the Oklahoma Statutes, and medical supplies and  
10 services as delegated by the supervising physician and as approved  
11 by the State Board of Medical Licensure and Supervision after  
12 consultation with the State Board of Pharmacy on the Physician  
13 Assistant Drug Formulary.

14 2. A physician assistant may write an order for a Schedule II  
15 drug for immediate or ongoing administration on site. Prescriptions  
16 and orders for Schedule II drugs written by a physician assistant  
17 must be included on a written protocol determined by the supervising  
18 physician and approved by the medical staff committee of the  
19 facility or by direct verbal order of the supervising physician.  
20 Physician assistants may not dispense drugs, but may request,  
21 receive, and sign for professional samples and may distribute  
22 professional samples to patients.

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

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

11 G. Each physician assistant licensed under the Physician  
12 Assistant Act shall keep his or her license available for inspection  
13 at the primary place of business and shall, when engaged in  
14 professional activities, identify himself or herself as a physician  
15 assistant.

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

18 Section 519.10. Any person ~~who holds herself or himself out as~~  
19 ~~a physician assistant or uses the title "Physician Assistant"~~  
20 ~~without being licensed, or who otherwise violates the provisions of~~  
21 ~~Section 519.1 et seq. of this title shall be guilty of a misdemeanor~~  
22 ~~and, upon conviction, shall be punished by a fine of not less than~~  
23 ~~Fifty Dollars (\$50.00), nor more than Five Hundred Dollars~~  
24 ~~(\$500.00), by imprisonment in the county jail for not less than five~~

1 ~~(5) days, nor more than thirty (30) days, or by both such fine and~~  
2 ~~imprisonment. Each day of a violation of the provisions of Section~~  
3 ~~519.1 et seq. of this title shall constitute a separate and distinct~~  
4 ~~offense. Conviction shall also be grounds for the suspension or~~  
5 ~~revocation of the license of a duly licensed physician assistant not~~  
6 licensed under the Physician Assistant Act is guilty of a  
7 misdemeanor and is subject to penalties applicable to the unlicensed  
8 practice of medicine if he or she:

9 1. Holds himself or herself out as a physician assistant;

10 2. Uses any combination or abbreviation of the term "physician  
11 assistant" to indicate or imply that he or she is a physician  
12 assistant; or

13 3. Acts as a physician assistant without being licensed by the  
14 State Board of Medical Licensure and Supervision.

15 An unlicensed physician shall not be permitted to use the title  
16 of "physician assistant" or to practice as a physician assistant  
17 unless he or she fulfills the requirements of Section 519.1 et seq.  
18 of this title.

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

21 Section 519.11. A. Nothing in ~~this act~~ the Physician Assistant  
22 Act shall be construed to prevent or restrict the practice, services  
23 or activities of any persons of other licensed professions or  
24 personnel supervised by licensed professions in this state from

1 performing work incidental to the practice of their profession or  
2 occupation, if that person does not represent himself as a physician  
3 assistant.

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

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

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

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

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21 55-1-665 AM 1/22/2015 8:29:29 PM  
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