1	Senate Bill No. 535
2	(By Senators Stollings, Foster and Miller)
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4	[Introduced February 7, 2012; referred to the Committee on Health
5	and Human Resources.]
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10	A BILL to amend and reenact $\$30-3-16$ of the Code of West Virginia,
11	1931, as amended; to amend and reenact §30-7-15a of said code;
12	and to amend and reenact §30-14A-1 of said code, all relating
13	to expanding prescriptive authority of advanced nurse
14	practitioners, physician assistants and assistants to
15	osteopathic physicians and surgeons to allow the prescribing
16	of medications for chronic diseases for a ninety-day period
17	with three ninety-day refills.
18	Be it enacted by the Legislature of West Virginia:
19	That §30-3-16 of the Code of West Virginia, 1931, as amended,
20	be amended and reenacted; that §30-7-15a of said code be amended
21	and reenacted; and that §30-14A-1 of said code be amended and
22	reenacted, all to read as follows:
23	ARTICLE 3. WEST VIRGINIA MEDICAL PRACTICE ACT.

Physician assistants; definitions; Board of Medicine 1 §30-3-16. 2 rules; annual report; licensure; temporary license; 3 relicensure; job description required; revocation or responsibilities 4 suspension of licensure; of 5 supervising physician; legal responsibility for 6 physician assistants; reporting by health care 7 facilities; identification; limitations on employment 8 and duties; fees; continuing education; unlawful 9 representation of physician assistant as a physician; 10 criminal penalties.

11 (a) As used in this section:

(1) "Approved program" means an educational program for physician assistants approved and accredited by the Committee on Accreditation of Allied Health Education Programs or its successor; (2) "Health care facility" means any licensed hospital, nursing home, extended care facility, state health or mental rinstitution, clinic or physician's office;

(3) "Physician assistant" means an assistant to a physician who is a graduate of an approved program of instruction in primary health care or surgery, has attained a baccalaureate or master's degree, has passed the national certification examination and is qualified to perform direct patient care services under the

1 supervision of a physician;

2 (4) "Physician assistant-midwife" means a physician assistant 3 who meets all qualifications set forth under subdivision (3) of 4 this subsection and fulfills the requirements set forth in 5 subsection (d) of this section, is subject to all provisions of 6 this section and assists in the management and care of a woman and 7 her infant during the prenatal, delivery and postnatal periods; and 8 (5) "Supervising physician" means a doctor or doctors of 9 medicine or podiatry permanently and fully licensed in this state 10 without restriction or limitation who assume legal and supervisory 11 responsibility for the work or training of any physician assistant 12 under his or her supervision.

(b) The board shall promulgate rules pursuant to the 14 provisions of article three, chapter twenty-nine-a of this code 15 governing the extent to which physician assistants may function in 16 this state. The rules shall provide that the physician assistant 17 is limited to the performance of those services for which he or she 18 is trained and that he or she performs only under the supervision 19 and control of a physician permanently licensed in this state but 20 that supervision and control does not require the personal presence 21 of the supervising physician at the place or places where services 22 are rendered if the physician assistant's normal place of 23 employment is on the premises of the supervising physician. The

1 supervising physician may send the physician assistant off the 2 premises to perform duties under his or her direction but a 3 separate place of work for the physician assistant may not be 4 established. In promulgating the rules, the board shall allow the 5 physician assistant to perform those procedures and examinations 6 and, in the case of certain authorized physician assistants, to 7 prescribe at the direction of his or her supervising physician, in 8 accordance with subsection (r) of this section, those categories of 9 drugs submitted to it in the job description required by this Certain authorized physician assistants may pronounce 10 section. 11 death in accordance with the rules proposed by the board which 12 receive legislative approval. The board shall compile and publish 13 an annual report that includes a list of currently licensed 14 physician assistants and their supervising physician(s) and 15 location in the state.

16 (c) The board shall license as a physician assistant any 17 person who files an application together with a proposed job 18 description and furnishes satisfactory evidence to it that he or 19 she has met the following standards:

(1) Is a graduate of an approved program of instruction in21 primary health care or surgery;

(2) Has passed the certifying examination for a primary care23 physician assistant administered by the National Commission on

1 Certification of Physician Assistants and has maintained 2 certification by that commission so as to be currently certified;

3

(3) Is of good moral character; and

4

(4) Has attained a baccalaureate or master's degree.

5 (d) The board shall license as a physician assistant-midwife 6 any person who meets the standards set forth under subsection (c) 7 of this section and, in addition thereto, the following standards: 8 (1) Is a graduate of a school of midwifery accredited by the 9 American College of Nurse-midwives;

10 (2) Has passed an examination approved by the board; and

11 (3) Practices midwifery under the supervision of a 12 board-certified obstetrician, gynecologist or a board-certified 13 family practice physician who routinely practices obstetrics.

(e) The board may license as a physician assistant any person by who files an application together with a proposed job description and furnishes satisfactory evidence that he or she is of good moral character and meets either of the following standards:

18 (1) He or she is a graduate of an approved program of 19 instruction in primary health care or surgery prior to July 1, 20 1994, and has passed the certifying examination for a physician 21 assistant administered by the National Commission on Certification 22 of Physician Assistants and has maintained certification by that 23 commission so as to be currently certified; or

1 (2) He or she had been certified by the board as a physician 2 assistant then classified as "Type B" prior to July 1, 1983.

3 (f) Licensure of an assistant to a physician practicing the 4 specialty of ophthalmology is permitted under this section: 5 *Provided*, That a physician assistant may not dispense a 6 prescription for a refraction.

7 (g) When a graduate of an approved program who has 8 successfully passed the National Commission on Certification of 9 Physician Assistants' certifying examination submits an application 10 to the board for a physician assistant license, accompanied by a 11 job description as referenced by this section, and a \$50 temporary 12 license fee, and the application is complete, the board shall issue 13 to that applicant a temporary license allowing that applicant to 14 function as a physician assistant.

(h) When a graduate of an approved program submits an application to the board for a physician assistant license, accompanied by a job description as referenced by this section, and a \$50 temporary license fee, and the application is complete, the board shall issue to that the applicant a temporary license allowing that the applicant to function as a physician assistant until the applicant successfully passes the National Commission on Certification of Physician Assistants' certifying examination *Provided*, That the applicant shall sit for and obtain so long as

1 the applicant sits for and obtains a passing score on the 2 examination next offered following graduation from the approved 3 program.

4 (i) No applicant may receive a temporary license who, 5 following graduation from an approved program, has sat for and not 6 obtained a passing score on the examination.

7 (j) A physician assistant who has not been certified by the 8 National Commission on Certification of Physician Assistants will 9 be restricted to work under the direct supervision of the 10 supervising physician.

11 (k) A physician assistant who has been issued a temporary 12 license shall, within thirty days of receipt of written notice from 13 the National Commission on Certification of Physician Assistants of 14 his or her performance on the certifying examination, notify the 15 board in writing of his or her results. In the event of failure of 16 that examination, the temporary license shall expire and terminate 17 automatically and the board shall so notify the physician assistant 18 in writing.

(1) In the event that a physician assistant fails a 20 recertification examination of the National Commission on 21 Certification of Physician Assistants and is no longer certified, 22 the physician assistant shall immediately notify his or her 23 supervising physician or physicians and the board in writing. The

1 physician assistant shall immediately cease practicing, the license 2 shall expire and terminate automatically and the physician 3 assistant is not eligible for reinstatement until he or she has 4 obtained a passing score on the examination.

5 (m) Any <u>A</u> physician applying to the board to supervise a 6 physician assistant shall affirm that the range of medical services 7 set forth in the physician assistant's job description are 8 consistent with the skills and training of the supervising 9 physician and the physician assistant. Before a physician 10 assistant can be employed or otherwise use his or her skills, the 11 supervising physician and the physician assistant must obtain 12 approval of the job description from the board. The board may 13 revoke or suspend any license of an assistant to a physician for 14 cause, after giving that the assistant an opportunity to be heard 15 in the manner provided by article five, chapter twenty-nine-a of 16 this code and as set forth in rules duly adopted by the board.

(n) The supervising physician is responsible for observing, 18 directing and evaluating the work, records and practices of each 19 physician assistant performing under his or her supervision. He or 20 she shall notify the board in writing of any termination of his or 21 her supervisory relationship with a physician assistant within ten 22 days of the termination. The legal responsibility for any 23 physician assistant remains with the supervising physician at all

1 times including occasions when the assistant under his or her 2 direction and supervision aids in the care and treatment of a 3 patient in a health care facility. In his or her absence, a 4 supervising physician must designate an alternate supervising 5 physician however, but the legal responsibility remains with the 6 supervising physician at all times. A health care facility is not 7 legally responsible for the actions or omissions of the physician 8 assistant unless the physician assistant is an employee of the 9 facility.

10 (o) The acts or omissions of a physician assistant employed by 11 health care facilities providing inpatient or outpatient services 12 shall be <u>are</u> the legal responsibility of the facilities. Physician 13 assistants employed by facilities in staff positions shall be 14 supervised by a permanently licensed physician.

(p) A health care facility shall report in writing to the board within sixty days after the completion of the facility's formal disciplinary procedure and also after the commencement and again after the conclusion of any resulting legal action, the name of any physician assistant practicing in the facility whose privileges at the facility have been revoked, restricted, reduced or terminated for any cause including resignation, together with all pertinent information relating to the action. The health care facility shall also report any other formal disciplinary action

1 taken against any physician assistant by the facility relating to 2 professional ethics, medical incompetence, medical malpractice, 3 moral turpitude or drug or alcohol abuse. Temporary suspension for 4 failure to maintain records on a timely basis or failure to attend 5 staff or section meetings need not be reported.

6 (q) When functioning as a physician assistant, the physician 7 assistant shall wear a name tag that identifies him or her as a 8 physician assistant. A two and one-half by three and one-half inch 9 card of identification shall be furnished by the board upon 10 licensure of the physician assistant.

(r) A physician assistant may write or sign prescriptions or transmit prescriptions by word of mouth, telephone or other means of communication at the direction of his or her supervising hypician. A fee of \$50 will be charged for prescription writing privileges. The board shall promulgate rules pursuant to the for provisions of article three, chapter twenty-nine-a of this code governing the eligibility and extent to which a physician assistant may prescribe at the direction of the supervising physician. The rules shall include, but not be limited to, the following:

20 (1) Provisions <u>and restrictions</u> for approving a state 21 formulary classifying pharmacologic categories of drugs that may be 22 prescribed by a physician assistant <u>are as follows:</u>

23 (A) The following categories of drugs shall be excluded from

1 the formulary: Schedules I and II of the Uniform Controlled 2 Substances Act, anticoagulants, antineoplastic, 3 radiopharmaceuticals, general anesthetics and radiographic contrast 4 materials shall be excluded from the formulary;

5 (B) Drugs listed under Schedule III shall be limited to a 6 seventy-two hour supply without refill; and

7 (C) At the direction of a supervising physician, permit the 8 prescribing of a ninety-day supply with three, ninety-day refills 9 of any drug which is prescribed for the treatment of a chronic 10 condition. For the purposes of this section, a chronic condition 11 is a condition which lasts three months or more, generally cannot 12 be prevented by vaccines, can be controlled but not cured by 13 medication and does not generally disappear. These conditions 14 include arthritis, asthma, cardiovascular disease, cancer, 15 diabetes, epilepsy and seizures, obesity and oral health problems; 16 and

17 (C) (D) Categories of other drugs may be excluded as 18 determined by the board.

(2) All pharmacological categories of drugs to be prescribed 20 by a physician assistant shall be listed in each job description 21 submitted to the board as required in subsection (i) of this 22 section;

23 (3) The maximum dosage a physician assistant may prescribe;

1 (4) A requirement that to be eligible for prescription 2 privileges, a physician assistant shall have performed patient care 3 services for a minimum of two years immediately preceding the 4 submission to the board of the job description containing 5 prescription privileges and shall have successfully completed an 6 accredited course of instruction in clinical pharmacology approved 7 by the board; and

(5) A requirement that to maintain prescription privileges, a 8 continue 9 physician assistant shall to maintain National 10 Certification as a Physician Assistant and, in meeting the national 11 certification requirements, shall complete a minimum of ten hours continuing education in rational drug therapy in each 12 of 13 certification period. Nothing in this subsection shall be 14 construed to permit permits a physician assistant to independently 15 prescribe or dispense drugs.

(s) A supervising physician may not supervise at any one time more than three full-time physician assistants or their equivalent, except that a physician may supervise up to four hospital-employed physician assistants. No physician shall supervise more than four physician assistants at any one time.

(t) A physician assistant may not sign any prescription, 22 except in the case of an authorized physician assistant at the 23 direction of his or her supervising physician in accordance with

1 the provisions of subsection (r) of this section. A physician 2 assistant may not perform any service that his or her supervising 3 physician is not qualified to perform. A physician assistant may 4 not perform any service that is not included in his or her job 5 description and approved by the board as provided for in this 6 section.

7 (u) The provisions of this section do not authorize any <u>a</u> 8 physician assistant to perform any specific function or duty 9 delegated by this code to those persons licensed as chiropractors, 10 dentists, dental hygienists, optometrists or pharmacists or 11 certified as nurse anesthetists.

(v) Each application for licensure submitted by a licensed supervising physician under this section is to be accompanied by a fee of \$200. A fee of \$100 is to be charged for the biennial renewal of the license. A fee of \$50 is to be charged for any change or addition of supervising physician or change or addition of job location. A fee of \$50 will be charged for prescriptive writing privileges.

(w) As a condition of renewal of physician assistant license,
each physician assistant shall provide written documentation of
participation in and successful completion during the preceding
two-year period of continuing education, in the number of hours
specified by the board by rule, designated as Category I by the

American Medical Association, American Academy of Physician
 Assistants or the Academy of Family Physicians and continuing
 education, in the number of hours specified by the board by rule,
 designated as Category II by the Association or either Academy.

5 (x) Notwithstanding any provision of this chapter to the 6 contrary, failure to timely submit the required written 7 documentation shall result results in the automatic expiration of 8 any license as a physician assistant until the written 9 documentation is submitted to and approved by the board.

10 (y) If a license is automatically expired and reinstatement is 11 sought within one year of the automatic expiration, the former 12 licensee shall:

13 (1) Provide certification with supporting written 14 documentation of the successful completion of the required 15 continuing education;

16 (2) Pay a renewal fee; and

17 (3) Pay a reinstatement fee equal to fifty percent of the 18 renewal fee.

(z) If a license is automatically expired and more than one 20 year has passed since the automatic expiration, the former licensee 21 shall:

22 (1) Apply for a new license;

23 (2) Provide certification with supporting written

1 documentation of the successful completion of the required 2 continuing education; and

3 (3) Pay such fees as determined by the board.

4 (aa) It is unlawful for any physician assistant to represent 5 to any person that he or she is a physician, surgeon or podiatrist. 6 Any <u>A</u> person who violates the provisions of this subsection is 7 guilty of a felony and, upon conviction thereof, shall be 8 imprisoned in a state correctional facility for not less than one 9 nor more than two years, or be fined not more than \$2,000, or both 10 fined and imprisoned.

(bb) All physician assistants holding valid certificates sued by the board prior to July 1, 1992, shall be considered to are licensed under this section.

14 ARTICLE 7. REGISTERED PROFESSIONAL NURSES.

15 §30-7-15a. Prescriptive authority for prescription drugs;
 16 coordination with Board of Pharmacy.

(a) The board may, in its discretion, authorize an advanced nurse practitioner to prescribe prescription drugs in a collaborative relationship with a physician licensed to practice in West Virginia and in accordance with applicable state and federal laws. An authorized advanced nurse practitioner may write or sign prescriptions or transmit prescriptions verbally or by other means of communication.

1 (b) For purposes of this section an agreement to a 2 collaborative relationship for prescriptive practice between a 3 physician and an advanced nurse practitioner shall be set forth in 4 writing. Verification of such the agreement shall be filed with 5 the board by the advanced nurse practitioner. The board shall 6 forward a copy of such the verification to the Board of Medicine. 7 Collaborative agreements shall include, but not be are not limited 8 to, the following:

9 (1) Mutually agreed upon written guidelines or protocols for 10 prescriptive authority as it applies to the advanced nurse 11 practitioner's clinical practice;

12 (2) Statements describing the individual and shared 13 responsibilities of the advanced nurse practitioner and the 14 physician pursuant to the collaborative agreement between them;

15 (3) Periodic and joint evaluation of prescriptive practice; 16 and

17 (4) Periodic and joint review and updating of the written18 guidelines or protocols.

19 (c) The board shall promulgate legislative rules in accordance 20 with the provisions of chapter twenty-nine-a of this code governing 21 the eligibility and extent to which an advanced nurse practitioner 22 may prescribe drugs. Such rules shall provide, at a minimum, a 23 state formulary classifying those categories of drugs which shall

1 not be prescribed by advanced nurse practitioners including, but 2 not limited to, Schedules I and II of the Uniform Controlled 3 Substances Act, anticoagulants, antineoplastics, 4 radio-pharmaceuticals and general anesthetics. Drugs listed under 5 schedule III shall be limited to a seventy-two hour supply without 6 refill. Additionally, pursuant to a collaborative agreement as set 7 forth in subsection (r) of this section, the rules shall permit the 8 prescribing of a ninety-day supply with three, ninety-day refills 9 of any drug which is prescribed for the treatment of a chronic 10 condition. For the purposes of this section, a chronic condition 11 is a condition which last three months or more, generally cannot be 12 prevented by vaccines, can be controlled but not cured by 13 medication and does not generally disappear. These conditions 14 include arthritis, asthma, cardiovascular disease, cancer, 15 diabetes, epilepsy and seizures, obesity, and oral health problems. (d) The board shall consult with other appropriate boards for 16 17 the development of the formulary.

(e) The board shall transmit to the Board of Pharmacy a list
of all advanced nurse practitioners with prescriptive authority.
20 The list shall include:

(1) The name of the authorized advanced nurse practitioner;
(2) The prescriber's identification number assigned by the
23 board; and

1 (3) The effective date of prescriptive authority.

2 ARTICLE 14A. ASSISTANTS TO OSTEOPATHIC PHYSICIANS AND SURGEONS. 3 §30-14A-1. Osteopathic physician assistant to osteopathic 4 physicians and surgeons; definitions; board of 5 osteopathy rules; licensure; temporary licensure; 6 renewal of license; job description required; 7 revocation or suspension of license; responsibilities of the supervising physician; 8 9 legal responsibility for osteopathic physician assistants; reporting of disciplinary procedures; 10 11 identification; limitation on employment and 12 duties; fees; unlawful use of the title of "osteopathic physician assistant"; 13 unlawful 14 representation of an osteopathic physician 15 assistant as a physician; criminal penalties.

16 (a) As used in this section:

17 (1) "Approved program" means an educational program for 18 osteopathic physician assistants approved and accredited by the 19 Committee on Allied Health Education and Accreditation or its 20 successor.

(2) "Board" means the Board of Osteopathy established under22 the provisions of article fourteen, chapter thirty of this code.

1 (3) "Direct supervision" means the presence of the supervising 2 physician at the site where the osteopathic physician assistant 3 performs medical duties.

4 (4) "Health care facility" means any licensed hospital, 5 nursing home, extended care facility, state health or mental 6 institution, clinic or physician's office.

7 (5) "License" means a certificate issued to an osteopathic 8 physician assistant who has passed the examination for a primary 9 care or surgery physician assistant administered by the National 10 Board of Medical Examiners on behalf of the National Commission on 11 Certification of Physician Assistants. All osteopathic physician 12 assistants holding valid certificates issued by the board prior to 13 March 31, 2010, shall be considered to be <u>are</u> licensed under the 14 provisions of this article, *Provided*, That a person holding a 15 certificate issued prior to March 31, 2010, but must renew the 16 license pursuant to the provisions of this article.

17 (6) "Osteopathic physician assistant" means an assistant to an 18 osteopathic physician who is a graduate of an approved program of 19 instruction in primary care or surgery, has passed the National 20 Certification Examination and is qualified to perform direct 21 patient care services under the supervision of an osteopathic 22 physician.

23 (7) "Supervising physician" means a doctor of osteopathy

1 permanently licensed in this state who assumes legal and 2 supervising responsibility for the work or training of $\frac{1}{2}$ and 3 osteopathic physician assistant under his or her supervision.

4 (b) The board shall propose emergency and legislative rules 5 for legislative approval pursuant to the provisions of article 6 three, chapter twenty-nine-a of this code, governing the extent to 7 which osteopathic physician assistants may function in this state. 8 The rules shall provide that:

9 (1) The osteopathic physician assistant is limited to the 10 performance of those services for which he or she is trained;

11 (2) The osteopathic physician assistant performs only under 12 the supervision and control of an osteopathic physician permanently 13 licensed in this state but such supervision and control does not 14 require the personal presence of the supervising physician at the 15 place or places where services are rendered if the osteopathic 16 physician assistant's normal place of employment is on the premises 17 of the supervising physician. The supervising physician may send 18 the osteopathic physician assistant off the premises to perform 19 duties under his or her direction, but a separate place of work for 20 the osteopathic physician assistant may not be established; and

(3) The board may allow the osteopathic physician assistant to perform those procedures and examinations and, in the case of authorized osteopathic physician assistants, to prescribe at the

1 direction of his or her supervising physician in accordance with 2 subsections (p) and (q) of this section those categories of drugs 3 submitted to it in the job description required by subsection (f) 4 of this section.

5 (c) The board shall compile and publish an annual report that 6 includes a list of currently licensed osteopathic physician 7 assistants and their employers and location in the state.

8 (d) The board shall license as an osteopathic physician 9 assistant any <u>a</u> person who files an application together with a 10 proposed job description and furnishes satisfactory evidence that 11 he or she has met the following standards:

12 (1) Is a graduate of an approved program of instruction in 13 primary health care or surgery;

(2) Has passed the examination for a primary care or surgery
physician assistant administered by the National Board of Medical
Examiners on behalf of the National Commission on Certification of
Physician Assistants; and

18 (3) Is of good moral character.

19 (e) When any <u>a</u> graduate of an approved program submits an 20 application to the board, accompanied by a job description in 21 conformity with this section, for an osteopathic physician 22 assistant license, the board may issue to the applicant a temporary 23 license allowing the applicant to function as an osteopathic

1 physician assistant for the period of one year. The temporary 2 license may be renewed for one additional year upon the request of 3 the supervising physician. An osteopathic physician assistant who 4 has not been certified as such by the National Board of Medical 5 Examiners on behalf of the National Commission on Certification of 6 Physician Assistants will be restricted to work under the direct 7 supervision of the supervising physician.

8 (f) Any An osteopathic physician applying to the board to 9 supervise an osteopathic physician assistant shall provide a job 10 description that sets forth the range of medical services to be 11 provided by the assistant. Before an osteopathic physician 12 assistant can be employed or otherwise use his or her skills, the 13 supervising physician must obtain approval of the job description 14 from the board. The board may revoke or suspend any <u>a</u> license of 15 an assistant to a physician for cause, after giving <u>such the</u> person 16 an opportunity to be heard in the manner provided by sections eight 17 and nine, article one of this chapter.

(g) The supervising physician is responsible for observing, 19 directing and evaluating the work records and practices of each 20 osteopathic physician assistant performing under his or her 21 supervision. He or she shall notify the board in writing of any 22 termination of his or her supervisory relationship with an 23 osteopathic physician assistant within ten days of his or her

1 termination. The legal responsibility for any osteopathic 2 physician assistant remains with the supervising physician at all 3 times, including occasions when the assistant, under his or her 4 direction and supervision, aids in the care and treatment of a 5 patient in a health care facility. In his or her absence, a 6 supervising physician must designate an alternate supervising 7 physician however, but the legal responsibility remains with the 8 supervising physician at all times. A health care facility is not 9 legally responsible for the actions or omissions of an osteopathic 10 physician assistant unless the osteopathic physician assistant is 11 an employee of the facility.

12 (h) The acts or omissions of an osteopathic physician 13 assistant employed by health care facilities providing in-patient 14 services are the legal responsibility of the facilities. 15 Osteopathic physician assistants employed by such facilities in 16 staff positions shall be supervised by a permanently licensed 17 physician.

(i) A health care facility shall report in writing to the board within sixty days after the completion of the facility's formal disciplinary procedure, and also after the commencement and again after the conclusion of any resulting legal action, the name of <u>any an</u> osteopathic physician assistant practicing in the facility whose privileges at the facility have been revoked,

1 restricted, reduced or terminated for any cause including 2 resignation, together with all pertinent information relating to 3 such action. The health care facility shall also report any other 4 formal disciplinary action taken against any <u>an</u> osteopathic 5 physician assistant by the facility relating to professional 6 ethics, medical incompetence, medical malpractice, moral turpitude 7 or drug or alcohol abuse. Temporary suspension for failure to 8 maintain records on a timely basis or failure to attend staff or 9 section meetings need not be reported.

(j) When functioning as an osteopathic physician assistant, the osteopathic physician assistant shall wear a name tag that identifies him or her as a physician assistant.

13 (k) (1) A supervising physician shall not supervise at any 14 time more than three osteopathic physician assistants except that 15 a physician may supervise up to four hospital-employed osteopathic 16 physician assistants: *Provided*, That an alternative supervisor has 17 been designated for each.

18 (2) An osteopathic physician assistant shall not perform any 19 service that his or her supervising physician is not qualified to 20 perform.

(3) An osteopathic physician assistant shall not perform any 22 service that is not included in his or her job description and 23 approved by the board as provided in this section.

1 (4) The provisions of this section do not authorize an 2 osteopathic physician assistant to perform any specific function or 3 duty delegated by this code to those persons licensed as 4 chiropractors, dentists, registered nurses, licensed practical 5 nurses, dental hygienists, optometrists or pharmacists or certified 6 as nurse anesthetists.

7 (1) An application for license or renewal of license shall be 8 accompanied by payment of a fee which shall be established by 9 legislative rule of the Board of Osteopathy pursuant to the 10 provisions of article three, chapter twenty-nine-a of this code.

11 (m) As a condition of renewal of an osteopathic physician 12 assistant license, each osteopathic physician assistant shall 13 provide written documentation satisfactory to the board of 14 participation in and successful completion of continuing education 15 in courses approved by the Board of Osteopathy for the purposes of 16 continuing education of osteopathic physician assistants. The 17 osteopathy board shall propose legislative rules for minimum 18 continuing hours necessary for the renewal of a license. These 19 rules shall provide for minimum hours equal to or more than the 20 hours necessary for national certification. Notwithstanding any 21 provision of this chapter to the contrary, failure to timely submit 22 the required written documentation shall result results in the 23 automatic suspension of any <u>a</u> license as an osteopathic physician

1 assistant until such time as the written documentation is submitted
2 to and approved by the board.

3 (n) It is unlawful for any person who is not licensed by the 4 board as an osteopathic physician assistant to use the title of 5 "osteopathic physician assistant" or to represent to any other 6 person that he or she is an osteopathic physician assistant. Any 7 <u>A</u> person who violates the provisions of this subsection is guilty 8 of a misdemeanor and, upon conviction thereof, shall be fined not 9 more than \$2,000.

10 (o) It is unlawful for any <u>an</u> osteopathic physician assistant 11 to represent to any person that he or she is a physician. Any <u>A</u> 12 person who violates the provisions of this subsection is guilty of 13 a felony, and, upon conviction thereof, shall be imprisoned in a 14 state correctional facility for not less than one, nor more than 15 two years, or be fined not more than \$2,000, or both fined and 16 imprisoned.

(p) An osteopathic physician assistant may write or sign prescriptions or transmit prescriptions by word of mouth, telephone or other means of communication at the direction of his or her supervising physician. The board shall propose rules for legislative approval in accordance with the provisions of article three, chapter twenty-nine-a of this code governing the eligibility and extent to which such an osteopathic physician assistant may

1 prescribe at the direction of the supervising physician. The rules 2 shall provide for a state formulary classifying pharmacologic 3 categories of drugs which may be prescribed by such an osteopathic 4 physician assistant. In classifying such pharmacologic categories, 5 those categories of drugs which shall be excluded shall include, 6 but not be include, but are not limited to, Schedules I and II of 7 the Uniform Controlled Substances Act, anticoaqulants, 8 antineoplastics, radio-pharmaceuticals, general anesthetics and 9 radiographic contrast materials. Drugs listed under Schedule III 10 are limited to a seventy-two hour supply without refill. 11 Additionally, at the direction of a supervising physician, the 12 rules shall permit the prescribing of a ninety-day supply with 13 three, ninety-day refills of any drug which is prescribed for the 14 treatment of a chronic condition. For the purposes of this 15 section, a chronic condition is a condition which last three months 16 or more, generally cannot be prevented by vaccines, can be 17 controlled but not cured by medication and does not generally 18 disappear. These conditions include arthritis, asthma, 19 cardiovascular disease, cancer, diabetes, epilepsy and seizures, 20 obesity, and oral health problems. The rules shall provide that 21 all pharmacological categories of drugs to be prescribed by an 22 osteopathic physician assistant shall be listed in each job 23 description submitted to the board as required in this section.

The rules shall provide the maximum dosage an osteopathic physician
 assistant may prescribe.

3 (q) (1) The rules shall also provide that to be eligible for 4 such prescription privileges, an osteopathic physician assistant 5 must:

6 <u>(A)</u> Submit an application to the board for such prescription 7 privileges; The rules shall also provide that an osteopathic 8 physician assistant shall

9 <u>(B)</u> Have performed patient care services for a minimum of two 10 years immediately preceding the submission to the board of said 11 application for prescription privileges and shall the application; 12 and

13 (C) Have successfully completed an accredited course of 14 instruction in clinical pharmacology approved by the board.

15 (2) The rules shall also provide that to maintain prescription
16 privileges, an osteopathic physician assistant shall:

17 <u>(A)</u> <u>Continue to maintain national certification as an 18 osteopathic physician assistant; and in meeting such national 19 certification requirements shall</u>

20 (B) Complete a minimum of ten hours of continuing education 21 in rational drug therapy in each licensing period.

22 <u>(3)</u> Nothing in this subsection may be construed to permit 23 permits an osteopathic physician assistant to independently

1 prescribe or dispense drugs.

NOTE: The purpose of this bill is to expand prescriptive authority for physician assistants, advanced nurse practitioners and osteopathic physician assistants to include medications for chronic health conditions within specific limitations.

Strike-throughs indicate language that would be stricken from the present law, and underscoring indicates new language that would be added.