

FIRST REGULAR SESSION

HOUSE BILL NO. 209

94TH GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVES SCHAAF (Sponsor), COOPER (155), ONDER, PAGE, WRIGHT,
FISHER, WHORTON, EMERY AND MEINERS (Co-sponsors).

Pre-filed January 2, 2007 and copies ordered printed.

D. ADAM CRUMBLISS, Chief Clerk

0460L.01I

AN ACT

To repeal section 334.735, RSMo, and to enact in lieu thereof three new sections relating to
medical professionals.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Section 334.735, RSMo, is repealed and three new sections enacted in lieu
2 thereof, to be known as sections 334.108, 334.735, and 334.751, to read as follows:

334.108. Any medical student who has completed two years of medical school at any
2 medical school which currently has received accreditation from the accrediting bodies of
3 either the American Osteopathic Association or the American Medical Association and has
4 entered the clinical rotation phase of their training shall have the same rights and
5 privileges as those granted under 304.104, RSMo, subject to the written approval of the
6 medical school and any attending physician responsible for their training.

334.735. 1. As used in sections 334.735 to 334.749, the following terms mean:

2 (1) "Applicant", any individual who seeks to become licensed as a physician assistant;

3 (2) "Certification" or "registration", a process by a certifying entity that grants
4 recognition to applicants meeting predetermined qualifications specified by such certifying
5 entity;

6 (3) "Certifying entity", the nongovernmental agency or association which certifies or
7 registers individuals who have completed academic and training requirements;

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended
to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

8 (4) "Department", the department of economic development or a designated agency
9 thereof;

10 (5) "License", a document issued to an applicant by the department acknowledging that
11 the applicant is entitled to practice as a physician assistant;

12 (6) "Physician assistant", a person who has graduated from a physician assistant program
13 accredited by the American Medical Association's Committee on Allied Health Education and
14 Accreditation or by its successor agency, who has passed the certifying examination administered
15 by the National Commission on Certification of Physician Assistants and has active certification
16 by the National Commission on Certification of Physician Assistants who provides health care
17 services delegated by a licensed physician. A person who has been employed as a physician
18 assistant for three years prior to August 28, 1989, who has passed the National Commission on
19 Certification of Physician Assistants examination, and has active certification of the National
20 Commission on Certification of Physician Assistants;

21 (7) "Recognition", the formal process of becoming a certifying entity as required by the
22 provisions of sections 334.735 to 334.749;

23 (8) "Supervision", [control exercised over a physician assistant working within the same
24 office facility of the supervising physician except a physician assistant may make follow-up
25 patient examinations in hospitals, nursing homes and correctional facilities, each such
26 examination being reviewed, approved and signed by the supervising physician] **overseeing the**
27 **activities of, and accepting responsibility for, the medical services rendered by a physician**
28 **assistant. The supervising physician shall at all times be immediately available to the**
29 **physician assistant for consultation, assistance, or intervention either personally or via**
30 **telecommunications. A supervising physician shall be personally present for practice**
31 **supervision and collaboration a minimum of eighty percent of clinic hours in any clinic**
32 **location utilizing physician's assistants. The physician assistant shall be limited to practice**
33 **at the supervising physician's primary location of practice and where the supervising**
34 **physician is able to be physically present at the location within thirty minutes so that there**
35 **is no impediment to effective intervention and supervision of patient care. A supervising**
36 **physician shall be engaged in the full-time practice of medicine and hold an active license**
37 **to practice.** The board shall promulgate rules pursuant to chapter 536, RSMo, for the [proximity
38 of practice between the physician assistant and the supervising physician and] documentation of
39 joint review of the physician assistant activity by the supervising physician and the physician
40 assistant.

41 2. The scope of practice of a physician assistant shall consist only of the following
42 services and procedures:

43 (1) Taking patient histories;

- 44 (2) Performing physical examinations of a patient;
- 45 (3) Performing or assisting in the performance of routine office laboratory and patient
46 screening procedures;
- 47 (4) Performing routine therapeutic procedures;
- 48 (5) Recording diagnostic impressions and evaluating situations calling for attention of
49 a physician to institute treatment procedures;
- 50 (6) Instructing and counseling patients regarding mental and physical health using
51 procedures reviewed and approved by a licensed physician;
- 52 (7) Assisting the supervising physician in institutional settings, including reviewing of
53 treatment plans, ordering of tests and diagnostic laboratory and radiological services, and
54 ordering of therapies, using procedures reviewed and approved by a licensed physician;
- 55 (8) Assisting in surgery;
- 56 (9) Performing such other tasks not prohibited by law under the supervision of a licensed
57 physician as the [physician's] **physician** assistant has been trained and is proficient to perform;
- 58 (10) Physician assistants shall not perform abortions.
- 59 3. Physician assistants shall not prescribe nor dispense any drug, medicine, device or
60 therapy independent of consultation with the supervising physician, nor prescribe lenses, prisms
61 or contact lenses for the aid, relief or correction of vision or the measurement of visual power
62 or visual efficiency of the human eye, nor administer or monitor general or regional block
63 anesthesia during diagnostic tests, surgery or obstetric procedures. Prescribing and dispensing
64 of drugs, medications, devices or therapies by a physician assistant shall be pursuant to a
65 physician assistant supervision agreement which is specific to the clinical conditions treated by
66 the supervising physician and the physician assistant shall be subject to the following:
- 67 (1) A physician assistant shall not prescribe controlled substances;
- 68 (2) The types of drugs, medications, devices or therapies prescribed or dispensed by a
69 physician assistant shall be consistent with the scopes of practice of the physician assistant and
70 the supervising physician;
- 71 (3) All prescriptions shall conform with state and federal laws and regulations and shall
72 include the name, address and telephone number of the physician assistant and the supervising
73 physician;
- 74 (4) A physician assistant or advanced practice nurse as defined in section 335.016,
75 RSMo, may request, receive and sign for noncontrolled professional samples and may distribute
76 professional samples to patients;
- 77 (5) A physician assistant shall not prescribe any drugs, medicines, devices or therapies
78 the supervising physician is not qualified or authorized to prescribe; and

79 (6) A physician assistant may only dispense starter doses of medication to cover a period
80 of time for seventy-two hours or less.

81 4. A physician assistant shall clearly identify himself or herself as a physician assistant
82 and shall [not] **specifically inform each patient seen of his or her status as a physician**
83 **assistant and shall specifically inform each patient that he or she has the opportunity to be**
84 **seen by the supervising physician. No physician assistant shall** use or permit to be used in
85 the physician assistant's behalf the terms "doctor", "Dr." or "doc" nor hold himself or herself out
86 in any way to be a physician or surgeon. No physician assistant shall practice or attempt to
87 practice without physician supervision or in any location where the supervising physician is not
88 immediately available for consultation, assistance and intervention, except in an emergency
89 situation, nor shall any physician assistant bill a patient independently or directly for any services
90 or procedure by the physician assistant.

91 5. For purposes of this section, the licensing of physician assistants shall take place
92 within processes established by the state board of registration for the healing arts through rule
93 and regulation. The board of healing arts is authorized to establish rules pursuant to chapter 536,
94 RSMo, establishing licensing and renewal procedures, supervision, supervision agreements, fees,
95 and addressing such other matters as are necessary to protect the public and discipline the
96 profession. An application for licensing may be denied or the license of a physician assistant
97 may be suspended or revoked by the board in the same manner and for violation of the standards
98 as set forth by section 334.100, or such other standards of conduct set by the board by rule or
99 regulation. Persons licensed pursuant to the provisions of chapter 335, RSMo, shall not be
100 required to be licensed as physician assistants. **All applicants for physician assistant licensure**
101 **who complete their physician assistant training program after January 1, 2007, shall have**
102 **a master's degree in a health or medical science related field.**

103 6. "Physician assistant supervision agreement" means a written agreement, jointly
104 agreed-upon protocols or standing order between a supervising physician and a physician
105 assistant, which provides for the delegation of health care services from a supervising physician
106 to a physician assistant and the review of such services. **In any physician assistant supervision**
107 **agreement, the supervising physician and physician assistant shall designate the primary**
108 **location where the supervising physician practices at least eighty percent of clinic hours.**
109 **The board shall randomly review physician assistant supervision agreements and the**
110 **practices of physician assistants and supervising physicians under such agreements.**

111 7. When a physician assistant supervision agreement is utilized to provide health care
112 services for conditions other than acute self-limited or well-defined problems, the supervising
113 physician or other physician designated in the supervision agreement shall see the patient for
114 evaluation and approve or formulate the plan of treatment for new or significantly changed

115 conditions as soon as practical, but in no case more than two weeks after the patient has been
116 seen by the physician assistant.

117 8. At all times the physician is responsible for the oversight of the activities of, and
118 accepts responsibility for, health care services rendered by the physician assistant.

119 9. **No physician shall be designated to service as supervising physician for more**
120 **than three licensed physician assistants. Physicians who have also been designated as a**
121 **collaborative practice physician under section 334.101, shall only supervise a total of three**
122 **either licensed physician assistants or collaborative practice registered professional nurses,**
123 **or a combination thereof. This limitation shall not apply to physician assistant agreements**
124 **of hospital employees providing inpatient care services in hospitals as defined in chapter**
125 **197, RSMo.**

126 10. **It is the responsibility of the supervising physician to determine and document**
127 **the completion of at least a one-month period of time during which the licensed physician**
128 **assistant shall practice with a supervising physician continuously present before practicing**
129 **in a setting where a supervising physician is not continuously present.**

130 11. **It shall be void and against public policy for any contract or other agreement**
131 **entered into with a physician to:**

132 (a) **Require the physician as a condition of employment to act as a supervising**
133 **physician for any physician assistant;**

134 (b) **Limit the supervising physician's ultimate authority over any protocols or**
135 **standing orders or in the delegation of the physician's authority to any physician assistant;**
136 **or**

137 (c) **Require the physician to be employed by a licensed physician assistant being**
138 **supervised under this section or a registered professional nurse in collaboration by such**
139 **physician under section 334.104, or for a physician to be employed by an entity with whom**
140 **the physician assistant or registered professional nurse has a financial relationship. A**
141 **financial relationship exists if the physician assistant or immediate family member has a**
142 **direct or indirect ownership or investment interest in the entity whether through equity,**
143 **debt, or other means, or receives remuneration from a compensation arrangement from**
144 **the entity.**

2 334.751. **Any hospital which employs an advanced practice nurse or a physician**
3 **assistant shall allow any nonboard certified M.D. or D.O. physician to practice in the same**
4 **hospital setting subject to the same credentialing procedures required of the advanced**
5 **practiced nurse or physician assistant as long as those credentialing procedures do not**
6 **discriminate against a nonboard-certified physician.**

✓