

SECOND REGULAR SESSION

# HOUSE BILL NO. 2252

100TH GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE NEELY.

5059H.011

DANA RADEMAN MILLER, Chief Clerk

## AN ACT

To repeal section 334.036, RSMo, and to enact in lieu thereof one new section relating to assistant physicians.

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

Section A. Section 334.036, RSMo, is repealed and one new section enacted in lieu thereof, to be known as section 334.036, to read as follows:

334.036. 1. For purposes of this section, the following terms shall mean:

(1) "Assistant physician", any medical school graduate who:

(a) Is a resident and citizen of the United States or is a legal resident alien;

(b) Has successfully completed Step 2 **or Step 3** of the United States Medical Licensing Examination or the equivalent of such step of any other board-approved medical licensing examination within the three-year period immediately preceding application for licensure as an assistant physician, or within three years after graduation from a medical college or osteopathic medical college, whichever is later;

(c) Has not completed an approved postgraduate residency and has successfully completed Step 2 **or Step 3** of the United States Medical Licensing Examination or the equivalent of such step of any other board-approved medical licensing examination within the immediately preceding three-year period unless when such three-year anniversary occurred he or she was serving as a resident physician in an accredited residency in the United States and continued to do so within thirty days prior to application for licensure as an assistant physician; and

(d) Has proficiency in the English language.

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.

18 Any medical school graduate who could have applied for licensure and complied with the  
19 provisions of this subdivision at any time between August 28, 2014, and August 28, 2017, may  
20 apply for licensure and shall be deemed in compliance with the provisions of this subdivision;

21 (2) "Assistant physician collaborative practice arrangement", an agreement between a  
22 physician and an assistant physician that meets the requirements of this section and section  
23 334.037;

24 (3) "Medical school graduate", any person who has graduated from a medical college or  
25 osteopathic medical college described in section 334.031.

26 2. (1) An assistant physician collaborative practice arrangement shall limit the assistant  
27 physician to providing only primary care services and only in medically underserved rural or  
28 urban areas of this state or in any pilot project areas established in which assistant physicians  
29 may practice.

30 (2) For a physician-assistant physician team working in a rural health clinic under the  
31 federal Rural Health Clinic Services Act, P.L. 95-210, as amended:

32 (a) An assistant physician shall be considered a physician assistant for purposes of  
33 regulations of the Centers for Medicare and Medicaid Services (CMS); and

34 (b) No supervision requirements in addition to the minimum federal law shall be  
35 required.

36 3. (1) For purposes of this section, the licensure of assistant physicians shall take place  
37 within processes established by rules of the state board of registration for the healing arts. The  
38 board of healing arts is authorized to establish rules under chapter 536 establishing licensure and  
39 renewal procedures, supervision, collaborative practice arrangements, fees, and addressing such  
40 other matters as are necessary to protect the public and discipline the profession. No licensure  
41 fee for an assistant physician shall exceed the amount of any licensure fee for a physician  
42 assistant. An application for licensure may be denied or the licensure of an assistant physician  
43 may be suspended or revoked by the board in the same manner and for violation of the standards  
44 as set forth by section 334.100, or such other standards of conduct set by the board by rule. No  
45 rule or regulation shall require an assistant physician to complete more hours of continuing  
46 medical education than that of a licensed physician.

47 (2) Any rule or portion of a rule, as that term is defined in section 536.010, that is created  
48 under the authority delegated in this section shall become effective only if it complies with and  
49 is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section  
50 and chapter 536 are nonseverable and if any of the powers vested with the general assembly  
51 under chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are  
52 subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed  
53 or adopted after August 28, 2014, shall be invalid and void.

54 (3) Any rules or regulations regarding assistant physicians in effect as of the effective  
55 date of this section that conflict with the provisions of this section and section 334.037 shall be  
56 null and void as of the effective date of this section.

57 4. An assistant physician shall clearly identify himself or herself as an assistant physician  
58 and shall be permitted to use the terms "doctor", "Dr.", or "doc". No assistant physician shall  
59 practice or attempt to practice without an assistant physician collaborative practice arrangement,  
60 except as otherwise provided in this section and in an emergency situation.

61 5. The collaborating physician is responsible at all times for the oversight of the  
62 activities of and accepts responsibility for primary care services rendered by the assistant  
63 physician.

64 6. The provisions of section 334.037 shall apply to all assistant physician collaborative  
65 practice arrangements. Any renewal of licensure under this section shall include verification of  
66 actual practice under a collaborative practice arrangement in accordance with this subsection  
67 during the immediately preceding licensure period.

68 7. Each health carrier or health benefit plan that offers or issues health benefit plans that  
69 are delivered, issued for delivery, continued, or renewed in this state shall reimburse an assistant  
70 physician for the diagnosis, consultation, or treatment of an insured or enrollee on the same basis  
71 that the health carrier or health benefit plan covers the service when it is delivered by another  
72 comparable mid-level health care provider including, but not limited to, a physician assistant.

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