

2010 Special Session
FISCAL ANALYSIS OF PROPOSED LEGISLATION
Prepared by the Oregon Legislative Fiscal Office

MEASURE NUMBER: HB 3642 **STATUS:** A Engrossed
SUBJECT: Allows a supervising physician organization to collectively supervise a physician assistant.
GOVERNMENT UNIT AFFECTED: Oregon Medical Board
PREPARED BY: Robin LaMonte
REVIEWED BY: Erica Kleiner
DATE: February 9, 2010

	<u>2009-2011</u>	<u>2011-2013</u>
EXPENDITURES:		
Personal Services	\$ 67,256	\$ 100,844
Services and Supplies	\$ 7,500	\$
Total Other Funds	\$ 74,756	\$ 100,844

POSITIONS / FTE: Administrative Specialist I 1/.67 1/1.00

EFFECTIVE DATE: The bill includes an emergency clause and is effective on passage

INTERIM JOINT COMMITTEE ON WAYS AND MEANS: The budgetary impact of this bill was not reviewed and approved by the Interim Joint Committee on Ways and Means Committee and is not included in the omnibus budget bill to be introduced by the committee.

LOCAL GOVERNMENT MANDATE: This bill does not affect local governments' service levels or shared revenues sufficient to trigger Section 15, Article XI of the Oregon Constitution.

ANALYSIS: HB 3642 allows a supervising physician organization to collectively supervise a physician assistant. The Oregon Medical Board (OMB) estimates that, under this bill, approximately 170 additional records will be created in 2009-11 to establish and monitor the supervisory record.

OMB is at capacity with its existing workload. OMB currently receives 640 physician assistant (PA) supervisory practice descriptions per year for about 900 PA's. These supervisory practice descriptions are entered into the OMB information system, and enable OMB to monitor the supervision and medical practice area of each PA. This workload is handled by one Administrative Specialist 1, who cannot absorb additional workload. This bill will require that additional supervisory information be entered onto the computer. OMB will require 1 additional position to handle the workload arising from the additional supervisory practice information.

There is a question as to the number of organizations that will be interested in using the supervising physician organization model. There is only one known organization that has expressed an interest. If only one organization used the model, OMB would have approximately 0.25 FTE (full time equivalent position) of additional workload. However, if additional organizations elect to use the model, the workload will increase.

Also unknown is whether or not this new model could result in an increase in the number of complaints that would be filed and must be investigated by OMB.

Because the workload is unknown, and because OMB will need sufficient FTE to meet actual requirements, the fiscal impact is estimated at one full time position (0.67 FTE for the remainder of the 2009-11 biennium) at a cost of \$67,256 Other Funds in the 2009-11 biennium. OMB will also need to spend approximately \$7,500 Other Funds to modify its information system to add supervising Physician Organization groups.