

**A-Engrossed**  
**Senate Bill 224**

Ordered by the Senate April 22  
Including Senate Amendments dated April 22

Sponsored by Senator MONNES ANDERSON; Senators BATES, COURTNEY, KRUSE, Representatives COWAN, GREENLICK, KENNEMER, NATHANSON, ROBLAN, THOMPSON (Presession filed.)

**SUMMARY**

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure.

Modifies provisions relating to regulation of physician assistants.  
Declares emergency, effective on passage.

**A BILL FOR AN ACT**

1  
2 Relating to physician assistants; creating new provisions; amending ORS 677.097, 677.495, 677.500,  
3 677.510, 677.512, 677.515, 677.535 and 677.545; and declaring an emergency.

4 **Be It Enacted by the People of the State of Oregon:**

5 **SECTION 1.** ORS 677.495, as amended by section 1, chapter 43, Oregon Laws 2010, is amended  
6 to read:

7 677.495. As used in ORS 677.495 to 677.545, unless the context requires otherwise:

8 [(1) "Agent" means a physician designated by the supervising physician of a physician assistant  
9 who supervises the medical services of the physician assistant for a predetermined period of time.]

10 [(2) "Committee" means the Physician Assistant Committee created in ORS 677.540.]

11 [(3)] (1) "Physician assistant" means a person who is licensed in accordance with ORS 677.505  
12 to 677.525.

13 (2) "Practice agreement" means a written agreement between a physician assistant and  
14 a supervising physician or supervising physician organization that describes the manner in  
15 which the services of the physician assistant will be used.

16 [(4)] (3) "Supervising physician" means a physician licensed to practice medicine under this  
17 chapter who supervises a physician assistant.

18 [(5)] (4) "Supervising physician organization" means a group of supervising physicians that col-  
19 lectively supervises a physician assistant.

20 [(6)] (5) "Supervision" means the [routine direction and regular review by the supervising physi-  
21 cian or supervising physician organization, as determined to be appropriate by the Oregon Medical  
22 Board, of the medical services provided by the physician assistant] **acts of overseeing and accepting**  
23 **responsibility for the medical services provided by a physician assistant in accordance with**  
24 **a practice agreement, including regular and routine oversight and chart review.**

25 **SECTION 2.** ORS 677.500, as amended by section 2, chapter 43, Oregon Laws 2010, is amended  
26 to read:

27 677.500. It is the intent of the Legislative Assembly in requiring the licensure of physician as-  
28 sistants [that there be reasonable utilization of the physician assistant by the supervising physician or

**NOTE:** Matter in **boldfaced** type in an amended section is new; matter [italic and bracketed] is existing law to be omitted.  
New sections are in **boldfaced** type.

1 *supervising physician organization*] **to encourage appropriate use of physician assistants in the**  
2 **delivery of health care services to the extent of a physician assistant's education and expe-**  
3 **rience.**

4 **SECTION 3.** ORS 677.510, as amended by section 3, chapter 43, Oregon Laws 2010, is amended  
5 to read:

6 677.510. (1) A person licensed to practice medicine under this chapter [*shall*] **may** not use the  
7 services of a physician assistant without the prior approval of the Oregon Medical Board.

8 (2) A supervising physician or a supervising physician organization may apply to the board to  
9 use the services of a physician assistant. The application shall:

10 (a) [*State the name of the physician assistant*] **If the applicant is not a supervising physician**  
11 **organization, state the name and contact information of the supervising physician;**

12 (b) If the applicant is a supervising physician organization:

13 (A) State the names **and contact information** of all supervising physicians; and

14 (B) State the name of the primary supervising physician required by subsection (5) of this sec-  
15 tion;

16 [(c) *Describe the manner and extent to which the physician assistant's services would be used and*  
17 *supervised;*]

18 [(d) *Include a practice description that provides for the maintenance of direct, verbal communi-*  
19 *cation between the physician assistant and one or more supervising physicians either in person or by*  
20 *means described in ORS 677.515 (4);*]

21 [(e) *State the education, training and experience of the physician assistant; and*]

22 (c) **Generally describe the medical services provided by each supervising physician;**

23 (d) **Contain a statement acknowledging that each supervising physician has reviewed**  
24 **statutes and rules relating to the practice of physician assistants and the role of a super-**  
25 **vising physician; and**

26 [(f)] (e) Provide such other information in such a form as the board may require.

27 (3) The board [*may*] **shall** approve or reject an application **within seven working days after**  
28 **the board receives the application, unless the board is conducting an investigation of the**  
29 **supervising physician or of any of the supervising physicians in a supervising physician or-**  
30 **ganization applying to use the services of a physician assistant.** [, *or it may modify the proposed*  
31 *use of the services of the physician assistant and approve the application as modified. The board may*  
32 *not require that a supervising physician be physically present at all times.*]

33 (4) A supervising physician organization shall provide the board with a list of the supervising  
34 physicians in the supervising physician organization. The supervising physician organization shall  
35 continually update the list and notify the board of any changes.

36 (5) A supervising physician organization shall designate a primary supervising physician and  
37 notify the board in the manner prescribed by the board.

38 [(6) *When it appears to the board that the services of a physician assistant are being used in a*  
39 *manner inconsistent with the approval granted, the board may withdraw its approval. If a hearing is*  
40 *requested by the supervising physician, the supervising physician organization or the physician assist-*  
41 *ant upon the rejection of an application or upon the withdrawal of an approval, a hearing shall be*  
42 *conducted in accordance with ORS 677.200.*]

43 [(7) *A supervising physician may have a different specialty from the physician assistant.*]

44 (6)(a) **A physician assistant may not practice medicine until the physician assistant en-**  
45 **ters into a practice agreement with a supervising physician or supervising physician organ-**

1 ization whose application has been approved under subsection (3) of this section. The practice  
2 agreement must:

3 (A) Include the name, contact information and license number of the physician assistant  
4 and each supervising physician.

5 (B) Describe the degree and methods of supervision that the supervising physician or  
6 supervising physician organization will use. The degree of supervision, whether general, di-  
7 rect or personal, must be based on the level of competency of the physician assistant as  
8 judged by the supervising physician.

9 (C) Generally describe the medical duties delegated to the physician assistant.

10 (D) Describe the services or procedures common to the practice or specialty that the  
11 physician assistant is not permitted to perform.

12 (E) Describe the prescriptive and medication administration privileges that the physician  
13 assistant will exercise.

14 (F) Provide the list of settings and licensed facilities in which the physician assistant will  
15 provide services.

16 (G) State that the physician assistant and each supervising physician is in full compliance  
17 with the laws and regulations governing the practice of medicine by physician assistants,  
18 supervising physicians and supervising physician organizations and acknowledge that vio-  
19 lation of laws or regulations governing the practice of medicine may subject the physician  
20 assistant and supervising physician or supervising physician organization to discipline.

21 (H) Be signed by the supervising physician or the primary supervising physician of the  
22 supervising physician organization and by the physician assistant.

23 (I) Be updated at least every two years.

24 (b) The supervising physician or supervising physician organization shall provide the  
25 board with a copy of the practice agreement within 10 days after the physician assistant  
26 begins practice with the supervising physician or supervising physician organization. The  
27 supervising physician or supervising physician organization shall keep a copy of the practice  
28 agreement at the practice location and make a copy of the practice agreement available to  
29 the board on request. The practice agreement is not subject to board approval, but the board  
30 may request a meeting with a supervising physician or supervising physician organization  
31 and a physician assistant to discuss a practice agreement.

32 (7) A physician assistant's supervising physician shall ensure that the physician assistant  
33 is competent to perform all duties delegated to the physician assistant. The supervising  
34 physician or supervising physician organization and the physician assistant are responsible  
35 for ensuring the competent practice of the physician assistant.

36 (8) A supervising physician or the agent of a supervising physician must be competent  
37 to perform the duties delegated to the physician assistant by the supervising physician or  
38 by a supervising physician organization.

39 (9) The board may not require that a supervising physician be physically present at all  
40 times when the physician assistant is providing services, but may require that:

41 (a) The physician assistant have access to personal or telephone communication with a  
42 supervising physician when the physician assistant is providing services; and

43 (b) The proximity of a supervising physician and the methods and means of supervision  
44 be appropriate to the practice setting and the patient conditions treated in the practice set-  
45 ting.

1        [(8)(a)] **(10)(a)** A supervising physician organization may supervise any number of physician as-  
2        sistants. The board may not adopt rules limiting the number of physician assistants that a super-  
3        vising physician organization may supervise.

4        (b) A physician assistant who is supervised by a supervising physician organization may be  
5        supervised by any of the supervising physicians in the supervising physician organization.

6        [(9)] **(11)** If a physician assistant is not supervised by a supervising physician organization, the  
7        physician assistant may be supervised by no more than four supervising physicians[.], **unless the**  
8        **board approves a request from the physician assistant, or from a supervising physician, for**  
9        **the physician assistant to be supervised by more than four supervising physicians.**

10        **(12)** A supervising physician who is not acting as part of a supervising physician organization  
11        may supervise four physician assistants[.], **unless the board approves a request from the super-**  
12        **vising physician or from a physician assistant for the supervising physician to supervise**  
13        **more than four physician assistants.**

14        **(13)** A supervising physician who is not acting as part of a supervising physician organization  
15        may designate a physician to serve as the agent of the supervising physician for a predetermined  
16        period of time.

17        [(10) *The board may review and approve applications from physicians serving federally designated*  
18        *underserved populations, or physicians in federally designated health professional shortage areas,*  
19        *federally designated medically underserved areas or areas designated as medically disadvantaged and*  
20        *in need of primary health care providers by the Director of the Oregon Health Authority or the Office*  
21        *of Rural Health to supervise more than four physician assistants, and applications from physician as-*  
22        *stantants to be supervised by more than four physicians.*]

23        **(14)** A physician assistant may render services in [*an emergency room and other hospital settings,*  
24        *a nursing home, a corrections institution and any site*] **any setting** included in the practice [*de-*  
25        *scription*] **agreement.**

26        [(11)] **(15)** A [*licensed*] physician assistant may [*make application*] **apply** to the board for emer-  
27        gency drug dispensing authority. The board shall consider the criteria adopted by the Physician  
28        Assistant Committee under ORS 677.545 (4) in reviewing the application. [*Such emergency dispensing*  
29        *shall be of*] **A physician assistant with emergency drug dispensing authority may dispense only**  
30        **drugs that have been** prepared or prepackaged by a licensed pharmacist, manufacturing drug outlet  
31        or wholesale drug outlet authorized to do so under ORS chapter 689.

32        [(12)] **(16)** A physician assistant for whom an application under this section has been approved  
33        by the board on or after January 2, 2006, shall submit to the board, within 24 months after the ap-  
34        proval, documentation of completion of:

35        (a) A pain management education program approved by the board and developed in conjunction  
36        with the Pain Management Commission established under ORS 409.500; or

37        (b) An equivalent pain management education program, as determined by the board.

38        **SECTION 4.** ORS 677.512 is amended to read:

39        677.512. (1) A person seeking licensure as a physician assistant shall complete an application  
40        form provided by the Oregon Medical Board and submit the form to the board, accompanied by  
41        nonrefundable fees for the application and for the license in amounts determined by rule of the  
42        board.

43        (2) [*Upon application,*] The board may issue a license to a physician assistant who [*meets the*  
44        *requirements for licensure under ORS 677.495 and 677.505 to 677.525*]:

45        **(a) Submits an application as required by the board by rule;**

1       **(b) Pays the application fee established by the board by rule;**

2       **(c) Has completed an educational program accredited by a nationally recognized accredi-**  
3 **tation organization for physician assistant educational programs;**

4       **(d) Has passed the initial national examination required of physician assistants to become**  
5 **nationally certified;**

6       **(e) Is mentally and physically able to engage safely in practice as a physician assistant;**

7       **(f) Has not had been disciplined by a physician assistant licensing board in another state,**  
8 **unless the board considers the discipline and determines that the person is competent to**  
9 **practice as a physician assistant; and**

10       **(g) Is of good moral character as determined by the board.**

11       **(3) The board may issue a license by reciprocity to a person who is licensed as a physician**  
12 **assistant in another state and meets the requirements of subsection (2)(c) and (d) of this**  
13 **section.**

14       [(3)] (4) The board shall adopt necessary and proper rules to govern the renewal of licenses is-  
15 sued under this section.

16       **SECTION 5.** ORS 677.515, as amended by section 4, chapter 43, Oregon Laws 2010, is amended  
17 to read:

18       677.515. [(1) *This chapter does not prohibit a person from rendering medical services:*]

19       [(a) *If the person has satisfactorily completed an educational program for physician assistants ap-*  
20 *proved by the Oregon Medical Board;*]

21       [(b) *If the services are rendered under the supervision and control of a supervising physician or*  
22 *supervising physician organization and the use of the physician assistant's services has been approved*  
23 *by the board as provided by ORS 677.510; and]*

24       [(c) *If the person is licensed as a physician assistant as provided by ORS 677.495 and 677.505 to*  
25 *677.525.*]

26       **(1) A physician assistant licensed under ORS 677.512 may provide any medical service,**  
27 **including prescribing and administering controlled substances in schedules II through V un-**  
28 **der the federal Controlled Substances Act:**

29       **(a) That is delegated by the physician assistant's supervising physician or supervising**  
30 **physician organization;**

31       **(b) That is within the scope of practice of the physician assistant;**

32       **(c) That is within the scope of practice of the supervising physician or supervising phy-**  
33 **sician organization;**

34       **(d) That is provided under the supervision of the supervising physician or supervising**  
35 **physician organization;**

36       **(e) That is generally described in and in compliance with the practice agreement; and**

37       **(f) For which the physician assistant has obtained informed consent as provided in ORS**  
38 **677.097, if informed consent is required.**

39       (2) This chapter does not prohibit a student enrolled in an [approved] program for educating  
40 physician assistants **approved by the board** from rendering medical services if the services are  
41 rendered in the course of the program.

42       (3) [Notwithstanding subsections (1) and (2) of this section,] The degree of independent judgment  
43 that a physician assistant may exercise shall be determined by the supervising physician, or super-  
44 vising physician organization, and the physician assistant in accordance with [a practice description  
45 approved by the board] **the practice agreement.**

1        [(4) *A physician assistant may provide medical services to patients in a setting where a supervising*  
2 *physician does not regularly practice if the following conditions exist:*]

3        [(a) *Direct communication between the physician assistant and one or more supervising physicians*  
4 *either in person or by telephone, radio, radiotelephone, television or similar means is maintained;*  
5 *and*]

6        [(b) *The medical services provided by the physician assistant are reviewed by a supervising phy-*  
7 *sician or supervising physician organization on a regularly scheduled basis as determined by the*  
8 *board.*]

9        [(5)] (4) A supervising physician, upon the approval of the board and in accordance with the  
10 rules established by the board, may delegate to the physician assistant the authority to administer  
11 and dispense limited emergency medications and to prescribe medications pursuant to this section  
12 and ORS 677.535 to 677.545. Neither the board nor the Physician Assistant Committee shall limit the  
13 privilege of administering, dispensing and prescribing to population groups federally designated as  
14 underserved, or to geographic areas of the state that are federally designated health professional  
15 shortage areas, federally designated medically underserved areas or areas designated as medically  
16 disadvantaged and in need of primary health care providers by the Director of the Oregon Health  
17 Authority or the Office of Rural Health. All prescriptions written pursuant to this subsection shall  
18 bear the name, office address and telephone number of the supervising physician.

19        [(6)] (5) [*Nothing in*] This chapter [*is intended to*] **does not** require or prohibit a physician as-  
20 sistant from practicing in a hospital licensed pursuant to ORS 441.015 to 441.089.

21        [(7)] (6) Prescriptions for medications prescribed by a physician assistant in accordance with  
22 this section and ORS 475.005, 677.010, 677.500, 677.510 and 677.535 to 677.545 and dispensed by a li-  
23 censed pharmacist may be filled by the pharmacist according to the terms of the prescription, and  
24 the filling of such a prescription [*shall*] **does not** constitute evidence of negligence on the part of  
25 the pharmacist if the prescription was dispensed within the reasonable and prudent practice of  
26 pharmacy.

27        **SECTION 6.** ORS 677.535, as amended by section 6, chapter 43, Oregon Laws 2010, is amended  
28 to read:

29        677.535. The Oregon Medical Board may grant a limited license to a physician assistant if[:]

30        [(1)] the applicant meets the qualifications of the board, the application file is complete and no  
31 derogatory information has been submitted but board approval is pending.[: or]

32        [(2) *The physician assistant is changing employment or changing supervising physicians or super-*  
33 *vising physician organizations.*]

34        **SECTION 7.** ORS 677.545, as amended by section 7, chapter 43, Oregon Laws 2010, is amended  
35 to read:

36        677.545. The Physician Assistant Committee shall:

37        [(1) *Review all applications for physician assistants' licensure and for renewal thereof.*]

38        (1) **Review and make recommendations to the Oregon Medical Board regarding all mat-**  
39 **ters relating to physician assistants, including but not limited to:**

40        (a) **Applications for licensure;**

41        (b) **Disciplinary proceedings; and**

42        (c) **Renewal requirements.**

43        (2) Review applications of physician assistants for dispensing privileges.

44        (3) Recommend approval or disapproval of applications submitted under subsection (1) or (2) of  
45 this section to the [*Oregon Medical*] board.

1 (4) Recommend criteria to be used in granting dispensing privileges under ORS 677.515.

2 (5) [*Recommend the formulary*] **Review the criteria** for prescriptive privileges that may include  
3 all or parts of Schedules II, III, IV and V controlled substances and the procedures for physician  
4 assistants, supervising physicians and supervising physician organizations to follow in exercising the  
5 prescriptive privileges.

6 [*(6) Recommend the approval, disapproval or modification of the application for prescriptive privi-*  
7 *leges for any physician assistant. An application for*] **A statement regarding** Schedule II controlled  
8 substances prescriptive privileges must be [*submitted to the Oregon Medical Board by the physician*  
9 *assistant's supervising physician or supervising physician organization and must be accompanied by*]  
10 **included in** the practice [*description of the physician assistant*] **agreement**. The Schedule II con-  
11 trolled substances prescriptive privileges of a physician assistant shall be limited by the practice  
12 [*description approved by the board*] **agreement** and may be restricted further by the supervising  
13 physician or supervising physician organization at any time. The supervising physician or supervis-  
14 ing physician organization shall notify the physician assistant and the board of any additional re-  
15 strictions imposed by the supervising physician or supervising physician organization[, *and the*  
16 *practice description on file with the board shall be amended to reflect the additional restrictions im-*  
17 *posed*]. To be eligible for Schedule II controlled substances prescriptive privileges, a physician as-  
18 sistant must be certified by the National Commission on Certification of Physician Assistants and  
19 must complete all required continuing medical education coursework.

20 **SECTION 8.** ORS 677.097 is amended to read:

21 677.097. (1) In order to obtain the informed consent of a patient, a physician [*or*], podiatric  
22 physician and surgeon **or physician assistant** shall explain the following:

23 (a) In general terms the procedure or treatment to be undertaken;

24 (b) That there may be alternative procedures or methods of treatment, if any; and

25 (c) That there are risks, if any, to the procedure or treatment.

26 (2) After giving the explanation specified in subsection (1) of this section, the physician [*or*],  
27 podiatric physician and surgeon **or physician assistant** shall ask the patient if the patient wants  
28 a more detailed explanation. If the patient requests further explanation, the physician [*or*], podiatric  
29 physician and surgeon **or physician assistant** shall disclose in substantial detail the procedure, the  
30 viable alternatives and the material risks unless to do so would be materially detrimental to the  
31 patient. In determining that further explanation would be materially detrimental the physician [*or*],  
32 podiatric physician and surgeon **or physician assistant** shall give due consideration to the stan-  
33 dards of practice of reasonable medical or podiatric practitioners in the same or a similar commu-  
34 nity under the same or similar circumstances.

35 **SECTION 9.** Notwithstanding the amendments to ORS 677.097, 677.495, 677.500, 677.510,  
36 677.512, 677.515, 677.535 and 677.545 by sections 1 to 8 of this 2011 Act:

37 (1) **A physician assistant practicing under a practice description approved by the Oregon**  
38 **Medical Board under ORS 677.510 as in effect immediately before the operative date of the**  
39 **amendments to ORS 677.510 by section 3 of this 2011 Act may continue to practice in ac-**  
40 **cordance with the practice description and is not required to enter into a practice agreement**  
41 **under ORS 677.510.**

42 (2) **A physician assistant licensed under ORS 677.512 as in effect immediately before the**  
43 **operative date of the amendments to ORS 677.512 by section 4 of this 2011 Act may renew**  
44 **the physician assistant's license without meeting the requirements of ORS 677.512 (2)(c) and**  
45 **(d).**

1       **SECTION 10.** (1) The amendments to ORS 677.097, 677.495, 677.500, 677.510, 677.512,  
2 677.515, 677.535 and 677.545 by sections 1 to 8 of this 2011 Act become operative on January  
3 1, 2012.

4       (2) The Oregon Medical Board may take any action on or before the operative date  
5 specified in subsection (1) of this section that is necessary to enable the board to exercise,  
6 on and after the operative date specified in subsection (1) of this section, all of the duties,  
7 functions and powers conferred on the board by the amendments to ORS 677.097, 677.495,  
8 677.500, 677.510, 677.512, 677.515, 677.535 and 677.545 by sections 1 to 8 of this 2011 Act.

9       **SECTION 11.** This 2011 Act being necessary for the immediate preservation of the public  
10 peace, health and safety, an emergency is declared to exist, and this 2011 Act takes effect  
11 on its passage.

12