

# House Bill 4108

Sponsored by Representative HACK; Representatives BUEHLER, DAVIS, LIVELY, PILUSO, WITT (Pre-session 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 **as introduced**.

Provides for licensing and regulation of anesthesiologist assistants.  
Becomes operative January 1, 2017.  
Declares emergency, effective on passage.

## A BILL FOR AN ACT

1  
2 Relating to anesthesiologist assistants; and declaring an emergency.

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

4 **SECTION 1. Sections 2 to 10 of this 2016 Act are added to and made a part of ORS**  
5 **chapter 677.**

6 **SECTION 2. As used in sections 2 to 10 of this 2016 Act:**

7 (1) "Anesthesiologist" has the meaning given that term in ORS 678.245.

8 (2) "Anesthesiologist assistant" means an individual who is licensed under section 5 or 8  
9 of this 2016 Act.

10 (3) "Anesthesiologist organization" means a collective of anesthesiologists.

11 (4) "Drug" has the meaning given that term in ORS 689.005.

12 (5) "Practice protocol" means a written agreement between an anesthesiologist assistant  
13 and an anesthesiologist or anesthesiologist organization.

14 **SECTION 3. (1) Except as provided in this section and section 4 of this 2016 Act, an**  
15 **anesthesiologist assistant may, under the supervision of an anesthesiologist or**  
16 **anesthesiologist organization, develop and implement an anesthesia care plan for a patient**  
17 **if the anesthesiologist or, if the anesthesiologist assistant is under the supervision of an**  
18 **anesthesiologist organization, each anesthesiologist who is part of the anesthesiologist or-**  
19 **ganization:**

20 (a) Is in good standing with the Oregon Medical Board; and

21 (b) Is certified in anesthesiology as prescribed by the board by rule.

22 (2) An anesthesiologist assistant may not:

23 (a) Prescribe drugs;

24 (b) Administer a drug, device or therapy unless the anesthesiologist who supervises the  
25 anesthesiologist assistant, or an anesthesiologist who is part of the anesthesiologist organ-  
26 ization that supervises the anesthesiologist assistant, is authorized to prescribe the drug,  
27 device or therapy;

28 (c) Develop or implement an anesthesia care plan at a location where an anesthesiologist  
29 is not available for consultation, assistance and intervention; or

30 (d) Use the title "doctor," "doctor of optometry," "physician," "optometric 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 “podiatric physician” or any other title that identifies the anesthesiologist assistant as a  
 2 person licensed to practice medicine or podiatry.

3 (3) The board may adopt rules establishing:

4 (a) The health care services that an anesthesiologist assistant may provide; and

5 (b) The requirements for supervising an anesthesiologist assistant.

6 (4) A health care facility, as defined in ORS 442.015, may limit the scope of health care  
 7 services authorized under this section.

8 **SECTION 4.** (1) An anesthesiologist assistant may not develop or implement an anes-  
 9 thesia care plan for a patient as described in section 3 (1) of this 2016 Act unless the  
 10 anesthesiologist assistant enters into a practice protocol. The practice protocol must:

11 (a) Be consistent with sections 2 to 10 of this 2016 Act and the rules adopted under  
 12 sections 2 to 10 of this 2016 Act.

13 (b) Include the name, contact information and license number of the anesthesiologist  
 14 assistant and the anesthesiologist or, if the anesthesiologist assistant is under the super-  
 15 vision of an anesthesiologist organization, an anesthesiologist designated by the  
 16 anesthesiologist organization.

17 (c) Describe each setting and facility in which the anesthesiologist assistant will provide  
 18 health care services.

19 (d) Describe the health care services that the anesthesiologist assistant is authorized by  
 20 the Oregon Medical Board to provide.

21 (e) Describe the manner in which the anesthesiologist or anesthesiologist organization  
 22 will supervise the anesthesiologist assistant.

23 (f) Incorporate quality assurance standards, including regular review by the  
 24 anesthesiologist or anesthesiologist organization of the medical records of each patient for  
 25 whom an anesthesiologist assistant provides health care services.

26 (g) Include a statement, signed by the anesthesiologist assistant and the anesthesiologist  
 27 or, if the anesthesiologist assistant is under the supervision of an anesthesiologist organiza-  
 28 tion, signed by the anesthesiologist assistant and the anesthesiologist designated under par-  
 29 agraph (b) of this subsection, certifying that the anesthesiologist assistant and the  
 30 anesthesiologist or, if the anesthesiologist assistant is under the supervision of an  
 31 anesthesiologist organization, that the anesthesiologist assistant and each anesthesiologist  
 32 who is part of the anesthesiologist organization are in full compliance with the provisions  
 33 of this chapter and rules adopted under this chapter that govern the practice of  
 34 anesthesiologist assistants.

35 (h) Acknowledge that violation of the provisions of this chapter, or rules adopted under  
 36 this chapter that govern the practice of anesthesiologist assistants, may subject the  
 37 anesthesiologist assistant and the anesthesiologist or, if the anesthesiologist assistant is  
 38 under the supervision of an anesthesiologist organization, the anesthesiologist assistant and  
 39 the anesthesiologist designated under paragraph (b) of this subsection to discipline.

40 (i) Be signed by the anesthesiologist assistant and the anesthesiologist or, if the  
 41 anesthesiologist assistant is under the supervision of an anesthesiologist organization, by the  
 42 anesthesiologist assistant and the anesthesiologist designated under paragraph (b) of this  
 43 subsection.

44 (2) An anesthesiologist or anesthesiologist organization shall provide the board with a  
 45 copy of the practice protocol within 10 days after an anesthesiologist assistant begins prac-

1 tice with the anesthesiologist or anesthesiologist organization. The anesthesiologist or  
 2 anesthesiologist organization shall keep a copy of the practice protocol at the location of the  
 3 practice and shall make this copy available to the board for inspection upon request. If the  
 4 board requests a meeting with an anesthesiologist or anesthesiologist organization to discuss  
 5 a practice protocol, the anesthesiologist or anesthesiologist designated by the  
 6 anesthesiologist organization must comply with the request.

7 (3) An anesthesiologist who is not part of an anesthesiologist organization may supervise  
 8 only four or fewer anesthesiologist assistants at any one time.

9 **SECTION 5.** (1)(a) To obtain a license as an anesthesiologist assistant, an applicant shall:

10 (A) Apply to the Oregon Medical Board in a manner prescribed by the board by rule; and

11 (B) Pay a license fee adopted by the board by rule.

12 (b) An application submitted under this subsection must include proof that the applicant:

13 (A) Has graduated from an anesthesiologist assistant program accredited by the Com-  
 14 mission on Accreditation of Allied Health Education Programs or its successor organization;

15 (B) Has passed the certifying examination administered by the National Commission for  
 16 Certification of Anesthesiologist Assistants or its successor organization;

17 (C) Is certified by the National Commission for Certification of Anesthesiologist Assis-  
 18 ants or its successor organization;

19 (D) Is in compliance with the applicable provisions of this chapter and rules adopted un-  
 20 der this chapter that govern the practice of anesthesiologist assistants, as identified by the  
 21 board; and

22 (E) Is of good moral character.

23 (2) Upon approval of an application, the board shall issue to the applicant a license to  
 24 practice as an anesthesiologist assistant.

25 (3) A license may be renewed by applying to the board in a manner prescribed by the  
 26 board by rule and paying a renewal fee adopted by the board by rule.

27 (4) The board may issue a temporary license to practice as an anesthesiologist assistant  
 28 to an applicant who has not taken the certifying examination described in subsection  
 29 (1)(b)(B) of this section or who has not received the results of the examination. The board  
 30 shall adopt rules for the issuance and expiration of a temporary license under this sub-  
 31 section.

32 (5) The board may not adopt fees under this section that exceed the cost of administering  
 33 sections 2 to 10 of this 2016 Act.

34 **SECTION 6.** (1) An anesthesiologist assistant may apply to the Oregon Medical Board for  
 35 an inactive license. An inactive license may be obtained by applying to the board in a manner  
 36 prescribed by the board by rule and paying a fee adopted by the board by rule. An  
 37 anesthesiologist assistant who holds an inactive license may not develop or implement an  
 38 anesthesia care plan for a patient as described in section 3 (1) of this 2016 Act.

39 (2) An anesthesiologist assistant who holds an inactive license is not required to comply  
 40 with the requirements for continuing education adopted by the board under section 9 of this  
 41 2016 Act.

42 (3) To reactivate a license issued under section 5 of this 2016 Act, an anesthesiologist  
 43 assistant who holds an inactive license shall make an application to the board in the manner  
 44 prescribed under section 5 (1) of this 2016 Act, except that an anesthesiologist assistant who  
 45 has held an inactive license for five years or less is not required to take the certifying ex-

1 amination described in section 5 (1)(b)(B) of this 2016 Act.

2 **SECTION 7.** (1) An anesthesiologist assistant who retires from practice shall file with the  
3 Oregon Medical Board an affidavit attesting to the retirement in a manner prescribed by the  
4 board by rule. An anesthesiologist assistant who is retired from practice may not develop  
5 or implement an anesthesia care plan for a patient as described in section 3 (1) of this 2016  
6 Act.

7 (2) An anesthesiologist assistant who is retired from practice is not required to comply  
8 with the requirements for continuing education adopted by the board under section 9 of this  
9 2016 Act.

10 (3) To resume practice as an anesthesiologist assistant, an anesthesiologist assistant who  
11 is retired from practice shall apply to the board in a manner prescribed by the board by rule  
12 and pay a fee adopted by the board by rule.

13 **SECTION 8.** The Oregon Medical Board shall issue a license to practice as an  
14 anesthesiologist assistant to an applicant who is licensed as an anesthesiologist assistant in  
15 another state or territory of the United States or the District of Columbia, and who has not  
16 been disciplined by the licensing authority in the other state or territory or the District of  
17 Columbia, if:

18 (1) The licensing requirements of the other jurisdiction are substantially similar to the  
19 licensing requirements of this state; and

20 (2) The applicant pays a fee adopted by the board by rule.

21 **SECTION 9.** The Oregon Medical Board shall adopt by rule requirements for the contin-  
22 uing education of an anesthesiologist assistant consistent with those established by the Na-  
23 tional Commission for Certification of Anesthesiologist Assistants or its successor  
24 organization.

25 **SECTION 10.** (1) There is established within the Oregon Medical Board the  
26 Anesthesiologist Assistants Advisory Committee.

27 (2) The board shall appoint the following five members to serve on the committee:

28 (a) A member of the board;

29 (b) From among three persons nominated by the Oregon Society of Anesthesiologists or  
30 its successor organization, two members who are licensed anesthesiologists;

31 (c) From among three persons nominated by the Oregon Society of Anesthesiologists or  
32 its successor organization, one member who is a licensed anesthesiologist assistant; and

33 (d) A member of the public.

34 (3) Each member appointed to the committee must be a resident of this state.

35 (4) The committee shall make recommendations to the board on the adoption of rules  
36 under sections 2 to 10 of this 2016 Act and other matters relating to the scope of practice,  
37 and promotion of the continuing role, of anesthesiologist assistants in this state.

38 (5) The term of office of each member of the committee is three years, but a member  
39 serves at the pleasure of the board. Before the expiration of the term of a member, the  
40 board shall appoint a successor whose term begins on January 1 next following. A member  
41 is eligible for reappointment. If there is a vacancy for any cause, the board shall make an  
42 appointment to become immediately effective for the unexpired term.

43 (6) A majority of the members of the committee constitutes a quorum for the transaction  
44 of business.

45 (7) Official action by the committee requires the approval of a majority of the members

1 of the committee.

2 (8) The committee shall elect one of its members to serve as chairperson.

3 (9) The committee shall meet at times and places specified by the call of the chairperson  
4 or of a majority of the members of the committee.

5 (10) The committee may adopt rules necessary for the operation of the committee.

6 (11) A member of the committee is entitled to compensation and expenses as provided in  
7 ORS 292.495.

8 **SECTION 11.** Notwithstanding the term of office specified in section 10 of this 2016 Act,  
9 of the members first appointed to the Anesthesiologist Assistants Advisory Committee:

10 (1) One shall serve for a term ending January 1, 2019;

11 (2) Two shall serve for a term ending January 1, 2020; and

12 (3) Two shall serve for a term ending January 1, 2021.

13 **SECTION 12.** (1) Sections 1 to 11 of this 2016 Act become operative on January 1, 2017.

14 (2) The Oregon Medical Board may take any action before the operative date specified in  
15 subsection (1) of this section to enable the board to exercise, on and after the operative date  
16 specified in subsection (1) of this section, all of the duties, functions and powers conferred  
17 on the board by sections 1 to 11 of this 2016 Act.

18 **SECTION 13.** This 2016 Act being necessary for the immediate preservation of the public  
19 peace, health and safety, an emergency is declared to exist, and this 2016 Act takes effect  
20 on its passage.

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