HB 3036 -4 STAFF MEASURE SUMMARY

House Committee On Health Care

Prepared By: Oliver Droppers, LPRO Analyst **Meeting Dates:** 2/4, 4/13

WHAT THE MEASURE DOES:

Defines "clinically experienced physician assistant," "collaboration," and "collaboration agreement." Specifies criteria permitting physician assistant (PA) to provide clinical care under collaborative agreement with a licensed physician, podiatric physician, or clinically experienced PA. Specifies terms of a collaboration agreement between a PA and licensed physician or experienced PA. Allows PAs to delegate dispensing of prescription drugs to staff assistants. Specifies that PA's degree of autonomous judgement shall be determined by community standards of care and PA's education, training, experience, and practice location. Grandfathers existing practice agreements if entered into or updated before January 1, 2022. Declares emergency, effective on passage.

ISSUES DISCUSSED:

- Simplification of administration requirements for PA supervision
- 2020 special session law allowing physician assistants to practice across state lines
- Training for and supervision of new PAs
- Rural clinics and access to care
- Proposed change from supervisory to collaborate relationship between physicians and PAs

EFFECT OF AMENDMENT:

-4 Replaces the measure. Allows a physician assistant (PA) to dispense schedule I or II prescription drugs without a supervising physician or physician organization. Allows a PA to delegate dispensing to a staff assistant if prescription is verified for accuracy and completeness. Requires a PA to maintain records of dispensed prescription, adhere to labeling requirements, and grants Oregon Medical Board (OMB) disciplinary authority over PAs with dispensing authority. Allows a PA to dispense schedule II through IV prescription drugs without a supervising physician or physician organization if registered with OMB. Specifies a PA's scope of practice shall be determined by practice location, community standards, education, training and experience. Allows out-of-state PAs not licensed in Oregon may diagnose or treat an individual if certain conditions are met, or apply for a license from OMB. Allows hospitals to refuse privileges to PAs without a supervising physician. Allows a PA to operate fluoroscopic X-ray equipment without a practice agreement. Repeals PA practice agreement grandfather clause that allows PA to practice without an agreement if in practice prior to 2011. Modifies provision allowing PAs to render services without a practice agreement enacted in first special session of 2020. Defines "collaboration," and "collaboration agreement" among a PA and physician including requiring the agreement be signed by PA, physician, or PA's employer. Defines employer for collaboration agreement. Specifies criteria permitting physician assistant (PA) to provide clinical care under collaborative agreement with a licensed physician, podiatric physician, or employer. Replaces current requirements for supervising physicians or physician organization to receive OMB approval to use services of a PA, with collaboration agreement requirements. Specifies criteria if a PA enters into a collaborative agreement with less 2,000 hour of post-graduate clinical experience. Grandfathers PAs currently working under a practice agreement or description until Dec. 31, 2023 unless they enter into a collaboration agreement before specified date. Allows PAs to sign death reports without physician supervision. Declares emergency, effective on passage.

REVENUE: May have revenue impact, but no statement yet issued.

FISCAL: May have fiscal impact, but no statement yet issued.

This summary has not been adopted or officially endorsed by action of the committee.

BACKGROUND:

The Oregon Medical Board's (Board) mission is to protect the health, safety, and wellbeing of Oregonians by regulating the practice of medicine, including licensing physician assistants (PAs). To be eligible for a PA license In Oregon, an individual must have: (1) graduated from a PA training program approved by the American Medical Association Committee on Allied Health Education and Accreditation (CAHEA), or the Commission on Accreditation for Allied Health Education Programs (CAAHEP), or the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA), and (2) passed the Physician Assistant National Certifying Examination (PANCE) given by the National Commission on Certification of Physician Assistants (NCCPA). Currently, a supervising physician may use the services of a PA in accordance with a practice agreement, which is a written agreement between a PA and a supervising physician or supervising physician organization (SPO) that describes what and how the PA will practice. The supervising physician or SPO is responsible for the direction and review of medical services provided by a PA.

House Bill 3036 modifies the practice of physician assistants by replacing supervision requirements with standards for collaboration with specified health care providers.