# HB 3036 A -A5, -A6, -A7, -A8 STAFF MEASURE SUMMARY

## **Senate Committee On Health Care**

**Prepared By:** Oliver Droppers, LPRO Analyst

**Meeting Dates:** 5/10, 5/24, 5/26

### WHAT THE MEASURE DOES:

Defines "collaboration," and "collaboration agreement" between a physician assistant (PA) and physician, including requiring the agreement be signed by PA and physician or PA's employer. Defines employer for collaboration agreement. Specifies required elements of collaboration agreement. Replaces current requirements for supervising physicians or physician organization to receive Oregon Medical Board (OMB) approval to use services of a PA, with collaboration agreement requirements. Specifies criteria for PA to enter into collaboration agreement with less than 2,000 hours of post-graduate clinical experience. Grandfathers PAs currently working under a practice agreement or description until December 31, 2023 unless they enter into a collaboration agreement before specified date. Allows a 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 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, to 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. Allows PAs to sign death reports without physician supervision. Declares emergency, effective on passage.

House Vote: Passed. Ayes, 54; Nays, 4; Excused, 2.

FISCAL: Minimal fiscal impact.

REVENUE: No revenue impact.

#### **ISSUES DISCUSSED:**

- During COVID-19 pandemic, flexibility for physician assistants (PA) has expended access to health services
- Use of telehealth by physician assistants
- Removal of current PA restrictions including statutory requirements
- Employer definition in collaboration agreement
- Liability for PAs; level of medical liability insurance coverage

# **EFFECT OF AMENDMENT:**

-A5 Modifies definition of "employer" by adding group medical practice part of a health system.

REVENUE: statement issued - no impact.

FISCAL: statement issued - minimal impact.

-A6 Clarifies a physician assistant is responsible for the care provided by a physician assistant if the physician assistant is acting as an employee. Modifies collaboration specifying standard of care in accordance with a

## HB 3036 A -A5, -A6, -A7, -A8 STAFF MEASURE SUMMARY

physician assistant's education, experience, and competence.

REVENUE: statement issued - no impact.

FISCAL: statement issued - minimal impact.

-A7 Amendment to resolve conflicts with House Bill 2078 A.

REVENUE: statement issued - no impact.

FISCAL: statement issued - minimal impact.

-A8 Combines -A5, -A6, and -A7 amendments.

REVENUE: statement issued - no impact.

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

### **BACKGROUND:**

The mission of the Oregon Medical Board (OMB) 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 A modifies the practice of physician assistants by replacing supervision requirements with standards for collaboration with specified health care providers.