

1 STATE OF OKLAHOMA

2 2nd Session of the 57th Legislature (2020)

3 SENATE BILL 1915

By: David

4  
5  
6 AS INTRODUCED

7 An Act relating to physician assistants; amending 59  
8 O.S. 2011, Sections 519.2, as amended by Section 1,  
9 Chapter 163, O.S.L. 2015, 519.6, as amended by  
10 Section 3, Chapter 163, O.S.L. 2015, 519.7, 519.8, as  
11 amended by Section 7, Chapter 428, O.S.L. 2019 and  
12 519.11, as amended by Section 5, Chapter 163, O.S.L.  
13 2015 (59 O.S. Supp. 2019, Sections 519.2, 519.6,  
14 519.8 and 519.11), which relate to physician  
15 assistants, temporary license and construction of  
16 act; providing for collaborative practice; modifying,  
17 adding and deleting definitions; removing and  
18 modifying certain requirements of physician  
19 assistant; eliminating certain fee; providing that  
20 physician assistant is considered primary care  
21 provider under certain condition; authorizing  
22 physician assistant to bill insurance and receive  
23 payment; requiring certain identification;  
24 prohibiting certain requirements; authorizing  
provision of certain emergency care; providing  
certain liability protection; clarifying language;  
providing for codification; and providing an  
effective date.

BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

SECTION 1. AMENDATORY 59 O.S. 2011, Section 519.2, as  
amended by Section 1, Chapter 163, O.S.L. 2015 (59 O.S. Supp. 2019,  
Section 519.2), is amended to read as follows:

Section 519.2. As used in the Physician Assistant Act:

1 1. "Board" means the State Board of Medical Licensure and  
2 Supervision;

3 2. "Committee" means the Physician Assistant Committee;

4 3. "Practice of medicine" means services which require training  
5 in the diagnosis, treatment and prevention of disease, including the  
6 use and administration of drugs, and which are performed by  
7 physician assistants so long as such services are within the  
8 physician assistants' skill, form a component of the physician's  
9 scope of practice, and are provided with ~~supervision~~ physician  
10 collaboration, including authenticating ~~with the~~ by signature any  
11 form that may be authenticated by the ~~supervising~~ collaborating  
12 physician's signature with prior delegation by the physician.

13 Nothing in the Physician Assistant Act shall be construed to permit  
14 a physician assistants assistant to provide health care services  
15 ~~independent of physician supervision~~ unless collaborating with the  
16 physician assistant's identified physician or physicians;

17 4. "Patient care setting" means and includes, but is not  
18 limited to, a physician's office, clinic, hospital, nursing home,  
19 extended care facility, patient's home, ambulatory surgical center,  
20 hospice facility or any other setting authorized by the ~~supervising~~  
21 collaborating physician;

22 5. "Physician assistant" means a health care professional,  
23 qualified by academic and clinical education and licensed by the  
24

1 State Board of Medical Licensure and Supervision, to practice  
2 medicine with physician ~~supervision~~ collaboration;

3 6. ~~"Supervising physician"~~ "Collaborating physician" means an  
4 individual holding a license as a physician from the State Board of  
5 Medical Licensure and Supervision or the State Board of Osteopathic  
6 Examiners, who ~~supervises~~ collaborates with physician assistants;

7 7. ~~"Supervision"~~ "Collaboration" means overseeing the  
8 activities of, ~~and accepting responsibility for,~~ the medical  
9 services rendered by a physician assistant. The constant physical  
10 presence of the ~~supervising~~ collaborating physician is not required  
11 as long as the ~~supervising~~ collaborating physician and physician  
12 assistant are or can be easily in contact with each other by  
13 telecommunication;

14 8. "Telecommunication" means the use of electronic technologies  
15 to transmit words, sounds or images for interpersonal communication,  
16 clinical care (telemedicine) and review of electronic health  
17 records; and

18 9. ~~"Application to practice"~~ means ~~a written description that~~  
19 ~~defines the scope of practice and the terms of supervision of a~~  
20 ~~physician assistant in a medical practice~~ "Practice agreement" means  
21 an agreement between a physician assistant and the collaborating  
22 physician or physicians concerning the scope of practice of the  
23 physician assistant to be determined at the practice level based on

1 the education, training, skills and experience of the physician  
2 assistant.

3 SECTION 2. AMENDATORY 59 O.S. 2011, Section 519.6, as  
4 amended by Section 3, Chapter 163, O.S.L. 2015 (59 O.S. Supp. 2019,  
5 Section 519.6), is amended to read as follows:

6 Section 519.6. A. No health care services may be performed by  
7 a physician assistant unless a current ~~application to practice,~~  
8 ~~jointly filed by the supervising physician and physician assistant,~~  
9 license is on file with and approved by the State Board of Medical  
10 Licensure and Supervision. ~~The application shall include a~~  
11 ~~description of the physician's practice, methods of supervising and~~  
12 ~~utilizing the physician assistant, and names of alternate~~  
13 ~~supervising physicians who will supervise the physician assistant in~~  
14 ~~the absence of the primary supervising physician.~~

15 B. A physician assistant may have practice agreements with  
16 multiple allopathic or osteopathic physicians. Each physician shall  
17 be in good standing with the State Board of Medical Licensure and  
18 Supervision or the State Board of Osteopathic Examiners.

19 C. The ~~supervising~~ collaborating physician need not be  
20 physically present nor be specifically consulted before each  
21 delegated patient care service is performed by a physician  
22 assistant, so long as the ~~supervising~~ collaborating physician and  
23 physician assistant are or can be easily in contact with one another  
24 by means of telecommunication. In all patient care settings, the

1 ~~supervising~~ collaborating physician shall provide appropriate  
2 methods of ~~supervising the~~ participating in health care services  
3 provided by the physician assistant including:

- 4 a. being responsible for the formulation or approval of  
5 all orders and protocols, whether standing orders,  
6 direct orders or any other orders or protocols, which  
7 direct the delivery of health care services provided  
8 by a physician assistant, and periodically reviewing  
9 such orders and protocols,
- 10 b. regularly reviewing the health care services provided  
11 by the physician assistant and any problems or  
12 complications encountered,
- 13 c. being available physically or through telemedicine or  
14 direct telecommunications for consultation, assistance  
15 with medical emergencies or patient referral,
- 16 d. reviewing a sample of outpatient medical records.  
17 Such reviews shall take place at the practice site ~~as~~  
18 ~~determined by the supervising physician~~ and with  
19 approval of the State Board of Medical Licensure and  
20 Supervision, and
- 21 e. that it remains clear that the physician assistant is  
22 an agent of the ~~supervising~~ collaborating physician;  
23 but, in no event shall the ~~supervising~~ collaborating  
24 physician be an employee of the physician assistant.

1           C. ~~In patients with newly diagnosed complex illnesses, the~~  
2 ~~physician assistant shall contact the supervising physician within~~  
3 ~~forty-eight (48) hours of the physician assistant's initial~~  
4 ~~examination or treatment and schedule the patient for appropriate~~  
5 ~~evaluation by the supervising physician as directed by the~~  
6 ~~physician. The supervising physician shall determine which~~  
7 ~~conditions qualify as complex illnesses based on the clinical~~  
8 ~~setting and the skill and experience of the physician assistant.~~

9           D. A physician assistant shall collaborate with, consult with  
10 or refer to the appropriate member of the healthcare team as  
11 indicated by the patient's condition, the education, experience and  
12 competencies of the physician assistant and the standard of care.  
13 The degree of collaboration shall be determined by the practice  
14 which may include decisions made by the physician, employer, group,  
15 hospital service and the credentialing and privileging systems of  
16 licensed facilities. A physician assistant shall be responsible for  
17 the care provided by that physician assistant and a written  
18 agreement relating to the items in the Physician Assistant Act is  
19 not required.

20           E. 1. ~~A physician assistant under the direction of a~~  
21 ~~supervising~~ in collaboration with the physician assistant's  
22 identified physician or physicians may prescribe written and oral  
23 prescriptions and orders. The physician assistant may prescribe  
24 drugs, including controlled medications in Schedules II through V

1 pursuant to Section 2-312 of Title 63 of the Oklahoma Statutes, and  
2 medical supplies and services as delegated by the ~~supervising~~  
3 collaborating physician and as approved by the State Board of  
4 Medical Licensure and Supervision after consultation with the State  
5 Board of Pharmacy on the Physician Assistant Drug Formulary.

6 2. A physician assistant may write an order for a Schedule II  
7 drug for immediate or ongoing administration on site. Prescriptions  
8 and orders for Schedule II drugs written by a physician assistant  
9 must be included on a written protocol determined by the ~~supervising~~  
10 collaborating physician and approved by the medical staff committee  
11 of the facility or by direct verbal order of the ~~supervising~~  
12 collaborating physician. Physician assistants may not dispense  
13 drugs, but may request, receive, and sign for professional samples  
14 and may distribute professional samples to patients.

15 ~~E.~~

16 F. A physician assistant may perform health care services in  
17 patient care settings as authorized by the ~~supervising~~ collaborating  
18 physician.

19 ~~F.~~

20 G. Each physician assistant licensed under the Physician  
21 Assistant Act shall keep his or her license available for inspection  
22 at the primary place of business and shall, when engaged in  
23 professional activities, identify himself or herself as a physician  
24 assistant.

1 SECTION 3. AMENDATORY 59 O.S. 2011, Section 519.7, is  
2 amended to read as follows:

3 Section 519.7. The Secretary of the State Board of Medical  
4 Licensure and Supervision is authorized to grant temporary approval  
5 of a license ~~and application to practice~~ to any ~~physician and~~  
6 physician assistant who ~~have jointly~~ has filed a license ~~and~~  
7 ~~application to practice~~ which meets the requirements set forth by  
8 the Board. Such temporary licensure approval ~~to practice~~ shall be  
9 reviewed at the next regularly scheduled meeting of the Board. The  
10 temporary approval may be approved, extended or rejected by the  
11 Board. If rejected, the temporary approval shall expire  
12 immediately.

13 SECTION 4. AMENDATORY 59 O.S. 2011, Section 519.8, as  
14 amended by Section 7, Chapter 428, O.S.L. 2019 (59 O.S. Supp. 2019,  
15 Section 519.8), is amended to read as follows:

16 Section 519.8. A. Licenses issued to physician assistants  
17 shall be renewed annually on a date determined by the State Board of  
18 Medical Licensure and Supervision. Each application for renewal  
19 shall document that the physician assistant has earned at least  
20 twenty (20) hours of continuing medical education during the  
21 preceding calendar year. Such continuing medical education shall  
22 include not less than one (1) hour of education in pain management  
23 or one (1) hour of education in opioid use or addiction.



1 B. The Board shall promulgate, in the manner established by its  
2 rules, fees for the following:

- 3 1. Initial licensure;
- 4 2. License renewal;
- 5 3. Late license renewal; and
- 6 4. ~~Application to practice; and~~
- 7 ~~5. Disciplinary hearing.~~

8 SECTION 5. AMENDATORY 59 O.S. 2011, Section 519.11, as  
9 amended by Section 5, Chapter 163, O.S.L. 2015 (59 O.S. Supp. 2019,  
10 Section 519.11), is amended to read as follows:

11 Section 519.11. A. Nothing in the Physician Assistant Act  
12 shall be construed to prevent or restrict the practice, services or  
13 activities of any persons of other licensed professions or personnel  
14 supervised by licensed professions in this state from performing  
15 work incidental to the practice of their profession or occupation,  
16 if that person does not represent himself as a physician assistant.

17 B. Nothing stated in the Physician Assistant Act shall prevent  
18 any hospital from requiring the physician assistant ~~and/or the~~  
19 ~~supervising~~ or the collaborating physician to meet and maintain  
20 certain staff appointment and ~~credentialing~~ credentialing  
21 qualifications for the privilege of practicing as, or utilizing, a  
22 physician assistant in the hospital.

23 C. Nothing in the Physician Assistant Act shall be construed to  
24 permit a physician assistant to practice medicine or prescribe drugs

1 and medical supplies in this state except when such actions are  
2 performed ~~under the supervision~~ in collaboration with and at the  
3 direction of a physician or physicians approved by the State Board  
4 of Medical Licensure and Supervision.

5 D. Nothing herein shall be construed to require licensure under  
6 ~~this act~~ the Physician Assistant Act of a physician assistant  
7 student enrolled in a physician assistant educational program  
8 accredited by the Accreditation Review Commission on Education for  
9 the Physician Assistant.

10 E. Notwithstanding any other provision of law, no one who is  
11 not a physician licensed to practice medicine in the state of  
12 Oklahoma may perform acts restricted to such physicians pursuant to  
13 the provisions of Section 1-731 of Title 63 of the Oklahoma  
14 Statutes. This paragraph is inseverable.

15 SECTION 6. NEW LAW A new section of law to be codified  
16 in the Oklahoma Statutes as Section 521.1 of Title 59, unless there  
17 is created a duplication in numbering, reads as follows:

18 Notwithstanding any other provision of law or regulation, a  
19 physician assistant shall be considered to be a primary care  
20 provider when the physician assistant is practicing in the medical  
21 specialties required for a physician to be a primary care provider.

22 SECTION 7. NEW LAW A new section of law to be codified  
23 in the Oklahoma Statutes as Section 521.2 of Title 59, unless there  
24 is created a duplication in numbering, reads as follows:

1 A. Payment for services within the physician assistant's scope  
2 of practice by a health insurance plan shall be made when ordered or  
3 performed by the physician assistant, if the same service would have  
4 been covered if ordered or performed by a physician. A physician  
5 assistant shall be authorized to bill for and receive direct payment  
6 for the medically necessary services the physician assistant  
7 delivers.

8 B. To ensure accountability and transparency for patients,  
9 payers and the healthcare system, a physician assistant shall be  
10 identified as the rendering professional in the billing and claims  
11 process when the physician assistant delivers medical or surgical  
12 services to patients.

13 C. No insurance company or third-party payer shall impose a  
14 practice, education or collaboration requirement that is  
15 inconsistent with or more restrictive than existing physician  
16 assistant state laws or regulations.

17 SECTION 8. NEW LAW A new section of law to be codified  
18 in the Oklahoma Statutes as Section 521.3 of Title 59, unless there  
19 is created a duplication in numbering, reads as follows:

20 A. A physician assistant licensed in this state or licensed or  
21 authorized to practice in any other U.S. jurisdiction or who is  
22 credentialed as a physician assistant by a federal employer who is  
23 responding to a need for medical care created by an emergency or a  
24

1 state or local disaster may render such care that the physician  
2 assistant is able to provide.

3 B. A physician assistant so responding who voluntarily and  
4 gratuitously, and other than in the ordinary course of employment or  
5 practice, renders emergency medical assistance shall not be liable  
6 for civil damages for any personal injuries that result from acts or  
7 omissions which may constitute ordinary negligence. The immunity  
8 granted by this section shall not apply to acts or omissions  
9 constituting gross, willful or wanton negligence.

10 SECTION 9. This act shall become effective January 1, 2021.

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