

1 **ENROLLED**

2 COMMITTEE SUBSTITUTE

3 FOR

4 **Senate Bill No. 535**

5 (SENATORS STOLLINGS, FOSTER AND MILLER, *original sponsors*)

6 _____
7 [Passed March 10, 2012; in effect ninety days from passage.]
8 _____

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10
11 AN ACT to amend and reenact §30-3-16 of the Code of West
12 Virginia, 1931, as amended; to amend and reenact §30-7-15a of
13 said code; and to amend and reenact §30-14A-1 of said code,
14 all relating to expanding prescriptive authority of advanced
15 practice registered nurses, physician assistants and
16 assistants to osteopathic physicians and surgeons to allow the
17 prescribing of medications for chronic diseases for an annual
18 supply; clarifying that controlled substances are not included
19 and chronic pain management is excluded from chronic diseases;
20 eliminating the exclusion for prescribing anticoagulants for
21 the specific prescribers; and correcting terminology.

22 *Be it enacted by the Legislature of West Virginia:*

23 That §30-3-16 of the Code of West Virginia, 1931, as amended,
24 be amended and reenacted; that §30-7-15a of said code be amended

1 and reenacted; and that §30-14A-1 of said code be amended and
2 reenacted, all to read as follows:

3 **ARTICLE 3. WEST VIRGINIA MEDICAL PRACTICE ACT.**

4 **§30-3-16. Physician assistants; definitions; Board of Medicine**
5 **rules; annual report; licensure; temporary license;**
6 **relicensure; job description required; revocation or**
7 **suspension of licensure; responsibilities of**
8 **supervising physician; legal responsibility for**
9 **physician assistants; reporting by health care**
10 **facilities; identification; limitations on employment**
11 **and duties; fees; continuing education; unlawful**
12 **representation of physician assistant as a physician;**
13 **criminal penalties.**

14 (a) As used in this section:

15 (1) "Approved program" means an educational program for
16 physician assistants approved and accredited by the Committee on
17 Accreditation of Allied Health Education Programs or its successor;

18 (2) "Health care facility" means any licensed hospital,
19 nursing home, extended care facility, state health or mental
20 institution, clinic or physician's office;

21 (3) "Physician assistant" means an assistant to a physician
22 who is a graduate of an approved program of instruction in primary
23 health care or surgery, has attained a baccalaureate or master's
24 degree, has passed the national certification examination and is

1 qualified to perform direct patient care services under the
2 supervision of a physician;

3 (4) "Physician assistant-midwife" means a physician assistant
4 who meets all qualifications set forth under subdivision (3) of
5 this subsection and fulfills the requirements set forth in
6 subsection (d) of this section, is subject to all provisions of
7 this section and assists in the management and care of a woman and
8 her infant during the prenatal, delivery and postnatal periods; and

9 (5) "Supervising physician" means a doctor or doctors of
10 medicine or podiatry permanently and fully licensed in this state
11 without restriction or limitation who assume legal and supervisory
12 responsibility for the work or training of any physician assistant
13 under his or her supervision.

14 (b) The board shall promulgate rules pursuant to the
15 provisions of article three, chapter twenty-nine-a of this code
16 governing the extent to which physician assistants may function in
17 this state. The rules shall provide that the physician assistant
18 is limited to the performance of those services for which he or she
19 is trained and that he or she performs only under the supervision
20 and control of a physician permanently licensed in this state but
21 that supervision and control does not require the personal presence
22 of the supervising physician at the place or places where services
23 are rendered if the physician assistant's normal place of
24 employment is on the premises of the supervising physician. The

1 supervising physician may send the physician assistant off the
2 premises to perform duties under his or her direction but a
3 separate place of work for the physician assistant may not be
4 established. In promulgating the rules, the board shall allow the
5 physician assistant to perform those procedures and examinations
6 and, in the case of certain authorized physician assistants, to
7 prescribe at the direction of his or her supervising physician, in
8 accordance with subsection (r) of this section, those categories of
9 drugs submitted to it in the job description required by this
10 section. Certain authorized physician assistants may pronounce
11 death in accordance with the rules proposed by the board which
12 receive legislative approval. The board shall compile and publish
13 an annual report that includes a list of currently licensed
14 physician assistants and their supervising physician(s) and
15 location in the state.

16 (c) The board shall license as a physician assistant any
17 person who files an application together with a proposed job
18 description and furnishes satisfactory evidence to it that he or
19 she has met the following standards:

20 (1) Is a graduate of an approved program of instruction in
21 primary health care or surgery;

22 (2) Has passed the certifying examination for a primary care
23 physician assistant administered by the National Commission on
24 Certification of Physician Assistants and has maintained

1 certification by that commission so as to be currently certified;

2 (3) Is of good moral character; and

3 (4) Has attained a baccalaureate or master's degree.

4 (d) The board shall license as a physician assistant-midwife
5 any person who meets the standards set forth under subsection (c)
6 of this section and, in addition thereto, the following standards:

7 (1) Is a graduate of a school of midwifery accredited by the
8 American College of Nurse-Midwives;

9 (2) Has passed an examination approved by the board; and

10 (3) Practices midwifery under the supervision of a
11 board-certified obstetrician, gynecologist or a board-certified
12 family practice physician who routinely practices obstetrics.

13 (e) The board may license as a physician assistant any person
14 who files an application together with a proposed job description
15 and furnishes satisfactory evidence that he or she is of good moral
16 character and meets either of the following standards:

17 (1) He or she is a graduate of an approved program of
18 instruction in primary health care or surgery prior to July 1,
19 1994, and has passed the certifying examination for a physician
20 assistant administered by the National Commission on Certification
21 of Physician Assistants and has maintained certification by that
22 commission so as to be currently certified; or

23 (2) He or she had been certified by the board as a physician
24 assistant then classified as Type B prior to July 1, 1983.

1 (f) Licensure of an assistant to a physician practicing the
2 specialty of ophthalmology is permitted under this section:
3 *Provided*, That a physician assistant may not dispense a
4 prescription for a refraction.

5 (g) When a graduate of an approved program who has
6 successfully passed the National Commission on Certification of
7 Physician Assistants' certifying examination submits an application
8 to the board for a physician assistant license, accompanied by a
9 job description as referenced by this section, and a \$50 temporary
10 license fee, and the application is complete, the board shall issue
11 to that applicant a temporary license allowing that applicant to
12 function as a physician assistant.

13 (h) When a graduate of an approved program submits an
14 application to the board for a physician assistant license,
15 accompanied by a job description as referenced by this section, and
16 a \$50 temporary license fee, and the application is complete, the
17 board shall issue to the applicant a temporary license allowing the
18 applicant to function as a physician assistant until the applicant
19 successfully passes the National Commission on Certification of
20 Physician Assistants' certifying examination so long as the
21 applicant sits for and obtains a passing score on the examination
22 next offered following graduation from the approved program.

23 (i) No applicant may receive a temporary license who,
24 following graduation from an approved program, has not obtained a

1 passing score on the examination.

2 (j) A physician assistant who has not been certified by the
3 National Commission on Certification of Physician Assistants will
4 be restricted to work under the direct supervision of the
5 supervising physician.

6 (k) A physician assistant who has been issued a temporary
7 license shall, within thirty days of receipt of written notice from
8 the National Commission on Certification of Physician Assistants of
9 his or her performance on the certifying examination, notify the
10 board in writing of his or her results. In the event of failure of
11 that examination, the temporary license shall terminate
12 automatically and the board shall so notify the physician assistant
13 in writing.

14 (l) In the event a physician assistant fails a recertification
15 examination of the National Commission on Certification of
16 Physician Assistants and is no longer certified, the physician
17 assistant shall immediately notify his or her supervising physician
18 or physicians and the board in writing. The physician assistant
19 shall immediately cease practicing, the license shall terminate
20 automatically and the physician assistant is not eligible for
21 reinstatement until he or she has obtained a passing score on the
22 examination.

23 (m) A physician applying to the board to supervise a physician
24 assistant shall affirm that the range of medical services set forth

1 in the physician assistant's job description are consistent with
2 the skills and training of the supervising physician and the
3 physician assistant. Before a physician assistant can be employed
4 or otherwise use his or her skills, the supervising physician and
5 the physician assistant must obtain approval of the job description
6 from the board. The board may revoke or suspend any license of an
7 assistant to a physician for cause, after giving the assistant an
8 opportunity to be heard in the manner provided by article five,
9 chapter twenty-nine-a of this code and as set forth in rules duly
10 adopted by the board.

11 (n) The supervising physician is responsible for observing,
12 directing and evaluating the work, records and practices of each
13 physician assistant performing under his or her supervision. He or
14 she shall notify the board in writing of any termination of his or
15 her supervisory relationship with a physician assistant within ten
16 days of the termination. The legal responsibility for any
17 physician assistant remains with the supervising physician at all
18 times including occasions when the assistant under his or her
19 direction and supervision aids in the care and treatment of a
20 patient in a health care facility. In his or her absence, a
21 supervising physician must designate an alternate supervising
22 physician but the legal responsibility remains with the supervising
23 physician at all times. A health care facility is not legally
24 responsible for the actions or omissions of the physician assistant

1 unless the physician assistant is an employee of the facility.

2 (o) The acts or omissions of a physician assistant employed by
3 health care facilities providing inpatient or outpatient services
4 are the legal responsibility of the facilities. Physician
5 assistants employed by facilities in staff positions shall be
6 supervised by a permanently licensed physician.

7 (p) A health care facility shall report in writing to the
8 board within sixty days after the completion of the facility's
9 formal disciplinary procedure and after the commencement and
10 conclusion of any resulting legal action, the name of any physician
11 assistant practicing in the facility whose privileges at the
12 facility have been revoked, restricted, reduced or terminated for
13 any cause including resignation, together with all pertinent
14 information relating to the action. The health care facility shall
15 also report any other formal disciplinary action taken against any
16 physician assistant by the facility relating to professional
17 ethics, medical incompetence, medical malpractice, moral turpitude
18 or drug or alcohol abuse. Temporary suspension for failure to
19 maintain records on a timely basis or failure to attend staff or
20 section meetings need not be reported.

21 (q) When functioning as a physician assistant, the physician
22 assistant shall wear a name tag that identifies him or her as a
23 physician assistant. A two and one-half by three and one-half inch
24 card of identification shall be furnished by the board upon

1 licensure of the physician assistant.

2 (r) A physician assistant may write or sign prescriptions or
3 transmit prescriptions by word of mouth, telephone or other means
4 of communication at the direction of his or her supervising
5 physician. A fee of \$50 will be charged for prescription-writing
6 privileges. The board shall promulgate rules pursuant to the
7 provisions of article three, chapter twenty-nine-a of this code
8 governing the eligibility and extent to which a physician assistant
9 may prescribe at the direction of the supervising physician. The
10 rules shall include, but not be limited to, the following:

11 (1) Provisions and restrictions for approving a state
12 formulary classifying pharmacologic categories of drugs that may be
13 prescribed by a physician assistant are as follows:

14 (A) Schedules I and II of the Uniform Controlled Substances
15 Act, antineoplastic, radiopharmaceuticals, general anesthetics and
16 radiographic contrast materials shall be excluded from the
17 formulary;

18 (B) Drugs listed under Schedule III shall be limited to a
19 seventy-two hour supply without refill;

20 (C) In addition to the above referenced provisions and
21 restrictions and at the direction of a supervising physician, the
22 rules shall permit the prescribing of an annual supply of any drug,
23 with the exception of controlled substances, which is prescribed
24 for the treatment of a chronic condition, other than chronic pain

1 management. For the purposes of this section, a "chronic
2 condition" is a condition which lasts three months or more,
3 generally cannot be prevented by vaccines, can be controlled but
4 not cured by medication and does not generally disappear. These
5 conditions, with the exception of chronic pain, include, but are
6 not limited to, arthritis, asthma, cardiovascular disease, cancer,
7 diabetes, epilepsy and seizures and obesity. The prescriber
8 authorized in this section shall note on the prescription the
9 chronic disease being treated.

10 (D) Categories of other drugs may be excluded as determined by
11 the board.

12 (2) All pharmacological categories of drugs to be prescribed
13 by a physician assistant shall be listed in each job description
14 submitted to the board as required in subsection (i) of this
15 section;

16 (3) The maximum dosage a physician assistant may prescribe;

17 (4) A requirement that to be eligible for prescription
18 privileges, a physician assistant shall have performed patient care
19 services for a minimum of two years immediately preceding the
20 submission to the board of the job description containing
21 prescription privileges and shall have successfully completed an
22 accredited course of instruction in clinical pharmacology approved
23 by the board; and

24 (5) A requirement that to maintain prescription privileges, a

1 physician assistant shall continue to maintain national
2 certification as a physician assistant and, in meeting the national
3 certification requirements, shall complete a minimum of ten hours
4 of continuing education in rational drug therapy in each
5 certification period. Nothing in this subsection permits a
6 physician assistant to independently prescribe or dispense drugs.

7 (s) A supervising physician may not supervise at any one time
8 more than three full-time physician assistants or their equivalent,
9 except that a physician may supervise up to four hospital-employed
10 physician assistants. No physician shall supervise more than four
11 physician assistants at any one time.

12 (t) A physician assistant may not sign any prescription,
13 except in the case of an authorized physician assistant at the
14 direction of his or her supervising physician in accordance with
15 the provisions of subsection (r) of this section. A physician
16 assistant may not perform any service that his or her supervising
17 physician is not qualified to perform. A physician assistant may
18 not perform any service that is not included in his or her job
19 description and approved by the board as provided for in this
20 section.

21 (u) The provisions of this section do not authorize a
22 physician assistant to perform any specific function or duty
23 delegated by this code to those persons licensed as chiropractors,
24 dentists, dental hygienists, optometrists or pharmacists or

1 certified as nurse anesthetists.

2 (v) Each application for licensure submitted by a licensed
3 supervising physician under this section is to be accompanied by a
4 fee of \$200. A fee of \$100 is to be charged for the biennial
5 renewal of the license. A fee of \$50 is to be charged for any
6 change or addition of supervising physician or change or addition
7 of job location. A fee of \$50 will be charged for prescriptive
8 writing privileges.

9 (w) As a condition of renewal of physician assistant license,
10 each physician assistant shall provide written documentation of
11 participation in and successful completion during the preceding
12 two-year period of continuing education, in the number of hours
13 specified by the board by rule, designated as Category I by the
14 American Medical Association, American Academy of Physician
15 Assistants or the Academy of Family Physicians and continuing
16 education, in the number of hours specified by the board by rule,
17 designated as Category II by the Association or either Academy.

18 (x) Notwithstanding any provision of this chapter to the
19 contrary, failure to timely submit the required written
20 documentation results in the automatic expiration of any license as
21 a physician assistant until the written documentation is submitted
22 to and approved by the board.

23 (y) If a license is automatically expired and reinstatement is
24 sought within one year of the automatic expiration, the former

1 licensee shall:

2 (1) Provide certification with supporting written
3 documentation of the successful completion of the required
4 continuing education;

5 (2) Pay a renewal fee; and

6 (3) Pay a reinstatement fee equal to fifty percent of the
7 renewal fee.

8 (z) If a license is automatically expired and more than one
9 year has passed since the automatic expiration, the former licensee
10 shall:

11 (1) Apply for a new license;

12 (2) Provide certification with supporting written
13 documentation of the successful completion of the required
14 continuing education; and

15 (3) Pay such fees as determined by the board.

16 (aa) It is unlawful for any physician assistant to represent
17 to any person that he or she is a physician, surgeon or podiatrist.
18 A person who violates the provisions of this subsection is guilty
19 of a felony and, upon conviction thereof, shall be imprisoned in a
20 state correctional facility for not less than one nor more than two
21 years, or be fined not more than \$2,000, or both fined and
22 imprisoned.

23 (bb) All physician assistants holding valid certificates
24 issued by the board prior to July 1, 1992, are licensed under this

1 section.

2 **ARTICLE 7. REGISTERED PROFESSIONAL NURSES.**

3 **§30-7-15a. Prescriptive authority for prescription drugs;**
4 **coordination with Board of Pharmacy.**

5 (a) The board may, in its discretion, authorize an advanced
6 practice registered nurse to prescribe prescription drugs in a
7 collaborative relationship with a physician licensed to practice in
8 West Virginia and in accordance with applicable state and federal
9 laws. An authorized advanced practice registered nurse may write
10 or sign prescriptions or transmit prescriptions verbally or by
11 other means of communication.

12 (b) For purposes of this section an agreement to a
13 collaborative relationship for prescriptive practice between a
14 physician and an advanced practice registered nurse shall be set
15 forth in writing. Verification of the agreement shall be filed
16 with the board by the advanced practice registered nurse. The
17 board shall forward a copy of the verification to the Board of
18 Medicine and the Board of Osteopathic Medicine. Collaborative
19 agreements shall include, but are not limited to, the following:

20 (1) Mutually agreed upon written guidelines or protocols for
21 prescriptive authority as it applies to the advanced practice
22 registered nurse's clinical practice;

23 (2) Statements describing the individual and shared
24 responsibilities of the advanced practice registered nurse and the

1 physician pursuant to the collaborative agreement between them;

2 (3) Periodic and joint evaluation of prescriptive practice;
3 and

4 (4) Periodic and joint review and updating of the written
5 guidelines or protocols.

6 (c) The board shall promulgate legislative rules in accordance
7 with the provisions of chapter twenty-nine-a of this code governing
8 the eligibility and extent to which an advanced practice registered
9 nurse may prescribe drugs. Such rules shall provide, at a minimum,
10 a state formulary classifying those categories of drugs which shall
11 not be prescribed by advanced practice registered nurse including,
12 but not limited to, Schedules I and II of the Uniform Controlled
13 Substances Act, antineoplastics, radiopharmaceuticals and general
14 anesthetics. Drugs listed under Schedule III shall be limited to
15 a seventy-two hour supply without refill. In addition to the above
16 referenced provisions and restrictions and pursuant to a
17 collaborative agreement as set forth in subsections (a) and (b) of
18 this section, the rules shall permit the prescribing of an annual
19 supply of any drug, with the exception of controlled substances,
20 which is prescribed for the treatment of a chronic condition, other
21 than chronic pain management. For the purposes of this section, a
22 "chronic condition" is a condition which lasts three months or
23 more, generally cannot be prevented by vaccines, can be controlled
24 but not cured by medication and does not generally disappear.

1 These conditions, with the exception of chronic pain, include, but
2 are not limited to, arthritis, asthma, cardiovascular disease,
3 cancer, diabetes, epilepsy and seizures, and obesity. The
4 prescriber authorized in this section shall note on the
5 prescription the chronic disease being treated.

6 (d) The board shall consult with other appropriate boards for
7 the development of the formulary.

8 (e) The board shall transmit to the Board of Pharmacy a list
9 of all advanced practice registered nurse with prescriptive
10 authority. The list shall include:

11 (1) The name of the authorized advanced practice registered
12 nurse;

13 (2) The prescriber's identification number assigned by the
14 board; and

15 (3) The effective date of prescriptive authority.

16 **ARTICLE 14A. ASSISTANTS TO OSTEOPATHIC PHYSICIANS AND SURGEONS.**

17 **§30-14A-1. Osteopathic physician assistant to osteopathic**
18 **physicians and surgeons; definitions; board of**
19 **osteopathy rules; licensure; temporary licensure;**
20 **renewal of license; job description required;**
21 **revocation or suspension of license;**
22 **responsibilities of the supervising physician;**
23 **legal responsibility for osteopathic physician**
24 **assistants; reporting of disciplinary procedures;**

1 **identification; limitation on employment and**
2 **duties; fees; unlawful use of the title of**
3 **"osteopathic physician assistant"; unlawful**
4 **representation of an osteopathic physician**
5 **assistant as a physician; criminal penalties.**

6 (a) As used in this section:

7 (1) "Approved program" means an educational program for
8 osteopathic physician assistants approved and accredited by the
9 Committee on Allied Health Education and Accreditation or its
10 successor.

11 (2) "Board" means the Board of Osteopathy established under
12 the provisions of article fourteen, chapter thirty of this code.

13 (3) "Direct supervision" means the presence of the supervising
14 physician at the site where the osteopathic physician assistant
15 performs medical duties.

16 (4) "Health care facility" means any licensed hospital,
17 nursing home, extended care facility, state health or mental
18 institution, clinic or physician's office.

19 (5) "License" means a certificate issued to an osteopathic
20 physician assistant who has passed the examination for a primary
21 care or surgery physician assistant administered by the National
22 Board of Medical Examiners on behalf of the National Commission on
23 Certification of Physician Assistants. All osteopathic physician
24 assistants holding valid certificates issued by the board prior to

1 March 31, 2010, are licensed under the provisions of this article,
2 but must renew the license pursuant to the provisions of this
3 article.

4 (6) "Osteopathic physician assistant" means an assistant to an
5 osteopathic physician who is a graduate of an approved program of
6 instruction in primary care or surgery, has passed the National
7 Certification Examination and is qualified to perform direct
8 patient care services under the supervision of an osteopathic
9 physician.

10 (7) "Supervising physician" means a doctor of osteopathy
11 permanently licensed in this state who assumes legal and
12 supervising responsibility for the work or training of an
13 osteopathic physician assistant under his or her supervision.

14 (b) The board shall propose emergency and legislative rules
15 for legislative approval pursuant to the provisions of article
16 three, chapter twenty-nine-a of this code, governing the extent to
17 which osteopathic physician assistants may function in this state.
18 The rules shall provide that:

19 (1) The osteopathic physician assistant is limited to the
20 performance of those services for which he or she is trained;

21 (2) The osteopathic physician assistant performs only under
22 the supervision and control of an osteopathic physician permanently
23 licensed in this state but such supervision and control does not
24 require the personal presence of the supervising physician at the

1 place or places where services are rendered if the osteopathic
2 physician assistant's normal place of employment is on the premises
3 of the supervising physician. The supervising physician may send
4 the osteopathic physician assistant off the premises to perform
5 duties under his or her direction, but a separate place of work for
6 the osteopathic physician assistant may not be established; and

7 (3) The board may allow the osteopathic physician assistant to
8 perform those procedures and examinations and, in the case of
9 authorized osteopathic physician assistants, to prescribe at the
10 direction of his or her supervising physician in accordance with
11 subsections (p) and (q) of this section those categories of drugs
12 submitted to it in the job description required by subsection (f)
13 of this section.

14 (c) The board shall compile and publish an annual report that
15 includes a list of currently licensed osteopathic physician
16 assistants and their employers and location in the state.

17 (d) The board shall license as an osteopathic physician
18 assistant a person who files an application together with a
19 proposed job description and furnishes satisfactory evidence that
20 he or she has met the following standards:

21 (1) Is a graduate of an approved program of instruction in
22 primary health care or surgery;

23 (2) Has passed the examination for a primary care or surgery
24 physician assistant administered by the National Board of Medical

1 Examiners on behalf of the National Commission on Certification of
2 Physician Assistants; and

3 (3) Is of good moral character.

4 (e) When a graduate of an approved program submits an
5 application to the board, accompanied by a job description in
6 conformity with this section, for an osteopathic physician
7 assistant license, the board may issue to the applicant a temporary
8 license allowing the applicant to function as an osteopathic
9 physician assistant for the period of one year. The temporary
10 license may be renewed for one additional year upon the request of
11 the supervising physician. An osteopathic physician assistant who
12 has not been certified as such by the National Board of Medical
13 Examiners on behalf of the National Commission on Certification of
14 Physician Assistants will be restricted to work under the direct
15 supervision of the supervising physician.

16 (f) An osteopathic physician applying to the board to
17 supervise an osteopathic physician assistant shall provide a job
18 description that sets forth the range of medical services to be
19 provided by the assistant. Before an osteopathic physician
20 assistant can be employed or otherwise use his or her skills, the
21 supervising physician must obtain approval of the job description
22 from the board. The board may revoke or suspend a license of an
23 assistant to a physician for cause, after giving the person an
24 opportunity to be heard in the manner provided by sections eight

1 and nine, article one of this chapter.

2 (g) The supervising physician is responsible for observing,
3 directing and evaluating the work records and practices of each
4 osteopathic physician assistant performing under his or her
5 supervision. He or she shall notify the board in writing of any
6 termination of his or her supervisory relationship with an
7 osteopathic physician assistant within ten days of his or her
8 termination. The legal responsibility for any osteopathic
9 physician assistant remains with the supervising physician at all
10 times, including occasions when the assistant, under his or her
11 direction and supervision, aids in the care and treatment of a
12 patient in a health care facility. In his or her absence, a
13 supervising physician must designate an alternate supervising
14 physician but the legal responsibility remains with the supervising
15 physician at all times. A health care facility is not legally
16 responsible for the actions or omissions of an osteopathic
17 physician assistant unless the osteopathic physician assistant is
18 an employee of the facility.

19 (h) The acts or omissions of an osteopathic physician
20 assistant employed by health care facilities providing in-patient
21 services are the legal responsibility of the facilities.
22 Osteopathic physician assistants employed by such facilities in
23 staff positions shall be supervised by a permanently licensed
24 physician.

1 (i) A health care facility shall report in writing to the
2 board within sixty days after the completion of the facility's
3 formal disciplinary procedure, and after the commencement and the
4 conclusion of any resulting legal action, the name of an
5 osteopathic physician assistant practicing in the facility whose
6 privileges at the facility have been revoked, restricted, reduced
7 or terminated for any cause including resignation, together with
8 all pertinent information relating to such action. The health care
9 facility shall also report any other formal disciplinary action
10 taken against an osteopathic physician assistant by the facility
11 relating to professional ethics, medical incompetence, medical
12 malpractice, moral turpitude or drug or alcohol abuse. Temporary
13 suspension for failure to maintain records on a timely basis or
14 failure to attend staff or section meetings need not be reported.

15 (j) When functioning as an osteopathic physician assistant,
16 the osteopathic physician assistant shall wear a name tag that
17 identifies him or her as a physician assistant.

18 (k) (1) A supervising physician shall not supervise at any
19 time more than three osteopathic physician assistants except that
20 a physician may supervise up to four hospital-employed osteopathic
21 physician assistants: *Provided*, That an alternative supervisor has
22 been designated for each.

23 (2) An osteopathic physician assistant shall not perform any
24 service that his or her supervising physician is not qualified to

1 perform.

2 (3) An osteopathic physician assistant shall not perform any
3 service that is not included in his or her job description and
4 approved by the board as provided in this section.

5 (4) The provisions of this section do not authorize an
6 osteopathic physician assistant to perform any specific function or
7 duty delegated by this code to those persons licensed as
8 chiropractors, dentists, registered nurses, licensed practical
9 nurses, dental hygienists, optometrists or pharmacists or certified
10 as nurse anesthetists.

11 (1) An application for license or renewal of license shall be
12 accompanied by payment of a fee established by legislative rule of
13 the Board of Osteopathy pursuant to the provisions of article
14 three, chapter twenty-nine-a of this code.

15 (m) As a condition of renewal of an osteopathic physician
16 assistant license, each osteopathic physician assistant shall
17 provide written documentation satisfactory to the board of
18 participation in and successful completion of continuing education
19 in courses approved by the Board of Osteopathy for the purposes of
20 continuing education of osteopathic physician assistants. The
21 osteopathy board shall propose legislative rules for minimum
22 continuing hours necessary for the renewal of a license. These
23 rules shall provide for minimum hours equal to or more than the
24 hours necessary for national certification. Notwithstanding any

1 provision of this chapter to the contrary, failure to timely submit
2 the required written documentation results in the automatic
3 suspension of a license as an osteopathic physician assistant until
4 the written documentation is submitted to and approved by the
5 board.

6 (n) It is unlawful for any person who is not licensed by the
7 board as an osteopathic physician assistant to use the title of
8 osteopathic physician assistant or to represent to any other person
9 that he or she is an osteopathic physician assistant. A person who
10 violates the provisions of this subsection is guilty of a
11 misdemeanor and, upon conviction thereof, shall be fined not more
12 than \$2,000.

13 (o) It is unlawful for an osteopathic physician assistant to
14 represent to any person that he or she is a physician. A person
15 who violates the provisions of this subsection is guilty of a
16 felony, and, upon conviction thereof, shall be imprisoned in a
17 state correctional facility for not less than one, nor more than
18 two years, or be fined not more than \$2,000, or both fined and
19 imprisoned.

20 (p) An osteopathic physician assistant may write or sign
21 prescriptions or transmit prescriptions by word of mouth, telephone
22 or other means of communication at the direction of his or her
23 supervising physician. The board shall propose rules for
24 legislative approval in accordance with the provisions of article

1 three, chapter twenty-nine-a of this code governing the eligibility
2 and extent to which an osteopathic physician assistant may
3 prescribe at the direction of the supervising physician. The rules
4 shall provide for a state formulary classifying pharmacologic
5 categories of drugs which may be prescribed by such an osteopathic
6 physician assistant. In classifying such pharmacologic categories,
7 those categories of drugs which shall be excluded include, but are
8 not limited to, Schedules I and II of the Uniform Controlled
9 Substances Act, antineoplastics, radiopharmaceuticals, general
10 anesthetics and radiographic contrast materials. Drugs listed
11 under Schedule III are limited to a seventy-two hour supply without
12 refill. In addition to the above referenced provisions and
13 restrictions and at the direction of a supervising physician, the
14 rules shall permit the prescribing an annual supply of any drug
15 other than controlled substances which is prescribed for the
16 treatment of a chronic condition other than chronic pain
17 management. For the purposes of this section, a "chronic
18 condition" is a condition which last three months or more,
19 generally cannot be prevented by vaccines, can be controlled but
20 not cured by medication and does not generally disappear. These
21 conditions include, but are not limited to, arthritis, asthma,
22 cardiovascular disease, cancer, diabetes, epilepsy and seizures and
23 obesity. The prescriber authorized in this section shall note on
24 the prescription the condition for which the patient is being

1 treated. The rules shall provide that all pharmacological
2 categories of drugs to be prescribed by an osteopathic physician
3 assistant be listed in each job description submitted to the board
4 as required in this section. The rules shall provide the maximum
5 dosage an osteopathic physician assistant may prescribe.

6 (q) (1) The rules shall provide that to be eligible for such
7 prescription privileges, an osteopathic physician assistant must:

8 (A) Submit an application to the board for prescription
9 privileges;

10 (B) Have performed patient care services for a minimum of two
11 years immediately preceding the application; and

12 (C) Have successfully completed an accredited course of
13 instruction in clinical pharmacology approved by the board.

14 (2) The rules shall provide that to maintain prescription
15 privileges, an osteopathic physician assistant shall:

16 (A) Continue to maintain national certification as an
17 osteopathic physician assistant; and

18 (B) Complete a minimum of ten hours of continuing education in
19 rational drug therapy in each licensing period.

20 (3) Nothing in this subsection permits an osteopathic
physician assistant to independently prescribe or dispense drugs.