HEALTH CARE. Provides for authority, responsibilities, and physician collaboration of a physician's assistant. (8/1/22)

AN ACT

To amend and reenact R.S. 37:1360.21, 1360.22(1), (5), (7), (8), and (9), 1360.23, the introductory paragraph of 1360.24(A), 1360.24(A)(3), (4), and (5), (B), 1360.26, 1360.27, 1360.28, 1360.29, 1360.30, 1360.31(A), (B), (C)(1), (2), and (3), 1360.32, the introductory paragraph of 1360.33, 1360.33(5) and (6), the introductory paragraph of 1360.34, 1360.34(4) and (5), 1360.35, 1360.36, and 1360.38(A), to enact R.S. 37:1360.22(10), 1360.24(A)(9), 1360.25, and 1360.31(E), and to repeal R.S. 1360.24(C) and (D), relative to physician assistants; to provide definitions and provide for duties of collaborating physicians; to provide for scope and authority of a physician assistant; to provide for the legal responsibility of physician assistant's patient care activities; and to provide for related matters.

Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 37:1360.21, 1360.22(1), (5), (7), (8), and (9), 1360.23, the introductory paragraph of 1360.24(A), 1360.24(A)(3), (4), and (5), (B), 1360.26, 1360.27, 1360.28, 1360.29, 1360.30, 1360.31(A), (B), (C)(1), (2), and (3), 1360.32, the introductory paragraph of 1360.33, 1360.33(5) and (6), the introductory paragraph of 1360.34, 1360.34(4) and (5), 1360.35, 1360.36, and 1360.38(A) are hereby amended and reenacted and R.S.
37:1360.22(10), 1360.24(A)(9), 1360.25, and 1360.31(E) are hereby enacted to read as follows:

§1360.21. Legislative intent

A. Shortages of all skilled health personnel, particularly in rural and urban medically underserved areas and in the field of primary care medicine, new scientific and technological developments, and new methods of organizing health services have made the question of new uses for allied health personnel the critical issue to be resolved if our supply of health manpower is to be used effectively and productively. In its concern with the growing shortage and geographic maldistribution of health care services in Louisiana, the rising cost of health care services in the state and nationally, and the need for access to primary health care by thousands of Louisiana citizens, the legislature intends to modernize the laws governing physician assistant (PA) practice.

B. Physician assistants (PAs) are health care professionals qualified by academic and clinical education and licensed by the Louisiana State Board of Medical Examiners to provide health care services at the direction and under the supervision of in collaboration with a physician or a group of physicians approved by the board as a supervising physician.

C. It is the intent of this Part to permit the more effective utilization of the skills of physicians, particularly in the primary care setting, by enabling them to delegate medical services to qualified physician assistants when such delegation is consistent with the patient's health and welfare.

D. It is the intent of this Part to encourage and permit the utilization of physician assistants by physicians PAs and assist in the development of the physician assistant PA profession and allow for innovative developments of programs for the education of physician assistants PAs. It is also the purpose of this Part to provide for a system of licensing physician assistants and regulating their relationship with supervising physicians so that a high quality of service is assured PAs.

§1360.22. Definitions

Coding: Words which are struck through are deletions from existing law; words in boldface type and underscored are additions.
As used in this Part:

(1) "Approved program" means a program for the education and training of physician assistants PAs which has been formally approved by the Committee on Allied Health Education and Accreditation, its predecessors, or its successors.

(5) "Physician assistant" or "PA" means a health professional qualified by academic and clinical education and licensed by the Louisiana State Board of Medical Examiners to provide health care services at the direction and under the supervision of in collaboration with a physician or a group of physicians approved by the board as a supervising physician.

(7) "Supervising Collaborating physician" means a physician who has been approved by the board to supervise a physician assistant refers to a physician actively engaged in clinical practice and the provision of patient care with whom the PA has developed and signed a collaborative practice agreement for prescriptive and distributing authority and who holds a current, unencumbered, unrestricted and valid medical license issued or recognized by the Louisiana State Board of Medical Examiners and is in good standing with no pending disciplinary proceedings, and practices in accordance with the rules of the Louisiana State Board of Medical Examiners.

(8) "Supervision" means responsible direction and control, with the supervising physician assuming legal liability for the services rendered by the physician assistant in the course and scope of the physician assistant's employment. Such supervision shall not be construed in every case to require the physical presence of the supervising physician. However, the supervising physician and physician assistant must have the capability to be in contact with each other by either telephone or other telecommunications device. Supervision shall exist when the supervising physician responsible for the patient gives informed concurrence of the action of a physician assistant, whether given prior to or after the action, and when
a medical treatment plan or action is made in accordance with written clinical
practice guidelines or protocols set forth by the supervising physician. The level and
method of supervision shall be at the physician and physician assistant level, shall
be documented and reviewed annually, and shall reflect the acuity of the patient care
and nature of the procedure. "Collaboration” refers to a cooperative working
relationship with a collaborating physician or physicians to jointly contribute
to providing patient care and may include but not be limited to discussion of a
patient’s diagnosis and cooperation in the management and delivery of health
care with each provider performing those activities that he is legally authorized
to perform.

(9) "Collaborative practice agreement” means a written statement
addressing the parameters of the collaborative practice which are mutually
agreed upon by the PA and one or more licensed physicians. The collaborative
practice agreement shall include but not be limited to the following provisions:

(a) Availability of the collaborating physician for consultation or
referral, or both.

(b) Methods of management of the collaborative practice which shall
include clinical practice guidelines.

(c) Coverage of the health care needs of a patient during any absence of
the PA or physician.

(10) "Trainee” means a person who is currently enrolled in an approved
physician assistant program.

§1360.23. Powers and duties of the board

A. The board shall have and exercise all powers and duties previously
granted to it, subject to the provisions of Title 36 of the Louisiana Revised Statutes
of 1950. The powers and authority granted to the board by this Part shall be subject
to the provisions of Title 36 of the Louisiana Revised Statutes of 1950, and
particularly R.S. 36:259(A) and 803. Except as otherwise provided by this Part, the
board shall also have the power, in consultation with the Physician Assistants
Advisory Committee, to make rules and regulations pertaining to the approval and
regulation of physician assistants PAs and the approval and regulation of physicians
applying to become supervising collaborating physicians.

B. The board shall have the authority to approve or reject an application for
licensure as a physician assistant PA. Licensure shall be valid for no more than one
year but may be renewed annually.

C. The board shall have the authority to approve or reject an application by
a licensed physician or physicians to act as a supervising collaborating physician,
within the bounds of this Part and rules and regulations promulgated by the board.

D. The board shall make and enforce orders, rules, and regulations for the
revocation or suspension of approval of licensure to act as a physician assistant PA,
and for the revocation and suspension of approval of supervising collaborating
physicians.

E. The board shall cooperate and participate in federal, state, and private
programs for the training, employment, and utilization of allied health personnel
PAs.

F. The board may adopt rules and regulations as are reasonably necessary to
carry out the intent, purposes, and provisions of this Part.

G. A physician, approved by the board as a supervising physician, practicing
in a private practice, group practice, partnership, professional medical corporation,
or employed by a hospital or other health care organization or entity may be the
primary supervising physician for up to eight physician assistants. Physician
assistants PAs may be employed by a group practice or partnership of physicians or
a professional medical corporation duly qualified under R.S. 12:901 et seq., as
amended, or a hospital or other health care organization or entity, as long as such
physician assistants are being supervised by a qualified supervising physician.

H. The board shall ensure that applicants for the program shall not be
discriminated against due to race, color, creed, age, sex, disability, as defined in R.S.
51:2232, or national origin.
I. Notwithstanding any other provision of this Part to the contrary, any person who before and on June 16, 1993, is currently practicing as a **physician assistant PA** under supervision of a licensed physician shall be licensed as a **physician assistant PA**.

§1360.24. Licensure

A. Except as otherwise provided for in this Part, an individual shall be licensed by the board before the individual may practice as a **physician assistant PA**.

The board may grant a license to a **physician assistant PA** applicant who:

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(3) Has successfully completed an education program for **physician assistants PAs** accredited by the Committee on Allied Health Education and Accreditation, its predecessors, or its successors and who has passed the physician assistant national certifying examination administered by the National Commission on Certification of Physicians' Assistants.

(4) Certifies that he is mentally and physically able to engage in practice as a **physician assistant PA**.

(5) Has no licensure, certification, or registration as a **physician assistant PA** in any jurisdiction under current discipline, revocation, suspension, or probation for cause resulting from the applicant's practice as a **physician assistant PA**, unless the board considers such condition and agrees to licensure.

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(9) Is qualified for enrollment in the Patient's Compensation Fund.

B. A personal interview of a **physician assistant PA** applicant shall be required only in those cases where the **assistant PA** is making his first application before the board and where discrepancies exist in the application or the applicant has been subject to prior adverse licensure, certification, or registration action.

§1360.25. Enrollment in the Patient's Compensation Fund

Each physician assistant shall enroll in the Patient's Compensation Fund upon licensure and continue to fulfill all of the requirements for enrollment in
§1360.26. Inactive license

Any physician assistant PA who notifies the board in writing on forms prescribed by the board may elect to place his licensure on an inactive status. A physician assistant PA with an inactive status license shall be excused from payment of renewal fees and shall not practice as a physician assistant PA. Any licensee who engages in practice while his or her license is lapsed or on inactive status shall be considered to be practicing without a license, which shall be grounds for discipline under R.S. 37:1360.34. A physician assistant PA requesting restoration to active status from inactive status shall be required to pay the current renewal fees and shall be required to meet the criteria for renewal as provided for in R.S. 37:1360.27.

§1360.27. Renewal

A. Each person who holds a license as a physician assistant PA in this state shall, upon notification from the board, renew said license by:

1. Submitting the appropriate fee as determined by the board.
2. Completing the appropriate forms.
4. Meeting any other requirements set forth by the board.

B. A physician assistant PA seeking licensure renewal will not be required to make a personal appearance before the board, unless the assistant PA is currently engaged in a licensure revocation or discipline proceeding.

§1360.28. Supervision of Collaboration with physician assistants

A. Supervision of a physician assistant Collaboration with a PA shall be continuous but shall not be construed as necessarily requiring the physical presence of the supervising physician at the time and place that the services are rendered. The method of collaboration shall be defined by the practice site, the terms of the collaborative practice agreement, and the acuity of the patient.

B. It is the obligation and responsibility of each supervising collaborating
physician and physician assistant PA to ensure:

(1) That the physician assistant's PA's scope of practice is identified.

(2) That delegation of medical tasks and the scope and authority is appropriate to the physician assistant's PA's level of education, experience, and competence.

(3) That the relationship of, and access to, the supervising collaborating physician is defined.

(4) That a process for evaluation of the physician assistant's PA's performance is established.

§1360.29. Supervising Collaborating physician qualifications and registration

A. A physician supervising collaborating with a physician assistant PA shall:

(1) Be licensed and in good standing in this state.

(2) Notify the board of his intent to supervise collaborate with a physician assistant PA.

(3) Submit a statement to the board that he will exercise supervision over the physician assistant in accordance with any rules and regulations adopted by the board and that he will retain professional and legal responsibility for the care rendered by the physician assistant.

(4) Maintain a written collaborative practice agreement with the physician assistant in compliance with R.S. 37:1360.22(8) that includes a statement that the physician shall exercise supervision over the physician assistant in accordance with this Part PA. The agreement shall be signed by the supervising collaborating physician and physician assistant PA, updated annually, kept on file at the practice site, and be available to the board upon request.

B. Physicians seeking to supervise a physician assistant collaborate with a PA shall be required to appear before the board upon their first application and notification to the board of their intention to supervise a physician assistant collaborate with a PA when the board finds discrepancies in the physician's
application or when the physician is currently or has been previously subject to
adverse licensure, certification, or registration actions.

§1360.30. Notification of intent to practice

A. A physician assistant PA licensed in this state, prior to initiating practice,
shall submit, on forms approved by the board, notification of such intent to practice.
Such notification shall include:

(1) The name, business address, and telephone number of the supervising
    collaborating physician.

(2) The name, business address, and telephone number of the physician assistant PA.

B. A physician assistant PA shall notify the board of any changes in or
additions to his supervising collaborating physicians within fifteen days of the date
of such change or addition.

§1360.31. Services performed by physician assistants

A. (1) A physician assistant PA performs medical services when such services
are rendered under the supervision of a supervising in collaboration with a
physician or physicians that are within the scope of the PA’s education, training,
and competence. These services shall be in accordance with a written
collaborative practice agreement and may include but are not limited to
eliciting patient histories, performing physical examinations, ordering and
interpreting diagnostic tests, exercising prescriptive authority, making
appropriate referrals, performing clinical procedures, and assisting in surgery.
A physician assistant may perform those duties and responsibilities that are delegated
to him by his supervising physician. A physician assistant is considered to be and is
deemed the agent of his supervising physician in the performance of all
practice-related activities, including but not limited to assisting in surgery and the
ordering and interpretation of diagnostic and other medical services. The level and
method of supervision collaboration shall be at the physician and physician assistant
level, determined at the practice site by the terms of the collaborative practice
agreement, shall be documented and reviewed annually, and shall reflect the acuity of the patient care and the nature of a procedure. A physician assistant PA shall not practice without supervision collaboration except in life-threatening emergencies, and in emergency situations such as man-made and natural disaster relief efforts or during a declared state of emergency.

(2) A physician assistant PA may inject local anesthetic agents subcutaneously, including digital blocks or apply topical anesthetic agents when delegated to do so by a supervising physician. However, nothing in this Part shall otherwise permit a physician assistant PA to administer local anesthetics perineurally, pericurally, epidurally, intrathecally, or intravenously unless such physician assistant the PA is a certified registered nurse anesthetist and meets the requirements in R.S. 37:930.

B. The practice of a physician assistant PA shall include the performance of medical services within the scope of his education, training, and experience, which are delegated by the supervising physician as defined in the collaborative practice agreement.

C.(1) A physician assistant PA may prescribe, order, and administer drugs to the extent delegated by the supervising physician in accordance with the collaborative practice agreement except as provided pursuant to R.S. 37:930 relative to anesthetics. Drugs which may be prescribed, ordered, and administered by a physician assistant PA or a health care professional licensed pursuant to Chapter 12 of this Title are those listed in Schedules II, III, IV, and V of R.S. 40:964 and legend drugs, which are defined as any drug or drug product bearing on the label of the manufacturer or distributor, as required by the Food and Drug Administration, the statement "Caution: Federal law prohibits dispensing without a prescription". A physician assistant PA authorized to prescribe controlled substances shall register with the United States Drug Enforcement Administration.

(2)(a) A physician assistant PA shall meet all of the following qualifications to be eligible to apply for prescriptive authority:
(i) Have completed a minimum of five hundred clinical training hours prior to graduation from an approved physician assistant PA educational program.

(ii) Hold a current license issued by the Louisiana State Board of Medical Examiners.

(iii) Be authorized to prescribe as delegated by the supervising physician in accordance with the collaborative practice agreement.

(iv) Apply for a controlled dangerous substance license from the Louisiana Board of Pharmacy and register with the United States Drug Enforcement Agency, if delegated authority to prescribe Schedule II, III, IV, or V drugs by the supervising physician is included in the collaborative practice agreement.

(b) The board shall not impose any qualifications for a physician assistant’s PA’s prescriptive authority, in addition to those set forth in this Paragraph, through administrative rulemaking.

(3) A physician assistant PA may request, receive, and sign for sample drugs and may distribute sample drugs to a patient.

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E. A PA who performs medical services authorized by this Section in collaboration with a physician or physicians as defined by the collaborative practice agreement may directly bill and be directly reimbursed for services.

§1360.32. Assumption of professional liability

When a physician assistant is supervised by a physician or group practice of physicians or a professional medical corporation, or a hospital or other health care organization or entity, the physician assistant shall be supervised by and be the legal responsibility of the supervising physician or group practice or professional medical corporation or other hospital or other health care organization or entity and the supervising physician. The legal responsibility legal responsibility for the physician assistant’s PA is legally responsible for his patient care activities, including care and treatment that is provided in health care facilities, shall remain that of the supervising physician, group practice of physicians, or a professional medical corporation, or a
hospital or other health care organization or entity.

§1360.33. Violations

The board may, exercising due process, discipline any physician assistant PA as provided in R.S. 37:1360.34, who:

* * *

(5) Is a habitual user of intoxicants or drugs to such an extent that he is unable to safely perform as a physician assistant PA.

(6) Has been adjudicated as mentally incompetent or has a mental condition that renders him unable to safely perform as a physician assistant PA.

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§1360.34. Disciplinary authority

The board, upon finding that a physician assistant PA has committed any offense described in R.S. 37:1360.33, may:

* * *

(4) Require a physician assistant PA to submit to the care, counseling, or treatment of a physician or physicians designated by the board.

(5) Place the physician assistant PA on probation with the right to vacate the probationary order for noncompliance.

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§1360.35. Title and practice protection

A. Any person not licensed under this Part is guilty of a misdemeanor and is subject to penalties applicable to the unlicensed practice of medicine if he:

(1) Holds himself out as a PA.

(2) Uses any combination or abbreviation of the term "physician assistant" to indicate that he is a physician assistant PA.

(3) Acts as a physician assistant PA without being licensed by the board.

B. An unlicensed physician shall not be permitted to use the title of "physician assistant" or "PA" or to practice as a physician assistant PA unless he fulfills the requirements of this Part.
C. Only a physician assistant PA licensed under this Part who has met the current certification requirements of the National Commission on the Certification of Physicians’ Assistants and its successors shall be entitled to use the designation "PA-C" before or after his name or as any title, thereof.

§1360.36. Identification requirements

A physician assistant PA licensed under this Part shall keep his license available for inspection at his primary place of employment and shall, when engaged in his professional activities, wear a name tag identifying himself as a "physician assistant PA".

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§1360.38. Exemptions

A. The provisions of this Part shall not apply to:

1. Practitioners of allied health fields duly licensed in accordance with other laws of this state.

2. A physician assistant PA administering medical services in cases of emergency.

3. A physician assistant PA student enrolled in a physician assistant educational program accredited by the Accreditation Review Commission on Education for the physician assistant PA.

4. A physician assistant PA employed by the federal government while performing duties incidental to that employment.

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Section 2. R.S. 37:1360.24(C) and (D) are hereby repealed.
physician assistant. Provides that the physical presence of the supervising physician is not required but requires there be the capability of the supervising physician to be in contact by either telephone or other telecommunications device. Provides that supervision exists when the supervising physician responsible for the patient gives informed concurrence of the action of a physician assistant and when a medical treatment plan or action is made in accordance with written clinical practice guidelines or protocols set forth by the supervising physician. Requires that the level and method of supervision be at the physician and physician assistant level, be documented and reviewed annually, and reflect the acuity of the patient care and nature of the procedure.

Proposed law defines the relationship between a physician and the PA as a collaboration or cooperative working relationship with one or more collaborating physicians to jointly contribute to providing patient care which may include discussion of a patient's diagnosis and cooperation in the management and delivery of health care with each provider performing those activities within the provider's scope of the practice.

Present law provides that a physician, approved by the La. State Board of Medical Examiners as a supervising physician, practicing in a private practice, group practice, partnership, professional medical corporation, or employed by a hospital or other health care organization or entity may be the primary supervising physician for up to eight physician assistants.

Proposed law repeals present law and provides that PAs may be employed by a group practice or partnership of physicians, a professional medical corporation, or a hospital or other health care organization or entity.

Proposed law requires that medical services performed by a PA be in accordance with a written collaborative practice agreement which may include eliciting patient histories, performing physical examinations, ordering and interpreting diagnostic tests, exercising prescriptive authority, making appropriate referrals, performing clinical procedures, and assisting in surgery. Further provides that it is the obligation and responsibility of each collaborating physician and PA to ensure that the scope and authority of practice is appropriate to the PA's level of education, experience, and competence.

Proposed law provides that a PA shall enroll in the Patient's Compensation Fund upon licensure and continue to fulfill all of the requirements for enrollment in the fund as a condition of licensure.

Proposed law provides that a PA performing medical services as defined by the collaborative practice agreement may directly bill and be directly reimbursed for services.

Present law provides that a PA's legal responsibility remains with the supervising physician, group of physicians, professional medical corporation, hospital, or other health care organization or entity.

Proposed law requires the PA be legally responsible for his patient care activities, including care and treatment that is provided in health care facilities, group practice of physicians, professional medical corporation, hospital, or other health care organization or entity.

Effective August 1, 2022.

(Amends R.S. 37:1360.21, 1360.22(1), (5), (7), (8), and (9), 1360.23, 1360.24(A)(intro para), 1360.24(A)(3), (4), and (5), (B), 1360.26, 1360.27, 1360.28, 1360.29, 1360.30, 1360.31(A), (B), (C)(1), (2), and (3), 1360.32, 1360.33(intro para), 1360.33(S) and (6), 1360.34(intro para), 1360.34(4) and (5), 1360.35, 1360.36, and 1360.38(A); adds R.S. 37:1360.22(10), 1360.24(A)(9), 1360.25, and 1360.31(E); repeals R.S. 1360.24(C) and (D))

Summary of Amendments Adopted by Senate

Coding: Words which are struck through are deletions from existing law; words in boldface type and underscored are additions.
Committee Amendments Proposed by Senate Committee on Health and Welfare to the original bill

1. Defines collaborative practice agreement.
2. Requires enrollment in the Patient's Compensation Fund.
3. Makes technical changes.