

2015 Regular Session

SENATE BILL NO. 115

BY SENATORS MILLS, LAFLEUR AND PEACOCK

Prefiled pursuant to Article III, Section 2(A)(4)(b)(i) of the Constitution of Louisiana.

HEALTH CARE. Provides with respect to the practice of physician assistants. (gov sig)

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AN ACT

To amend and reenact R.S. 37:1360.21(A), (B), and (C), 1360.22(1), (5), (7), and (8), 1360.23(G), (H), and (I), 1360.24(A)(3), the introductory paragraph of 1360.29(A), 1360.31, and 1360.32, to enact R.S. 37:1360.29(A)(4) and 1360.38(A)(3) and (4), and to repeal R.S. 37:1360.23(J), relative to physician assistants; to provide for legislative intent; to amend definitions; to provide for the powers and duties of the Louisiana State Board of Medical Examiners; to provide for licensure; to provide for supervising physician qualifications and registration; to provide for services performed by physician assistants; to provide for assumption of professional liability; to provide for exemption; and to provide for related matters.

Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 37:1360.21(A), (B), and (C), 1360.22(1), (5), (7), and (8), 1360.23(G), (H), and (I), 1360.24(A)(3), the introductory paragraph of 1360.29(A), 1360.31, and 1360.32 are hereby amended and reenacted and R.S. 37:1360.29(A)(4) and 1360.38(A)(3) and (4) are hereby enacted to read as follows:

§1360.21. Legislative intent

A. Shortages of all skilled health personnel, particularly in rural **and urban**

1 medically underserved areas and in the field of primary care medicine, new  
2 scientific and technological developments, and new methods of organizing health  
3 services have made the question of new uses for allied health personnel the critical  
4 issue to be resolved if our supply of health manpower is to be used effectively and  
5 productively. In its concern with the growing shortage and geographic  
6 maldistribution of health care services in Louisiana, the rising cost of health care  
7 services in the state and nationally, and the need for primary health care by  
8 thousands of Louisiana citizens, the legislature intends to ~~establish in this Part a~~  
9 ~~framework for legal recognition and development of new categories of health~~  
10 ~~manpower to be known as physician assistants~~ modernize the laws governing  
11 physician assistant practice.

12 B. ~~Physician assistants are skilled members of the health care profession who~~  
13 ~~work under the supervision of licensed physicians. They are qualified to take patient~~  
14 ~~histories, perform physical examinations, and order and interpret certain diagnostic~~  
15 ~~tests. A physician assistant may implement treatment plans as delegated by the~~  
16 ~~supervising physician and explain them to patients~~ are health care professionals  
17 qualified by academic and clinical education and licensed by the Louisiana State  
18 Board of Medical Examiners to provide health care services at the direction and  
19 under the supervision of a physician or a group of physicians approved by the  
20 board as a supervising physician.

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

25 \* \* \*

26 §1360.22. Definitions

27 As used in this Part:

28 (1) "Approved program" means a program for the education and training of  
29 physician assistants which has been formally approved by the Committee on Allied

1 Health Education and Accreditation, **its predecessors**, or its successors.

2 \* \* \*

3 (5) "Physician assistant" or "assistant" means a person who is a graduate of  
 4 a ~~program accredited by the Committee on Allied Health Education and~~  
 5 ~~Accreditation or its successors and who has successfully passed the national~~  
 6 ~~certificate examination administered by the National Commission on the~~  
 7 ~~Certification of Physicians' Assistants or its predecessors and who is approved and~~  
 8 ~~licensed by the Louisiana State Board of Medical Examiners to perform medical~~  
 9 ~~services under the supervision of a physician or group of physicians who are licensed~~  
 10 ~~by and registered with the board to supervise such assistant~~ **means a health**  
 11 **professional qualified by academic and clinical education and licensed by the**  
 12 **Louisiana State Board of Medical Examiners to provide health care services at**  
 13 **the direction and under the supervision of a physician or a group of physicians**  
 14 **approved by the board as a supervising physician.**

15 \* \* \*

16 (7) "Supervising physician" means a physician who ~~has been approved by~~  
 17 ~~the board to supervise a physician assistant~~ **supervises a physician assistant.**

18 (8) "Supervision" means responsible direction and control, with the  
 19 supervising physician assuming legal liability for the services rendered by the  
 20 physician assistant in the course and scope of the physician assistant's employment.  
 21 Such supervision shall not be construed in every case to require the physical  
 22 presence of the supervising physician. However, the supervising physician and  
 23 physician assistant must have the capability to be in contact with each other by either  
 24 telephone or other telecommunications device. Supervision shall exist when the  
 25 supervising physician responsible for the patient gives informed concurrence of the  
 26 action of a physician assistant, whether given prior to or after the action, and when  
 27 a medical treatment plan or action is made in accordance with written clinical  
 28 practice guidelines or protocols set forth by the supervising physician. **The level**  
 29 **and method of supervision shall be at the physician and physician assistant**

1 level, shall be documented and reviewed annually, and shall reflect the acuity  
2 of the patient care and nature of the procedure.

3 \* \* \*

4 §1360.23. Powers and duties of the board

5 \* \* \*

6 G. ~~The board shall report to the legislature no later than February 1, 1994,~~  
7 ~~and annually thereafter, as to:~~

8 ~~(1) The number and types of programs which have been approved and a~~  
9 ~~description of each.~~

10 ~~(2) The number of physician assistants who have been approved and licensed~~  
11 ~~under this Part and the number of physicians approved as supervising physicians~~  
12 ~~under this Part.~~

13 ~~(3) An evaluation of the programs and the acceptance of them by the~~  
14 ~~community.~~

15 H.G. Approval may be given for a physician to be the primary supervising  
16 physician for up to two physician assistants; however, nothing in this Part shall  
17 prohibit a qualified supervising physician from acting as a supervising physician on  
18 a locum tenens basis for any physician assistants in addition to the two physician  
19 assistants for whom he is the primary supervising physician, provided that such  
20 physician shall not act as supervising physician for more than four physician  
21 assistants at any one time. In addition, a A physician, **approved by the board as a**  
22 **supervising physician,** practicing in a **private practice,** group practice, partnership,  
23 professional medical corporation, or employed by a hospital or other health care  
24 organization or entity may be the primary supervising physician for up to ~~two~~ **four**  
25 physician assistants. Physician assistants may be employed by a group practice or  
26 partnership of physicians or a professional medical corporation duly qualified under  
27 R.S. 12:901 et seq., as amended, or a hospital or other health care organization or  
28 entity, as long as such physician assistants are being supervised by a qualified  
29 supervising physician.



1           A.(1) A physician assistant performs medical services when such services  
2 are rendered under the supervision of a supervising physician. ~~A physician assistant~~  
3 ~~may have multiple supervising physicians in no more than five medical specialties~~  
4 ~~or subspecialties, provided all of the physician assistant's supervising physicians are~~  
5 ~~properly registered with the board in accordance with the provisions of this Part.~~ A  
6 physician assistant may perform those duties and responsibilities that are delegated  
7 to him by his supervising physician. A physician assistant is considered to be and  
8 is deemed the agent of his supervising physician in the performance of all  
9 practice-related activities, including but not limited to assisting in surgery and the  
10 ordering **and interpretation** of diagnostic and other medical services. **The level**  
11 **and method of supervision shall be at the physician and physician assistant**  
12 **level, shall be documented and reviewed annually, and shall reflect the acuity**  
13 **of the patient care and the nature of a procedure.** A physician assistant shall not  
14 practice without supervision except in life-threatening emergencies and in  
15 emergency situations such as man-made and natural disaster relief efforts.

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

22           B. The practice of a physician assistant shall include the performance of  
23 medical services within the scope of his education, training, and experience, which  
24 are delegated by the supervising physician. ~~Medical services rendered by a~~  
25 ~~physician assistant may include but are not limited to:~~

26           ~~(1) Obtaining patient histories and performing physical examinations.~~

27           ~~(2) Ordering or performing diagnostic procedures as delegated by the~~  
28 ~~supervising physician.~~

29           ~~(3) Developing and implementing a treatment plan in accordance with~~

1 ~~written clinical practice guidelines and protocols set forth by the supervising~~  
2 ~~physician.~~

3 (4) ~~Monitoring the effectiveness of therapeutic intervention.~~

4 (5) ~~Suturing wounds as delegated by the supervising physician.~~

5 (6) ~~Offering counseling and education to meet patient needs.~~

6 (7) ~~Making appropriate referrals.~~

7 (8) C.(1) ~~Prescribing certain drugs and medical devices to the extent~~  
8 ~~delegated by the supervising physician, provided the physician assistant has~~  
9 ~~completed a minimum of one year of clinical rotations during his training and has~~  
10 ~~practiced for a minimum of one year under a supervising physician. **A physician**~~  
11 ~~**assistant may prescribe, order, and administer drugs to the extent delegated by**~~  
12 ~~**the supervising physician except as provided pursuant to R.S. 37:930. Drugs**~~  
13 ~~**which may be prescribed, ordered, and administered by a physician assistant or**~~  
14 ~~**a health care professional licensed pursuant to Chapter 12 of this Title**~~ are those  
15 listed in Schedules II, III, IV, and V of R.S. 40:964 and legend drugs, which are  
16 defined as any drug or drug product bearing on the label of the manufacturer or  
17 distributor, as required by the Food and Drug Administration, the statement  
18 "Caution: Federal law prohibits dispensing without a prescription". **A physician**  
19 ~~**assistant authorized to prescribe controlled substances shall register with the**~~  
20 ~~**United States Drug Enforcement Administration.**~~

21 **(2) A graduate physician assistant shall have at least five hundred**  
22 **clinical hours of training prior to application for prescriptive authority.**

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

25 ~~€~~ **D.** The activities listed above may be performed in any setting authorized  
26 by the supervising physician including: **but not limited to** clinics, hospitals,  
27 ambulatory surgical centers, patient homes, nursing homes, other institutional  
28 settings, and health manpower shortage areas.

29 §1360.32. Assumption of professional liability



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The original instrument was prepared by Christopher D. Adams. The following digest, which does not constitute a part of the legislative instrument, was prepared by Michelle Broussard-Johnson.

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## DIGEST

SB 115 Reengrossed

2015 Regular Session

Mills

Present law provides legislative intent regarding the shortage of all skilled health personnel, particularly in rural areas.

Proposed law amends present law to include to the shortage areas of skilled health personnel the urban medically underserved areas of Louisiana.

Present law provides legislative intent regarding physician assistants and working under the supervision of a supervising physician.

Proposed law amends present law's legislative intent to provide physician assistants practice medicine as delegated by a physician.

Present law defines "approved program" to mean a program approved by the Committee on Allied Health Education and Accreditation or its successors.

Proposed law amends present law definition of "approved program" to include the predecessor entity of the Committee on Allied Health Education and Accreditation.

Present law defines "supervising physician" to mean a physician who has been approved by the Louisiana State Board of Medical Examiners (LSBME) to supervise a physician assistant.

Proposed law redefines "supervising physician" to mean a physician who supervises a physician assistant.

Present law defines "supervision".

Proposed law adds to the present law definition of "supervision" that 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.

Present law provides the LSBME shall submit annual reports to the legislature regarding physician assistants in Louisiana.

Proposed law removes the reporting requirement.

Present law provides for a limit on the number of physician assistants a primary supervising physician may oversee. The limit is two physician assistants to one primary supervising physician.

Proposed law amends present law supervising limit from two to four physician assistants per primary supervising physician and clarifies that the physician must be approved by the board as a supervising physician.

Present law provides for the licensure of a physician assistant and the required education program accredited by the Committee on Allied Health Education and Accreditation or its successors.

Proposed law amends present law to include the predecessors to the Committee on Allied

Health Education and Accreditation.

Proposed law adds to the supervising physician qualifications and registration to include the physician supervising the physician assistant shall maintain a written 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 present law. The agreement shall be signed by the supervising physician and physician assistant, updated annually, kept on file at the practice site, and available to the LSBME upon request.

Present law provides a physician assistant may have multiple supervising physicians in no more than five medical specialties or subspecialties, provided all of the physician assistant's supervising physicians are properly registered with the LSBME in accordance with the provisions of present law.

Proposed law removes this provision of present law.

Present law provides 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 of diagnostic and other medical services.

Proposed law amends present law to include "interpretation" of diagnostic and other medical services. Further, proposed law requires 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 the nature of a procedure.

Present law provides for the injection of local anesthetic agents subcutaneously when delegated by supervising physician. Furthermore, present law prohibits a physician assistant from administering local anesthetics perineurally, pericurally, epidurally, intrathecally, or intravenously unless such physician assistant is a certified registered nurse anesthetist.

Present law provides a list of medical services that may be rendered by a physician assistant to include but not be limited to:

- (1) Obtaining patient histories and performing physical examinations.
- (2) Ordering or performing diagnostic procedures as delegated by the supervising physician.
- (3) Developing and implementing a treatment plan in accordance with written clinical practice guidelines and protocols set forth by the supervising physician.
- (4) Monitoring the effectiveness of therapeutic intervention.
- (5) Suturing wounds as delegated by the supervising physician.
- (6) Offering counseling and education to meet patient needs.
- (7) Making appropriate referrals.
- (8) Prescribing certain drugs and medical devices to the extent delegated by the supervising physician, provided the physician assistant has completed a minimum of one year of clinical rotations during his training and has practiced for a minimum of one year under a supervising physician. Drugs prescribed may be those listed in Schedules III, IV, and V.

Proposed law removes this provision of present law.

Proposed law provides a physician assistant may prescribe, order, and administer drugs to

the extent delegated by the supervising physician except as provided pursuant to present law. Further, proposed law includes Schedule II drugs to the type of drugs that a physician assistant and an optometrist may prescribe, order, and administer.

Proposed law provides a physician assistant authorized to prescribe controlled substances shall register with the United States Drug Enforcement Administration.

Proposed law provides a graduate physician assistant shall have at least five hundred clinical hours of training prior to application for prescriptive authority.

Proposed law provides a physician assistant may request, receive, and sign for sample drugs and may distribute sample drugs to a patient.

Present law provides when a physician assistant is employed 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 employing physician or group practice or professional medical corporation or other hospital or other health care organization or entity and the supervising physician.

Proposed law amends present law by replacing "employed" and "employing" with "supervised" and "supervising".

Proposed law adds to the exemptions of present law to include a physician assistant student enrolled in a physician assistant educational program accredited by the Accreditation Review Commission on Education for the Physician Assistant and a physician assistant employed by the federal government while performing duties incidental to that employment.

Effective upon signature of the governor or lapse of time for gubernatorial action.

(Amends R.S. 37:1360.21(A), (B), and (C), 1360.22(1), (5), (7), and (8), 1360.23(G), (H), and (I), 1360.24(A)(3), 1360.29(A)(intro para), 1360.31, and 1360.32; adds R.S. 37:1360.29(A)(4) and 1360.38(A)(3) and (4); repeals R.S. 37:1360.23(J))

#### Summary of Amendments Adopted by Senate

##### Committee Amendments Proposed by Senate Committee on Health and Welfare to the original bill

1. Redefines a physician assistant to mean a health care professional qualified by academic and clinical education and licensed by the LSBME to provide healthcare services at the direction and under the supervision of a physician or a group of physicians approved by the board as a supervising physician.
2. Puts back present law limitations as to certain procedures a physician assistant may do.
3. Provides for the drug schedules a physician assistant and optometrist may prescribe from.

##### Senate Floor Amendments to reengrossed bill

1. Makes Legislative Bureau technical changes.