## **UNOFFICIAL COPY**

1		AN ACT relating to physician assistants.				
2	2 Be it enacted by the General Assembly of the Commonwealth of Kentucky:					
3		→ Section 1. KRS 311.844 is amended to read as follows:				
4	(1)	To be licensed by the board as a physician assistant, an applicant shall:				
5		(a) Submit a completed application form with the required fee;				
6		(b) Be of good character and reputation;				
7		(c) Be a graduate of an approved program; and				
8		(d) Have passed an examination approved by the board within three (3) attempts.				
9	(2)	A physician assistant who is authorized to practice in another state and who is in				
10		good standing may apply for licensure by endorsement from the state of his or her				
11		credentialing if that state has standards substantially equivalent to those of this				
12		Commonwealth.				
13	(3)	A physician assistant's license shall be valid for two (2) years and shall be renewed				
14		by the board upon fulfillment of the following requirements:				
15		(a) The holder shall be of good character and reputation;				
16		(b) The holder shall provide evidence of completion, during the previous two (2)				
17		years, of a minimum of one hundred (100) hours of continuing education				
18		approved by the American Medical Association, the American Osteopathic				
19		Association, the American Academy of Family Physicians, the American				
20		Academy of Physician Assistants, or by another entity approved by the board.				
21		The one hundred (100) hours of continuing education required by this				
22		paragraph shall include:				
23		1. During the first two (2) years of licensure or <i>through completed course</i>				
24		curriculum in the holder's graduate education, [prior to the first				
25		licensure renewal:				
26		a. One (1) continuing education course on the human				
27		immunodeficiency virus and acquired immunodeficiency				

1		syndrome; and			
2		b. ]one and one-half (1.5) hours of continuing education in the			
3		prevention and recognition of pediatric abusive head trauma, as			
4		defined in KRS 620.020; and			
5		2. If the license holder is authorized, pursuant to KRS 311.858(5), to			
6		prescribe and administer Schedule III, IV, or V controlled substances, a			
7		minimum of seven and one-half (7.5) hours of approved continuing			
8		education relating to controlled substance diversion, pain management,			
9		addiction disorders, use of the electronic system for monitoring			
10		controlled substances established in KRS 218A.202, or any combination			
11		of two (2) or more of these subjects; and			
12		(c) The holder shall provide proof of current certification with the National			
13		Commission on Certification of Physician Assistants.			
14		→ Section 2. KRS 311.854 is amended to read as follows:			
15	(1)	A physician shall not supervise a physician assistant without approval of the board.			
16		Failure to obtain board approval as a supervising physician or failure to comply			
17		with the requirements of KRS 311.840 to 311.862 or related administrative			
18		regulations shall be considered unprofessional conduct and shall be subject to			
19		disciplinary action by the board that may include revocation, suspension, restriction,			
20		or placing on probation the supervising physician's right to supervise a physician			
21		assistant.			
22	(2)	To be approved by the board as a supervising physician, a physician shall:			
23		(a) Be currently licensed and in good standing with the board;			
24		(b) Maintain a practice primarily within this Commonwealth. The board in its			
25		discretion may modify or waive this requirement;			
26		(c) Submit a completed application and the required fee to the board. The			
27		application shall include but is not limited to:			

22 RS BR 1514

1			1. A description of the nature of the physician's practice;
2			2. A statement of assurance by the supervising physician that the scope of
3			medical services and procedures described in the application or in any
4			supplemental information shall not exceed the normal scope of practice
5			of the supervising physician;
6			3. A description of the means by which the physician shall maintain
7			communication with the physician assistant when they are not in the
8			same physical location;
9			4. [The name, address, and area of practice of one (1) or more physicians
10			who agree in writing to accept responsibility for supervising the
11			physician assistant in the absence of the supervising physician;
12			5. ]A description of the scope of medical services and procedures to be
13			performed by the physician assistant for which the physician assistant
14			has been trained in an approved program; and
15			5.[6.] An outline of the specific parameters for review of countersignatures.
16	(3)	Prior	to a physician assistant performing any service or procedure beyond those
17		desc	ribed in the initial application submitted to the board under subsection (2)(c) of
18		this	section, the supervising physician shall supplement that application with
19		info	mation that includes but is not limited to:
20		(a)	A description of the additional service or procedure;
21		(b)	A description of the physician assistant's education, training, experience, and
22			institutional credentialing;
23		(c)	A description of the level of supervision to be provided for the additional
24			service or procedure;
25		(d)	The location or locations where the additional service or procedure will be
26			provided; and
27		(e)	Any changes to the specific parameters for review of countersignatures.

## **UNOFFICIAL COPY**

22 RS BR 1514

1 2 The initial and supplemental applications required under this section may be submitted to the board at the same time.

- 3 (4) A physician who has been supervising a physician assistant prior to July 15, 2002,
  4 may continue supervision and the physician assistant may continue to perform all
  5 medical services and procedures that were provided by the physician assistant prior
  6 to July 15, 2002. The supervising physician shall submit the initial application and
  7 any supplemental application as required in this section by October 15, 2002.
- 8 (5) A physician may enter into supervision agreements with no more than <u>six[four]</u>
  9 (<u>6)[(4)]</u> physician assistants and shall not supervise more than <u>six[four]</u> (<u>6)[(4)]</u>
  10 physician assistants at any one (1) time. Application for board approval to be a
  11 supervising physician shall be obtained individually for each physician assistant.
- 12 (6) The board may impose restrictions on the scope of practice of a physician assistant
  13 or on the methods of supervision by the supervising physician upon consideration of
  14 recommendations of the Physician Assistant Advisory Committee established in
  15 KRS 311.842 after providing the applicant with reasonable notice of its intended
  16 action and after providing a reasonable opportunity to be heard.