1 AN ACT relating to physician assistants.

2 Be it enacted by the General Assembly of the Commonwealth of Kentucky:

- 3 → Section 1. KRS 311.530 is amended to read as follows:
- 4 (1) There is hereby created in state government an independent board to be known as
- 5 the State Board of Medical Licensure which shall exercise all medical and
- 6 osteopathic licensure functions heretofore exercised by the State Board of Health.
- 7 The offices of the board shall be maintained at such place as is designated by the
- 8 board.
- 9 (2) The board shall consist of sixteen[fifteen] (16)[(15)] members, including the
- 10 commissioner of public health, the dean of the University of Kentucky College of
- 11 Medicine, the vice dean for clinical affairs of the University of Louisville School of
- Medicine, the dean of the University of Pikeville *College*[School] of Osteopathic
- 13 Medicine, the chair of the Physician Assistant Advisory Committee established
- pursuant to Section 2 of this Act who shall serve as an ex officio nonvoting
- 15 <u>member</u>, and eleven (11) members appointed by the Governor.
- 16 (3) Of the Governor's appointees:
- 17 (a) One (1) member shall be a licensed osteopathic physician and shall be
- 18 appointed from a list of three (3) names submitted by the Kentucky
- 19 Osteopathic Medical Association;
- 20 (b) Seven (7) members shall be licensed medical physicians and shall be
- appointed from a list of three (3) names submitted for each position by the
- 22 Kentucky Medical Association; and
- 23 (c) Three (3) members shall be citizens at large who are representatives of any
- 24 recognized consumer advocacy groups with an interest in the delivery of
- 25 health care and are not associated with or financially interested in the practice
- or business regulated.
- → Section 2. KRS 311.842 is amended to read as follows:

1	(1)	The	board shall promulgate administrative regulations in accordance with KRS
2		Chaj	pter 13A relating to the licensing and regulation of physician assistants,
3		inclu	ading but not limited to:
4		(a)	Temporary licensing;
5		(b)	Professional standards for prescribing and administering controlled
6			substances; and
7		(c)	Professional standards for prescribing or administering Buprenorphine-Mono-
8			Product or Buprenorphine-Combined-with-Naloxone.
9	(2)	The	board shall establish a nine (9) member Physician Assistant Advisory
10		Com	nmittee that shall review and make recommendations to the board regarding all
11		matt	ers relating to physician assistants that come before the board, including but not
12		limit	ted to:
13		(a)	Applications for physician assistant licensing;
14		(b)	Licensing renewal requirements;
15		(c)	Approval of supervising physicians;
16		(d)	Disciplinary actions; and
17		(e)	Promulgation and revision of administrative regulations.
18	(3)	Men	nbers of the Physician Assistant Advisory Committee shall be appointed by the
19		boar	d for four (4) year terms and shall consist of:
20		(a)	Five (5) practicing physician assistants, each selected from a list of three (3)
21			names submitted for each position by the Kentucky Academy of Physician
22			Assistants;
23		(b)	Two (2) supervising physicians;
24		(c)	One (1) member of the board; and
25		(d)	One (1) citizen at large.
26	(4)	The	chairperson of the committee shall be <u>a practicing physician assistant</u> elected
27		by a	majority vote of the committee members and shall be responsible for presiding

- 1 over meetings that shall be held on a regular basis.
- 2 (5) Members shall receive reimbursement for expenditures relating to attendance at
- 3 committee meetings consistent with state policies for reimbursement of travel
- 4 expenses for state employees.

5 (6) Members shall not serve more than two (2) consecutive terms.

- 6 (7)[(6)] Nothing in this chapter shall be construed to require licensing of a physician
- 7 assistant student enrolled in a physician assistant or surgeon assistant program
- 8 accredited by the Accreditation Review Commission on Education for Physician
- 9 Assistants or its successor agencies or of a physician assistant employed in the
- service of the federal government while performing duties relating to that
- 11 employment.
- → Section 3. KRS 311.854 is amended to read as follows:
- 13 (1) A physician shall not supervise a physician assistant without approval of the board.
- Failure to obtain board approval as a supervising physician or failure to comply
- with the requirements of KRS 311.840 to 311.862 or related administrative
- regulations shall be considered unprofessional conduct and shall be subject to
- 17 disciplinary action by the board that may include revocation, suspension,
- 18 restriction, or placing on probation the supervising physician's right to supervise a
- 19 physician assistant.
- 20 (2) To be approved by the board as a supervising physician, a physician shall:
- 21 (a) Be currently licensed and in good standing with the board;
- 22 (b) Maintain a practice primarily within this Commonwealth. The board in its
- 23 discretion may modify or waive this requirement;
- 24 (c) Submit a completed application and the required fee to the board. The
- application shall include but is not limited to:
- 1. A description of the nature of the physician's practice;
- 27 2. A statement of assurance by the supervising physician that the scope of

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

A physician who has been supervising a physician assistant prior to July 15, 2002, may continue supervision and the physician assistant may continue to perform all medical services and procedures that were provided by the physician assistant prior to July 15, 2002. The supervising physician shall submit the initial application and

- 5 any supplemental application as required in this section by October 15, 2002.
- 6 (5) A physician may enter into supervision agreements with no more than four (4) physician assistants and shall not supervise more than four (4) physician assistants at any one (1) time. Application for board approval to be a supervising physician shall be obtained individually for each physician assistant.
- 10 (6) The board may impose restrictions on the scope of practice of a physician assistant
 11 or on the methods of supervision by the supervising physician upon consideration
 12 of recommendations of the Physician Assistant Advisory Committee established in
 13 KRS 311.842 after providing the applicant with reasonable notice of its intended
 14 action and after providing a reasonable opportunity to be heard.
- → Section 4. KRS 311.844 is amended to read as follows:
- 16 (1) To be licensed by the board as a physician assistant, an applicant shall:
- 17 (a) Submit a completed application form with the required fee;
- 18 (b) Be of good character and reputation;
- 19 (c) Be a graduate of an approved program; and
- 20 (d) Have passed an examination approved by the board within three (3) attempts.
- 21 (2) A physician assistant who is authorized to practice in another state and who is in
- good standing may apply for licensure by endorsement from the state of his or her
- credentialing if that state has standards substantially equivalent to those of this
- 24 Commonwealth.
- 25 (3) A physician assistant's license shall be valid for two (2) years and shall be renewed 26 by the board upon fulfillment of the following requirements:
- 27 (a) The holder shall be of good character and reputation;

1	(b)	The noticer shall provide evidence of completion, during the previous two (2)
2		years, of a minimum of one hundred (100) hours of continuing education
3		approved by the American Medical Association, the American Osteopathic
4		Association, the American Academy of Family Physicians, the American
5		Academy of Physician Assistants, or by another entity approved by the board.
6		The one hundred (100) hours of continuing education required by this
7		paragraph shall include:
8		1. During the first two (2) years of licensure or prior to the first licensure
9		renewal <u>, <i>one</i></u> {:
10		a. One (1) continuing education course on the human immunodeficiency
11		virus and acquired immunodeficiency syndrome; and
12		b. One] and one-half (1.5) hours of continuing education in the prevention
13		and recognition of pediatric abusive head trauma, as defined in KRS
14		620.020, except that graduating physician assistant students may apply
15		pediatric abusive head trauma curriculum taught in their physician
16		assistant graduate education to count towards the required one and
17		one-half (1.5) hours; and
18		2. If the license holder is authorized, pursuant to KRS 311.858(5), to
19		prescribe and administer Schedule III, IV, or V controlled substances, a
20		minimum of seven and one-half (7.5) hours of approved continuing
21		education relating to controlled substance diversion, pain management,
22		addiction disorders, use of the electronic system for monitoring
23		controlled substances established in KRS 218A.202, or any combination
24		of two (2) or more of these subjects; and
25	(c)	The holder shall provide proof of current certification with the National

Commission on Certification of Physician Assistants.

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