The original instrument was prepared by Thomas L. Tyler. The following digest, which does not constitute a part of the legislative instrument, was prepared by Brandi Cannon.

## DIGEST 2022 Regular Session

Luneau

Present law provides for physician assistants which proposed law refers to as PA's.

SB 158 Engrossed

<u>Present law</u> provides for supervision of physician assistants by a physician and who is responsible for direction and control and who assumes liability for services rendered by a 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.

<u>Proposed law</u> 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.

<u>Present law</u> 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.

<u>Proposed law</u> repeals <u>present law</u> 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.

<u>Proposed law</u> 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.

<u>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.</u>

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

<u>Present law</u> 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.

<u>Proposed law</u> 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(5) 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

## 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.