2020 Regular Session

HOUSE BILL NO. 702

BY REPRESENTATIVE BAGLEY

HEALTH SERVICES: Provides with respect to the practice of physician assistants

1	AN ACT
2	To amend and reenact R.S. 37:961(4), 1360.21(B) and (D), 1360.22(4), (5), and (8),
3	1360.23(A), (C), (D), and (G), 1360.28(A) and (B)(introductory paragraph) and (3),
4	1360.29(A)(introductory paragraph), (2) through (4), and (B), 1360.30(B),
5	1360.31(A), (B), (C)(1), (2)(a)(iii) and (iv), (4), and (D), and 1360.32 and to repeal
6	R.S. 37:1360.22(7), 1360.23(I), and 1360.24(C) and (D), relative to physician
7	assistants; to provide definitions; to provide for collaboration between a physician
8	and physician assistant; to provide for physician's assistant professional liability; to
9	provide for physician's assistant scope of care; and to provide for related matters.
10	Be it enacted by the Legislature of Louisiana:
11	Section 1. R.S. 37:961(4), 1360.21(B) and (D), 1360.22(4), (5), and (8), 1360.23(A),
12	(C), (D), and (G), 1360.28(A) and (B)(introductory paragraph) and (3),
13	1360.29(A)(introductory paragraph), (2) through (4), and (B), 1360.30 (B), 1360.31(A), (B),
14	(C)(1), (2)(a)(iii) and (iv), (4), and (D), and 1360.32 are hereby amended and reenacted to
15	read as follows:
16	§961. Definitions
17	As used in this Part:
18	* * *
19	(4) The "practice of practical nursing" means the performance for
20	compensation of any acts, not requiring the education, training, and preparation

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1	required in professional pursing in the care treatment or chaptration of persons
	required in professional nursing, in the care, treatment, or observation of persons
2	who are ill, injured, or infirm and for the maintenance of the health of others and the
3	promotion of health care, including the administration of medications and treatments
4	or in on-job training or supervising licensed practical nurses, subordinate personnel,
5	or instructing patients consistent with the licensed practical nurse's education and
6	preparation, under the direction of a licensed physician, optometrist, or dentist acting
7	individually or in his capacity as a member of the medical staff, or registered nurse,
8	or physician assistant. The licensed practical nurse may perform any of the foregoing
9	duties, and with appropriate training may perform additional specified acts which are
10	authorized by the Louisiana State Board of Practical Nurse Examiners when directed
11	to do so by the licensed physician, optometrist, or dentist acting individually or in
12	his capacity as a member of the medical staff, or registered nurse, or physician
13	assistant.
14	* * *
15	§1360.21. Legislative intent
16	* * *
17	B. Physician assistants are health care healthcare professionals qualified by
18	academic and clinical education and licensed by the Louisiana State Board of
19	Medical Examiners to provide health care healthcare services at the direction and
20	under the supervision of in collaboration with a physician or a group of physicians
21	approved by the board as a supervising physician.
22	* * *
23	D. It is the intent of this Part to encourage and permit the utilization of
24	physician assistants by physicians <u>to collaborate with physician assistants</u> , and assist
25	in with the development of the physician assistant profession, and allow for
26	innovative developments of programs for the education of physician assistants. It
27	is also the purpose of this Part to provide for a system of licensing physician
28	assistants and regulating their relationship with supervising physicians so that a high
29	quality of service is assured.

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1	§1360.22. Definitions
2	As used in this Part:
3	* * *
4	(4) "Physician" or "collaborating physician" means a person who is licensed
5	to practice medicine in this state and who has been approved by the board to
6	collaborate with a physician assistant or group of physicians.
7	(5) "Physician assistant" means a health professional qualified by academic
8	and clinical education and licensed by the Louisiana State Board of Medical
9	Examiners to provide health care healthcare services at the direction and under the
10	supervision of in collaboration with a physician or a group of physicians approved
11	by the board as a supervising physician.
12	* * *
13	(8) "Supervision Collaboration" means responsible direction and control,
14	with the supervising physician assuming legal liability for the services rendered by
15	the physician assistant in the course and scope of the physician assistant's
16	employment the physician assistant shall consult with the collaborating physician,
17	or refer to the appropriate physician or healthcare professional, when necessary, in
18	consideration of the patient's condition, the education, competencies and experience
19	of the physician assistant, and the applicable standard of care. The degree of
20	collaboration shall be determined by the practice and shall include decisions made
21	by a physician, group of physicians, or other healthcare delivery organization. Such
22	supervision collaboration shall not be construed in every case to require the physical
23	presence of the supervising physician. However, the supervising physician and
24	physician assistant must have the capability to be in contact with each other by either
25	telephone or other telecommunications device at all times. Supervision shall exist
26	when the supervising physician responsible for the patient gives informed
27	concurrence of the action of a physician assistant, whether given prior to or after the
28	action, and when a medical treatment plan or action is made in accordance with
29	written clinical practice guidelines or protocols set forth by the supervising

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1	physician. The level and method of supervision collaboration shall be determined
2	at the physician and physician assistant level; and shall be documented and reviewed
3	annually, and shall reflect the acuity of the patient care and nature of the procedure.
4	* * *
5	§1360.23. Powers and duties of the board
6	A. The board shall have and exercise all powers and duties previously
7	granted to it, subject to the provisions of Title 36 of the Louisiana Revised Statutes
8	of 1950. The powers and authority granted to the board by this Part shall be subject
9	to the provisions of Title 36 of the Louisiana Revised Statutes of 1950, and
10	particularly R.S. 36:259(A) and 803. Except as otherwise provided by this Part, the
11	board shall also have the power, in consultation with the Physician Assistants
12	Advisory Committee, to make rules and regulations pertaining to the approval and
13	regulation of physician assistants and the approval and regulation of physicians
14	applying to become supervising physicians collaborate with physician assistants.
15	* * *
16	C. The board shall have the authority to approve or reject an application by
17	a licensed physician or physicians to act as a supervising physician collaborate with
18	a physician assistant, within the bounds of this Part and rules and regulations
19	promulgated by the board.
20	D. The board shall make and enforce orders, rules, and regulations for the
21	revocation or suspension of approval of licensure to act as a physician assistant, and
22	for the revocation and suspension of approval of supervising physicians.
23	* * *
24	G. A physician, approved by the board as a supervising physician to
25	collaborate with a physician assistant, practicing in a private practice, group practice,
26	partnership, professional medical corporation, or employed by a hospital or other
27	health care healthcare organization or entity may be the primary supervising
28	collaborating physician for up to eight physician assistants. Physician assistants may
29	be employed by a group practice or partnership of physicians or a professional

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1	medical corporation duly qualified under R.S. 12:901 et seq., as amended, or a
2	hospital or other health care healthcare organization or entity, as long as such
3	physician assistants are being supervised by a qualified supervising collaborating
4	with a board-approved physician.
5	* * *
6	§1360.28. Supervision of Collaboration with physician assistants
7	A. Supervision of a Collaboration with a physician assistant shall be
8	continuous but shall not be construed as necessarily requiring the physical presence
9	of the supervising physician at the time and place that the services are rendered.
10	B. It is the obligation and responsibility of each supervising physician and
11	physician assistant to ensure:
12	* * *
13	(3) That the relationship of, and access to, the supervising physician is
14	defined.
15	* * *
16	§1360.29. Supervising physician Physician qualifications and registration
17	A. A physician supervising <u>collaborating with</u> a physician assistant shall:
18	* * *
19	(2) Notify the board of his intent to supervise <u>collaborate with</u> a physician
20	assistant.
21	(3) Submit a statement to the board that he will exercise supervision over
22	collaborate with the physician assistant in accordance with any rules and regulations
23	adopted by the board and that he will retain professional and legal responsibility for
24	the care rendered by the physician assistant.
25	(4) Maintain a written agreement with the physician assistant in compliance
26	with the provisions of R.S. 37:1360.22 relative to collaboration R.S. 37:1360.22(8)
27	that includes a statement that the physician shall exercise supervision over
28	collaborate with the physician assistant in accordance with this Part. The agreement

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1 shall be signed by the supervising physician and physician assistant, updated 2 annually, kept on file at the practice site, and available to the board upon request. 3 B. Physicians seeking to supervise collaborate with a physician assistant 4 shall be required to appear before the board upon their first application and notification to the board of their intention to supervise collaborate with a physician 5 6 assistant when the board finds discrepancies in the physician's application or when 7 the physician is currently or has been previously subject to adverse licensure, 8 certification, or registration actions. 9 §1360.30. Notification of intent to practice 10 11 B. A physician assistant shall notify the board of any changes in or additions 12 relative to his supervising collaborating physicians within fifteen days of the date of 13 such change or addition. 14 §1360.31. Services performed by physician assistants 15 A.(1) A physician assistant performs medical services when such services 16 are rendered under the supervision of a supervising in collaboration with a physician. 17 A physician assistant may perform those duties and responsibilities that are delegated 18 to him by his supervising physician provide any medical or surgical services that are 19 within the physician assistant's skills, education, training, and experience, and meet 20 established standards of care. A physician assistant is considered to be and is 21 deemed the agent of his supervising physician in the performance of all 22 practice-related activities, including but not limited to assisting in surgery and the 23 ordering and interpretation of diagnostic and other medical services. The level and 24 method of supervision collaboration shall be at the physician and physician assistant 25 level, and shall be documented and reviewed annually, and shall reflect the acuity 26 of the patient care and the nature of a procedure. A physician assistant shall not 27 practice without supervision collaboration except in life-threatening emergencies and 28 in emergency situations such as man-made and natural disaster relief efforts.

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1	(2) A physician assistant may inject local anesthetic agents subcutaneously,
2	including digital blocks or apply topical anesthetic agents when delegated to do so
3	by a supervising physician. However, nothing in this Part shall otherwise permit a
4	physician assistant to administer local anesthetics perineurally, pericurally,
5	epidurally, intrathecally, or intravenously unless such physician assistant is a
6	certified registered nurse anesthetist and meets the requirements provided in R.S.
7	37:930.
8	B. The practice of a physician assistant shall include the performance of
9	medical services within the scope of his skills, education, training, and experience,
10	which are delegated by the supervising physician.
11	C.(1) A physician assistant may prescribe, order, and administer drugs to the
12	extent delegated by the supervising physician except as provided pursuant to R.S.
13	37:930 relative to anesthetics. Drugs which may be prescribed, ordered, and
14	administered by a physician assistant or a health care healthcare professional
15	licensed pursuant to Chapter 12 of this Title are those listed in Schedules II, III, IV,
16	and V of R.S. 40:964 and legend drugs, which are defined as any drug or drug
17	product bearing on the label of the manufacturer or distributor, as required by the
18	Food and Drug Administration, the statement "Caution: Federal law prohibits
19	dispensing without a prescription". A physician assistant authorized to prescribe
20	controlled substances shall register with the United States Drug Enforcement
21	Administration.
22	(2)(a)
23	* * *
24	(iii) Be authorized to prescribe as delegated by the supervising physician.
25	(iv) Apply for a controlled dangerous substance license from the Louisiana
26	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.

29 * *

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1	(4) A physician assistant may provide medication-assisted treatment (MAT),
2	as authorized by the United States Department of Health and Human Services,
3	Substance Abuse and Mental Health Services Administration and in accordance with
4	rules promulgated by the board. At a minimum, rules promulgated by the board shall
5	include a requirement that in order for the PA physician assistant to provide MAT,
6	his supervising collaborating physician shall also be authorized and in compliance
7	with all federal and state laws and rules authorizing the provision of MAT. For
8	purposes of this Subparagraph, "MAT" means the use of medications with
9	counseling and behavioral therapies to treat substance use disorders and prevent
10	opioid overdose.
11	D. The activities listed above may be performed in any setting authorized by
12	the supervising physician including but not limited to clinics, hospitals, ambulatory
13	surgical centers, patient homes, nursing homes, other institutional settings, and
14	health manpower shortage areas.
15	§1360.32. Assumption of Physician assistant professional liability
16	<u>A.</u> When a physician assistant is supervised by a physician or group practice
17	of physicians or a professional medical corporation or a hospital or other health care
18	organization or entity, the physician assistant shall be supervised by and be the legal
19	responsibility of the supervising physician or group practice or professional medical
20	corporation or other hospital or other health care organization or entity and the
21	supervising physician. The legal responsibility for the physician assistant's patient
22	care activities, including care and treatment that is provided in health care healthcare
23	facilities, shall remain be that of the supervising physician, group practice of
24	physicians, or a professional medical corporation or a hospital or other health care
25	organization or entity physician assistant.
26	B. A physician assistant shall not represent that he is qualified to provide a
27	medical or surgical care service that he knows or reasonably believes is not within
28	his scope of care or is prohibited by law.

1

Section 2. R.S. 37:1360:22(7), 1360.23(I), and 1360.24(C) and (D) are hereby

2 repealed in their entirety.

DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

HB 702 Original	2020 Regular Session	Bagley
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Abstract: Provides for physician assistants who oversee the duties of a licensed practical nurse and for physician assistants to collaborate with physicians.

<u>Present law</u> provides that a licensed practical nurse shall administer their job duties under the direction of a licensed physician, optometrist, or dentist acting individually or in his capacity as a member of the medical staff or registered nurse.

<u>Proposed law</u> retains <u>present law</u> and adds physician assistant as an individual who may provide direction to a licensed practical nurse to perform their necessary duties.

<u>Present law</u> provides that physician assistants are healthcare professionals licensed by the La. State Board of Medical Examiners (board) to provide healthcare services at the direction and supervision of a physician or a group of physicians approved by the board as a supervising physician.

<u>Proposed law</u> modifies <u>present law</u> and adds that physician assistants provide health services in a collaboration with a physician or a group of physicians approved by the board.

<u>Present law</u> provides that <u>present law's</u> intent is to encourage and permit the utilization of physician assistants by physicians and assist in the development of the physician assistant profession and allow for innovative developments of programs for the education of physician assistants. Further provides that <u>present law</u> is created to provide a system of licensing physician assistants and regulate their relationship with supervising physicians to ensure high quality service is delivered to patients.

<u>Proposed law</u> deletes references to supervising physicians; otherwise retains <u>present law</u> and adds that physicians shall collaborate with physician assistants to help with the development of the physician assistant profession and assuring a high quality of service is delivered to patients.

Present law defines physician as a person who is licensed to practice medicine in this state.

<u>Proposed law</u> changes <u>present law</u> and defines physician or collaborating physician as a person who is licensed to practice medicine in this state and who has been approved by the board to collaborate with a physician assistant or group of physicians.

<u>Present law</u> defines physician assistant as a health professional qualified by academic and clinical education and licensed by the board to provide healthcare services at the direction and supervision of a physician or group of physicians who are approved by the board as a supervising physician.

<u>Proposed law</u> modifies <u>present law</u> to provide that the physician assistant shall furnish healthcare services in a collaboration with a physician or group of physicians approved by the board.

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<u>Present law</u> defines supervision to mean 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's employment. Further provides that the supervising physician and physician assistant shall be in contact with each other to provide informed concurrence of the action of a physician assistant. The level of supervision shall be at the physician and physician assistant level and shall be documented and reviewed annually to reflect the acuity of the patient care and nature of the procedure.

<u>Proposed law</u> deletes <u>present law</u> and defines collaboration to mean the physician assistant shall consult with the collaborating physician, or refer to the appropriate physician or healthcare profession in consideration of the patient's condition, the education, competencies and experience of the physician assistant, and the appropriate standard of care. Further provides that the physician and physician assistant shall be in contact with each other at all times. <u>Proposed law</u> also provides that the collaboration between the physician and physician assistant shall be documented and reviewed annually.

<u>Present law</u> provides for the powers and duties of the board to make rules and regulations pertaining to the approval and regulation of physician assistants and the approval and regulation of physicians applying to become supervising physicians.

<u>Proposed law</u> retains <u>present law</u> and adds that the board shall regulate those physicians applying to collaborate with physician assistants.

<u>Present law</u> provides that the board shall have the authority to approve or reject an application by a licensed physician or physicians to act as a supervising physician. Further provides that the board shall make and enforce orders, rules, and regulations for physician assistant licenses and for the revocation or suspension of approving supervising physicians.

<u>Proposed law</u> changes <u>present law</u> and adds that the board shall have authority to approve or reject an application by a licensed physician or physicians to collaborate with a physician and enforce orders, rules, and regulation of approving a physician assistant license and for the revocation and suspension of physicians.

<u>Present law</u> provides that a supervising physician may be the primarily supervising physician for up to eight physician assistants. Further provides that a physician assistant may be employed by a group practice, partnership of physicians, or a professional medical corporation authorized by <u>present law</u> as long as physician assistants are supervised by a physician.

<u>Proposed law</u> deletes references to supervising physicians; otherwise retains <u>present law</u> and adds that a physician may collaborate with a physician assistant and may do so for up to eight physician assistants. Further provides that the physician assistants shall be collaborating with a board approved collaborating physician.

<u>Present law</u> provides that supervision of a physician assistant shall be continuous but does not require the physical presence of the physician at all times.

<u>Proposed law</u> retains <u>present law</u> and changes supervision of a physician to collaboration with a physician assistant.

<u>Present law</u> provides for qualifications and registration by the board to be a supervising physician of a physician assistant.

<u>Proposed law</u> changes <u>present law</u> and adds that the qualifications and registration by the board are required to collaborate with a physician assistant.

<u>Present law</u> provides that a physician assistant shall notify the board of any change in or additions to his supervising physicians within 15 days of the date of such change or addition.

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<u>Proposed law</u> changes <u>present law</u> and adds that any change or additions shall be those of the collaborating physicians.

<u>Present law</u> provides that a physician assistant performs medical services and may prescribe, order, and administer drugs under the supervision of a supervising physician. Further provides that the level of supervision shall be at the physician and physician assistant level. <u>Proposed law</u> also provides that the physician assistant may provide medication-assisted treatment authorized by the United States Department of Health and Human Services and the supervising physician shall authorize in compliance with federal law.

<u>Proposed law</u> deletes references to supervising physicians; otherwise retains <u>present law</u> and adds that the physician assistant shall perform such medical services pursuant to <u>present law</u> in collaboration with the physician. Further provides that the collaborating physician shall authorize the physician assistant to provide medication-assisted treatment in compliance with federal law.

<u>Present law</u> provides that a physician supervised by a physician or healthcare organization, shall be supervised by and be the legal responsibility of the supervising physician or healthcare organization.

<u>Proposed law</u> deletes <u>present law</u> and provides that the legal responsibility for the physician assistants patient care activities, including care and treatment that is provided in healthcare facilities, shall be that of the physician assistant. Further provides that a physician assistant shall not represent that he is qualified to provide medical or surgical care that he knows or reasonable believes is not with his scope of care or prohibited by law.

(Amends R.S. 37:961(4), 1360.21(B) and (D), 1360.22(4), (5), and (8), 1360.23(A), (C), (D), and (G), 1360.28(A) and (B)(intro. para.) and (3), 1360.29(A)(intro. para.), (2)-(4), and (B), 1360.30(B), 1360.31(A), (B), (C)(1), (2)(a)(iii) and (iv), (4) and (D), and 1360.32; Repeals R.S. 37:1360.22(7), 1360.23(I), and 1360.24(C) and (D))