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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2016

A N A C T

RELATING TO BUSINESSES AND PROFESSIONS - PHYSICIAN ASSISTANTS

Introduced By: Representatives Bennett, Corvese, Edwards, McNamara, and Azzinaro

Date Introduced: February 05, 2016

Referred To: House Health, Education & Welfare

It is enacted by the General Assembly as follows:

1 SECTION 1. Sections 5-54-1, 5-54-2, 5-54-3, 5-54-5, 5-54-6, 5-54-7, 5-54-8, 5-54-9, 5-
2 54-22 and 5-54-27 of the General Laws in Chapter 5-54 entitled "Physician Assistants" are
3 hereby amended to read as follows:

4 **5-54-1. Declaration of policy.** -- (a) The general assembly intends to establish by this
5 chapter a framework for ~~the development of a new~~ category of health personnel to be known as
6 the physician assistant [\(PA\)](#).

7 (b) The purpose of this chapter is to ~~encourage the more effective utilization of the skills~~
8 ~~of physicians by enabling them to delegate health care tasks including the writing of prescriptions~~
9 ~~and medical orders to qualified physician assistants where that delegation is consistent with the~~
10 ~~patient's health and welfare~~ [provide for an adequate supply of qualified medical providers to meet](#)
11 [the needs of the citizens of Rhode Island and protect the public safety by establishing criteria for](#)
12 [licensure and regulation of physician assistants.](#)

13 (c) Nothing in this chapter shall be construed to repeal or supersede existing laws
14 relating to other paramedical professions or services.

15 **5-54-2. Definitions.** -- As used in this chapter, the following words have the following
16 meanings:

17 (1) "Administrator" means the administrator, division of professional regulation.

18 (2) "Approved program" means a program for the education and training of physician
19 assistants formally approved by the American Medical Association's (A.M.A.'s) Committee on

1 Allied Health, Education and Accreditation, its successor, the Commission on Accreditation of
2 Allied Health Education Programs (CAAHEP) or its successor.

3 (3) "Approved program for continuing medical education" means a program for
4 continuing education approved by the American Academy of Physician Assistants (AAPA) or the
5 Accreditation Council for Continuing Medical Education of the American Medical Association
6 (AMA), or the American Academy of Family Physicians (AAPFP) or the American Osteopathic
7 Association Committee on Continuing Medical Education (AOACCME) or any other board
8 approved program.

9 (4) "Board" means the board of licensure of physician assistants.

10 (5) "Collaboration" means that the physician assistant and physician deliver appropriate
11 medical services within the scope of the physician assistant's skill, education, training, and
12 experience. Collaboration shall be continuous but shall not be construed to require the physical
13 presence of a physician at the time and place that services are rendered. A collaborating physician
14 must be accessible at all times for consultation by the physician assistant.

15 ~~(5)~~(6) "Director" means the director of the department of health.

16 ~~(6)~~(7) "Division" means the division of professional regulation, department of health.

17 ~~(7)~~(8) [Deleted by P.L. 2013, ch. 320, § 1 and P.L. 2013, ch. 420, § 1].

18 ~~(8)~~(9) "Physician" means a person licensed under the provisions of chapter 29 or 37 of
19 this title.

20 ~~(9)~~(10) "Physician assistant" or "PA" means a person who is qualified by academic and
21 practical training to ~~provide those certain patient services under the supervision, control,~~
22 ~~responsibility and direction of a licensed physician~~ practice medicine in collaboration with
23 physicians.

24 ~~(10) "Supervision" means overseeing the activities of, and accepting the responsibility~~
25 ~~for the medical services rendered by the physician assistants. Supervision is continuous, and~~
26 ~~under the direct control of a licensed physician expert in the field of medicine in which the~~
27 ~~physician assistants practice. The constant physical presence of the supervising physician or~~
28 ~~physician designee is not required. It is the responsibility of the supervising physician and~~
29 ~~physician assistant to assure an appropriate level of supervision depending on the services being~~
30 ~~rendered. Each physician or group of physicians, or other health care delivery organization~~
31 ~~excluding licensed hospital or licensed health care facilities controlled or operated by a licensed~~
32 ~~hospital employing physician assistants must have on file at the primary practice site a copy of a~~
33 ~~policy in the form of an agreement between the supervising physicians and physician assistants~~
34 ~~delineating:~~

1 ~~(i) The level of supervision provided by the supervising physician or designee with~~
2 ~~particular reference to differing levels of supervision depending on the type of patient services~~
3 ~~provided and requirements for communication between the supervising physician or designee and~~
4 ~~the physician assistant.~~

5 ~~(ii) A job description for the physician assistant listing patient care responsibilities and~~
6 ~~procedures to be performed by the physician assistant.~~

7 ~~(iii) A program for quality assurance for physician assistant services including~~
8 ~~requirements for periodic review of the physician assistant services.~~

9 ~~(iv) Requirements for supervision of physician assistants employed or extended medical~~
10 ~~staff privileges by licensed hospitals or other licensed health care facilities or employed by other~~
11 ~~health care delivery agencies shall be delineated by the medical staff by laws and/or applicable~~
12 ~~governing authority of the facility.~~

13 ~~(v) The supervising physician or physician designee must be available for easy~~
14 ~~communication and referral at all times.~~

15 (11) "Unprofessional conduct" includes, but is not limited to, the following items or any
16 combination and may be defined by regulations established by the board with prior approval of
17 the director:

18 (i) Fraudulent or deceptive procuring or use of a license;

19 (ii) Representation of himself or herself as a physician;

20 (iii) Conviction of a crime involving moral turpitude; conviction of a felony; conviction
21 of a crime arising out of the practice of medicine. All advertising of medical business, which is
22 intended or has a tendency to deceive the public;

23 (iv) Abandonment of a patient;

24 (v) Dependence upon a controlled substance, habitual drunkenness, or rendering
25 professional services to a patient while intoxicated or incapacitated by the use of drugs;

26 (vi) Promotion of the sale of drugs, devices appliances, or goods or services provided for
27 a patient in a manner that exploits the patient for the financial gain of the physician ~~assistant~~
28 assistants;

29 (vii) Immoral conduct of a physician assistant in the practice of medicine;

30 (viii) Willfully making and filing false reports or records;

31 (ix) Willful omission to file or record or willfully impeding or obstructing a filing or
32 recording, or inducing another person to omit to file or record medical or other reports as required
33 by law;

34 (x) Agreeing with clinical or bioanalytical laboratories to accept payments from these

- 1 laboratories for individual tests or test series for patients;
- 2 (xi) Practicing with an unlicensed physician or physician assistant or aiding or abetting
- 3 these unlicensed persons in the practice of medicine;
- 4 (xii) Offering, undertaking or agreeing to cure or treat a disease by a secret method,
- 5 procedure, treatment or medicine;
- 6 (xiii) Professional or mental incompetence;
- 7 (xiv) Surrender, revocation, suspension, limitation of privilege based on quality of care
- 8 provided, or any other disciplinary action against a license or authorization to practice in another
- 9 state or jurisdiction; or surrender, revocation, suspension, or any other disciplinary action relating
- 10 to membership on any medical staff or in any medical professional association, or society while
- 11 under disciplinary investigation by any of those authorities or bodies for acts or conduct similar to
- 12 acts or conduct which would constitute grounds for action as stated in this chapter;
- 13 (xv) Any adverse judgment, settlement, or award arising from a medical liability claim
- 14 related to acts or conduct, which would constitute grounds for action as stated in this chapter;
- 15 (xvi) Failure to furnish the board, the administrator, investigator or representatives,
- 16 information legally requested by the board;
- 17 (xvii) Violation of any provisions of this chapter or the rules and regulations
- 18 promulgated by the director or an action, stipulation, or agreement of the board;
- 19 (xviii) Cheating or attempting to subvert the certifying examination;
- 20 (xix) Violating any state or federal law or regulation relating to controlled substances;
- 21 (xx) Medical malpractice;
- 22 (xxi) Sexual contact between a physician assistant and patient during the existence of the
- 23 physician assistant/patient relationship;
- 24 (xxii) Providing services to a person who is making a claim as a result of a personal
- 25 injury, who charges or collects from the person any amount in excess of the reimbursement to the
- 26 physician assistant by the insurer as a condition of providing or continuing to provide services or
- 27 treatment.

28 **5-54-3. Exemptions.** -- The provisions of this chapter do not apply to services performed

29 in any of the following areas:

- 30 (1) The practice of dentistry or dental hygiene as defined in chapter 31.1 of this title.
- 31 (2) The practice of chiropractic medicine.
- 32 (3) The practice of optometry as defined in chapter 35 of this title.
- 33 (4) A physician assistant student enrolled in a physician assistant ~~or surgeon assistant~~
- 34 educational program while performing duties in conjunction with a formal training program

1 clinical rotation under the auspices of a recognized degree granting institution.

2 (5) Technicians, or other assistants or employees of physicians who perform delegated
3 tasks in the office of a physician but who are not rendering services as physician assistant or
4 identifying themselves as a physician assistant.

5 **5-54-5. Board of licensure.** -- (a) The director of the department of health, with the
6 approval of the governor, shall appoint a board consisting of ~~seven (7)~~ nine (9) persons, residents
7 of the state, to constitute a board of licensure for physician assistants with the duties, powers, and
8 authority as stated in this chapter, and that board shall be composed of the following:

9 (1) Two (2) members shall be licensed physicians under the provisions of chapter 37 of
10 this title who have been actively engaged in the practice of medicine;

11 (2) One member is a chief executive officer of a health care facility located and licensed
12 in the state or his or her designee who is not licensed in any health care profession;

13 (3) Two (2) members who are representatives of the general public not employed in any
14 health-related field; and

15 (4) ~~Two (2)~~ Four (4) members shall be physician assistants.

16 (b) Members shall be appointed for terms of three (3) years each with no member
17 serving more than two (2) consecutive terms.

18 (c) In his or her initial appointment, the director shall designate the members of the
19 board of licensure for physician assistants as follows: two (2) members to serve for terms of three
20 (3) years; two (2) members to serve for a term of two (2) years; and three (3) members to serve
21 for a term of one year. Any additional appointments shall serve for one year.

22 (d) The director of the department of health may remove any member of the board for
23 cause.

24 (e) Vacancies shall be filled for the unexpired portion of any term in the same manner as
25 the original appointment.

26 **5-54-6. Board of licensure -- Organization and meetings -- Compensation of**
27 **members.** -- The board shall elect its own chairperson annually and shall meet at the call of the
28 administrator, the chairperson or upon the request of two (2) or more members of the board. A
29 quorum shall consist of at least ~~three (3)~~ five (5) members present. The board shall approve
30 programs for continuing medical education. Board members shall serve without compensation.

31 **5-54-7. Board of licensure -- Powers and duties.** -- (a) The board shall administer,
32 coordinate, and enforce the provisions of this chapter, evaluate the qualifications of applicants,
33 supervise any examination of applicants deemed necessary, recommend to the director the
34 commencement of disciplinary hearings in accordance with chapter 35 of title 42 and the

1 provisions of this chapter, and investigate persons engaging in practices which violate the
2 provisions of this chapter. This authority shall specifically encompass practicing physician
3 assistants, ~~supervisory~~ collaborating physicians, and those health care agencies employing
4 physician assistants. The board shall investigate all persons and agencies engaging in practices
5 which violate the provisions in this chapter.

6 (b) The board shall conduct hearings of a non-disciplinary nature and shall keep the
7 records and minutes that are necessary to an orderly dispatch of business.

8 (c) The board, with the approval of the director of the department of health, shall adopt
9 rules and regulations necessary to carry into effect the provisions of this chapter and may amend
10 or repeal them.

11 (d) Regular meetings of the board shall be held at any time and places that the board
12 prescribes and special meetings shall be held upon the call of the chairperson; provided, that at
13 least one regular meeting is held each year.

14 (e) The conferral or enumeration of specific powers in this chapter shall not be construed
15 as a limitation of the general powers conferred by this section.

16 (f) The board shall recommend to the director for registration those persons meeting the
17 criteria stated by this chapter.

18 (g) The board shall recommend to the director the revocation or suspension of the
19 ~~registration~~ license of any physician assistant who does not conform to the requirements of this
20 chapter or regulations adopted under this chapter.

21 (h) In accordance with its authority under subsection (a) of this section the board shall
22 make recommendations to the director for discipline of supervising physicians and employing
23 health care agencies found wanting in their use of physician assistants.

24 (i) The board shall approve programs for continuing medical education.

25 **5-54-8. ~~Permitted health care practices by physician assistants.~~ Permitted health**
26 **care practices by physician assistants (PAs).** -- (a) Physician assistants (PAs) shall practice in
27 collaboration with ~~physician~~ physicians ~~supervision and shall be considered the agents of their~~
28 ~~supervising physicians in the performance of all practice-related activities.~~ PAs may provide any
29 medical services that are within the PAs' skills, education, and training. Whenever any provision
30 of general or public law, or regulation, requires a signature, certification, stamp, verification,
31 affidavit or endorsement by a physician, it shall be deemed to include a signature, certification,
32 stamp, verification, affidavit or endorsement by a physician assistant; ~~provided, however, that~~
33 ~~nothing in this section shall be construed to expand the scope of practice of physician assistants.~~
34 Physician assistants may perform those duties and responsibilities consistent with the limitations

1 of this section, including prescribing, administering, procuring, and dispensing of drugs and
2 medical devices, ~~which are delegated by their supervising physician(s)~~. Physician assistants may
3 request, receive, sign for and distribute professional samples of drugs and medical devices to
4 patients only within the limitations of this section. ~~Notwithstanding any other provisions of law, a~~
5 ~~physician assistant may perform health care services when those services are rendered under the~~
6 ~~supervision of a licensed physician.~~

7 (b) ~~Physician assistants, depending upon their level of professional training and~~
8 ~~experience, as determined by a supervising physician, may perform health care services~~
9 ~~consistent with their expertise and that of the supervising physician, who is a licensed physician~~
10 ~~in solo practice, in group practice, or in health care facilities.~~

11 (c) Physician assistants may write prescriptions and medical orders to the extent
12 provided in this paragraph. When ~~employed by or~~ extended medical staff privileges by a licensed
13 hospital or other licensed health care facility a physician assistant may write medical orders for
14 inpatients as delineated by the medical staff bylaws of the facility in accordance with subsection
15 (e) of this section ~~as well as its credentialing process and applicable governing authority.~~

16 Physician assistants ~~employed directly by physicians, health maintenance organizations or other~~
17 ~~health care delivery organizations~~ may prescribe legend medications including schedule II, III, IV
18 and V medications under chapter 28 of title 21 of the Rhode Island Uniform Controlled
19 Substances Act, medical therapies, medical devices and medical diagnostics ~~according to~~
20 ~~guidelines established by the employing physician, health maintenance organization or other~~
21 ~~health care delivery organization.~~

22 (d) When ~~supervised by a~~ collaborating with a physician licensed under chapter 29 of
23 this title, the service rendered by the physician assistant shall be limited to the foot. The "foot" is
24 defined as the pedal extremity of the human body and its articulations, and includes the tendons
25 and muscles of the lower leg only as they are involved in conditions of the foot.

26 (e) Hospitals and other licensed health care facilities have discretion to grant privileges
27 to a physician assistant and to define the scope of privileges or services which a physician
28 assistant may deliver in a facility by establishing bylaws. ~~In no event shall those privileges, if~~
29 ~~granted, exceed the privileges granted to the supervising physician.~~

30 ~~**5-54-9. Criteria for licensure as a physician assistant.**~~ **Criteria for licensure as a**
31 **physician assistant (PA).** --The board shall recommend to the director for licensure as a
32 physician assistant (PA) an applicant who:

33 (1) Is of good character and reputation;

34 (2) Graduated from a physician assistant training program certified by the AMA's

1 Committee on Allied Health, Education, and Accreditation, its successor, the Commission on
2 Accreditation of Allied Health Education Programs (CAAHEP), its successor, ~~or~~ the
3 Accreditation Review Commission on Education for the Physician Assistant (ARC-PA), or its
4 successor.

5 (3) Passed ~~a certifying examination approved by~~ the National Commission on
6 Certification of Physician ~~Assistants~~ Assistants' Physician Assistant National Certification
7 Examination or any other national ~~certifying~~ exam approved by the board.

8 (4) Submitted a completed application together with the required fee as set forth in § 23-
9 1-54.

10 **5-54-22. Continuing medical education.** -- Every physician assistant licensed to practice
11 within the state shall be required to have satisfactorily completed ~~ten (10)~~ twenty-five (25) hours
12 of approved continuing medical education annually. The annual period for accumulation of
13 continuing education hours commences on the first day of October and runs through the last day
14 of September beginning in 1996. Beginning with the annual renewal period commencing the first
15 day of October 1997 the administrator shall not renew the certificate of licensure until satisfactory
16 evidence of the completion of the required continuing medical education is provided to the
17 division.

18 **5-54-27. Participation in disaster and emergency care.** -- A person licensed under the
19 provisions of this chapter or members of the same profession licensed to practice in other states of
20 the United States or members of the same profession credentialed by a federal employer who
21 voluntarily and gratuitously, and other than in the ordinary course of his or her employment or
22 practice, renders emergency medical assistance during an emergency or a state or local disaster
23 may render such care without ~~supervision~~ collaboration as set forth in subdivision 5-54-2(10), or
24 with such ~~supervision~~ collaboration as is available. Any physician who ~~supervises~~ collaborates
25 with a physician assistant providing medical care in response to such an emergency or state or
26 local disaster shall not be required to meet the ~~supervising~~ collaborating physician requirements
27 set forth in subdivision 5-54-2(10).

28 SECTION 2. Section 5-54-12.1 of the General Laws in Chapter 5-54 entitled "Physician
29 Assistants" is hereby repealed.

30 ~~**5-54-12.1. Continuing medical education.** -- Every physician assistant licensed to~~
31 ~~practice within the state shall be required to have satisfactorily completed ten (10) hours of~~
32 ~~approved continuing medical education annually. The annual period for accumulation of~~
33 ~~continuing medical education hours commences on the first day of September and runs through~~
34 ~~the thirty-first day of August beginning in 1996. Beginning with the annual renewal period~~

1 ~~commencing the first day of August 1997 the administrator shall not renew the certificate of~~
2 ~~licensure until satisfactory evidence of completion of the required continuing medical education~~
3 ~~is provided to the division.~~

4 SECTION 3. Chapter 5-54 of the General Laws entitled "Physician Assistants" is hereby
5 amended by adding thereto the following section:

6 **5-54-28. Participation in charitable and voluntary care.** – A PA licensed in this state,
7 or licensed or authorized to practice in any other U.S. jurisdiction, or who is credentialed by a
8 federal employer or meets the licensure requirements of their requisite federal agency as a PA
9 may volunteer to render such care that they are able to provide at a children's summer camp or for
10 a public or community event without a collaborating physician as it is defined in this chapter or
11 with such collaborating physicians as may be available. Such care must be rendered without
12 compensation or remuneration. It is the obligation of the PA to assure adequate and appropriate
13 professional liability coverage.

14 SECTION 4. This act shall take effect upon passage.

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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF
A N A C T
RELATING TO BUSINESSES AND PROFESSIONS - PHYSICIAN ASSISTANTS

1 This act would modernize the statutes regulating physician assistants (PAs) by providing
2 for collaboration between physicians and physician assistants, amending the continuing education
3 requirement from ten (10) to twenty-five (25) hours annually, and providing the conditions for
4 which PAs may do charitable work without collaborating with a physician.

5 This act would take effect upon passage.

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