

HOUSE BILL 674

Unofficial Copy
J2

1999 Regular Session
(91r0928)

ENROLLED BILL

-- Environmental Matters/Economic and Environmental Affairs --

Introduced by **Delegates Redmer, Ports, Klausmeier, Stull, Weir, Frush,
Petzold, Owings, Dewberry, Mitchell, D. Davis, Malone, Dembrow, and
Fulton, Fulton, and Hubbard**

Read and Examined by Proofreaders:

Proofreader.

Proofreader.

Sealed with the Great Seal and presented to the Governor, for his approval this
____ day of _____ at _____ o'clock, ____ M.

Speaker.

CHAPTER _____

1 AN ACT concerning

2 **Patient Prescription Access - Limited Physician Delegation to Physician**
3 **Assistants**

4 FOR the purpose of repealing certain provisions that ~~relate to patient services~~
5 ~~provided by a physician assistant and that~~ require a physician assistant to
6 obtain an approved job description from the Board of Physician Quality
7 Assurance in order to perform certain delegated medical acts; substituting
8 provisions that authorize a physician to delegate certain medical acts to a
9 physician assistant under a delegation agreement that has been approved by the
10 Board of Physician Quality Assurance; specifying the contents of a delegation
11 agreement and procedures for review, approval, disapproval, and modification of
12 a delegation agreement; authorizing a physician to delegate authority to a
13 physician assistant to write medication orders under an approved delegation
14 agreement under certain circumstances; authorizing the Board to adopt certain
15 regulations; prohibiting a certain physician assistant from writing medication

1 orders for certain controlled dangerous substances unless the physician
 2 assistant has certain valid registrations; prohibiting a supervising physician
 3 from delegating the prescribing and administering of controlled dangerous
 4 substances, prescription drugs, or medical devices unless certain information is
 5 included in the delegation agreement and certain other requirements are met;
 6 prohibiting a physician from delegating to a physician assistant the prescribing
 7 of certain controlled dangerous substances; providing that a physician assistant
 8 is the agent of the supervising physician in the performance of certain
 9 practice-related activities; requiring the Board of Physician Quality Assurance
 10 to provide a certain list to the Board of Pharmacy; requiring a supervising
 11 physician to provide certain notice to the Board of Physician Quality Assurance
 12 when the supervising physician restricts or removes a delegation to write
 13 medical orders or to prescribe controlled dangerous substances, prescription
 14 drugs, or medical devices; *requiring the Board of Physician Quality Assurance to*
 15 *require a certain continuing education course*; requiring the Board of Physician
 16 Quality Assurance to include certain information in its annual report; defining
 17 certain terms; and generally relating to health occupations, physician
 18 assistants, and the authority of physicians to delegate prescriptive authority to
 19 physician assistants.

20 BY repealing and reenacting, with amendments,
 21 Article - Health Occupations
 22 Section 15-101 ~~and 15-301, 15-301, and 15-307(d)~~
 23 Annotated Code of Maryland
 24 (1994 Replacement Volume and 1998 Supplement)

25 BY repealing
 26 Article - Health Occupations
 27 Section 15-302
 28 Annotated Code of Maryland
 29 (1994 Replacement Volume and 1998 Supplement)

30 BY adding to
 31 Article - Health Occupations
 32 Section 15-302 ~~and 15-302.1~~ through 15-302.3
 33 Annotated Code of Maryland
 34 (1994 Replacement Volume and 1998 Supplement)

35 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
 36 MARYLAND, That the Laws of Maryland read as follows:

37 **Article - Health Occupations**

38 15-101.

39 (a) In this title the following words have the meanings indicated.

1 (b) "Board" means the State Board of Physician Quality Assurance,
2 established under § 14-201 of this article.

3 (c) "Certificate" means a certificate issued by the Board to a physician
4 assistant under this title.

5 (d) "Committee" means the Physician Assistant Advisory Committee.

6 (e) "Controlled dangerous substances" has the meaning stated in Art. 27, §
7 277 of the Code.

8 (f) "Correctional facility" includes a State or local correctional facility.

9 (g) "Delegated medical acts" means activities that constitute the practice of
10 medicine delegated by a physician under Title 14 of this article.

11 ~~(G)~~ (H) "DELEGATION AGREEMENT" MEANS A DOCUMENT THAT IS
12 EXECUTED BY A SUPERVISING PHYSICIAN AND A PHYSICIAN ASSISTANT
13 CONTAINING THE REQUIREMENTS OF ~~§§ 15-302 AND 15-302.1~~ § 15-302 OF THIS TITLE
14 AND:

15 (1) § 15-302.1 OF THIS TITLE; OR

16 (2) § 15-302.2 OF THIS TITLE.

17 ~~(H)~~ (I) "Designated pharmacy" means a pharmacy that has an agreement
18 to supply medications for a hospital, public health facility, correctional facility, or
19 detention center if:

20 (1) The hospital, public health facility, correctional facility, or detention
21 center does not have an on-site pharmacy; or

22 (2) The on-site pharmacy at the hospital, public health facility,
23 correctional facility, or detention center is closed or does not have a particular
24 medication in stock.

25 ~~(I)~~ (J) "Hospital" means:

26 (1) A hospital as defined under § 19-301(f) of the Health - General
27 Article;

28 (2) A comprehensive care facility that:

29 (i) Meets the requirements of a hospital-based skilled nursing
30 facility under federal law;

31 (ii) Offers acute care in the same building; and

32 (iii) Has the same protocols and degree of supervision of physician
33 assistants as it does in its acute care area; and

1 (3) An emergency room that is physically connected to a hospital.

2 [(j) "Job description" means a document executed by a physician assistant and
3 physician that has been approved under this title to permit the delegation of medical
4 acts to a certified physician assistant.]

5 (k) "Medication order" means a directive written in a medical chart:

6 (1) For controlled dangerous substances, noncontrolled substances, or
7 nonprescription medications; and

8 (2) In accordance with the protocols of a hospital, public health facility,
9 correctional facility, or detention center.

10 (l) } ~~(l)~~ "National certifying examination" means an examination offered by a
11 national organization, which certifies physician assistants as having achieved a
12 certain level of training.

13 {(m)} ~~(m)~~ "Physician assistant" means an individual who is certified under this
14 title to perform delegated medical acts under the supervision of a physician.

15 {(n)} ~~(n)~~ "Practice as a physician assistant" means the performance of medical
16 acts THAT ARE:

17 (1) [delegated] DELEGATED BY A SUPERVISING PHYSICIAN to a
18 physician assistant [under this title];

19 (2) WITHIN THE SUPERVISING PHYSICIAN'S SCOPE OF PRACTICE; AND

20 (3) APPROPRIATE TO THE PHYSICIAN ASSISTANT'S EDUCATION,
21 TRAINING, AND EXPERIENCE.

22 ~~(o)~~ (O) "PRESCRIPTIVE AUTHORITY" MEANS THE AUTHORITY DELEGATED
23 BY A SUPERVISING PHYSICIAN TO A PHYSICIAN ASSISTANT TO PRESCRIBE AND
24 ADMINISTER CONTROLLED DANGEROUS SUBSTANCES, PRESCRIPTION DRUGS, AND
25 MEDICAL DEVICES.

26 ~~(p)~~ (P) "Protocols" means written policies, bylaws, rules, or regulations
27 established by a hospital, public health facility, correctional facility, or detention
28 center that:

29 (1) Are established in consultation with and with the approval of its
30 medical staff;

31 (2) Describe the delegated medical acts a physician assistant may
32 execute; and

33 (3) Specify the minimum requirements for supervision by a physician.

1 ~~(P)~~ (Q) "Public health facility" means a fixed site where clinical public health
 2 services are rendered under the auspices of the Department, a local health
 3 department in a county, or the Baltimore City Health Department.

4 ~~(q)~~ ~~(M)~~ (R) "Supervising physician" means a physician who has been
 5 approved by the Board to supervise 1 or more physician assistants.

6 [(r)] ~~(N)~~ (S) (1) "Supervision" means ~~the responsibility of a physician to~~
 7 ~~exercise on site supervision or immediately available direction for physician~~
 8 ~~assistants performing delegated medical acts~~.

9 (2) "SUPERVISION" INCLUDES PHYSICIAN OVERSIGHT OF AND
 10 ACCEPTANCE OF DIRECT RESPONSIBILITY FOR THE PATIENT SERVICES AND CARE
 11 RENDERED BY A PHYSICIAN ASSISTANT, INCLUDING CONTINUOUS AVAILABILITY TO
 12 THE PHYSICIAN ASSISTANT IN PERSON, THROUGH WRITTEN INSTRUCTIONS, OR BY
 13 ELECTRONIC MEANS.

14 ~~(2)~~ "SUPERVISION" MAY NOT BE CONSTRUED TO REQUIRE ON SITE
 15 SUPERVISION AT ALL TIMES.

16 15-301.

17 (a) NOTHING IN THIS TITLE MAY BE CONSTRUED TO AUTHORIZE A PHYSICIAN
 18 ASSISTANT TO PRACTICE INDEPENDENT OF A SUPERVISING PHYSICIAN.

19 [(1)] (B) A certificate issued to a physician assistant shall limit the
 20 physician assistant's scope of practice to MEDICAL ACTS:

21 (1) DELEGATED BY THE SUPERVISING PHYSICIAN;

22 [(i)] (2) [Services within the training or] APPROPRIATE TO THE
 23 EDUCATION, TRAINING, AND experience of the physician assistant;

24 [(ii)] (3) [Services customary] CUSTOMARY to the practice of the
 25 supervising physician;

26 [(iii)] Services delegated by the supervising physician;] and

27 [(iv)] (4) [The approved job description from] CONSISTENT WITH
 28 THE DELEGATION AGREEMENT SUBMITTED TO the Board.

29 ~~(2)~~ (C) Patient services THAT MAY BE provided by a physician assistant
 30 ~~are limited to~~ INCLUDE:

31 ~~(1)~~ (I) (I) Taking complete, detailed, and accurate patient
 32 histories; and

33 ~~(2)~~ (II) Reviewing patient records to develop comprehensive
 34 medical status reports;

1 ~~(ii)~~ (2) Performing physical examinations and recording all
2 pertinent patient data;

3 ~~(iii)~~ (3) Interpreting and evaluating patient data as authorized
4 by the supervising physician for the purpose of determining management and
5 treatment of patients;

6 ~~(iv)~~ (4) Initiating requests for or performing diagnostic
7 procedures as indicated by pertinent data and as authorized by the supervising
8 physician;

9 ~~(v)~~ (5) Providing instructions and guidance regarding medical
10 care matters to patients;

11 ~~(vi)~~ (6) Assisting the supervising physician in the delivery of
12 services to patients who require medical care in the home and in health care
13 institutions, including:

14 ~~1-~~ (I) Recording patient progress notes;

15 ~~2-~~ (II) Issuing diagnostic orders that must be
16 countersigned by the supervising physician within 48 hours; and

17 ~~3-~~ (III) Transcribing or executing specific orders at the
18 direction of the supervising physician; AND

19 ~~(vii) Writing medication orders under an approved job description~~
20 ~~and in accordance with § 15-302 of this subtitle; and~~

21 ~~(viii) Other medical acts permitted to be delegated under an~~
22 ~~approved job description.]~~

23 ~~(vii)~~ ~~1-~~ (7) (I) WRITING MEDICATION ORDERS UNDER AN
24 APPROVED DELEGATION AGREEMENT AND IN ACCORDANCE WITH § 15-302.1 OF THIS
25 SUBTITLE; OR

26 ~~2-~~ (II) EXERCISING PRESCRIPTIVE AUTHORITY UNDER AN
27 APPROVED DELEGATION AGREEMENT AND IN ACCORDANCE WITH § 15-302.2 OF THIS
28 SUBTITLE.

29 [(b)] ~~(C)~~ (D) (1) Except as otherwise provided in this title, an individual
30 shall be certified by the Board before the individual may practice as a physician
31 assistant.

32 [(2) Nothing in this title may be construed to authorize a physician
33 assistant to practice independent of a supervising physician.]

34 [(3)] (2) Except as otherwise provided in this title, a physician may not
35 supervise a physician assistant in the performance of delegated medical acts without
36 the approval of the Board.

1 [(4)] (3) Except as otherwise provided in this title or in a medical
2 emergency, a physician assistant may not perform any medical act for which:

3 (i) The individual has not been certified; and

4 (ii) The medical acts have not been delegated by a supervising
5 physician.

6 ~~(D)~~ (E) A PHYSICIAN ASSISTANT IS THE AGENT OF THE SUPERVISING
7 PHYSICIAN IN THE PERFORMANCE OF ALL PRACTICE-RELATED ACTIVITIES,
8 INCLUDING THE ORAL, WRITTEN, OR ELECTRONIC ORDERING OF DIAGNOSTIC,
9 THERAPEUTIC, AND OTHER MEDICAL SERVICES.

10 [(c)] ~~(E)~~ (F) Except as provided in subsection [(d)] ~~(F)~~ (G) of this section, the
11 following individuals may practice as a physician assistant without a certificate:

12 (1) A physician assistant student in a PHYSICIAN ASSISTANT training
13 program THAT IS ACCREDITED BY THE COMMISSION ON ALLIED HEALTH EDUCATION
14 PROGRAMS AND approved by the Board[, while performing the delegated medical acts
15 at:

16 (i) Any office of a physician;

17 (ii) A hospital;

18 (iii) A clinic;

19 (iv) A related institution; or

20 (v) A similar facility]; or

21 (2) A physician assistant employed in the service of the federal
22 government while performing duties incident to that employment.

23 [(d)] ~~(F)~~ (G) A physician may not delegate the authority to write medication
24 orders} ~~PRESCRIPTIONS FOR CONTROLLED DANGEROUS SUBSTANCES,~~
25 ~~PRESCRIPTION DRUGS, OR MEDICAL DEVICES OR THE ABILITY TO EXERCISE~~
26 PRESCRIPTIVE AUTHORITY to a physician assistant student in a training program
27 approved by the Board.

28 [(e)] ~~(G)~~ (H) (1) Except as prohibited by § 15-102(a) of this title, if a duty
29 that is to be delegated under this section is a part of the practice of a health
30 occupation that is regulated under this article by another board, any rule or
31 regulation concerning that duty shall be adopted jointly by the Board of Physician
32 Quality Assurance and the board that regulates the other health occupation.

33 (2) If the two boards cannot agree on a proposed rule or regulation, the
34 proposal shall be submitted to the Secretary for a final decision.

35 (I) NOTWITHSTANDING THE PROVISIONS OF THIS SECTION, A PATIENT BEING
36 TREATED REGULARLY FOR A LIFE THREATENING, CHRONIC, DEGENERATIVE, OR

1 DISABLING CONDITION SHALL BE SEEN *INITIALLY* BY THE SUPERVISING PHYSICIAN
2 AND AS FREQUENTLY AS THE PATIENT'S CONDITION REQUIRES, BUT NO LESS THAN
3 WITHIN EVERY FIVE APPOINTMENTS OR WITHIN 180 DAYS, WHICHEVER OCCURS
4 FIRST.

5 [15-302.

6 (a) To perform delegated medical acts within the scope of this title, a physician
7 assistant shall obtain an approved job description from the Board.

8 (b) To apply for a job description, a physician assistant shall:

9 (1) Submit an application to the Board:

10 (i) Listing all medical acts to be delegated to the physician
11 assistant and the supervision to be performed;

12 (ii) Describing the setting in which the physician assistant shall
13 practice and the qualifications of the supervising physician;

14 (iii) Describing the specialized training provided to the physician
15 assistant and the supervision to be provided by the supervising physician; and

16 (iv) Providing other information deemed necessary by the Board or
17 the Committee;

18 (2) Submit to the Board the fee set by the Board; and

19 (3) Comply with all other requirements established by the Board.

20 (c) The Committee shall:

21 (1) Evaluate the qualifications of the physician assistant for delegated
22 medical acts to be performed under the job description; and

23 (2) Recommend to the Board the approval, rejection, or modification of
24 any application for a job description.

25 (d) The Board may authorize a physician to delegate the authority to write
26 medication orders under an approved job description only if:

27 (1) The physician assistant:

28 (i) Completes an application for expanded job duties on a form
29 provided by the Board regardless of whether the physician assistant already has a job
30 description on file with the Board;

31 (ii) States on the application whether controlled dangerous
32 substances, noncontrolled substances, or nonprescription medications may be ordered
33 by the physician assistant;

- 1 (iii) Provides evidence of:
- 2 1. Certification by the National Commission on the
3 Certification of Physician Assistants, Inc. within the previous 2 years; or
- 4 2. Successful completion of 8 category 1 hours in
5 pharmacology education within the previous 2 years; and
- 6 (iv) Attests that the physician assistant will comply with:
- 7 1. State and federal laws governing the prescribing of
8 medications; and
- 9 2. The protocols established by the hospital, public health
10 facility, correctional facility, or detention center where the physician assistant is
11 requesting permission to write medication orders;
- 12 (2) The hospital, public health facility, correctional facility, or detention
13 center where the physician assistant is requesting permission to write medication
14 orders:
- 15 (i) Examines the physician assistant's qualifications to write
16 medication orders as part of an established credentialing process; and
- 17 (ii) Attests to having established minimum criteria for protocols
18 that:
- 19 1. Allow a physician assistant to write medication orders
20 only in accordance with clinical privileges and an expanded job description approved
21 by the Board;
- 22 2. Require a physician who has been approved by the Board
23 to supervise a physician assistant to countersign all medication orders in accordance
24 with this section;
- 25 3. Prohibit a physician assistant from using pre-signed
26 prescriptions;
- 27 4. Prohibit a physician assistant from dispensing
28 medications;
- 29 5. Require a physician assistant to legibly sign each
30 medication order or set of medication orders with the name of the physician assistant,
31 the initials "PA-C", and any other notation mandated by the hospital, public health
32 facility, correctional facility, or detention center;
- 33 6. Allow a physician assistant's medication orders to be
34 transmitted by facsimile or other nonverbal electronic communication only to a
35 pharmacy within the hospital, public health facility, correctional facility, or detention

1 center or to the designated pharmacy of the hospital, public health facility,
2 correctional facility, or detention center;

3
4 7. Prohibit a physician assistant from verbally transmitting
5 a medication order over the telephone from outside the hospital, public health facility,
6 correctional facility, or detention center; and

7 8. Require a physician who has been approved by the Board
8 to supervise a physician assistant to notify the Board if the physician assistant's
9 authority to write medication orders has been restricted, removed by the supervising
10 physician, revoked by disciplinary measures of a hospital, public health facility,
11 correctional facility, or detention center, or if the physician assistant no longer
12 provides care in a setting where medication order writing has been authorized;

13 (3) In a hospital, correctional facility, or detention center, the authority
14 of a physician assistant to write medication orders complies with the following
15 limitations:

16 (i) A physician assistant may write medication orders only for
17 Schedule II, Schedule III, Schedule IV, and Schedule V Medications, noncontrolled
18 substances, and nonprescription medications; and

19 (ii) Medication orders must be administered on-site;

20 (4) In a public health facility, the authority of a physician assistant to
21 write medication orders complies with the following limitations:

22 (i) A physician assistant may not write medication orders for
23 controlled dangerous substances; and

24 (ii) A physician assistant may write a medication order for the
25 treatment of:

26 1. Human Immunodeficiency Virus (HIV) or an infectious
27 disease other than a sexually transmitted disease only after a patient is evaluated by
28 a physician and if the medication order is written in accordance with protocols
29 established by the Department; and

30 2. A sexually transmitted disease only after the physician
31 assistant determines, based on diagnostic parameters, that a patient has a sexually
32 transmitted disease and if the medication order is written in accordance with
33 protocols;

34 (5) In a hospital, correctional facility, or detention center, each
35 medication order is countersigned by a supervising physician within 48 hours;

36 (6) In a public health facility, each medication order is countersigned by
37 a supervising physician within 72 hours;

(7) The supervising physician:

1 (i) Attests that the physician assistant has been credentialed by
2 the hospital, public health facility, correctional facility, or detention center to write
3 medication orders for controlled dangerous substances, noncontrolled substances, or
4 nonprescription medications; and

5 (ii) Notifies the Board if the physician assistant's authority to write
6 medication orders has been restricted or removed by the supervising physician,
7 revoked by disciplinary measures of a hospital, public health facility, correctional
8 facility, or detention center, or if the physician assistant no longer provides care in a
9 setting where medication order writing has been authorized; and

10 (8) In an emergency room, a physician assistant discusses a patient's
11 treatment plan, including medication orders, with a supervising physician prior to
12 patient discharge.

13 (e) The Board shall adopt regulations to carry out the provisions of this
14 section.

15 (f) A physician assistant who has been approved by the Board to write
16 medication orders may not write medication orders for controlled dangerous
17 substances in accordance with this section unless the physician assistant has a valid:

18 (1) State controlled dangerous substances registration; and

19 (2) Federal Drug Enforcement Agency (DEA) registration unless the
20 registration is waived by the DEA.

21 (g) (1) On a quarterly basis, the Board shall provide a list of physician
22 assistants authorized to write medication orders to:

23 (i) Each pharmacy located in or designated by a hospital, public
24 health facility, correctional facility, or detention center; and

25 (ii) The Board of Pharmacy.

26 (2) The list required under paragraph (1) of this subsection shall specify
27 whether each physician assistant is authorized to write medication orders for
28 controlled dangerous substances, noncontrolled substances, or nonprescription
29 medications.

30 (h) The Committee may conduct a personal interview of the physician
31 assistant and the supervisory physician.

32 (i) On review of the Committee's recommendation, the Board:

33 (1) May approve, modify, or deny a request for certification; and

34 (2) Shall notify the physician assistant in writing of the reasons for the
35 Board's decision.

1 (j) The physician assistant shall file and obtain the Board's approval of an
2 expanded job description before any substantial change occurs in:

- 3 (1) The delegated medical acts;
4 (2) The extent of supervision provided; or
5 (3) The practice setting.

6 (k) (1) A job description approved under this title shall be reviewed as a
7 component of the certificate renewal process established under § 15-307 of this title.

8 (2) Expiration of a certificate shall result in expiration of a job
9 description.]

10 15-302.

11 (A) SUBJECT TO THE PROVISIONS OF SUBSECTION (I) OF THIS SECTION, THE
12 BOARD MAY AUTHORIZE A PHYSICIAN TO DELEGATE MEDICAL ACTS TO A PHYSICIAN
13 ASSISTANT ONLY AFTER:

14 (1) A DELEGATION AGREEMENT HAS BEEN EXECUTED AND SUBMITTED
15 TO THE COMMITTEE FOR REVIEW TO ENSURE THE DELEGATION AGREEMENT
16 CONTAINS THE REQUIREMENTS OF THIS SUBTITLE; AND

17 (2) THE BOARD HAS REVIEWED AND APPROVED A FAVORABLE
18 RECOMMENDATION BY THE COMMITTEE THAT THE REQUIREMENTS OF THIS
19 SUBTITLE HAVE BEEN MET.

20 (B) THE DELEGATION AGREEMENT SHALL CONTAIN:

21 (1) A DESCRIPTION OF THE QUALIFICATIONS OF THE SUPERVISING
22 PHYSICIAN AND PHYSICIAN ASSISTANT;

23 (2) A DESCRIPTION OF THE SETTINGS IN WHICH THE PHYSICIAN
24 ASSISTANT WILL PRACTICE;

25 (3) A DESCRIPTION OF THE CONTINUOUS PHYSICIAN SUPERVISION
26 MECHANISMS THAT ARE REASONABLE AND APPROPRIATE TO THE PRACTICE
27 SETTING;

28 (4) AN ATTESTATION THAT ALL MEDICAL ACTS TO BE DELEGATED TO
29 THE PHYSICIAN ASSISTANT ARE WITHIN THE SCOPE OF PRACTICE OF THE
30 SUPERVISING PHYSICIAN AND APPROPRIATE TO THE PHYSICIAN ASSISTANT'S
31 EDUCATION, TRAINING, AND LEVEL OF COMPETENCE;

32 (5) AN ATTESTATION OF CONTINUOUS SUPERVISION OF THE PHYSICIAN
33 ASSISTANT BY THE SUPERVISING PHYSICIAN THROUGH THE MECHANISMS
34 DESCRIBED IN THE DELEGATION AGREEMENT;

1 (6) AN ATTESTATION BY THE SUPERVISING PHYSICIAN OF ASSUMPTION
2 ~~OF PROFESSIONAL AND LEGAL LIABILITY FOR THE PHYSICIAN ASSISTANT'S PATIENT~~
3 ~~CARE ACTIVITIES; AND THE PHYSICIAN'S ACCEPTANCE OF RESPONSIBILITY FOR ANY~~
4 ~~CARE GIVEN BY THE PHYSICIAN ASSISTANT;~~

5 (7) AN ATTESTATION BY THE SUPERVISING PHYSICIAN THAT THE
6 PHYSICIAN WILL RESPOND IN A TIMELY MANNER WHEN CONTACTED BY THE
7 PHYSICIAN ASSISTANT; AND

8 ~~(7)~~ (8) ANY OTHER INFORMATION DEEMED NECESSARY BY THE
9 BOARD OR COMMITTEE TO CARRY OUT THE PROVISIONS OF THIS SUBTITLE.

10 (C) (1) THE DELEGATION AGREEMENT SHALL BE SUBMITTED WITH THE
11 APPLICATION FEE ESTABLISHED BY THE BOARD AND THE SUPERVISING PHYSICIAN
12 AND PHYSICIAN ASSISTANT SHALL COMPLY WITH ALL OTHER REQUIREMENTS
13 ESTABLISHED BY THE BOARD IN ACCORDANCE WITH THIS TITLE.

14 (2) THE BOARD SHALL SET THE APPLICATION FEE SO AS TO PRODUCE
15 FUNDS TO APPROXIMATE THE COST OF REVIEWING AND APPROVING DELEGATION
16 AGREEMENTS AND ANY OTHER RELATED SERVICES PROVIDED.

17 (D) THE COMMITTEE SHALL REVIEW THE DELEGATION AGREEMENT AND
18 RECOMMEND TO THE BOARD THAT THE DELEGATION AGREEMENT BE APPROVED,
19 REJECTED, OR MODIFIED TO ENSURE CONFORMANCE WITH THE REQUIREMENTS OF
20 THIS TITLE.

21 (E) THE COMMITTEE MAY CONDUCT A PERSONAL INTERVIEW OF THE
22 SUPERVISING PHYSICIAN AND THE PHYSICIAN ASSISTANT.

23 (F) ON REVIEW OF THE COMMITTEE'S RECOMMENDATION REGARDING A
24 SUPERVISING PHYSICIAN'S REQUEST TO DELEGATE MEDICAL ACTS AS DESCRIBED IN
25 A DELEGATION AGREEMENT, THE BOARD:

26 (1) MAY APPROVE OR, FOR GOOD CAUSE, MODIFY OR DISAPPROVE THE
27 COMMITTEE'S RECOMMENDATION; AND

28 (2) SHALL NOTIFY THE SUPERVISING PHYSICIAN AND PHYSICIAN
29 ASSISTANT IN WRITING OF THE REASONS FOR A BOARD DECISION TO MODIFY OR
30 DISAPPROVE THE PHYSICIAN'S REQUEST TO DELEGATE MEDICAL ACTS AS
31 DESCRIBED IN THE DELEGATION AGREEMENT.

32 (G) IF THE BOARD DETERMINES THAT A SUPERVISING PHYSICIAN OR
33 PHYSICIAN ASSISTANT IS PRACTICING IN A MANNER INCONSISTENT WITH THE
34 REQUIREMENTS OF THIS TITLE OR TITLE 14 OF THIS ARTICLE, THE BOARD ON ITS
35 OWN INITIATIVE OR ON THE RECOMMENDATION OF THE COMMITTEE MAY DEMAND
36 MODIFICATION OF THE PRACTICE, WITHDRAW THE APPROVAL OF THE DELEGATION
37 AGREEMENT, OR TAKE OTHER DISCIPLINARY ACTION UNDER § 14-404 OR § 15-314 OF
38 THIS ARTICLE.

1 (H) (1) A DELEGATION AGREEMENT APPROVED UNDER THIS SUBTITLE MAY
2 BE REVIEWED AS A COMPONENT OF THE CERTIFICATE RENEWAL PROCESS
3 ESTABLISHED UNDER § 15-307 OF THIS SUBTITLE.

4 (2) A DELEGATION AGREEMENT SHALL EXPIRE WHEN A PHYSICIAN
5 ASSISTANT'S CERTIFICATE EXPIRES.

6 (I) THE BOARD MAY NOT AUTHORIZE A PHYSICIAN TO DELEGATE MEDICAL
7 ACTS UNDER A DELEGATION AGREEMENT TO MORE THAN ~~FOUR~~ TWO PHYSICIAN
8 ASSISTANTS IN A NONHOSPITAL SETTING.

9 (J) A PERSON MAY NOT COERCE ANOTHER PERSON TO ENTER INTO A
10 DELEGATION AGREEMENT UNDER THIS SUBTITLE.

11 15-302.1.

12 (A) A PHYSICIAN MAY DELEGATE THE AUTHORITY TO WRITE MEDICATION
13 ORDERS UNDER AN APPROVED DELEGATION AGREEMENT IF:

14 (1) THE SUPERVISING PHYSICIAN AND THE PHYSICIAN ASSISTANT
15 INCLUDE IN THE DELEGATION AGREEMENT:

16 (I) A STATEMENT OF WHETHER CONTROLLED DANGEROUS
17 SUBSTANCES, NONCONTROLLED SUBSTANCES, OR NONPRESCRIPTION MEDICATIONS
18 MAY BE ORDERED BY THE PHYSICIAN ASSISTANT;

19 (II) EVIDENCE OF:

20 1. CERTIFICATION BY THE NATIONAL COMMISSION ON THE
21 CERTIFICATION OF PHYSICIAN ASSISTANTS, INC. WITHIN THE PREVIOUS 2 YEARS; OR

22 2. SUCCESSFUL COMPLETION OF 8 CATEGORY 1 HOURS IN
23 PHARMACOLOGY EDUCATION WITHIN THE PREVIOUS 2 YEARS; AND

24 (III) ATTESTATION THAT THE PHYSICIAN ASSISTANT WILL COMPLY
25 WITH:

26 1. STATE AND FEDERAL LAWS GOVERNING THE
27 PRESCRIBING OF MEDICATIONS; AND

28 2. THE PROTOCOLS ESTABLISHED BY THE HOSPITAL,
29 PUBLIC HEALTH FACILITY, CORRECTIONAL FACILITY, OR DETENTION CENTER
30 WHERE THE PHYSICIAN ASSISTANT IS REQUESTING PERMISSION TO WRITE
31 MEDICATION ORDERS;

32 (2) THE HOSPITAL, PUBLIC HEALTH FACILITY, CORRECTIONAL FACILITY,
33 OR DETENTION CENTER WHERE THE PHYSICIAN ASSISTANT IS REQUESTING
34 PERMISSION TO WRITE MEDICATION ORDERS:

1 (I) EXAMINES THE PHYSICIAN ASSISTANT'S QUALIFICATIONS TO
2 WRITE MEDICATION ORDERS AS PART OF AN ESTABLISHED CREDENTIALING
3 PROCESS; AND

4 (II) ATTESTS TO HAVING ESTABLISHED MINIMUM CRITERIA FOR
5 PROTOCOLS THAT:

6 1. ALLOW A PHYSICIAN ASSISTANT TO WRITE MEDICATION
7 ORDERS ONLY IN ACCORDANCE WITH CLINICAL PRIVILEGES AND THE DELEGATION
8 AGREEMENT APPROVED BY THE BOARD;

9 2. REQUIRE A PHYSICIAN WHO HAS BEEN APPROVED BY THE
10 BOARD TO SUPERVISE A PHYSICIAN ASSISTANT TO COUNTERSIGN ALL MEDICATION
11 ORDERS IN ACCORDANCE WITH THIS SECTION;

12 3. PROHIBIT A PHYSICIAN ASSISTANT FROM USING
13 PRESIGNED PRESCRIPTIONS;

14 4. PROHIBIT A PHYSICIAN ASSISTANT FROM DISPENSING
15 MEDICATIONS;

16 5. REQUIRE A PHYSICIAN ASSISTANT TO LEGIBLY SIGN
17 EACH MEDICATION ORDER OR SET OF MEDICATION ORDERS WITH THE NAME OF THE
18 PHYSICIAN ASSISTANT, THE INITIALS "PA-C", AND ANY OTHER NOTATION MANDATED
19 BY THE HOSPITAL, PUBLIC HEALTH FACILITY, CORRECTIONAL FACILITY, OR
20 DETENTION CENTER;

21 6. ALLOW A PHYSICIAN ASSISTANT'S MEDICATION ORDERS
22 TO BE TRANSMITTED BY FACSIMILE OR OTHER NONVERBAL ELECTRONIC
23 COMMUNICATION ONLY TO A PHARMACY WITHIN THE HOSPITAL, PUBLIC HEALTH
24 FACILITY, CORRECTIONAL FACILITY, OR DETENTION CENTER OR TO THE PHARMACY
25 DESIGNATED BY THE HOSPITAL, PUBLIC HEALTH FACILITY, CORRECTIONAL
26 FACILITY, OR DETENTION CENTER;

27 7. PROHIBIT A PHYSICIAN ASSISTANT FROM VERBALLY
28 TRANSMITTING A MEDICATION ORDER OVER THE TELEPHONE FROM OUTSIDE THE
29 HOSPITAL, PUBLIC HEALTH FACILITY, CORRECTIONAL FACILITY, OR DETENTION
30 CENTER, WHICH SHALL NOT BE CONSTRUED TO PROHIBIT VERBAL ORDERS BY A
31 PHYSICIAN ASSISTANT WITHIN A HOSPITAL, PUBLIC HEALTH FACILITY,
32 CORRECTIONAL FACILITY, OR DETENTION CENTER; AND

33 8. REQUIRE A PHYSICIAN WHO HAS BEEN APPROVED BY THE
34 BOARD TO SUPERVISE A PHYSICIAN ASSISTANT TO NOTIFY THE BOARD IF THE
35 PHYSICIAN ASSISTANT'S AUTHORITY TO WRITE MEDICATION ORDERS HAS BEEN
36 RESTRICTED, REMOVED BY THE SUPERVISING PHYSICIAN, REVOKED BY
37 DISCIPLINARY MEASURES OF A HOSPITAL, PUBLIC HEALTH FACILITY,
38 CORRECTIONAL FACILITY, OR DETENTION CENTER, OR IF THE PHYSICIAN ASSISTANT
39 NO LONGER PROVIDES CARE IN A SETTING WHERE MEDICATION ORDER WRITING
40 HAS BEEN AUTHORIZED;

1 (3) IN A HOSPITAL, CORRECTIONAL FACILITY, OR DETENTION CENTER,
2 THE AUTHORITY OF A PHYSICIAN ASSISTANT TO WRITE MEDICATION ORDERS
3 COMPLIES WITH THE FOLLOWING LIMITATIONS:

4 (I) A PHYSICIAN ASSISTANT MAY WRITE MEDICATION ORDERS
5 ONLY FOR SCHEDULE II, SCHEDULE III, SCHEDULE IV, AND SCHEDULE V
6 MEDICATIONS, NONCONTROLLED SUBSTANCES, AND NONPRESCRIPTION
7 MEDICATIONS; AND

8 (II) MEDICATION ORDERS MUST BE ADMINISTERED ON-SITE;

9 (4) IN A PUBLIC HEALTH FACILITY, THE AUTHORITY OF A PHYSICIAN
10 ASSISTANT TO WRITE MEDICATION ORDERS COMPLIES WITH THE FOLLOWING
11 LIMITATIONS:

12 (I) A PHYSICIAN ASSISTANT MAY NOT WRITE MEDICATION ORDERS
13 FOR CONTROLLED DANGEROUS SUBSTANCES; AND

14 (II) A PHYSICIAN ASSISTANT MAY WRITE A MEDICATION ORDER
15 FOR THE TREATMENT OF:

16 1. HUMAN IMMUNODEFICIENCY VIRUS (HIV) OR AN
17 INFECTIOUS DISEASE OTHER THAN A SEXUALLY TRANSMITTED DISEASE ONLY
18 AFTER A PATIENT IS EVALUATED BY A PHYSICIAN AND IF THE MEDICATION ORDER IS
19 WRITTEN IN ACCORDANCE WITH PROTOCOLS ESTABLISHED BY THE DEPARTMENT;
20 AND

21 2. A SEXUALLY TRANSMITTED DISEASE ONLY AFTER THE
22 PHYSICIAN ASSISTANT DETERMINES, BASED ON DIAGNOSTIC PARAMETERS, THAT A
23 PATIENT HAS A SEXUALLY TRANSMITTED DISEASE AND IF THE MEDICATION ORDER
24 IS WRITTEN IN ACCORDANCE WITH PROTOCOLS;

25 (5) IN A HOSPITAL, CORRECTIONAL FACILITY, OR DETENTION CENTER,
26 EACH MEDICATION ORDER IS COUNTERSIGNED BY A SUPERVISING PHYSICIAN
27 WITHIN 48 HOURS;

28 (6) IN A PUBLIC HEALTH FACILITY, EACH MEDICATION ORDER IS
29 COUNTERSIGNED BY A SUPERVISING PHYSICIAN WITHIN 72 HOURS;

30 (7) THE SUPERVISING PHYSICIAN:

31 (I) ATTESTS THAT THE PHYSICIAN ASSISTANT HAS BEEN
32 CREDENTIALLED BY THE HOSPITAL, PUBLIC HEALTH FACILITY, CORRECTIONAL
33 FACILITY, OR DETENTION CENTER TO WRITE MEDICATION ORDERS FOR
34 CONTROLLED DANGEROUS SUBSTANCES, NONCONTROLLED SUBSTANCES, OR
35 NONPRESCRIPTION MEDICATIONS; AND

36 (II) NOTIFIES THE BOARD IF THE PHYSICIAN ASSISTANT'S
37 AUTHORITY TO WRITE MEDICATION ORDERS HAS BEEN RESTRICTED OR REMOVED
38 BY THE SUPERVISING PHYSICIAN, REVOKED BY DISCIPLINARY MEASURES OF A

1 HOSPITAL, PUBLIC HEALTH FACILITY, CORRECTIONAL FACILITY, OR DETENTION
2 CENTER, OR IF THE PHYSICIAN ASSISTANT NO LONGER PROVIDES CARE IN A
3 SETTING WHERE MEDICATION ORDER WRITING HAS BEEN AUTHORIZED; AND

4 (8) IN AN EMERGENCY ROOM, A PHYSICIAN ASSISTANT DISCUSSES A
5 PATIENT'S TREATMENT PLAN, INCLUDING MEDICATION ORDERS, WITH A
6 SUPERVISING PHYSICIAN PRIOR TO PATIENT DISCHARGE.

7 (B) THE BOARD SHALL ADOPT REGULATIONS TO CARRY OUT THE PROVISIONS
8 OF THIS SECTION.

9 (C) A PHYSICIAN ASSISTANT WHO HAS BEEN APPROVED BY THE BOARD TO
10 WRITE MEDICATION ORDERS MAY NOT WRITE MEDICATION ORDERS FOR
11 CONTROLLED DANGEROUS SUBSTANCES IN ACCORDANCE WITH THIS SECTION
12 UNLESS THE PHYSICIAN ASSISTANT HAS A VALID:

13 (1) STATE CONTROLLED DANGEROUS SUBSTANCES REGISTRATION; AND

14 (2) FEDERAL DRUG ENFORCEMENT AGENCY (DEA) REGISTRATION
15 UNLESS THE REGISTRATION IS WAIVED BY THE DEA.

16 15-302.2.

17 (A) A SUPERVISING PHYSICIAN MAY NOT DELEGATE PRESCRIBING AND
18 ADMINISTERING OF CONTROLLED DANGEROUS SUBSTANCES, PRESCRIPTION DRUGS,
19 OR MEDICAL DEVICES UNLESS THE SUPERVISING PHYSICIAN AND PHYSICIAN
20 ASSISTANT INCLUDE IN THE DELEGATION AGREEMENT:

21 (1) A NOTICE OF INTENT TO DELEGATE PRESCRIBING OF CONTROLLED
22 DANGEROUS SUBSTANCES, PRESCRIPTION DRUGS, OR MEDICAL DEVICES;

23 (2) AN ATTESTATION THAT ALL PRESCRIBING ACTIVITIES OF THE
24 PHYSICIAN ASSISTANT WILL COMPLY WITH APPLICABLE FEDERAL AND STATE
25 REGULATIONS;

26 (3) AN ATTESTATION THAT ALL MEDICAL CHARTS OR RECORDS:

27 (I) WILL CONTAIN A NOTATION OF ANY PRESCRIPTIONS WRITTEN
28 BY A PHYSICIAN ASSISTANT IN ACCORDANCE WITH THIS SECTION; AND

29 (II) WILL BE REVIEWED AND COSIGNED BY THE SUPERVISING
30 PHYSICIAN WITHIN A PERIOD REASONABLE AND APPROPRIATE TO THE PRACTICE
31 SETTING AND CONSISTENT WITH CURRENT STANDARDS OF ACCEPTABLE MEDICAL
32 PRACTICE;

33 (4) AN ATTESTATION THAT ALL PRESCRIPTIONS WRITTEN UNDER THIS
34 SECTION WILL INCLUDE THE PHYSICIAN ASSISTANT'S NAME AND THE SUPERVISING
35 PHYSICIAN'S NAME, BUSINESS ADDRESS, AND BUSINESS TELEPHONE NUMBER
36 LEGIBLY WRITTEN OR PRINTED;

1 (5) EVIDENCE DEMONSTRATING:

2 (I) PASSAGE OF THE PHYSICIAN ASSISTANT NATIONAL
3 CERTIFICATION EXAM ADMINISTERED BY THE NATIONAL COMMISSION ON THE
4 CERTIFICATION OF PHYSICIAN ASSISTANTS WITHIN THE PREVIOUS 2 YEARS; OR

5 (II) SUCCESSFUL COMPLETION OF 8 CATEGORY 1 HOURS OF
6 PHARMACOLOGY EDUCATION WITHIN THE PREVIOUS 2 YEARS; AND

7 (6) EVIDENCE DEMONSTRATING:

8 (I) A BACHELOR'S DEGREE OR ITS EQUIVALENT;

9 (II) 2 YEARS OF WORK EXPERIENCE AS A PHYSICIAN ASSISTANT; OR

10 (III) PRIOR APPROVAL BY THE BOARD OF A JOB DESCRIPTION,
11 INCLUDING APPROVAL FOR WRITING PRESCRIPTIONS FOR CONTROLLED
12 DANGEROUS SUBSTANCES, PRESCRIPTION DRUGS, AND MEDICAL DEVICES
13 MEDICATION ORDERS.

14 (B) (1) A SUPERVISING PHYSICIAN MAY NOT DELEGATE THE PRESCRIBING
15 OF SUBSTANCES THAT ARE IDENTIFIED AS SCHEDULE I CONTROLLED DANGEROUS
16 SUBSTANCES UNDER ARTICLE 27, § 279 OF THE CODE.

17 (2) A SUPERVISING PHYSICIAN MAY NOT DELEGATE THE PRESCRIBING
18 OF CONTROLLED DANGEROUS SUBSTANCES TO A PHYSICIAN ASSISTANT UNLESS
19 THE PHYSICIAN ASSISTANT HAS A VALID:

20 (I) STATE CONTROLLED DANGEROUS SUBSTANCE REGISTRATION;
21 AND

22 (II) FEDERAL DRUG ENFORCEMENT AGENCY (DEA) REGISTRATION.

23 15-302.3.

24 ~~(C)~~ ~~(+)~~ (A) ON A QUARTERLY BASIS, THE BOARD SHALL PROVIDE TO THE
25 BOARD OF PHARMACY A LIST OF PHYSICIAN ASSISTANTS WHOSE DELEGATION
26 AGREEMENTS INCLUDE THE DELEGATION OF ~~PRESCRIBING CONTROLLED~~
27 ~~DANGEROUS SUBSTANCES, PRESCRIPTION DRUGS, OR MEDICAL DEVICES~~
28 AUTHORITY TO WRITE MEDICATION ORDERS OR TO EXERCISE PRESCRIPTIVE
29 AUTHORITY.

30 ~~(2)~~ (B) THE LIST REQUIRED UNDER ~~PARAGRAPH (1) OF THIS~~
31 ~~SUBSECTION~~ SUBSECTION (A) OF THIS SECTION SHALL SPECIFY WHETHER EACH
32 PHYSICIAN ASSISTANT HAS BEEN DELEGATED THE AUTHORITY TO PRESCRIBE
33 CONTROLLED DANGEROUS SUBSTANCES, PRESCRIPTION DRUGS, OR MEDICAL
34 DEVICES.

35 ~~(3)~~ (C) IF A SUPERVISING PHYSICIAN WHO HAS DELEGATED
36 ~~PRESCRIBING OR ADMINISTERING OF CONTROLLED DANGEROUS SUBSTANCES,~~

1 ~~PRESCRIPTION DRUGS, OR MEDICAL DEVICES~~ AUTHORITY TO WRITE MEDICATION
2 ORDERS OR TO EXERCISE PRESCRIPTIVE AUTHORITY TO A PHYSICIAN ASSISTANT
3 SUBSEQUENTLY RESTRICTS OR REMOVES THE DELEGATION, THE SUPERVISING
4 PHYSICIAN SHALL NOTIFY THE BOARD OF THE RESTRICTION OR REMOVAL WITHIN 5
5 BUSINESS DAYS.

6 15-307.

7 *(d) (1) In addition to any other qualifications and requirements established*
8 *by the Board, the Board shall establish continuing education requirements as a*
9 *condition for the renewal of certificates under this section.*

10 *(2) IN ESTABLISHING THE CONTINUING EDUCATION REQUIREMENTS*
11 *UNDER PARAGRAPH (1) OF THIS SUBSECTION, THE BOARD SHALL INCLUDE A*
12 *REQUIREMENT FOR A COURSE ON THE SPECIAL CARE NEEDS OF TERMINALLY ILL*
13 *INDIVIDUALS AND THEIR FAMILIES WHICH SHALL INCLUDE TOPICS RELATED TO:*

14 *(I) PAIN AND SYMPTOM MANAGEMENT;*

15 *(II) THE PSYCHO-SOCIAL DYNAMICS OF DEATH;*

16 *(III) DYING AND BEREAVEMENT; AND*

17 *(IV) HOSPICE CARE.*

18 SECTION 2. AND BE IT FURTHER ENACTED, That the State Board of
19 Physician Quality Assurance shall include in the Board's annual report information
20 relating to the implementation and effects of this Act.

21 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect
22 ~~October~~ June 1, 1999.