Unofficial Copy J2 HB 1068/01 - ENV 2002 Regular Session 2lr1323

By: Delegates Redmer, Petzold, Ports, Morhaim, Klausmeier, and Hammen

Introduced and read first time: January 31, 2002

Assigned to: Environmental Matters

A BILL ENTITLED

4	4 % T	1 000	•
1	AN	ACT	concerning

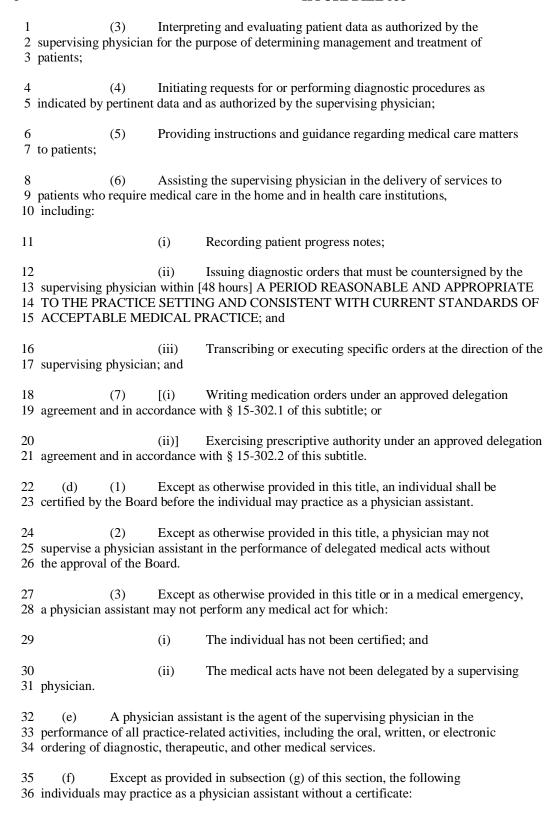
2	Marylai	na Pnys	sician Ass	istants Act	- Kevisions

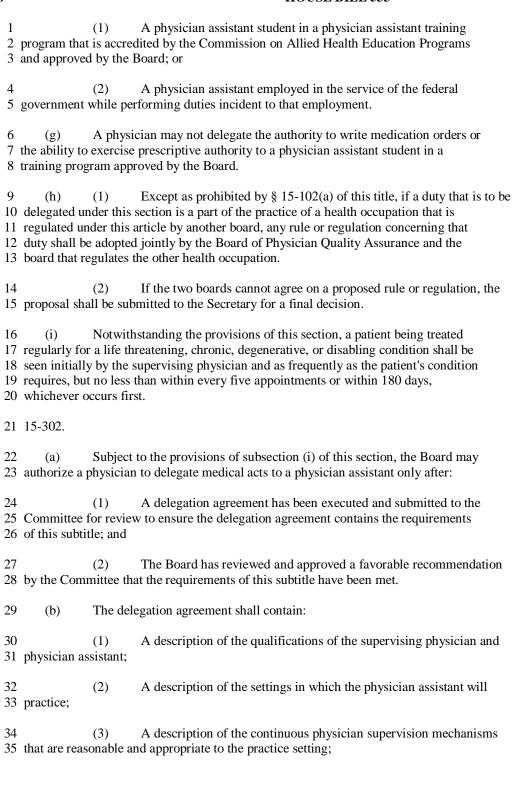
- 3 FOR the purpose of clarifying the practice responsibilities of a physician assistant
- 4 and a supervising physician; adding to the list of items required to be included
- 5 in a delegation agreement between the physician assistant and supervising
- 6 physician; altering the actions that the State Board of Physician Quality
- Assurance may take after reviewing a delegation agreement; altering the
- 8 manner in which a physician may supervise a physician assistant; exempting
- 9 individual members of the Board from civil liability for certain actions;
- authorizing the Board to assess a certain fee and providing for the use of the fees
- 11 assessed; authorizing the Board to assess a civil penalty for a violation of the
- law regulating the delegation of duties to physician assistants; providing for the
- use of the civil penalties assessed; altering certain provisions pertaining to
- physician assistants and medication orders; adding certain clarifying language;
- defining a certain term; altering certain definitions; making stylistic changes;
- and generally relating to the Maryland Physician Assistants Act.
- 17 BY repealing and reenacting, with amendments,
- 18 Article Health Occupations
- 19 Section 15-101, 15-301, 15-302, 15-302.3, and 15-403
- 20 Annotated Code of Maryland
- 21 (2000 Replacement Volume and 2001 Supplement)
- 22 BY repealing
- 23 Article Health Occupations
- 24 Section 15-302.1
- 25 Annotated Code of Maryland
- 26 (2000 Replacement Volume and 2001 Supplement)
- 27 BY adding to
- 28 Article Health Occupations
- 29 Section 15-310(e)
- 30 Annotated Code of Maryland

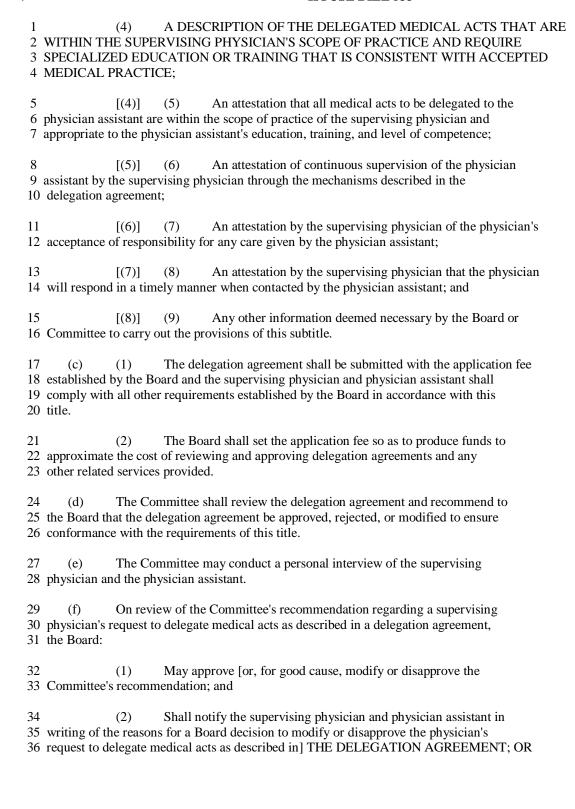
- **HOUSE BILL 533** 1 (2000 Replacement Volume and 2001 Supplement) 2 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF 3 MARYLAND, That the Laws of Maryland read as follows: 4 **Article - Health Occupations** 5 15-101. In this title the following words have the meanings indicated. 6 (a) 7 "ALTERNATE SUPERVISING PHYSICIAN" MEANS ONE OR MORE (B) 8 PHYSICIANS DESIGNATED BY THE SUPERVISING PHYSICIAN TO PROVIDE 9 SUPERVISION OF A PHYSICIAN ASSISTANT DURING THE ABSENCE OF THE 10 SUPERVISING PHYSICIAN AND IN ACCORDANCE WITH THE DELEGATION 11 AGREEMENT ON FILE WITH THE BOARD. 12 [(b)](C) "Board" means the State Board of Physician Quality Assurance, 13 established under § 14-201 of this article. 14 "Certificate" means a certificate issued by the Board to a physician [(c)](D) 15 assistant under this title. "Committee" means the Physician Assistant Advisory Committee. 16 [(d)](E) 17 (F) "Controlled dangerous substances" has the meaning stated in Art. 27, [(e)]18 § 277 of the Code. 19 [(f)](G) "Correctional facility" includes a State or local correctional facility. 20 (H) "Delegated medical acts" means activities that constitute the practice [(g)]21 of medicine delegated by a physician under Title 14 of this article. 22 "Delegation agreement" means a document that is executed by a [(h)](I) supervising physician and a physician assistant containing the requirements of § 24 15-302 of this title [and: 25 (1) § 15-302.1 of this title; or
- 26 (2) § 15-302.2 of this title].
- 27 "Designated pharmacy" means a pharmacy that has an agreement to **(J)** [(i)]
- 28 supply medications for a hospital, public health facility, correctional facility, or
- 29 detention center if:
- 30 The hospital, public health facility, correctional facility, or detention (1)
- 31 center does not have an on-site pharmacy; or
- 32 The on-site pharmacy at the hospital, public health facility,
- 33 correctional facility, or detention center is closed or does not have a particular
- 34 medication in stock.

1	[(j)]	(K)	"Hospital" means:
2 3	Article;	(1)	A hospital as defined under § 19-301(g) of the Health - General
4		(2)	A comprehensive care facility that:
5 6	facility unde	r federal	(i) Meets the requirements of a hospital-based skilled nursing law;
7			(ii) Offers acute care in the same building; and
8 9	assistants as	it does in	(iii) Has the same protocols and degree of supervision of physician its acute care area; and
10		(3)	An emergency room that is physically connected to a hospital.
11	[(k)	"Medica	ation order" means a directive written in a medical chart:
12 13	nonprescrip	(1) tion medi	For controlled dangerous substances, noncontrolled substances, or cations; and
14 15	correctional	(2) facility,	In accordance with the protocols of a hospital, public health facility, or detention center.]
	(l) national org certain level	anization	al certifying examination" means an examination offered by a , which certifies physician assistants as having achieved a ng.
19 20	(m) to perform of	•	an assistant" means an individual who is certified under this title medical acts under the supervision of a physician.
21 22	(n) that are:	"Practic	e as a physician assistant" means the performance of medical acts
23		(1)	Delegated by a supervising physician to a physician assistant;
24		(2)	Within the supervising physician's scope of practice; and
25 26	experience.	(3)	Appropriate to the physician assistant's education, training, and
29	substances,	a physic prescripti	ptive authority" means the authority delegated by a supervising ian assistant to prescribe and administer controlled dangerous ion drugs, [and] medical devices, AND THE ORAL, WRITTEN, OR DERING OF MEDICATIONS.
	(p) established to center that:		ols" means written policies, bylaws, rules, or regulations oital, public health facility, correctional facility, or detention

1 2	medical staff	(1)	Are established in consultation with and with the approval of its
3 4	execute; and	(2)	Describe the delegated medical acts a physician assistant may
5		(3)	Specify the minimum requirements for supervision by a physician.
		endered	health facility" means a fixed site where clinical public health under the auspices of the Department, a local health y, or the Baltimore City Health Department.
9 10	(r) Board to sup		ising physician" means a physician who has been approved by the] ONE or more physician assistants.
			"Supervision" means the responsibility of a physician to exercise [on vision or immediately available direction for physician assistants medical acts.
16 17	including co written instr	ntinuous uctions, o	"Supervision" includes physician oversight of and acceptance of direct patient services and care rendered by a physician assistant, availability to the physician assistant in person, through or by electronic means AND BY DESIGNATION OF ONE OR MORE RVISING PHYSICIANS.
19	15-301.		
20 21	(a) practice inde		in this title may be construed to authorize a physician assistant to of a supervising physician.
22 23	(b) assistant's so		cate issued to a physician assistant shall limit the physician ractice to medical acts:
24		(1)	Delegated by the supervising physician;
25 26	physician as	(2) sistant;	Appropriate to the education, training, and experience of the
27		(3)	Customary to the practice of the supervising physician; and
28		(4)	Consistent with the delegation agreement submitted to the Board.
29	(c)	Patient s	ervices that may be provided by a physician assistant include:
30		(1)	(i) Taking complete, detailed, and accurate patient histories; and
31 32	status report	s;	(ii) Reviewing patient records to develop comprehensive medical
33 34	patient data;	(2)	Performing physical examinations and recording all pertinent





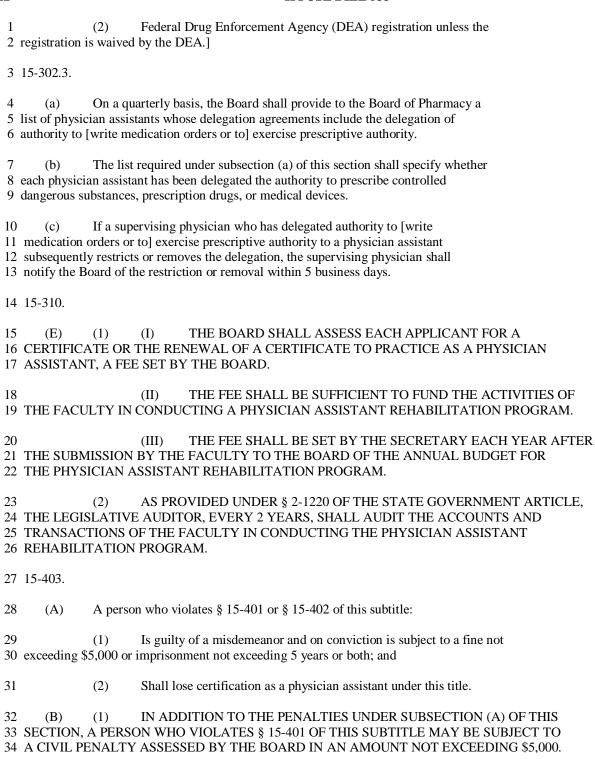


3	(2) (I) IF THE PHYSICIAN ASSISTANT DOES NOT MEET THE APPLICABLE EDUCATION, TRAINING, AND EXPERIENCE REQUIREMENTS TO PERFORM THE SPECIFIED DELEGATED ACTS, MAY MODIFY OR DISAPPROVE THE DELEGATION AGREEMENT; AND
5	(II) IF THE BOARD TAKES AN ACTION UNDER ITEM (I) OF THIS ITEM:
8	1. SHALL NOTIFY THE SUPERVISING PHYSICIAN AND THE PHYSICIAN ASSISTANT IN WRITING OF THE PARTICULAR ELEMENTS OF THE PROPOSED DELEGATION AGREEMENT THAT WERE THE CAUSE FOR THE MODIFICATION OR DISAPPROVAL; AND
10 11	2. MAY NOT RESTRICT THE SUBMISSION OF AN AMENDMENT TO the delegation agreement.
14 15 16	(g) If the Board determines that a supervising physician or physician assistant is practicing in a manner inconsistent with the requirements of this title or Title 14 of this article, the Board on its own initiative or on the recommendation of the Committee may demand modification of the practice, withdraw the approval of the delegation agreement, or take other disciplinary action under § 14-404 or § 15-314 of this article.
	(h) (1) A delegation agreement approved under this subtitle may be reviewed as a component of the certificate renewal process established under § 15-307 of this subtitle.
21 22	(2) A delegation agreement shall expire when a physician assistant's certificate expires.
25	(i) The Board may not authorize a physician to delegate medical acts under a delegation agreement to more than two physician assistants AT ANY ONE TIME, EXCEPT in a [nonhospital setting] HOSPITAL, CORRECTIONAL FACILITY, DETENTION CENTER, OR PUBLIC HEALTH FACILITY.
27 28	(j) A person may not coerce another person to enter into a delegation agreement under this subtitle.
29	(K) A PHYSICIAN MAY SUPERVISE A PHYSICIAN ASSISTANT:
30 31	(1) IN ACCORDANCE WITH A DELEGATION AGREEMENT APPROVED BY THE BOARD UNDER THIS SUBTITLE; OR
32	(2) AS AN ALTERNATE SUPERVISING PHYSICIAN IF:
33 34	(I) THE ALTERNATE SUPERVISING PHYSICIAN SUPERVISES IN ACCORDANCE WITH A DELEGATION AGREEMENT FILED WITH THE BOARD;
35 36	(II) THE ALTERNATE SUPERVISING PHYSICIAN SUPERVISES NO MORE THAN FOUR PHYSICIAN ASSISTANTS AT ANY ONE TIME, EXCEPT IN A

	HOSPITAL, CORRECTIONAL FACILITY, DETENTION CENTER, OR PUBLIC HEALTH FACILITY; AND
3	(III) THE PHYSICIAN ASSISTANT PERFORMS ONLY THOSE MEDICAL ACTS THAT:
5 6	1. HAVE BEEN DELEGATED UNDER THE DELEGATION AGREEMENT FILED WITH THE BOARD; AND
7 8	2. ARE WITHIN THE SCOPE OF PRACTICE OF THE ALTERNATE SUPERVISING PHYSICIAN.
	(L) INDIVIDUAL MEMBERS OF THE BOARD ARE NOT CIVILLY LIABLE FOR ACTIONS REGARDING THE APPROVAL, MODIFICATION, OR DISAPPROVAL OF A DELEGATION AGREEMENT DESCRIBED IN THIS SECTION.
12	[15-302.1.
13 14	(a) A physician may delegate the authority to write medication orders under an approved delegation agreement if:
15 16	(1) The supervising physician and the physician assistant include in the delegation agreement:
	(i) A statement of whether controlled dangerous substances, noncontrolled substances, or nonprescription medications may be ordered by the physician assistant;
20	(ii) Evidence of:
21 22	1. Certification by the National Commission on the Certification of Physician Assistants, Inc. within the previous 2 years; or
23 24	2. Successful completion of 8 category 1 hours in pharmacology education within the previous 2 years; and
25	(iii) Attestation that the physician assistant will comply with:
26 27	1. State and federal laws governing the prescribing of medications; and
	2. The protocols established by the hospital, public health facility, correctional facility, or detention center where the physician assistant is requesting permission to write medication orders;
	(2) The hospital, public health facility, correctional facility, or detention center where the physician assistant is requesting permission to write medication orders:
34 35	(i) Examines the physician assistant's qualifications to write medication orders as part of an established credentialing process; and

1 2	(ii) Attests to having established minimum criteria for protocols that:
	1. Allow a physician assistant to write medication orders only in accordance with clinical privileges and the delegation agreement approved by the Board;
	2. Require a physician who has been approved by the Board to supervise a physician assistant to countersign all medication orders in accordance with this section;
9 10	3. Prohibit a physician assistant from using presigned prescriptions;
11 12	4. Prohibit a physician assistant from dispensing medications;
15	5. Require a physician assistant to legibly sign each medication order or set of medication orders with the name of the physician assistant, the initials "PA-C", and any other notation mandated by the hospital, public health facility, correctional facility, or detention center;
19 20	6. Allow a physician assistant's medication orders to be transmitted by facsimile or other nonverbal electronic communication only to a pharmacy within the hospital, public health facility, correctional facility, or detention center or to the pharmacy designated by the hospital, public health facility, correctional facility, or detention center;
24 25	7. Prohibit a physician assistant from verbally transmitting a medication order over the telephone from outside the hospital, public health facility, correctional facility, or detention center, which shall not be construed to prohibit verbal orders by a physician assistant within a hospital, public health facility, correctional facility, or detention center; and
29 30 31	8. Require a physician who has been approved by the Board to supervise a physician assistant to notify the Board if the physician assistant's authority to write medication orders has been restricted, removed by the supervising physician, revoked by disciplinary measures of a hospital, public health facility, correctional facility, or detention center, or if the physician assistant no longer provides care in a setting where medication order writing has been authorized;
	(3) In a hospital, correctional facility, or detention center, the authority of a physician assistant to write medication orders complies with the following limitations:
	(i) A physician assistant may write medication orders only for Schedule II, Schedule IV, and Schedule V medications, noncontrolled substances, and nonprescription medications; and
39	(ii) Medication orders must be administered on-site;

1 2	(4) In a public health facility, the authority of a physician assistant to write medication orders complies with the following limitations:
3	(i) A physician assistant may not write medication orders for controlled dangerous substances; and
5 6	(ii) A physician assistant may write a medication order for the treatment of:
9	1. Human immunodeficiency virus (HIV) or an infectious disease other than a sexually transmitted disease only after a patient is evaluated by a physician and if the medication order is written in accordance with protocols established by the Department; and
13	2. A sexually transmitted disease only after the physician assistant determines, based on diagnostic parameters, that a patient has a sexually transmitted disease and if the medication order is written in accordance with protocols;
15 16	(5) In a hospital, correctional facility, or detention center, each medication order is countersigned by a supervising physician within 48 hours;
17 18	(6) In a public health facility, each medication order is countersigned by a supervising physician within 72 hours;
19	(7) The supervising physician:
22	(i) Attests that the physician assistant has been credentialed by the hospital, public health facility, correctional facility, or detention center to write medication orders for controlled dangerous substances, noncontrolled substances, or nonprescription medications; and
26 27	(ii) Notifies the Board if the physician assistant's authority to write medication orders has been restricted or removed by the supervising physician, revoked by disciplinary measures of a hospital, public health facility, correctional facility, or detention center, or if the physician assistant no longer provides care in a setting where medication order writing has been authorized; and
	(8) In an emergency room, a physician assistant discusses a patient's treatment plan, including medication orders, with a supervising physician prior to patient discharge.
32 33	(b) The Board shall adopt regulations to carry out the provisions of this section.
	(c) A physician assistant who has been approved by the Board to write medication orders may not write medication orders for controlled dangerous substances in accordance with this section unless the physician assistant has a valid:
37	(1) State controlled dangerous substances registration; and



- 1 (2) THE BOARD SHALL PAY ANY CIVIL PENALTY COLLECTED UNDER 2 THIS SUBSECTION INTO THE STATE BOARD OF PHYSICIAN QUALITY ASSURANCE
- 3 FUND.
- SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
- 5 October 1, 2002.