

REFERENCE TITLE: board of physician assistants

State of Arizona
Senate
Fifty-first Legislature
Second Regular Session
2014

SB 1345

Introduced by
Senators Barto: Ward

AN ACT

AMENDING SECTIONS 32-1403, 32-2502, 32-2503, 32-2504, 32-2521, 32-2523 AND 32-2531, ARIZONA REVISED STATUTES; RELATING TO THE ARIZONA REGULATORY BOARD OF PHYSICIAN ASSISTANTS.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 Be it enacted by the Legislature of the State of Arizona:

2 Section 1. Section 32-1403, Arizona Revised Statutes, is amended to
3 read:

4 32-1403. Powers and duties of the board; compensation; immunity

5 A. The primary duty of the board is to protect the public from
6 unlawful, incompetent, unqualified, impaired or unprofessional practitioners
7 of allopathic medicine through licensure, regulation and rehabilitation of
8 the profession in this state. The powers and duties of the board include:

9 1. Ordering and evaluating physical, psychological, psychiatric and
10 competency testing of licensed physicians and candidates for licensure as may
11 be determined necessary by the board.

12 2. Initiating investigations and determining on its own motion if a
13 doctor of medicine has engaged in unprofessional conduct or provided
14 incompetent medical care or is mentally or physically unable to engage in the
15 practice of medicine.

16 3. Developing and recommending standards governing the profession.

17 4. Reviewing the credentials and the abilities of applicants whose
18 professional records or physical or mental capabilities may not meet the
19 requirements for licensure or registration as prescribed in article 2 of this
20 chapter in order for the board to make a final determination as to whether
21 the applicant meets the requirements for licensure pursuant to this chapter.

22 5. Disciplining and rehabilitating physicians.

23 6. Engaging in a full exchange of information with the licensing and
24 disciplinary boards and medical associations of other states and
25 jurisdictions of the United States and foreign countries and the Arizona
26 medical association and its components.

27 7. Directing the preparation and circulation of educational material
28 the board determines is helpful and proper for licensees.

29 8. Adopting rules regarding the regulation and the qualifications of
30 doctors of medicine.

31 9. Establishing fees and penalties as provided pursuant to section
32 32-1436.

33 10. Delegating to the executive director the board's authority pursuant
34 to section 32-1405 or 32-1451. The board shall adopt substantive policy
35 statements pursuant to section 41-1091 for each specific licensing and
36 regulatory authority the board delegates to the executive director.

37 B. The board may appoint one of its members to the jurisdiction
38 arbitration panel pursuant to section 32-2907, subsection B.

39 C. There shall be no monetary liability on the part of and no cause of
40 action shall arise against the executive director or such other permanent or
41 temporary personnel or professional medical investigators for any act done or
42 proceeding undertaken or performed in good faith and in furtherance of the
43 purposes of this chapter.

1 D. In conducting its investigations pursuant to subsection A,
2 paragraph 2 of this section, the board may receive and review staff reports
3 relating to complaints and malpractice claims.

4 E. The board shall establish a program that is reasonable and
5 necessary to educate doctors of medicine regarding the uses and advantages of
6 autologous blood transfusions.

7 F. The board may make statistical information on doctors of medicine
8 and applicants for licensure under this article available to academic and
9 research organizations.

10 G. THE ARIZONA MEDICAL BOARD SHALL INCLUDE THE CHAIRPERSON AND
11 VICE-CHAIRPERSON OF THE ARIZONA REGULATORY BOARD OF PHYSICIAN ASSISTANTS IN
12 THE DISCUSSION AND DECISION-MAKING RELATING TO EACH ADMINISTRATIVE,
13 MANAGEMENT OR PRACTICE ISSUE THAT AFFECTS PHYSICIAN ASSISTANTS. IN THIS
14 CAPACITY, THE CHAIRPERSON AND VICE-CHAIRPERSON OF THE ARIZONA REGULATORY
15 BOARD OF PHYSICIAN ASSISTANTS ARE VOTING MEMBERS OF THE ARIZONA MEDICAL
16 BOARD. IF ANY DISCUSSIONS OR DECISION-MAKING OCCURS IN AN EXECUTIVE SESSION
17 OF THE ARIZONA MEDICAL BOARD, THE CHAIRPERSON AND VICE-CHAIRPERSON OF THE
18 ARIZONA REGULATORY BOARD OF PHYSICIAN ASSISTANTS MAY DISCUSS THIS INFORMATION
19 WITH THE ARIZONA REGULATORY BOARD OF PHYSICIAN ASSISTANTS IN EXECUTIVE
20 SESSION.

21 Sec. 2. Section 32-2502, Arizona Revised Statutes, is amended to read:

22 32-2502. Arizona regulatory board of physician assistants;
23 membership; appointment; terms; immunity

24 A. The Arizona regulatory board of physician assistants is established
25 consisting of the following members:

26 1. ~~Four~~ FIVE physician assistants who hold a current regular license
27 pursuant to this chapter. The governor may appoint these members from a list
28 of qualified candidates submitted by the Arizona state association of
29 physician assistants. The governor may seek additional input and nominations
30 before the governor makes the physician assistant appointments.

31 2. Two public members WHO ARE appointed by the governor.

32 3. Two physicians who are actively engaged in the practice of medicine
33 and who are licensed pursuant to chapter 17 of this title, one of whom
34 supervises a physician assistant at the time of appointment, and who are
35 appointed by the governor.

36 4. Two physicians who are actively engaged in the practice of medicine
37 and who are licensed pursuant to chapter 13 of this title, one of whom
38 supervises a physician assistant at the time of appointment, and who are
39 appointed by the governor.

40 B. The term of office of members of the board is four years to begin
41 and end on July 1.

42 C. Each board member is eligible for appointment to not more than two
43 full terms, except that the term of office for a member appointed to fill a
44 vacancy that is not caused by the expiration of a full term is for the
45 unexpired portion of that term and the governor may reappoint that member to

1 not more than two additional full terms. Each board member may continue to
2 hold office until the appointment and qualification of that member's
3 successor. However, the entity that appoints a board member may remove that
4 member, after notice and a hearing before that entity, on a finding of
5 continued neglect of duty, incompetence or unprofessional or dishonorable
6 conduct. That member's term ends when the entity makes this finding.

7 D. A board member's term automatically ends:

8 1. On written resignation submitted to the board chairperson or to an
9 appointing entity.

10 2. If the member is absent from this state for more than six months
11 during a one-year period.

12 3. If the member fails to attend three consecutive regular board
13 meetings.

14 4. Five years after retirement from active practice.

15 E. Board members are immune from civil liability for all good faith
16 actions they take pursuant to this chapter.

17 Sec. 3. Section 32-2503, Arizona Revised Statutes, is amended to read:

18 32-2503. Organization; meetings; compensation

19 A. The board shall annually elect a chairperson and vice-chairperson
20 from among its members.

21 B. The board shall hold a regular meeting at least quarterly on a date
22 and at a time and place it designates. ~~In addition, the chairperson may call~~
23 ~~special meetings the board deems necessary. The board shall hold special~~
24 ~~meetings on Saturdays as the chairperson may determine necessary to carry out~~
25 ~~the functions of the board.~~ THE BOARD SHALL HOLD SPECIAL MEETINGS, INCLUDING
26 MEETINGS USING COMMUNICATIONS EQUIPMENT THAT ALLOWS ALL MEMBERS PARTICIPATING
27 IN THE MEETING TO HEAR EACH OTHER AS THE CHAIRPERSON DETERMINES ARE NECESSARY
28 TO CARRY OUT THE FUNCTIONS OF THE BOARD. THE BOARD SHALL HOLD A SPECIAL
29 MEETING ON ANY DAY THAT THE CHAIRPERSON DETERMINES IS NECESSARY TO CARRY OUT
30 THE FUNCTIONS OF THE BOARD. THE VICE-CHAIRPERSON MAY CALL REGULAR MEETINGS
31 AND SPECIAL MEETINGS IF THE CHAIRPERSON IS NOT AVAILABLE.

32 C. Members of the board are eligible to receive compensation in the
33 amount of two hundred dollars for each day of actual service in the business
34 of the board and for all expenses necessarily and properly incurred in
35 attending board meetings.

36 Sec. 4. Section 32-2504, Arizona Revised Statutes, is amended to read:

37 32-2504. Powers and duties; subcommittees

38 A. The board shall:

39 1. As its primary duty, protect the public from unlawful, incompetent,
40 unqualified, impaired or unprofessional physician assistants.

41 2. License and regulate physician assistants pursuant to this chapter.

42 3. Order and evaluate physical, psychological, psychiatric and
43 competency testing of licensees and applicants the board determines is
44 necessary to enforce this chapter.

1 4. Review the credentials and the abilities of applicants for
2 licensure whose professional records or physical or mental capabilities may
3 not meet the requirements of this chapter.

4 5. Initiate investigations and determine on its own motion if a
5 licensee has engaged in unprofessional conduct or is or may be incompetent or
6 mentally or physically unable to safely perform health care tasks.

7 6. Establish fees and penalties pursuant to section 32-2526.

8 7. Develop and recommend standards governing the profession.

9 8. Engage in the full exchange of information with the licensing and
10 disciplinary boards and professional associations of other states and
11 jurisdictions of the United States and foreign countries and a statewide
12 association for physician assistants.

13 9. Direct the preparation and circulation of educational material the
14 board determines is helpful and proper for its licensees.

15 10. Discipline and rehabilitate physician assistants pursuant to this
16 chapter.

17 11. Certify physician assistants for thirty-day prescription privileges
18 for schedule II or schedule III controlled substances if the physician
19 assistant:

20 (a) Within the preceding three years of application, completed
21 forty-five hours in pharmacology or clinical management of drug therapy or at
22 the time of application is certified by a national commission on the
23 certification of physician assistants or its successor.

24 (b) Met any other requirement established by board rule.

25 B. The board may make and adopt rules necessary or proper for the
26 administration of this chapter.

27 C. The chairperson may establish subcommittees consisting of board
28 members and define their duties as the chairperson deems necessary to carry
29 out the functions of the board.

30 D. Board employees, including the executive director, temporary
31 personnel and professional medical investigators, are immune from civil
32 liability for good faith actions they take to enforce this chapter.

33 E. In performing its duties pursuant to subsection A of this section,
34 the board may receive and review staff reports on complaints, malpractice
35 cases and all investigations.

36 F. THE ARIZONA MEDICAL BOARD SHALL INCLUDE THE CHAIRPERSON AND
37 VICE-CHAIRPERSON OF THE ARIZONA REGULATORY BOARD OF PHYSICIAN ASSISTANTS IN
38 THE DISCUSSION AND DECISION-MAKING RELATING TO EACH ADMINISTRATIVE,
39 MANAGEMENT OR PRACTICE ISSUE THAT AFFECTS PHYSICIAN ASSISTANTS PURSUANT TO
40 SECTION 32-1403.

41 Sec. 5. Section 32-2521, Arizona Revised Statutes, is amended to read:
42 32-2521. Qualifications

43 A. An applicant for licensure shall:

44 1. Have graduated from a physician assistants educational program
45 approved by the board.

1 2. Pass a certifying examination approved by the board.

2 3. Be physically and mentally able to safely perform health care tasks
3 as a physician assistant.

4 4. Have a professional record that indicates that the applicant has
5 not committed any act or engaged in any conduct that constitutes grounds for
6 disciplinary action against a licensee pursuant to this chapter. This
7 paragraph does not prevent the board from considering the application of an
8 applicant who was the subject of disciplinary action in another jurisdiction
9 if the applicant's act or conduct was subsequently corrected, monitored and
10 resolved to the satisfaction of that jurisdiction's regulatory board.

11 5. Not have had a license to practice revoked by a regulatory board in
12 another jurisdiction in the United States for an act that occurred in that
13 jurisdiction that constitutes unprofessional conduct pursuant to this
14 chapter.

15 6. Not be currently under investigation, suspension or restriction by
16 a regulatory board in another jurisdiction in the United States for an act
17 that occurred in that jurisdiction that constitutes unprofessional conduct
18 pursuant to this chapter. If the applicant is under investigation by a
19 regulatory board in another jurisdiction, the board shall suspend the
20 application process and may not issue or deny a license to the applicant
21 until the investigation is resolved.

22 7. Not have surrendered, relinquished or given up a license in lieu of
23 disciplinary action by a regulatory board in another jurisdiction in the
24 United States for an act that occurred in that jurisdiction that constitutes
25 unprofessional conduct pursuant to this chapter. This paragraph does not
26 prevent the board from considering the application of an applicant who
27 surrendered, relinquished or gave up a license in lieu of disciplinary action
28 by a regulatory board in another jurisdiction if that regulatory board
29 subsequently reinstated the applicant's license.

30 B. THE BOARD SHALL REQUIRE AN APPLICANT TO SUBMIT ALL CREDENTIALS FROM
31 THE PRIMARY SOURCE WHERE THE DOCUMENT ORIGINATED, EITHER ELECTRONICALLY OR BY
32 HARD COPY, EXCEPT THAT THE BOARD MAY ACCEPT PRIMARY-SOURCE VERIFIED
33 CREDENTIALS FROM A CREDENTIALS VERIFICATION SERVICE APPROVED BY THE BOARD.

34 ~~B. C. The board may:-~~
35 ~~1. Require an applicant to submit written or oral proof of~~
36 ~~credentials.~~

37 ~~2. make investigations it deems necessary to advise itself with~~
38 ~~respect to the qualifications of the applicant, including physical~~
39 ~~examinations, mental evaluations, written competency examinations or any~~
40 ~~combination of these examinations and evaluations.~~

41 ~~C. D. If the board finds that the applicant committed an act or~~
42 ~~engaged in conduct that would constitute grounds for disciplinary action in~~
43 ~~this state, before issuing a license the board must determine to its~~
44 ~~satisfaction that the act or conduct has been corrected, monitored and~~
45 ~~resolved. If the act or conduct has not been resolved, before issuing a~~

1 license the board must determine to its satisfaction that mitigating
2 circumstances exist that prevent its resolution.

3 ~~D.~~ E. If another jurisdiction has taken disciplinary action against
4 an applicant, before issuing a license the board must determine to its
5 satisfaction that the cause for the action was corrected and the matter was
6 resolved. If the other jurisdiction has not resolved the matter, before
7 issuing a license the board must determine to its satisfaction that
8 mitigating circumstances exist that prevent its resolution.

9 ~~E.~~ F. The board may delegate to the executive director the authority
10 to deny licenses to applicants who do not meet the requirements of this
11 section.

12 Sec. 6. Section 32-2523, Arizona Revised Statutes, is amended to read:
13 32-2523. Licensure; renewal; continuing education; audit;
14 expiration

15 A. Except as provided in section 32-4301, each holder of a regular
16 license shall renew the license on or before June 1 of each year by paying
17 the prescribed renewal fee and supplying the board with information it deems
18 necessary including proof of having completed twenty hours of category I
19 continuing medical education approved by the American academy of physician
20 assistants, the American medical association, the American osteopathic
21 association or ANY other accrediting organization acceptable to the board
22 within the previous renewal year of July 1 through June 30. EACH YEAR THE
23 BOARD SHALL RANDOMLY AUDIT AT LEAST TEN PER CENT OF PHYSICIAN ASSISTANTS TO
24 VERIFY CONTINUING MEDICAL EDUCATION COMPLIANCE.

25 B. Except as provided in section 32-4301, if a holder of a regular
26 license fails to renew the license on or before July 1 of each year that
27 person shall pay the prescribed penalty fee for a late renewal.

28 C. Except as provided in section 32-4301, if a holder of a regular
29 license fails to renew the license on or before October 1 of each year, the
30 license expires. It is unlawful for a person to perform health care tasks of
31 a physician assistant after the license expires.

32 D. A person whose license expires may reapply for licensure pursuant
33 to this chapter.

34 E. If a licensee does not meet the requirements of subsection A of
35 this section because of that person's illness, religious missionary activity
36 or residence in a foreign country or any other extenuating circumstance, the
37 board may grant an extension of the deadline if it receives a written request
38 to do so from the licensee that details the reasons for this request.

39 Sec. 5. Section 32-2531, Arizona Revised Statutes, is amended to read:
40 32-2531. Physician assistant scope of practice; health care
41 tasks; supervising physician duties; civil penalty

42 A. A supervising physician may delegate health care tasks to a
43 physician assistant.

44 B. A physician assistant shall not perform surgical abortions as
45 defined in section 36-2151.

1 C. The physician assistant may perform those duties and
2 responsibilities, including the ordering, prescribing, dispensing and
3 administration of drugs and medical devices, that are delegated by the
4 supervising physician.

5 D. The physician assistant may provide any medical service that is
6 delegated by the supervising physician if the service is within the physician
7 assistant's skills, is within the physician's scope of practice and is
8 supervised by the physician.

9 E. The physician assistant may pronounce death and, if delegated, may
10 authenticate by the physician assistant's signature any form that may be
11 authenticated by a physician's signature.

12 F. The physician assistant is the agent of the physician assistant's
13 supervising physician in the performance of all practice related activities,
14 including the ordering of diagnostic, therapeutic and other medical services.

15 G. The physician assistant may perform health care tasks in any
16 setting authorized by the supervising physician, including physician offices,
17 clinics, hospitals, ambulatory surgical centers, patient homes, nursing homes
18 and other health care institutions. These tasks may include:

- 19 1. Obtaining patient histories.
- 20 2. Performing physical examinations.
- 21 3. Ordering and performing diagnostic and therapeutic procedures.
- 22 4. Formulating a diagnostic impression.
- 23 5. Developing and implementing a treatment plan.
- 24 6. Monitoring the effectiveness of therapeutic interventions.
- 25 7. Assisting in surgery.
- 26 8. Offering counseling and education to meet patient needs.
- 27 9. Making appropriate referrals.
- 28 10. Prescribing schedule IV or V controlled substances as defined in
29 the federal controlled substances act of 1970 (P.L. 91-513; 84 Stat. 1242;
30 21 United States Code section 802) and prescription-only medications.
- 31 11. Prescribing schedule II and III controlled substances as defined in
32 the federal controlled substances act of 1970.
- 33 12. Performing minor surgery as defined in section 32-2501.
- 34 13. Performing other nonsurgical health care tasks that are normally
35 taught in courses of training approved by the board, that are consistent with
36 the training and experience of the physician assistant and that have been
37 properly delegated by the supervising physician.

38 H. The supervising physician shall:

- 39 1. Meet the requirements established by the board for supervising a
40 physician assistant.
- 41 2. Accept responsibility for all tasks and duties the physician
42 delegates to a physician assistant.
- 43 3. Notify the board and the physician assistant in writing if the
44 physician assistant exceeds the scope of the delegated health care tasks.

1 4. Maintain a written agreement with the physician assistant. The
2 agreement must state that the physician will exercise supervision over the
3 physician assistant and retains professional and legal responsibility for the
4 care rendered by the physician assistant. The agreement must be signed by
5 the supervising physician and the physician assistant and updated annually.
6 The agreement must be kept on file at the practice site and made available to
7 the board on request. EACH YEAR THE BOARD SHALL RANDOMLY AUDIT AT LEAST FIVE
8 PER CENT OF THESE AGREEMENTS FOR COMPLIANCE.

9 I. A physician's ability to supervise a physician assistant is not
10 affected by restrictions imposed by the board on a physician assistant
11 pursuant to disciplinary action taken by the board.

12 J. Supervision must be continuous but does not require the personal
13 presence of the physician at the place where health care tasks are performed
14 if the physician assistant is in contact with the supervising physician by
15 telecommunication. If the physician assistant practices in a location where
16 a supervising physician is not routinely present, the physician assistant
17 must meet in person or by telecommunication with a supervising physician at
18 least once each week to ensure ongoing direction and oversight of the
19 physician assistant's work. The board by order may require the personal
20 presence of a supervising physician when designated health care tasks are
21 performed.

22 K. At all times while a physician assistant is on duty, the physician
23 assistant shall wear a name tag with the designation "physician assistant" on
24 it.

25 L. The board by rule may prescribe a civil penalty for a violation of
26 this article. The penalty shall not exceed fifty dollars for each violation.
27 The board shall deposit, pursuant to sections 35-146 and 35-147, all monies
28 it receives from this penalty in the state general fund. A physician
29 assistant and the supervising physician may contest the imposition of this
30 penalty pursuant to board rule. The imposition of a civil penalty is public
31 information, and the board may use this information in any future
32 disciplinary actions.