

REFERENCE TITLE: physician assistants; oversight; practice

State of Arizona
Senate
Fifty-fifth Legislature
Second Regular Session
2022

SB 1367

Introduced by
Senator Barto

AN ACT

AMENDING SECTIONS 32-2501, 32-2502, 32-2531, 32-2532 AND 32-2533, ARIZONA REVISED STATUTES; REPEALING SECTION 32-2534, ARIZONA REVISED STATUTES; AMENDING TITLE 32, CHAPTER 25, ARTICLE 3, ARIZONA REVISED STATUTES, BY ADDING A NEW SECTION 32-2534; AMENDING SECTIONS 32-2535, 32-2551 AND 32-2811, ARIZONA REVISED STATUTES; RELATING TO 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 32-2501, Arizona Revised Statutes, is amended to
3 read:

4 32-2501. Definitions

5 In this chapter, unless the context otherwise requires:

6 1. "Active license" means a regular license issued pursuant to this
7 chapter.

8 2. "Adequate records" means legible medical records containing, at
9 a minimum, sufficient information to identify the patient, support the
10 diagnosis, justify the treatment, accurately document the results,
11 indicate advice and cautionary warnings provided to the patient and
12 provide sufficient information for another practitioner to assume
13 continuity of the patient's care at any point in the course of treatment.

14 3. "Advisory letter" means a nondisciplinary letter to notify a
15 physician assistant that either:

16 (a) While there is insufficient evidence to support disciplinary
17 action, the board believes that continuation of the activities that led to
18 the investigation may result in further board action against the licensee.

19 (b) The violation is a minor or technical violation that is not of
20 sufficient merit to warrant disciplinary action.

21 (c) While the licensee has demonstrated substantial compliance
22 through rehabilitation or remediation that has mitigated the need for
23 disciplinary action, the board believes that repetition of the activities
24 that led to the investigation may result in further board action against
25 the licensee.

26 4. "Approved program" means a physician assistant educational
27 program accredited by the accreditation review commission on education for
28 physician assistants, or one of its predecessor agencies, the committee on
29 allied health education and accreditation or the commission on the
30 accreditation of allied health educational programs.

31 5. "Board" means the Arizona regulatory board of physician
32 assistants.

33 6. "COLLABORATING PHYSICIAN" MEANS A PHYSICIAN WHO HOLDS A CURRENT
34 UNRESTRICTED LICENSE IN THIS STATE AND WHO HAS A COLLABORATION AGREEMENT
35 WITH A PHYSICIAN ASSISTANT.

36 7. "COLLABORATION AGREEMENT" MEANS AN AGREEMENT THAT DESCRIBES A
37 PHYSICIAN ASSISTANT'S SCOPE OF PRACTICE AND THAT IS BETWEEN THE PHYSICIAN
38 ASSISTANT AND A COLLABORATING PHYSICIAN.

39 ~~6.~~ 8. "Completed application" means an application for which the
40 applicant has supplied all required fees, information and correspondence
41 requested by the board on forms and in a manner acceptable to the board.

42 ~~7.~~ 9. "Immediate family" means the spouse, natural or adopted
43 children, father, mother, brothers and sisters of the physician assistant
44 and the natural or adopted children, father, mother, brothers and sisters
45 of the physician assistant's spouse.

1 ~~8.~~ 10. "Letter of reprimand" means a disciplinary letter that is
2 issued by the board and that informs the physician assistant that the
3 physician assistant's conduct violates state or federal law and may
4 require the board to monitor the physician assistant.

5 ~~9.~~ 11. "Limit" means a nondisciplinary action that is taken by the
6 board and that alters a physician assistant's practice or medical
7 activities if there is evidence that the physician assistant is or may be
8 mentally or physically unable to safely engage in health care tasks.

9 ~~10.~~ 12. "Medically incompetent" means that a physician assistant
10 lacks sufficient medical knowledge or skills, or both, in performing
11 delegated health care tasks to a degree likely to endanger the health or
12 safety of patients.

13 ~~11.~~ 13. "Minor surgery":

14 (a) Means those invasive procedures that may be ~~delegated to~~
15 ~~PERFORMED BY~~ a physician assistant ~~by a supervising physician~~, that are
16 consistent with the training and experience of the physician assistant,
17 that are normally taught in courses of training approved by the board, ~~and~~
18 that have been approved by the board as falling within a scope of practice
19 of a physician assistant ~~AND THAT ARE CONSISTENT WITH THE PRACTICE SETTING~~
20 ~~REQUIREMENTS OF THE PHYSICIAN ASSISTANT.~~ ~~Minor surgery~~

21 (b) Does not include a surgical abortion.

22 ~~12.~~ 14. "Physician" means a physician who is licensed pursuant to
23 chapter 13 or 17 of this title.

24 ~~13.~~ 15. "Physician assistant" means a person who is licensed
25 pursuant to this chapter ~~and who practices medicine with physician~~
26 ~~supervision.~~

27 ~~14.~~ 16. "Regular license" means a valid and existing license that
28 is issued pursuant to section 32-2521 to perform health care tasks.

29 ~~15.~~ 17. "Restrict" means a disciplinary action that is taken by
30 the board and that alters a physician assistant's practice or medical
31 activities if there is evidence that the physician assistant is or may be
32 medically incompetent or guilty of unprofessional conduct.

33 ~~16.~~ ~~"Supervising physician" means a physician who holds a current~~
34 ~~unrestricted license, who supervises a physician assistant and who assumes~~
35 ~~legal responsibility for health care tasks performed by the physician~~
36 ~~assistant.~~

37 ~~17.~~ ~~"Supervision" means a physician's opportunity or ability to~~
38 ~~provide or exercise direction and control over the services of a physician~~
39 ~~assistant. Supervision does not require a physician's constant physical~~
40 ~~presence if the supervising physician is or can be easily in contact with~~
41 ~~the physician assistant by telecommunication.~~

42 18. "Unprofessional conduct" includes the following acts by a
43 physician assistant that occur in this state or elsewhere:

1 (a) Violating any federal or state law or rule that applies to the
2 performance of health care tasks as a physician assistant. Conviction in
3 any court of competent jurisdiction is conclusive evidence of a violation.

4 (b) Claiming to be a physician or knowingly ~~permitting~~ ALLOWING
5 another person to represent that person as a physician.

6 ~~(c) Performing health care tasks that have not been delegated by~~
7 ~~the supervising physician.~~

8 (c) PERFORMING HEALTH CARE TASKS THAT DO NOT MEET COLLABORATION
9 REQUIREMENTS PURSUANT TO SECTION 32-2531.

10 (d) Exhibiting a pattern of using or being under the influence of
11 alcohol or drugs or a similar substance while performing health care tasks
12 or to the extent that judgment may be impaired and the ability to perform
13 health care tasks detrimentally affected.

14 (e) Signing a blank, undated or predated prescription form.

15 (f) Committing gross malpractice, repeated malpractice or any
16 malpractice resulting in the death of a patient.

17 (g) Representing that a manifestly incurable disease or infirmity
18 can be permanently cured or that a disease, ailment or infirmity can be
19 cured by a secret method, procedure, treatment, medicine or device, if
20 this is not true.

21 (h) Refusing to divulge to the board on demand the means, method,
22 procedure, modality of treatment or medicine used in ~~the treatment of~~
23 TREATING a disease, injury, ailment or infirmity.

24 (i) Prescribing or dispensing controlled substances or
25 prescription-only drugs for which the physician assistant is not approved
26 or in excess of the amount authorized pursuant to this chapter.

27 (j) Committing any conduct or practice that is or might be harmful
28 or dangerous to the health of a patient or the public.

29 (k) Violating a formal order, probation or stipulation issued by
30 the board.

31 (l) Failing to clearly disclose the person's identity as a
32 physician assistant in the course of the physician assistant's employment.

33 (m) Failing to use and affix the initials "P.A." or "P.A.-C." after
34 the physician assistant's name or signature on charts, prescriptions or
35 professional correspondence.

36 (n) Procuring or attempting to procure a physician assistant
37 license by fraud, misrepresentation or knowingly taking advantage of the
38 mistake of another.

39 (o) Having professional connection with or lending the physician
40 assistant's name to an illegal practitioner of any of the healing arts.

41 (p) Failing or refusing to maintain adequate records ~~on~~ FOR a
42 patient.

43 (q) Using controlled substances that have not been prescribed by a
44 physician, physician assistant, dentist or nurse practitioner for use
45 during a prescribed course of treatment.

1 (r) Prescribing or dispensing controlled substances to members of
2 the physician assistant's immediate family.

3 (s) Prescribing, dispensing or administering any controlled
4 substance or prescription-only drug for other than accepted therapeutic
5 purposes.

6 (t) Dispensing a schedule II controlled substance that is an
7 opioid, except as provided in section 32-2532.

8 (u) Knowingly making any written or oral false or fraudulent
9 statement in connection with the performance of health care tasks or when
10 applying for privileges or renewing an application for privileges at a
11 health care institution.

12 (v) Committing a felony, whether or not involving moral turpitude,
13 or a misdemeanor involving moral turpitude. In either case, conviction by
14 a court of competent jurisdiction or a plea of no contest is conclusive
15 evidence of the commission.

16 (w) Having a certification or license refused, revoked, suspended,
17 limited or restricted by any other licensing jurisdiction for the
18 inability to safely and skillfully perform health care tasks or for
19 unprofessional conduct as defined by that jurisdiction that directly or
20 indirectly corresponds to any act of unprofessional conduct as prescribed
21 by this paragraph.

22 (x) Having sanctions including restriction, suspension or removal
23 from practice imposed by an agency of the federal government.

24 (y) Violating or attempting to violate, directly or indirectly, or
25 assisting in or abetting the violation of or conspiring to violate a
26 provision of this chapter.

27 (z) Using the term "doctor" or the abbreviation "Dr." on a name tag
28 or in a way that leads the public to believe that the physician assistant
29 is licensed to practice as an allopathic or ~~an~~ osteopathic physician in
30 this state.

31 (aa) Failing to furnish legally requested information to the board
32 or its investigator in a timely manner.

33 (bb) Failing to allow properly authorized board personnel to
34 examine on demand documents, reports and records of any kind relating to
35 the physician assistant's performance of health care tasks.

36 (cc) Knowingly making a false or misleading statement on a form
37 required by the board or in written correspondence or attachments
38 furnished to the board.

39 (dd) Failing to submit to a body fluid examination and other
40 examinations known to detect the presence of alcohol or other drugs
41 pursuant to an agreement with the board or an order of the board.

42 (ee) Violating a formal order, probation agreement or stipulation
43 issued or entered into by the board or its executive director.

44 (ff) Except as otherwise required by law, intentionally betraying a
45 professional secret or intentionally violating a privileged communication.

1 (gg) Allowing the use of the licensee's name in any way to enhance
2 or ~~permit~~ ALLOW the continuance of the activities of, or maintaining a
3 professional connection with, an illegal practitioner of medicine or the
4 performance of health care tasks by a person who is not licensed pursuant
5 to this chapter.

6 (hh) Committing false, fraudulent, deceptive or misleading
7 advertising by a physician assistant or the physician assistant's staff or
8 representative.

9 (ii) Knowingly failing to disclose to a patient on a form that is
10 prescribed by the board and that is dated and signed by the patient or
11 guardian acknowledging that the patient or guardian has read and
12 understands that the licensee has a direct financial interest in a
13 separate diagnostic or treatment agency or in nonroutine goods or services
14 that the patient is being prescribed and ~~if~~ WHETHER the prescribed
15 treatment, goods or services are available on a competitive basis. This
16 subdivision does not apply to a referral by one physician assistant to
17 another physician assistant or to a doctor of medicine or a doctor of
18 osteopathic medicine within a group working together.

19 (jj) With the exception of heavy metal poisoning, using chelation
20 therapy in the treatment of arteriosclerosis or as any other form of
21 therapy without adequate informed patient consent or without conforming to
22 generally accepted experimental criteria, including protocols, detailed
23 records, periodic analysis of results and periodic review by a medical
24 peer review committee, or without approval by the United States food and
25 drug administration or its successor agency.

26 (kk) Prescribing, dispensing or administering anabolic or
27 androgenic steroids for other than therapeutic purposes.

28 (ll) Prescribing, dispensing or furnishing a prescription
29 medication or a prescription-only device as defined in section 32-1901 to
30 a person unless the licensee first conducts a physical examination of that
31 person or has previously established a professional relationship with the
32 person. This subdivision does not apply to:

33 (i) A physician assistant who provides temporary patient care on
34 behalf of the patient's regular treating licensed health care
35 professional.

36 (ii) Emergency medical situations as defined in section 41-1831.

37 (iii) Prescriptions written to prepare a patient for a medical
38 examination.

39 (iv) Prescriptions written or antimicrobials dispensed to a contact
40 as defined in section 36-661 who is believed to have had significant
41 exposure risk as defined in section 36-661 with another person who has
42 been diagnosed with a communicable disease as defined in section 36-661 by
43 the prescribing or dispensing physician assistant.

1 (mm) Engaging in sexual conduct with a current patient or with a
2 former patient within six months after the last medical consultation
3 unless the patient was the licensee's spouse at the time of the contact
4 or, immediately preceding the professional relationship, was in a dating
5 or engagement relationship with the licensee. For the purposes of this
6 subdivision, "sexual conduct" includes:

7 (i) Engaging in or soliciting sexual relationships, whether
8 consensual or nonconsensual.

9 (ii) Making sexual advances, requesting sexual favors or engaging
10 in other verbal conduct or physical contact of a sexual nature with a
11 patient.

12 (iii) Intentionally viewing a completely or partially disrobed
13 patient in the course of treatment if the viewing is not related to
14 patient diagnosis or treatment under current practice standards.

15 (nn) Performing health care tasks under a false or assumed name in
16 this state.

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

19 32-2502. Arizona regulatory board of physician assistants;
20 membership; appointment; terms; immunity

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

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

29 2. Two public members who are appointed by the governor.

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

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

38 B. Before appointment by the governor, a prospective member of the
39 board shall submit a full set of fingerprints to the governor for the
40 purpose of obtaining a state and federal criminal records check pursuant
41 to section 41-1750 and Public Law 92-544. The department of public safety
42 may exchange this fingerprint data with the federal bureau of
43 investigation.

44 C. The term of office of members of the board is four years to
45 begin and end on July 1.

1 D. Each board member is eligible for appointment to not more than
2 two full terms, except that the term of office for a member appointed to
3 fill a vacancy that is not caused by the expiration of a full term is for
4 the unexpired portion of that term and the governor may reappoint that
5 member to not more than two additional full terms. Each board member may
6 continue to hold office until the appointment and qualification of that
7 member's successor. ~~However,~~ The governor may remove a member after
8 notice and a hearing, on a finding of continued neglect of duty,
9 incompetence or unprofessional or dishonorable conduct. That member's
10 term ends when the finding is made.

11 E. A board member's term automatically ends:

12 1. On written resignation submitted to the board chairperson or to
13 the governor.

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

16 3. If the member fails to attend three consecutive regular board
17 meetings.

18 4. Five years after retirement from active practice.

19 F. Board members are immune from civil liability for all good faith
20 actions they take pursuant to this chapter.

21 Sec. 3. Section 32-2531, Arizona Revised Statutes, is amended to
22 read:

23 32-2531. Physician assistants; legal medical services;
24 collaboration agreements; civil penalty

25 ~~A. A supervising physician may delegate health care tasks to a~~
26 ~~physician assistant.~~

27 A. EXCEPT AS PROHIBITED IN SUBSECTION E OF THIS SECTION, A
28 PHYSICIAN ASSISTANT MAY PROVIDE ANY LEGAL MEDICAL SERVICE FOR WHICH THE
29 PHYSICIAN ASSISTANT HAS BEEN PREPARED BY EDUCATION, TRAINING AND
30 EXPERIENCE AND THAT THE PHYSICIAN ASSISTANT IS COMPETENT TO PERFORM. A
31 PHYSICIAN ASSISTANT MAY PROVIDE MEDICAL SERVICES IN ANY HEALTH CARE
32 FACILITY OR PROGRAM, INCLUDING A HOSPITAL, A NURSING FACILITY, AN ASSISTED
33 LIVING FACILITY, HOSPICE, AN OPIOID TREATMENT PROGRAM, AN INPATIENT
34 PSYCHIATRIC SETTING OR A MENTAL HEALTH CRISIS FACILITY. LEGAL MEDICAL
35 SERVICES INCLUDE:

36 1. OBTAINING COMPREHENSIVE HEALTH HISTORIES AND PERFORMING PHYSICAL
37 EXAMINATIONS.

38 2. EVALUATING AND DIAGNOSING PATIENTS AND MANAGING AND PROVIDING
39 MEDICAL TREATMENT AND THERAPEUTIC INTERVENTIONS.

40 3. ORDERING, PERFORMING AND INTERPRETING DIAGNOSTIC STUDIES AND
41 THERAPEUTIC PROCEDURES.

42 4. EDUCATING PATIENTS ON HEALTH PROMOTION AND DISEASE PREVENTION
43 AND PROVIDING COUNSELING AND EDUCATION TO MEET PATIENT NEEDS.

44 5. PROVIDING CONSULTATION ON REQUEST.

45 6. WRITING MEDICAL ORDERS.

- 1 7. OBTAINING INFORMED CONSENT.
- 2 8. ASSISTING IN SURGERY.
- 3 9. DELEGATING AND ASSIGNING THERAPEUTIC AND DIAGNOSTIC MEASURES TO
- 4 AND SUPERVISING LICENSED OR UNLICENSED PERSONNEL.
- 5 10. MAKING APPROPRIATE REFERRALS.
- 6 11. ORDERING, PRESCRIBING, DISPENSING AND ADMINISTERING DRUGS AND
- 7 MEDICAL DEVICES.
- 8 12. PRESCRIBING PRESCRIPTION-ONLY MEDICATIONS.
- 9 13. PRESCRIBING SCHEDULE IV OR SCHEDULE V CONTROLLED SUBSTANCES AS
- 10 DEFINED IN THE CONTROLLED SUBSTANCES ACT (P.L. 91-513; 84 STAT. 1242; 21
- 11 UNITED STATES CODE SECTION 802).
- 12 14. PRESCRIBING SCHEDULE II AND SCHEDULE III CONTROLLED SUBSTANCES
- 13 AS DEFINED IN THE CONTROLLED SUBSTANCES ACT.
- 14 15. PERFORMING MINOR SURGERY AS DEFINED IN SECTION 32-2501.
- 15 16. PERFORMING NONSURGICAL HEALTH CARE TASKS THAT ARE NORMALLY
- 16 TAUGHT IN COURSES OF TRAINING APPROVED BY THE BOARD AND THAT ARE
- 17 CONSISTENT WITH THE PHYSICIAN ASSISTANT'S TRAINING AND EXPERIENCE.
- 18 17. CERTIFYING THE HEALTH OR DISABILITY OF A PATIENT AS REQUIRED BY
- 19 ANY LOCAL, STATE OR FEDERAL PROGRAM.
- 20 B. PURSUANT TO THE REQUIREMENTS OF THIS CHAPTER AND THE STANDARD OF
- 21 CARE, A PHYSICIAN ASSISTANT WHO HAS AT LEAST FOUR THOUSAND HOURS OF
- 22 CLINICAL PRACTICE DOCUMENTED TO THE BOARD SHALL COLLABORATE WITH, CONSULT
- 23 WITH OR REFER TO THE APPROPRIATE HEALTH CARE PROFESSIONAL AS INDICATED BY
- 24 THE PATIENT'S CONDITION AND BY THE PHYSICIAN ASSISTANT'S EDUCATION,
- 25 EXPERIENCE AND COMPETENCIES. THE LEVEL OF COLLABORATION IS DETERMINED BY
- 26 THE PRACTICE SETTING IN WHICH THE PHYSICIAN ASSISTANT WORKS, INCLUDING A
- 27 PHYSICIAN EMPLOYER, PHYSICIAN GROUP PRACTICE, PRIVATE PRACTICE OR HEALTH
- 28 CARE FACILITY, ANY OF WHICH MAY REQUIRE A COLLABORATION AGREEMENT.
- 29 C. A PHYSICIAN ASSISTANT WHO HAS FEWER THAN FOUR THOUSAND HOURS OF
- 30 CLINICAL PRACTICE DOCUMENTED TO THE BOARD SHALL WORK IN ACCORDANCE WITH A
- 31 COLLABORATION AGREEMENT THAT DESCRIBES THE PHYSICIAN ASSISTANT'S SCOPE OF
- 32 PRACTICE. A PHYSICIAN ASSISTANT MAY NOT PERFORM HEALTH CARE TASKS UNTIL
- 33 THE PHYSICIAN ASSISTANT HAS COMPLETED AND SIGNED A WRITTEN COLLABORATION
- 34 AGREEMENT. UNDER A COLLABORATION AGREEMENT, COLLABORATION MAY OCCUR
- 35 THROUGH ELECTRONIC MEANS AND DOES NOT REQUIRE THE PHYSICAL PRESENCE OF THE
- 36 COLLABORATING PHYSICIAN AT THE TIME OR PLACE THE PHYSICIAN ASSISTANT
- 37 PROVIDES MEDICAL SERVICES. THE WRITTEN COLLABORATION AGREEMENT MUST BE
- 38 KEPT ON FILE AT THE MAIN LOCATION OF THE PHYSICIAN ASSISTANT'S PRACTICE
- 39 AND, ON REQUEST, BE MADE AVAILABLE TO THE BOARD OR THE BOARD'S
- 40 REPRESENTATIVE. ON SUBMISSION TO THE BOARD OF DOCUMENTATION OF FOUR
- 41 THOUSAND HOURS OF CLINICAL PRACTICE, A PHYSICIAN ASSISTANT IS NO LONGER
- 42 SUBJECT TO THE REQUIREMENTS OF THIS SUBSECTION. THE BOARD MAY COUNT
- 43 PRACTICE HOURS EARNED IN ANOTHER JURISDICTION TOWARDS THE HOURS OF
- 44 CLINICAL PRACTICE REQUIRED BY THIS SUBSECTION.

1 D. A PHYSICIAN ASSISTANT IS LEGALLY RESPONSIBLE AND ASSUMES LEGAL
2 LIABILITY FOR THE HEALTH CARE THE PHYSICIAN ASSISTANT PROVIDES.

3 ~~B. E. A physician assistant shall not perform surgical abortions~~
4 ~~as defined in section 36-2151.~~

5 ~~C. The physician assistant may perform those duties and~~
6 ~~responsibilities, including the ordering, prescribing, dispensing and~~
7 ~~administration of drugs and medical devices, that are delegated by the~~
8 ~~supervising physician.~~

9 ~~D. The physician assistant may provide any medical service that is~~
10 ~~delegated by the supervising physician if the service is within the~~
11 ~~physician assistant's skills, is within the physician's scope of practice~~
12 ~~and is supervised by the physician.~~

13 ~~E. F. The A~~ physician assistant may pronounce death and, ~~if~~
14 ~~delegated,~~ may authenticate by the physician assistant's signature any
15 form that may be authenticated by a physician's signature.

16 ~~F. The physician assistant is the agent of the physician~~
17 ~~assistant's supervising physician in the performance of all practice~~
18 ~~related activities, including the ordering of diagnostic, therapeutic and~~
19 ~~other medical services.~~

20 ~~G. The physician assistant may perform health care tasks in any~~
21 ~~setting authorized by the supervising physician, including physician~~
22 ~~offices, clinics, hospitals, ambulatory surgical centers, patient homes,~~
23 ~~nursing homes and other health care institutions. These tasks may~~
24 ~~include:~~

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

41 ~~taught in courses of training approved by the board, that are consistent~~
42 ~~with the training and experience of the physician assistant and that have~~
43 ~~been properly delegated by the supervising physician.~~

44 ~~H. The supervising physician shall:~~

1 ~~1. Meet the requirements established by the board for supervising a~~
2 ~~physician assistant.~~

3 ~~2. Accept responsibility for all tasks and duties the physician~~
4 ~~delegates to a physician assistant.~~

5 ~~3. Notify the board and the physician assistant in writing if the~~
6 ~~physician assistant exceeds the scope of the delegated health care tasks.~~

7 ~~4. Maintain a written agreement with the physician assistant. The~~
8 ~~agreement must state that the physician will exercise supervision over the~~
9 ~~physician assistant and retains professional and legal responsibility for~~
10 ~~the care rendered by the physician assistant. The agreement must be~~
11 ~~signed by the supervising physician and the physician assistant and~~
12 ~~updated annually. The agreement must be kept on file at the practice site~~
13 ~~and made available to the board on request. Each year the board shall~~
14 ~~randomly audit at least five per cent of these agreements for compliance.~~

15 ~~i. A physician's ability to supervise a physician assistant is not~~
16 ~~affected by restrictions imposed by the board on a physician assistant~~
17 ~~pursuant to disciplinary action taken by the board.~~

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

28 G. A PHYSICIAN ASSISTANT WHO HAS AT LEAST SIXTEEN HOURS OF
29 DOCUMENTED TRAINING IN RADIATION SAFETY MAY OPERATE A FLUOROSCOPY MACHINE
30 PURSUANT TO SECTION 32-2811. THE TRAINING DOCUMENTATION SHALL BE KEPT ON
31 FILE AT THE MAIN LOCATION OF THE PHYSICIAN ASSISTANT'S PRACTICE AND, ON
32 REQUEST, BE MADE AVAILABLE TO THE BOARD OR THE BOARD'S REPRESENTATIVE.

33 ~~k.~~ H. At all times while a physician assistant is on duty, the
34 physician assistant shall wear a name tag with the designation "physician
35 assistant" on it.

36 ~~l.~~ I. The board by rule may prescribe a civil penalty for a
37 violation of this article. The penalty shall not exceed ~~fifty dollars~~ \$50
38 for each violation. The board shall deposit, pursuant to sections 35-146
39 and 35-147, all monies it receives from this penalty in the state general
40 fund. A physician assistant and the ~~supervising~~ COLLABORATING physician,
41 IF APPLICABLE, may contest the imposition of this penalty pursuant to
42 board rule. The imposition of a civil penalty is public information, and
43 the board may use this information in any future disciplinary actions.

1 Sec. 4. Section 32-2532, Arizona Revised Statutes, is amended to
2 read:

3 32-2532. Prescribing, administering and dispensing drugs;
4 limits and requirements; notice

5 A. Except as provided in subsection F of this section, a physician
6 assistant shall not prescribe, dispense or administer:

7 1. A schedule II or schedule III controlled substance as defined in
8 the ~~federal~~ controlled substances act ~~of 1970~~ (P.L. 91-513; 84 Stat. 1242;
9 21 United States Code section 802) without ~~delegation by the supervising~~
10 ~~physician;~~ board approval and United States drug enforcement
11 administration registration. ~~IF THE PHYSICIAN ASSISTANT IS A PARTY TO A~~
12 ~~COLLABORATION AGREEMENT, THE COLLABORATION AGREEMENT SHALL SPECIFY THE~~
13 ~~ABILITY OF THE PHYSICIAN ASSISTANT TO PRESCRIBE, DISPENSE OR ADMINISTER A~~
14 ~~SCHEDULE II OR SCHEDULE III CONTROLLED SUBSTANCE.~~

15 2. A schedule IV or schedule V controlled substance as defined in
16 the ~~federal~~ controlled substances act ~~of 1970~~ without United States drug
17 enforcement administration registration ~~and delegation by the supervising~~
18 ~~physician.~~ ~~IF THE PHYSICIAN IS A PARTY TO A COLLABORATION AGREEMENT, THE~~
19 ~~COLLABORATION AGREEMENT SHALL SPECIFY THE ABILITY OF THE PHYSICIAN~~
20 ~~ASSISTANT TO PRESCRIBE, DISPENSE OR ADMINISTER A SCHEDULE IV OR SCHEDULE V~~
21 ~~CONTROLLED SUBSTANCE.~~

22 ~~3. Prescription-only medication without delegation by the~~
23 ~~supervising physician.~~

24 3. ~~IF THE PHYSICIAN ASSISTANT IS A PARTY TO A COLLABORATION~~
25 ~~AGREEMENT, PRESCRIPTION-ONLY MEDICATION TO THE EXTENT SPECIFIED IN THE~~
26 ~~COLLABORATION AGREEMENT.~~

27 4. Prescription medication intended to perform or induce an
28 abortion.

29 B. All prescription orders issued by a physician assistant shall
30 contain the name, address and telephone number of the physician
31 assistant. A physician assistant shall issue prescription orders for
32 controlled substances under the physician assistant's own United States
33 drug enforcement administration registration number.

34 C. If ~~THE PHYSICIAN ASSISTANT IS~~ certified for prescription
35 privileges pursuant to section 32-2504, subsection A, initial
36 prescriptions ~~BY THE PHYSICIAN ASSISTANT~~ for schedule II controlled
37 substances that are opioids are subject to the limits prescribed in
38 sections 32-3248 and 32-3248.01 ~~if the physician assistant has been~~
39 ~~delegated to prescribe schedule II controlled substances by the~~
40 ~~supervising physician pursuant to this section.~~ For each schedule IV or
41 schedule V controlled substance, the physician assistant may not prescribe
42 the controlled substance more than five times in a six-month period for
43 each patient.

1 D. A prescription BY A PHYSICIAN ASSISTANT for a schedule III
2 controlled substance that is an opioid or benzodiazepine is not refillable
3 without the written consent of ~~the supervising~~ A physician.

4 E. A PHYSICIAN ASSISTANT MAY NOT DISPENSE, PRESCRIBE OR REFILL
5 prescription-only drugs ~~shall not be dispensed, prescribed or refillable~~
6 for a period exceeding one year.

7 F. Except in an emergency, a physician assistant may dispense
8 schedule II or schedule III controlled substances for a period of use of
9 not to exceed seventy-two hours with board approval or any other
10 controlled substance for a period of use of not to exceed ninety days and
11 may administer controlled substances without board approval if it is
12 medically indicated in an emergency dealing with potential loss of life or
13 limb or major acute traumatic pain. Notwithstanding the authority granted
14 in this subsection, a physician assistant may not dispense a schedule II
15 controlled substance that is an opioid, except for an implantable device
16 or an opioid that is for medication-assisted treatment for substance use
17 disorders.

18 G. Except for samples provided by manufacturers, all drugs
19 dispensed by a physician assistant shall be labeled to show the name of
20 the physician assistant.

21 H. A physician assistant shall not obtain a drug from any source
22 other than ~~the supervising~~ A physician or a pharmacist. A physician
23 assistant may receive manufacturers' samples ~~if delegated to do so by the~~
24 ~~supervising physician.~~

25 I. If a physician assistant is approved by the board to prescribe,
26 administer or dispense schedule II and schedule III controlled substances,
27 the physician assistant shall maintain an up-to-date and complete log of
28 all schedule II and schedule III controlled substances the physician
29 assistant administers or dispenses. The board may not grant a physician
30 assistant the authority to dispense schedule II controlled substances that
31 are opioids, except for implantable devices or opioids that are for
32 medication-assisted treatment for substance use disorders.

33 J. The ARIZONA REGULATORY board OF PHYSICIAN ASSISTANTS shall
34 advise the Arizona state board of pharmacy and the United States drug
35 enforcement administration of all physician assistants who are authorized
36 to prescribe or dispense drugs and any modification of their authority.

37 K. The Arizona state board of pharmacy shall notify all pharmacies
38 at least quarterly of physician assistants who are authorized to prescribe
39 or dispense drugs.

40 Sec. 5. Section 32-2533, Arizona Revised Statutes, is amended to
41 read:

42 32-2533. Collaborating physicians; responsibilities

43 A. EXCEPT AS PROVIDED IN SECTION 32-2535, a ~~supervising~~
44 COLLABORATING physician is responsible for all aspects of the performance
45 of a physician assistant, whether or not the ~~supervising~~ COLLABORATING

1 physician actually pays the physician assistant a salary. The ~~supervising~~
2 ~~COLLABORATING~~ physician is responsible for ~~supervising the physician~~
3 ~~assistant and~~ ensuring that the health care tasks performed by ~~a~~ THE
4 physician assistant are within the physician assistant's scope of training
5 and experience and have been properly delegated by the ~~supervising~~
6 ~~COLLABORATING~~ physician.

7 B. Each physician-physician assistant team must ensure that:
8 1. The physician assistant's scope of practice is identified.
9 2. The delegation of medical tasks is appropriate to the physician
10 assistant's level of competence.

11 3. The relationship of, and access to, the ~~supervising~~
12 ~~COLLABORATING~~ physician is defined.

13 4. A process for evaluating the physician assistant's performance
14 is established.

15 C. A ~~supervising~~ ~~COLLABORATING~~ physician shall not ~~supervise~~
16 ~~COLLABORATE WITH~~ more than six physician assistants who work at the same
17 time.

18 D. A ~~supervising~~ ~~COLLABORATING~~ physician shall develop a system for
19 recording and reviewing all instances in which the physician assistant
20 prescribes schedule II or schedule III controlled substances.

21 Sec. 6. Repeal

22 Section 32-2534, Arizona Revised Statutes, is repealed.

23 Sec. 7. Title 32, chapter 25, article 3, Arizona Revised Statutes,
24 is amended by adding a new section 32-2534, to read:

25 32-2534. Billing; direct payment

26 A PHYSICIAN ASSISTANT MAY BILL AND RECEIVE DIRECT PAYMENT FOR THE
27 PROFESSIONAL SERVICES PROVIDED BY THE PHYSICIAN ASSISTANT.

28 Sec. 8. Section 32-2535, Arizona Revised Statutes, is amended to
29 read:

30 32-2535. Emergency medical care; supervision

31 ~~A.~~ Notwithstanding the requirements of this article, in response to
32 a natural disaster, accident or other emergency, a physician assistant who
33 is licensed pursuant to this chapter, licensed or certified by another
34 regulatory jurisdiction in the United States or credentialed as a
35 physician assistant by a federal employer may provide medical care at any
36 location ~~and with or without supervision.~~

37 ~~B. A physician who supervises a physician assistant who is~~
38 ~~providing medical care pursuant to this section is not required to comply~~
39 ~~with the requirements of this article relating to supervising physicians.~~

1 Sec. 9. Section 32-2551, Arizona Revised Statutes, is amended to
2 read:

3 32-2551. Grounds for disciplinary action; duty to report;
4 immunity; proceedings; board action; notice; civil
5 penalty

6 A. The board on its own motion may investigate any evidence that
7 appears to show that a physician assistant is or may be medically
8 incompetent, is or may be guilty of unprofessional conduct or is or may be
9 mentally or physically unable to carry out approved health care tasks.
10 Any physician, physician assistant or health care institution as defined
11 in section 36-401 shall, and any other person may, report to the board any
12 information the physician, physician assistant, health care institution or
13 other person has that appears to show that a physician assistant is or may
14 be medically incompetent, is or may be guilty of unprofessional conduct or
15 is or may be mentally or physically unable to carry out approved health
16 care tasks. If the board begins an investigation pursuant to this section,
17 it may require the physician assistant to promptly provide the name and
18 address of the ~~physician assistant's supervising~~ COLLABORATING physician,
19 ~~or physicians~~ IF APPLICABLE, OR THE HEALTH CARE PROFESSIONAL THE PHYSICIAN
20 ASSISTANT COLLABORATED OR CONSULTED WITH OR REFERRED TO PURSUANT TO
21 SECTION 32-2531, SUBSECTION B. The board or the executive director shall
22 notify the physician assistant ~~and the supervising physician~~ of the
23 content of the reported information in writing within one hundred twenty
24 days ~~of its~~ AFTER THE BOARD'S receipt of the information. Any physician,
25 physician assistant, health care institution or other person that reports
26 or provides information to the board in good faith is not subject to an
27 action for civil damages as a result of reporting or providing
28 information, and, if requested, the name of the reporter shall not be
29 disclosed unless the information is essential to proceedings conducted
30 pursuant to this section.

31 B. The board or, if delegated by the board, the executive director
32 may require a mental, physical or medical competency examination or any
33 combination of those examinations or may make investigations, including
34 investigational interviews, between representatives of the board, ~~and~~ the
35 physician assistant and the ~~supervising~~ COLLABORATING physician, IF
36 APPLICABLE, as ~~it~~ THE BOARD deems necessary to fully inform itself with
37 respect to any information reported pursuant to subsection A of this
38 section. These examinations may include biological fluid testing and
39 other examinations known to detect the presence of alcohol or other drugs.
40 The board or, if delegated by the board, the executive director may
41 require the physician assistant, at the physician assistant's expense, to
42 undergo assessment by a ~~board-approved~~ BOARD-APPROVED rehabilitative,
43 retraining or assessment program.

1 C. If the board finds, based on the information it receives under
2 subsections A and B of this section, that the public safety imperatively
3 requires emergency action, and incorporates a finding to that effect in
4 its order, the board may restrict a license or order a summary suspension
5 of a license pending proceedings for revocation or other action. If the
6 board acts pursuant to this subsection, the physician assistant shall also
7 be served with a written notice of complaint and formal hearing, setting
8 forth the charges, and is entitled to a formal hearing before the board or
9 an administrative law judge on the charges within sixty days pursuant to
10 title 41, chapter 6, article 10.

11 D. If, after completing its investigation, the board finds that the
12 information provided pursuant to subsection A of this section is not of
13 sufficient seriousness to merit disciplinary action against the physician
14 assistant's license, ~~it~~ THE BOARD may take the following actions:

15 1. Dismiss if, in the opinion of the board, the complaint is
16 without merit.

17 2. File an advisory letter. The licensee may file a written
18 response with the board within thirty days after receiving the advisory
19 letter.

20 3. Require the licensee to complete designated continuing medical
21 education courses.

22 E. If the board finds that it can take rehabilitative or
23 disciplinary action without the presence of the physician assistant at a
24 formal interview it may enter into a consent agreement with the physician
25 assistant to limit or restrict the physician assistant's practice or to
26 rehabilitate the physician assistant, protect the public and ensure the
27 physician assistant's ability to safely practice. The board may also
28 require the physician assistant to successfully complete a ~~board-approved~~
29 BOARD-APPROVED rehabilitative, retraining or assessment program at the
30 physician assistant's own expense.

31 F. The board shall not disclose the name of the person who provided
32 the information regarding a licensee's drug or alcohol impairment or the
33 name of the person who files a complaint if that person requests
34 anonymity.

35 G. If, after completing its investigation, the board believes that
36 the information is or may be true and that the information may be of
37 sufficient seriousness to merit direct action against the physician
38 assistant's license, it may request a formal interview with the physician
39 assistant and the ~~supervising~~ COLLABORATING physician, IF APPLICABLE. If
40 the physician assistant refuses the invitation for a formal interview, the
41 board may issue a formal complaint and order that a hearing be held
42 pursuant to title 41, chapter 6, article 10. The board shall notify the
43 physician assistant in writing of the time, date and place of the formal
44 interview at least twenty days before the interview. The notice shall

1 include the right to be represented by counsel and shall fully set forth
2 the conduct or matters to be discussed.

3 H. After the formal interview, the board may take the following
4 actions:

5 1. Dismiss if, in the opinion of the board, the information is
6 without merit.

7 2. File an advisory letter. The licensee may file a written
8 response with the board within thirty days after receiving the advisory
9 letter.

10 3. Enter into a stipulation with the physician assistant to
11 restrict or limit the physician assistant's practice or medical activities
12 or to rehabilitate, retrain or assess the physician assistant, in order to
13 protect the public and ensure the physician assistant's ability to safely
14 perform health care tasks. The board may also require the physician
15 assistant to successfully complete a ~~board-approved~~ BOARD-APPROVED
16 rehabilitative, retraining or assessment program at the physician
17 assistant's own expense as prescribed in subsection E of this section.

18 4. File a letter of reprimand.

19 5. Issue a decree of censure. A decree of censure is a
20 disciplinary action against the physician assistant's license and may
21 include a requirement for restitution of fees to a patient resulting from
22 violations of this chapter or rules adopted under this chapter.

23 6. Fix a period and terms of probation best adapted to protect the
24 public health and safety and rehabilitate or educate the physician
25 assistant. Failure to comply with any terms of probation is cause for
26 initiating formal proceedings pursuant to title 41, chapter 6, article
27 10. Probation may include:

28 (a) Restrictions on the health care tasks the physician assistant
29 may perform.

30 (b) Temporary suspension for not ~~to exceed~~ MORE THAN twelve months.

31 (c) Restitution of patient fees.

32 (d) Education or rehabilitation at the licensee's own expense.

33 7. Require the licensee to complete designated continuing medical
34 education courses.

35 I. If the board finds that the information provided pursuant to
36 subsection A of this section warrants suspension or revocation of a
37 physician assistant's license, ~~it~~ THE BOARD shall immediately initiate
38 formal proceedings ~~for the suspension~~ TO SUSPEND or ~~revocation of~~ REVOKE
39 the license as provided in title 41, chapter 6, article 10. The notice of
40 complaint and hearing is fully effective by mailing a true copy of the
41 notice of complaint and hearing by certified mail addressed to the
42 physician assistant's last known address of record in the board's files.
43 The notice of complaint and hearing is complete at the time of its deposit
44 in the mail.

1 J. A physician assistant who after a formal hearing pursuant to
2 title 41, chapter 6, article 10 is found to be medically incompetent,
3 guilty of unprofessional conduct or mentally or physically unable to
4 safely carry out the physician assistant's approved health care tasks, or
5 any combination of these, is subject to censure, probation, suspension or
6 revocation, or any combination of these, for a period of time or
7 permanently and under conditions the board deems appropriate ~~for the~~
8 ~~protection of~~ TO PROTECT the public health and safety.

9 K. In a formal interview pursuant to subsection G of this section
10 or in a hearing pursuant to subsection I of this section, the board in
11 addition to any other action may impose a civil penalty in the amount of
12 ~~not less than three hundred dollars nor~~ AT LEAST \$300 BUT NOT more than
13 ~~ten thousand dollars~~ \$10,000 for each violation of this chapter or a rule
14 adopted under this chapter.

15 L. An advisory letter is a public document and may be used in
16 future disciplinary actions against a physician assistant.

17 M. The board may charge the costs of a formal hearing to the
18 licensee if it finds the licensee in violation of this chapter.

19 N. If the board acts to modify a physician assistant's prescription
20 writing privileges, the Arizona regulatory board of physician assistants
21 shall immediately notify the Arizona state board of pharmacy and the
22 United States drug enforcement administration of this modification.

23 O. If during the course of an investigation the ~~Arizona regulatory~~
24 ~~board of physician assistants~~ determines that a criminal violation may
25 have occurred involving the PHYSICIAN ASSISTANT'S performance of health
26 care tasks, ~~it~~ THE BOARD shall provide evidence of the violation to the
27 appropriate criminal justice agency.

28 P. The board may accept the surrender of an active license from a
29 person who admits in writing to any of the following:

- 30 1. Being unable to safely engage in the practice of medicine.
- 31 2. Having committed an act of unprofessional conduct.
- 32 3. Having violated this chapter or a board rule.

33 Q. In determining the appropriate disciplinary action under this
34 section, the board shall consider all previous nondisciplinary and
35 disciplinary actions against a licensee.

36 Sec. 10. Section 32-2811, Arizona Revised Statutes, is amended to
37 read:

38 32-2811. Prohibitions and limitations; exceptions

39 A. ~~No~~ A person may NOT use ionizing radiation on a human being
40 unless the person is a licensed practitioner or the holder of a
41 certificate as provided in this chapter.

42 B. A person holding a certificate may use ionizing radiation on
43 human beings only for diagnostic or therapeutic purposes while operating
44 in each particular case at the direction of a licensed practitioner,
45 except that a person holding a certificate may use ionizing radiation on

1 human beings for diagnostic purposes only while operating in each
2 particular case at the direction of a licensed practitioner who is
3 licensed in any other state, territory or district of the United States.
4 The application of ionizing radiation and the direction to apply ionizing
5 radiation are limited to those persons or parts of the human body
6 specified in the law under which the practitioner is licensed. The
7 provisions of the technologist's certificate govern the extent of
8 application of ionizing radiation.

9 C. ~~Nothing in~~ THE PROVISIONS OF this chapter relating to
10 technologists ~~shall be construed to~~ DO NOT limit, enlarge or affect in any
11 respect the practice of their respective professions by duly licensed
12 practitioners.

13 D. A PHYSICIAN ASSISTANT WHO IS LICENSED PURSUANT TO CHAPTER 25 OF
14 THIS TITLE AND WHO HAS AT LEAST SIXTEEN HOURS OF DOCUMENTED TRAINING OR
15 HAS DOCUMENTED THE REQUIRED EXPERIENCE IN RADIATION SAFETY MAY OPERATE A
16 FLUOROSCOPY MACHINE AND IS CONSIDERED A LICENSED PRACTITIONER FOR THE
17 PURPOSES OF THIS SECTION. TRAINING DOCUMENTATION SHALL BE KEPT ON FILE AT
18 THE MAIN LOCATION OF THE PHYSICIAN ASSISTANT'S PRACTICE AND, IF REQUESTED,
19 MADE AVAILABLE TO THE BOARD OR THE BOARD'S REPRESENTATIVE.

20 ~~D.~~ E. The requirement of a certificate ~~shall~~ DOES not apply to:

21 1. A hospital resident specializing in radiology who is not a
22 licensed practitioner in this state or a student enrolled in and attending
23 a school or college of medicine, ~~osteopathy~~ OSTEOPATHIC MEDICINE,
24 podiatry, dentistry, naturopathic medicine, chiropractic or radiologic
25 technology AND who applies ionizing radiation to a human being while under
26 the specific direction of a licensed practitioner.

27 2. A person engaged in performing the duties of a technologist in
28 that person's employment by an agency, bureau or division of the
29 government of the United States.

30 3. Dental hygienists licensed in the state of Arizona and dental
31 assistants holding a valid certificate in dental radiology from a course
32 approved by the state board of dental examiners.

33 4. Persons providing assistance during an ionizing radiation
34 procedure, apart from such procedures conducted in a health care
35 institution, under the direction of a person licensed for the use of an
36 ionizing radiation machine.

37 5. A person who is employed by or acting on behalf of the state
38 department of corrections or a county jail and who uses a low-dose
39 ionizing radiation body scanning device to detect contraband, as defined
40 in section 13-2501, in or on an inmate.

41 ~~E.~~ F. Subsection B of this section does not apply to ionizing
42 radiation ordered by a licensed practitioner for other than diagnostic or
43 therapeutic purposes pursuant to section 13-2505, subsection E.

