

WISCONSIN LEGISLATIVE COUNCIL STAFF

LCRC
FORM 2

RULES CLEARINGHOUSE

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CLEARINGHOUSE REPORT TO AGENCY

[THIS REPORT HAS BEEN PREPARED PURSUANT TO S. 227.15, STATS. THIS IS A REPORT ON A RULE AS ORIGINALLY PROPOSED BY THE AGENCY; THE REPORT MAY NOT REFLECT THE FINAL CONTENT OF THE RULE IN FINAL DRAFT FORM AS IT WILL BE SUBMITTED TO THE LEGISLATURE. THIS REPORT CONSTITUTES A REVIEW OF, BUT NOT APPROVAL OR DISAPPROVAL OF, THE SUBSTANTIVE CONTENT AND TECHNICAL ACCURACY OF THE RULE.]

CLEARINGHOUSE RULE 99-001

AN ORDER to repeal Med 8.05 (2) (b) 10. and 11.; to renumber and amend Med 8.02 (3); to amend Med 8.01, 8.02 (6), 8.03, 8.04, 8.05 (1) (intro.), the Note following 8.05 (1) (a), and (cm), (2) (b) 5., (c) and (d) and (4), 8.06 (title), (1) (intro.), (b) and (c), (2) (a) and (b) and (3), 8.07 (1) and (2) (title), (intro.), (c), (e), (f) and (i), 8.08 (title), (1) and (2) (intro.), (a), (b), (c), (d) and (e) 2. and 3. and 8.10 (1); and to create Med 8.06 (4), relating to licensure and regulation of physician assistants.

Submitted by **DEPARTMENT OF REGULATION AND LICENSING**

01-06-99 RECEIVED BY LEGISLATIVE COUNCIL.

02-04-99 REPORT SENT TO AGENCY.

RS:DD:jal;wu

LEGISLATIVE COUNCIL RULES CLEARINGHOUSE REPORT

This rule has been reviewed by the Rules Clearinghouse. Based on that review, comments are reported as noted below:

1. STATUTORY AUTHORITY [s. 227.15 (2) (a)]

Comment Attached YES NO

2. FORM, STYLE AND PLACEMENT IN ADMINISTRATIVE CODE [s. 227.15 (2) (c)]

Comment Attached YES NO

3. CONFLICT WITH OR DUPLICATION OF EXISTING RULES [s. 227.15 (2) (d)]

Comment Attached YES NO

4. ADEQUACY OF REFERENCES TO RELATED STATUTES, RULES AND FORMS
[s. 227.15 (2) (e)]

Comment Attached YES NO

5. CLARITY, GRAMMAR, PUNCTUATION AND USE OF PLAIN LANGUAGE [s. 227.15 (2) (f)]

Comment Attached YES NO

6. POTENTIAL CONFLICTS WITH, AND COMPARABILITY TO, RELATED FEDERAL
REGULATIONS [s. 227.15 (2) (g)]

Comment Attached YES NO

7. COMPLIANCE WITH PERMIT ACTION DEADLINE REQUIREMENTS [s. 227.15 (2) (h)]

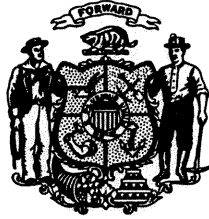
Comment Attached YES NO

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CLEARINGHOUSE RULE 99-001

Comments

[NOTE: All citations to "Manual" in the comments below are to the Administrative Rules Procedures Manual, prepared by the Revisor of Statutes Bureau and the Legislative Council Staff, dated September 1998.]

2. Form, Style and Placement in Administrative Code

a. While the changes in the rule might be characterized as "minor," as indicated in the analysis, the rationale of a number of the changes is not necessarily evident. Arguably, specific explanation should be given to the treatment by the rule of the following provisions: ss. Med 8.05 (2) (b) 10. and 11.; 8.06 (4); 8.07 (2) (e) and (i); and 8.08 (1) and (2) (d) and (e) 2. and 3.

b. In s. Med 8.04, to what does "its successor agency" refer? The use of "successor agency" in that section and in s. Med 8.04 (intro.) and (1) (cm) should be reviewed. It is noted, for example, that s. 448.05 (5) (a) 1., Stats., refers to the National Commission on Certification of Physician Assistants but not its "successor agency." In contrast, "or its successor" is used in conjunction with the American Medical Association's Committee on Allied Health Education and Accreditation in s. 448.05 (5) (a) 2., Stats. Also, it appears that the first comma should be replaced by the word "or" and the last comma should be deleted.

c. In s. Med 8.08 (2) (a), it appears that "in" has inadvertently been left out of the first sentence, following "described."

d. There is nothing in the materials to indicate whether ss. 448.05 (5) (c) and 448.20 (3) (a) have been followed.

STATE OF WISCONSIN
MEDICAL EXAMINING BOARD

IN THE MATTER OF RULE-MAKING : PROPOSED ORDER OF THE
PROCEEDINGS BEFORE THE : MEDICAL EXAMINING BOARD
MEDICAL EXAMINING BOARD : ADOPTING RULES
: (CLEARINGHOUSE RULE 99-)

PROPOSED ORDER

An order of the Medical Examining Board to **repeal** Med 8.05 (2) (b) 10. and 11.; to **renumber and amend** Med 8.02 (3); to **amend** Med 8.01, 8.02 (6), 8.03, 8.04, 8.05, (1) (intro.), the Note following 8.05 (1) (a), and (cm), (2) (b) 5., (c) and (d), (4) (title) and (4), 8.06 (title), (1) (intro.), (b), (c), (2) (a), (b) and (3), 8.07 (1), (2) (title), (2) (intro.), (c), (e), (f) and (i), 8.08 (title), (1), (2) (intro.), (a), (b), (c), (d), (e) 2. and 3. and 8.10 (1); and to **create** Med 8.06 (4), relating to licensure and regulation of physician assistants.

Analysis prepared by the Department of Regulation and Licensing.

ANALYSIS

Statutes authorizing promulgation: ss. 15.08 (5) (b) and 227.11 (2), Stats., and s. 448.05 (5) (a) (intro.), Stats., as amended by 1997 Wisconsin Act 67. ? - see number by revision

Review Statutes interpreted: ss. 448.01 (6), 448.02 (1), 448.03 (1) (b), (2) (e) and (3) (e), 448.04 (1) (f), 448.05 (5), 448.20 (1), (3) (a), 448.21 and 448.40 (2) (f), Stats.

This proposed rule-making order of the Medical Examining Board amends chapter Med 8 as required by 1997 Wisconsin Act 67.

~ The new law required that the board promulgate rules specifying changing the terms "patient services" to "medical care"; changing the credentialing title from "certification" to "licensure"; and changing the prescribing limitations from "protocols" to "guidelines." These proposed rules also make form and clarity changes to which questions have arisen and the board feels might best be clarified by minor changes to the rules. mad + q. note

TEXT OF RULE

SECTION 1. Med 8.01 is amended to read:

Med 8.01 **Authority and purpose.** The rules in this chapter are adopted by the medical examining board pursuant to authority in ss. 15.08 (5) (b), 227.11, 448.04 (1) (f) and 448.40, Stats., and govern the ~~certification~~ licensure and regulation of physician assistants.

Note: 448.20(4) & 448.05(5)(c)

check rvt

SECTION 2. Med 8.02 (3) is renumbered Med 8.02 (5m) and amended to read:

Med 8.02 (5m) "~~Certificate~~" "License" means documentary evidence issued by the board to applicants for ~~certification~~ licensure as a physician assistant who meet all of the requirements of the board.

SECTION 3. Med 8.02 (6) is amended to read:

Med 8.02 (6) "Supervision" means to coordinate, direct, and inspect ~~continually~~ the accomplishments of another, or to oversee with powers of direction and decision the implementation of one's own or another's intentions.

SECTION 4. Med 8.03 and 8.04 are amended to read:

Med 8.03 **Council.** As specified in s. 15.407 (1) and (2), Stats., the council shall advise the board on the formulation of rules on the education, examination, ~~certification~~ licensure and practice of a physician assistant.

Med 8.04 **Educational program approval.** The board shall approve only educational programs accredited and approved by the committee on allied health education and accreditation of the American medical association, the commission for accreditation of allied health education programs, or its successor agency. *of which ~ commission (cf, below) ✓*

SECTION 5. Med 8.05, (1) (intro.), the Note following (1) (a), and (cm) are amended to read:

Med 8.05 **Panel review of applications; examinations required.** The board may use a written examination prepared, administered and scored by the national commission on certification of physician assistants or its successor agency, or a written examination from other professional testing services as approved by the board.

(1) APPLICATION. (intro.) An applicant for examination for ~~certification~~ licensure as a physician assistant shall submit to the board:

Note: An application form may be obtained upon request to the Medical Examining Board located at Room 176, 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53702 53708.

(cm) Proof that the applicant is currently certified ~~to assist primary care~~ physicians by the national commission on certification of physician assistants or its successor agency.

*Why not...
"or its successor agency"
include both?*

*cf Stats.
44825(5)(a) ✓*

SECTION 6. Med 8.05 (2) (b) 5. is amended to read:

Med 8.05 (2) (b) 5. Has not practiced ~~patient care~~ as a physician assistant for a period of 3 years prior to application, unless the applicant has been graduated from ~~a school-approved~~ an approved educational program for physician assistants within that period.

SECTION 7. Med 8.05 (2) (b) 10. and 11. are repealed. *check ✓*

SECTION 8 Med 8.05 (2) (c) and (d) are amended to read:

Med 8.05 (2) (c) An application filed under this chapter shall be reviewed by an application review panel of at least 2 council members designated by the chairperson of the board to determine whether an applicant is required to complete an oral examination under par. (a). If the application review panel is not able to reach unanimous agreement on whether an applicant is eligible for ~~certification~~ licensure without completing an oral examination, the application shall be referred to the board for a final determination.

(d) Where both written and oral examinations are required they shall be scored separately and the applicant shall achieve a passing grade on both examinations to qualify for a ~~certificate~~ license.

SECTION 9. Med 8.05 (4) (title) and (4) are amended to read:

Med 8.05 (4) (title) ~~CERTIFICATION~~ LICENSURE; RENEWAL. At the time of ~~certification~~ licensure and each biennial registration of ~~certification~~ licensure thereafter, a physician assistant shall list with the board the name and address of the supervising physician and shall notify the board within 20 days of any change of a supervising physician.

SECTION 10. Med 8.06 (title), (1) (intro.), (b), (c), (2) (a), (b) and (3) are amended to read:

Med 8.06 (title) **Temporary ~~certificate~~ license**. (1) (intro.) An applicant' for ~~certification~~ licensure may apply to the board for a temporary ~~certificate~~ license to practice as a physician assistant if the applicant:

(b) Is a graduate of an approved school and is scheduled to take the examination for ~~primary care physician's~~ physician assistants required by s. Med 8.05 (1) or has taken the examination and is awaiting the results; or

(c) Submits proof of successful completion of the examination required by s. Med 8.05 (1) and applies for a temporary ~~certificate~~ license no later than 30 days prior to the date scheduled for the next oral examination.

(2) (a) Except as specified in par. (b), a temporary ~~certificate~~ license expires on the date the board grants or denies an applicant permanent ~~certification~~ licensure. Permanent

~~certification licensure~~ to practice as a physician assistant is deemed denied by the board on the date the applicant is sent notice from the board that he or she has failed the examination required by s. Med 8.05 (1) (c).

(b) A temporary ~~certificate~~ license expires on the first day of the next regularly scheduled oral examination for permanent ~~certification licensure~~ if the applicant is required to take, but failed to apply for, the examination.

(3) A temporary ~~permit~~ license may not be renewed.

SECTION 11. Med 8.06 (4) is created to read:

Med 8.06 (4) An applicant holding a temporary license may apply for one transfer of supervising physician and location during the term of the temporary license.

substantive

SECTION 12. Med 8.07 (1), (2) (title), (2) (intro.), (c), (e), (f) and (i) are amended to read:

Med 8.07 (1) SCOPE AND LIMITATIONS. In providing ~~patient services~~ medical care, the entire practice of any physician assistant shall be under the supervision of a licensed physician. The scope of practice is limited to providing ~~patient services~~ medical care specified in sub. (2). A physician assistant's practice may not exceed the scope of practice of the supervising physician. A medical care task assigned by the supervising physician to a physician assistant may not be delegated by the physician assistant to another person.

(2) (title) PATIENT SERVICES MEDICAL CARE. (intro.) ~~Patient services~~ Medical care a physician assistant may provide ~~include~~ includes:

(c) Performing routine therapeutic procedures, including, but not limited to, injections, immunizations, and the suturing and care of wounds.

(e) Assisting the supervising physician in a hospital or facility, as defined in s. 50.01 (1m), Stats., by assisting in surgery, making patient rounds, recording patient progress notes, compiling and recording detailed narrative case summaries and accurately writing or executing ~~standing orders or other specific orders following consultation with and at the direction of the supervising~~ under the supervision of a licensed physician.

revised

(f) Assisting in the delivery of ~~services~~ medical care to a patient by reviewing and monitoring treatment and therapy plans.

(i) ~~Preparing~~ Issuing written prescription orders for drugs ~~if specifically directed to do so by the supervising~~ under the supervision of a licensed physician and in accordance with procedures specified in s. Med 8.08 (2).

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SECTION 13. Med 8.08 (title), (1), (2) (intro.), (a), (b), (c), (d), (e) 2. and 3. are amended to read:

see 448.2(1)(e)
[Handwritten scribbles and arrows]

Med 8.08 (title) ~~Prohibitions and Prescribing limitations.~~ (1) ~~ACUPUNCTURE AND INDEPENDENT PRESCRIBING PROHIBITED.~~ A physician assistant may not practice acupuncture in any form and may not prescribe or dispense any drug independently. A supervising physician may direct a physician assistant to prepare a prescription order according to procedures specified in sub. (2).

(2) ~~PRESCRIBING LIMITATIONS.~~ (intro.) A physician assistant may prepare issue a prescription order only if all of the following conditions apply:

(a) The physician assistant ~~prepares~~ ⁱⁿ issues the prescription order only in patient situations specified and described established written protocols guidelines. The protocol guidelines shall be reviewed at least annually by the physician assistant and his or her supervising physician.

(b) The supervising physician and physician assistant determine by mutual agreement that the physician assistant is qualified through training and experience to prepare issue a prescription order as specified in the established written protocols guidelines.

(c) ~~When practicable, the physician assistant consults directly with the supervising physician prior to preparing a prescription order. In any case the~~ The supervising physician shall be is available for consultation as specified in s. Med 8.10 (2) (3). ^{check}

(d) The prescription orders prepared under procedures in this section contain, in addition to other information required by law, the name, address and telephone number of the supervising physician, ~~the DEA registration number of the supervising physician if the prescription is prepared for a controlled substance, the name and address of the physician assistant, legibly printed, the DEA registration number of the physician assistant if the prescription is prepared for a controlled substance and if the physician assistant is registered with DEA, and the signature of the physician assistant.~~

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(e) 2. Reviews and countersigns within ~~one day~~ 72 hours the patient record prepared by the physician assistant practicing in the office of the supervising physician or at a facility or a hospital in which the supervising physician has staff privileges; or

3. Reviews by telephone or other means, as soon as practicable but within a ~~48-hour~~ 72-hour period, and countersigns within one week, the patient record prepared by the physician assistant who practices in an office facility other than the supervising physician's main office of a facility or hospital in which the supervising physician has staff privileges.

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SECTION 14. Med 8.10 (1) is amended to read:

Med 8.10 (1) No physician may concurrently supervise more than 2 physician assistants unless the physician submits a written plan for the supervision of more than 2 physician assistants and the board approves the plan. A physician assistant may be supervised by more than one physician.

(END OF TEXT OF RULE)

The rules adopted in this order shall take effect on the first day of the month following publication in the Wisconsin administrative register, pursuant to s. 227.22 (2) (intro.), Stats.

Dated _____

Agency _____

Chairperson
Medical Examining Board

FISCAL ESTIMATE

1. The anticipated fiscal effect on the fiscal liability and revenues of any local unit of government of the proposed rule is: \$0.00.
2. The projected anticipated state fiscal effect during the current biennium of the proposed rule is: \$0.00.
3. The projected net annualized fiscal impact on state funds of the proposed rule is: \$0.00.

INITIAL REGULATORY FLEXIBILITY ANALYSIS

These proposed rules will be reviewed by the department through its Small Business Review Advisory Committee to determine whether there will be an economic impact on a substantial number of small businesses, as defined in s. 227.114 (1) (a), Stats.

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1/6/99

**STATE OF WISCONSIN
MEDICAL EXAMINING BOARD**

**IN THE MATTER OF RULE-MAKING : PROPOSED ORDER OF THE
PROCEEDINGS BEFORE THE : MEDICAL EXAMINING BOARD
MEDICAL EXAMINING BOARD : ADOPTING RULES
: (CLEARINGHOUSE RULE 99-001)**

TO: Senator Judy Robson, Senate Co-Chairperson
Joint Committee for the Review of Administrative Rules
Room 15 South, State Capitol
Madison, Wisconsin 53702

PLEASE TAKE NOTICE that the MEDICAL EXAMINING BOARD is submitting in final draft form proposed rules relating to the licensure and regulation of physician assistants.

Please stamp or sign a copy of this letter to acknowledge receipt. If you have any questions concerning the final draft form or desire additional information, please contact Pamela Haack at 266-0495.



Tommy G. Thompson
Governor

Marlene A. Cummings
Secretary

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Administrative Rules in Final Draft Form

Medical Examining Board

Rule: Chapter Med 8

Relating to: Physician Assistants

Clearinghouse Rule: No. 99-001

Regulatory Boards

Accounting; Architects, Landscape Architects, Professional Engineers, Designers and Land Surveyors; Professional Geologists, Hydrologists and Soil Scientists; Auctioneer; Barbering and Cosmetology; Chiropractic; Controlled Substances; Dentistry; Dietitians; Funeral Directors; Hearing and Speech; Medical; Nursing; Nursing Home Administrator; Optometry; Pharmacy; Physical Therapists; Podiatry; Psychology; Real Estate; Real Estate Appraisers; Social Workers, Marriage and Family Therapists and Professional Counselors; and Veterinary.

Committed to Equal Opportunity in Employment and Licensing

**STATE OF WISCONSIN
MEDICAL EXAMINING BOARD**

IN THE MATTER OF RULE-MAKING :
PROCEEDINGS BEFORE THE : **REPORT TO THE LEGISLATURE**
MEDICAL EXAMINING BOARD : **ON CLEARINGHOUSE RULE 99-001**
: **(s. 227.19 (3), Stats.)**

I. THE PROPOSED RULE:

The proposed rule, including the analysis and text, is attached.

II. REFERENCE TO APPLICABLE FORMS:

No new or revised forms are required by these rules.

III. FISCAL ESTIMATES:

These rules will have no significant impact upon state or local units of government.

IV. STATEMENT EXPLAINING NEED:

This rule-making order of the Medical Examining Board amends ch. Med 8 as required by 1997 Wisconsin Act 67.

The new law required that the board promulgate rules specifying changing the terms "patient services" to "medical care"; changing the credentialing title from "certification" to "licensure"; and changing the prescribing limitations from "protocols" to "guidelines." These rules also make form and clarity changes to which questions have arisen and the board feels might best be clarified by minor changes to the rules.

V. NOTICE OF PUBLIC HEARING:

A public hearing was held on March 25, 1999.

The following individuals appeared and registered in support of the proposed rules: Lou Falligant, Madison, WI, representing the Wisconsin Academy of Physician Assistants, (also submitted written comments); Richard Faust, PA-C, Mauston, WI, representing the Wisconsin Academy of Physician Assistants (also submitted written comments); Cindy Benning, R.Ph., Belgium, WI, representing the Pharmacy Examining Board; Rebecca Lehman, PA-C, Neenah, WI, representing the Wisconsin Academy of Physician Assistants (also submitted written comments); John Bohlman, R.Ph., Boscobel, WI; representing the Pharmacy Examining Board; Eric Jensen, Madison, WI, representing the State Medical Society of Wisconsin; Susan Skaros, PA-C, Physician Assistant Advisory

Council, Milwaukee, WI; Michael Conard, PA-C, Bellin Health Medical Group, Kewaunee, WI; and the Pharmacy Examining Board.

VI. RESPONSE TO LEGISLATIVE COUNCIL STAFF RECOMMENDATIONS:

All of the recommendations suggested in the Clearinghouse Report were accepted in whole.

VII. FINAL REGULATORY FLEXIBILITY ANALYSIS:

The proposed rules will have no significant economic impact on small businesses, as defined in s. 227.114 (1) (a), Stats.

STATE OF WISCONSIN
MEDICAL EXAMINING BOARD

IN THE MATTER OF RULE-MAKING : PROPOSED ORDER OF THE
PROCEEDINGS BEFORE THE : MEDICAL EXAMINING BOARD
MEDICAL EXAMINING BOARD : ADOPTING RULES
: (CLEARINGHOUSE RULE 99-001)

PROPOSED ORDER

An order of the Medical Examining Board to **repeal** Med 8.05 (2) (b) 10. and 11.; to **renumber and amend** Med 8.02 (3); to **amend** Med 8.01, 8.02 (6), 8.03, 8.04, 8.05, (1) (intro.), the Note following 8.05 (1) (a), and (cm), (2) (b) 5., (c) and (d), (4) (title) and (4), 8.06 (title), (1) (intro.), (b), (c), (2) (a), (b) and (3), 8.07 (1), (2) (title), (2) (intro.), (c), (e), (f) and (i), 8.08 (title), (1), (2) (intro.), (a), (b), (c), (d), (e) 2. and 3. and 8.10 (1); and to **create** Med 8.06 (4), relating to licensure and regulation of physician assistants.

Analysis prepared by the Department of Regulation and Licensing.

ANALYSIS

Statutes authorizing promulgation: ss. 15.08 (5) (b) and 227.11 (2), Stats., and s. 448.05 (5) (a) (intro.), Stats., as amended by 1997 Wisconsin Act 67.

Statutes interpreted: ss. 448.01 (6), 448.02 (1), 448.03 (1) (b), (2) (e) and (3) (e), 448.04 (1) (f), 448.05 (5), 448.20 (1), (3) (a), 448.21 and 448.40 (2) (f), Stats.

This rule-making order of the Medical Examining Board amends chapter Med 8 as required by 1997 Wisconsin Act 67.

The new law required that the board promulgate rules specifying changing the terms "patient services" to "medical care"; changing the credentialing title from "certification" to "licensure"; and changing the prescribing limitations from "protocols" to "guidelines." These rules also make form and clarity changes to which questions have arisen and the board feels might best be clarified by minor changes to the rules.

Section Med 8.05 (2) (b) 10. is repealed since the grandfathering clause is no longer applicable. Section Med 8.05 (2) (b) 11. is repealed because the board does not accept applicants from schools that are not approved by the board. Section Med 8.06 (4) is created to reflect that an applicant must stay with their supervising physician until the applicant receives his or her certificate. Section Med 8.07 (2) (e) and (i) are amended for clarity. In s. Med 8.08 (2) (e) 2. and 3. the time period for the reviewing physician supervisor a larger time span to do the reviews. Because certifying bodies do change from time to time, the board includes "its successor agency" in s. Med 8.05 to alleviate modification of rules in the future.

TEXT OF RULE

SECTION 1. Med 8.01 is amended to read:

Med 8.01 Authority and purpose. The rules in this chapter are adopted by the medical examining board pursuant to authority in ss. 15.08 (5) (b), 227.11, 448.04 (1) (f) and 448.40, Stats., and govern the ~~certification~~ licensure and regulation of physician assistants.

SECTION 2. Med 8.02 (3) is renumbered Med 8.02 (5m) and amended to read:

Med 8.02 (5m) ~~“Certificate”~~ “License” means documentary evidence issued by the board to applicants for ~~certification~~ licensure as a physician assistant who meet all of the requirements of the board.

SECTION 3. Med 8.02 (6) is amended to read:

Med 8.02 (6) “Supervision” means to coordinate, direct, and inspect ~~continually~~ the accomplishments of another, or to oversee with powers of direction and decision the implementation of one’s own or another’s intentions.

SECTION 4. Med 8.03 and 8.04 are amended to read:

Med 8.03 Council. As specified in s. 15.407 (1) and (2), Stats., the council shall advise the board on the formulation of rules on the education, examination, ~~certification~~ licensure and practice of a physician assistant.

Med 8.04 Educational program approval. The board shall approve only educational programs accredited and approved by the committee on allied health education and accreditation of the American medical association, the commission for accreditation of allied health education programs, or its successor agency.

SECTION 5. Med 8.05, (1) (intro.), the Note following (1) (a), and (cm) are amended to read:

Med 8.05 Panel review of applications; examinations required. The board may use a written examination prepared, administered and scored by the national commission on certification of physician assistants or its successor agency, or a written examination from other professional testing services as approved by the board.

(1) APPLICATION. (intro.) An applicant for examination for ~~certification~~ licensure as a physician assistant shall submit to the board:

Note: An application form may be obtained upon request to the Medical Examining Board located at ~~Room 176~~, 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin ~~53702~~ 53708.

(cm) Proof that the applicant is currently certified ~~to assist primary care physicians~~ by the national commission on certification of physician assistants or its successor agency.

SECTION 6. Med 8.05 (2) (b) 5. is amended to read:

Med 8.05 (2) (b) 5. Has not practiced ~~patient care~~ as a physician assistant for a period of 3 years prior to application, unless the applicant has been graduated from ~~a school approved an~~ approved educational program for physician assistants within that period.

SECTION 7. Med 8.05 (2) (b) 10. and 11. are repealed.

SECTION 8 Med 8.05 (2) (c) and (d) are amended to read:

Med 8.05 (2) (c) An application filed under this chapter shall be reviewed by an application review panel of at least 2 council members designated by the chairperson of the board to determine whether an applicant is required to complete an oral examination under par. (a). If the application review panel is not able to reach unanimous agreement on whether an applicant is eligible for ~~certification~~ licensure without completing an oral examination, the application shall be referred to the board for a final determination.

(d) Where both written and oral examinations are required they shall be scored separately and the applicant shall achieve a passing grade on both examinations to qualify for a ~~certificate~~ license.

SECTION 9. Med 8.05 (4) (title) and (4) are amended to read:

Med 8.05 (4) (title) ~~CERTIFICATION LICENSURE; RENEWAL~~. At the time of ~~certification~~ licensure and each biennial registration of ~~certification~~ licensure thereafter, a physician assistant shall list with the board the name and address of the supervising physician and shall notify the board within 20 days of any change of a supervising physician.

SECTION 10. Med 8.06 (title), (1) (intro.), (b), (c), (2) (a), (b) and (3) are amended to read:

Med 8.06 (title) Temporary ~~certificate~~ license. (1) (intro.) An applicant' for ~~certification~~ licensure may apply to the board for a temporary ~~certificate~~ license to practice as a physician assistant if the applicant:

(b) Is a graduate of an approved school and is scheduled to take the examination for ~~primary care physician's~~ physician assistants required by s. Med 8.05 (1) or has taken the examination and is awaiting the results; or

(c) Submits proof of successful completion of the examination required by s. Med 8.05 (1) and applies for a temporary ~~certificate~~ license no later than 30 days prior to the date scheduled for the next oral examination.

(2) (a) Except as specified in par. (b), a temporary ~~certificate~~ license expires on the date the board grants or denies an applicant permanent ~~certification~~ licensure. Permanent ~~certification~~ licensure to practice as a physician assistant is deemed denied by the board on the date the applicant is sent notice from the board that he or she has failed the examination required by s. Med 8.05 (1) (c).

(b) A temporary ~~certificate~~ license expires on the first day of the next regularly scheduled oral examination for permanent ~~certification~~ licensure if the applicant is required to take, but failed to apply for, the examination.

(3) A temporary ~~permit~~ license may not be renewed.

SECTION 11. Med 8.06 (4) is created to read:

Med 8.06 (4) An applicant holding a temporary license may apply for one transfer of supervising physician and location during the term of the temporary license.

SECTION 12. Med 8.07 (1), (2) (title), (2) (intro.), (c), (e), (f) and (i) are amended to read:

Med 8.07 (1) SCOPE AND LIMITATIONS. In providing ~~patient services~~ medical care, the entire practice of any physician assistant shall be under the supervision of a licensed physician. The scope of practice is limited to providing ~~patient services~~ medical care specified in sub. (2). A physician assistant's practice may not exceed the scope of practice of the supervising physician. A medical care task assigned by the supervising physician to a physician assistant may not be delegated by the physician assistant to another person.

(2) (title) ~~PATIENT SERVICES MEDICAL CARE~~. (intro.) ~~Patient services~~ Medical care a physician assistant may provide ~~include~~ includes:

(c) Performing routine therapeutic procedures, including, but not limited to, injections, immunizations, and the suturing and care of wounds.

(e) Assisting the supervising physician in a hospital or facility, as defined in s. 50.01 (1m), Stats., by assisting in surgery, making patient rounds, recording patient progress notes, compiling and recording detailed narrative case summaries and accurately writing or executing ~~standing orders or other specific orders following consultation with and at the direction of the supervising~~ under the supervision of a licensed physician.

(f) Assisting in the delivery of ~~services~~ medical care to a patient by reviewing and monitoring treatment and therapy plans.

(i) ~~Preparing~~ Issuing written prescription orders for drugs ~~if specifically directed to do so by the supervising~~ under the supervision of a licensed physician and in accordance with procedures specified in s. Med 8.08 (2).

SECTION 13. Med 8.08 (title), (1), (2) (intro.), (a), (b), (c), (d), (e) 2. and 3. are amended to read:

Med 8.08 (title) Prohibitions and Prescribing limitations. (1) ~~ACUPUNCTURE AND INDEPENDENT PRESCRIBING PROHIBITED.~~ A physician assistant may not ~~practice acupuncture in any form and may not~~ prescribe or dispense any drug independently. ~~A supervising physician may direct a physician assistant to prepare a prescription order according to procedures specified in sub. (2).~~

(2) ~~PRESCRIBING LIMITATIONS.~~ (intro.) A physician assistant may ~~prepare~~ issue a prescription order only if all of the following conditions apply:

(a) The physician assistant ~~prepares~~ issues the prescription order only in patient situations specified and described in established written ~~protocols~~ guidelines. The ~~protocol~~ guidelines shall be reviewed at least annually by the physician assistant and his or her supervising physician.

(b) The supervising physician and physician assistant determine by mutual agreement that the physician assistant is qualified through training and experience to ~~prepare~~ issue a prescription order as specified in the established written ~~protocols~~ guidelines.

(c) ~~When practicable, the physician assistant consults directly with the supervising physician prior to preparing a prescription order. In any case the~~ The supervising physician ~~shall be~~ is available for consultation as specified in s. Med 8.10 ~~(2)~~ (3).

(d) The prescription orders prepared under procedures in this section contain, ~~in addition to other~~ all information required by law, ~~the name, address and telephone number of the supervising physician, the DEA registration number of the supervising physician if the prescription is prepared for a controlled substance, the name and address of the physician assistant, legibly printed, the DEA registration number of the physician assistant if the prescription is prepared for a controlled substance and if the physician assistant is registered with DEA, and the signature of the physician assistant~~ under s. 450.11 (1), Stats.

(e) 2. Reviews and countersigns within ~~one day~~ 72 hours the patient record prepared by the physician assistant practicing in the office of the supervising physician or at a facility or a hospital in which the supervising physician has staff privileges; or

3. Reviews by telephone or other means, as soon as practicable but within a ~~48-hour~~ 72-hour period, and countersigns within one week, the patient record prepared by the physician assistant who practices in an office facility other than the supervising

physician's main office of a facility or hospital in which the supervising physician has staff privileges.

SECTION 14. Med 8.10 (1) is amended to read:

Med 8.10 (1) No physician may concurrently supervise more than 2 physician assistants unless the physician submits a written plan for the supervision of more than 2 physician assistants and the board approves the plan. A physician assistant may be supervised by more than one physician.

(END OF TEXT OF RULE)

The rules adopted in this order shall take effect on the first day of the month following publication in the Wisconsin administrative register, pursuant to s. 227.22 (2) (intro.), Stats.

Dated _____

Agency _____

Chairperson
Medical Examining Board

FISCAL ESTIMATE

1. The anticipated fiscal effect on the fiscal liability and revenues of any local unit of government of the proposed rule is: \$0.00.
2. The projected anticipated state fiscal effect during the current biennium of the proposed rule is: \$0.00.
3. The projected net annualized fiscal impact on state funds of the proposed rule is: \$0.00.

FINAL REGULATORY FLEXIBILITY ANALYSIS

These rules will have no significant economic impact on small businesses, as defined in s. 227.114 (1) (a), Stats.

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