

ADMINISTRATIVE RULES FISCAL ESTIMATE AND ECONOMIC IMPACT ANALYSIS

Type of Estimate and Analysis

Original Updated Corrected

Administrative Rule Chapter, Title and Number

Wis. Admin Code MED 8

Subject

Increasing the number of physician assistants a physician may supervise

Fund Sources Affected

Chapter 20, Stats. Appropriations Affected

GPR FED PRO PRS SEG SEG-S

Fiscal Effect of Implementing the Rule

No Fiscal Effect

Indeterminate

Increase Existing Revenues

Decrease Existing Revenues

Increase Costs

Could Absorb Within Agency's Budget

Decrease Costs

The Rule Will Impact the Following (Check All That Apply)

State's Economy

Local Government Units

Specific Businesses/Sectors

Public Utility Rate Payers

Would Implementation and Compliance Costs Be Greater Than \$20 million?

Yes No

Policy Problem Addressed by the Rule

The proposed rule addresses the issue of whether to increase the number of physician assistants a physician may concurrently supervise. Currently, a physician may simultaneously supervise no more than two physician assistants at one time. If a physician wishes to supervise more than two physician assistants he or she must submit a written plan to the Medical Examining Board for review and approval. The proposed rule will increase the number of physician assistants a physician may simultaneously supervise from 2 to 4.

Summary of Rule's Economic and Fiscal Impact on Specific Businesses, Business Sectors, Public Utility Rate Payers, Local Governmental Units and the State's Economy as a Whole (Include Implementation and Compliance Costs Expected to be Incurred)

The proposed rule is not anticipated to have any fiscal impact on businesses, public utility rate payers, local government units or the state's economy as a whole. The proposed rule was posted on the department's website for 14 days. Comments were solicited. The department did not receive any comments regarding an economic impact from local government units, specific business sectors or public utility rate payers. Therefore, the department finds the proposed rule will have no economic impact.

Benefits of Implementing the Rule and Alternative(s) to Implementing the Rule

The national trend, as recognized by the Federation of State Medical Boards, is to increase the number of physician assistants a physician may supervise as one of the means to address the problem of physician workforce shortages. Implementing this proposed rule will bring Wisconsin in line with the national trend and allow greater flexibility for physicians and physician assistants in providing health care. The alternative to implementing the rule is to allow the current physician to physician assistant ratio to remain the same.

Long Range Implications of Implementing the Rule

The primary long term effect of implementing this rule will be building physician and physician assistant health care teams that are equipped to meet the demands of providing adequate health care in spite of growing

physician workforce shortages.

Compare With Approaches Being Used by Federal Government

There are no comparative federal rules.

Compare With Approaches Being Used by Neighboring States (Illinois, Iowa, Michigan and Minnesota)

Similar to the current rule, Illinois and Iowa limit the ratio of physician assistants a physician may supervise to 2:1. Illinois allows “alternate supervising physicians” to supervise more than two physician assistants when the supervising physician is unable to perform supervisory duties. Michigan allows a physician assistant to physician ratio of 4:1 when the supervising physician practices within a group of physicians. If the supervising physician has privileges at a health facility, agency or state correctional facility he or she may supervise more than 4. However, if the physician assistant and physician are not in the same location the ratio is limited to 2:1. The proposed rule is most similar to Minnesota which allows a physician to simultaneously supervise five physician assistants at once. In an emergency, a Minnesota physician may supervise more than five physician assistants.

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