October 25, 2019 - Introduced by Representatives VANDERMEEER, EDMING, CONSIDINE, ANDERSON, DITTRICH, DOYLE, FELZKOWSKI, JAMES, KRUG, KULP, MURSAU, OLDENBURG, QUINN, RAMTHUN, ROHRKASTE, SORTWELL, SPIROS, SUMMERFIELD, TITTL, VRUWINK and TAUCHEN, cosponsored by Senators BERNIER, KOOYENGA, HANSEN, TIFFANY, SCHACHTNER and BEWLEY. Referred to Committee on Regulatory Licensing Reform.

**AN ACT to repeal** 15.407 (2), 50.01 (4p), 252.01 (5), 448.01 (6), 448.03 (1) (b), 448.03 (3) (e), 448.04 (1) (f), 448.05 (5), 448.20, 448.21, 448.40 (2) (f), 448.695 (4) and 450.01 (15r); **to renumber** 448.038; **to amend** 15.08 (1m) (b), 16.417 (1) (e) 3m., 46.03 (44), 48.981 (2m) (b) 1., 49.45 (9r) (a) 7. a., 50.08 (2), 50.39 (3), 50.60 (1), 55.14 (8) (b), 69.01 (6g), 70.47 (8) (intro.), 97.67 (5m) (a) 3., 118.2925 (1) (f), 146.38 (1) (b) 1., 146.81 (1) (d), 146.81 (1) (i), 146.81 (1) (j), 146.82 (3) (a), 146.89 (1) (r) 1., 146.997 (1) (d) 5., 155.01 (7), 252.15 (1) (am), 252.15 (1) (ar) 1., 255.07 (1) (d), 255.07 (7), 257.01 (5) (a), 257.01 (5) (b), 343.16 (5) (a), 440.035 (2m) (b), 440.035 (2m) (c) 1. (intro.), 448.015 (4) (am) 2., 448.02 (1), 448.03 (2) (a), 448.03 (2) (e), 448.03 (2) (k), 448.03 (5) (b), 448.035 (2) to (4), 448.037 (2) (a) (intro.) and (b) and (3), 448.62 (7), 450.01 (16) (hm) 3., 450.10 (3) (a) 5., 450.11 (1g) (b), 450.11 (1i) (a) 1., 450.11 (1i) (b) 2. c., 450.11 (1i) (c) 2., 450.11 (8) (b), 462.02 (2) (e), 462.04, 895.48 (1m) (a) (intro.), 961.01 (19) (a) and 971.14 (4) (a); and **to create** 15.405 (4), 49.45 (9r) (a) 7. a.m., 69.18 (1) (ck), 146.81 (1)
ASSEMBLY BILL 575

(cm., 450.11 (8) (f), chapter 461 and 990.01 (27s) of the statutes; relating to:
regulation of physician assistants, creating a Physician Assistant Examining
Board, extending the time limit for emergency rule procedures, providing an
exemption from emergency rule procedures, granting rule-making authority,
and providing a penalty.

Analysis by the Legislative Reference Bureau

This bill makes changes with respect to the licensure, regulation, and practice
of physician assistants (PAs).

Under current law, PAs are defined as individuals who are licensed to provide
medical care with physician supervision and direction. The Medical Examining
Board licenses and regulates PAs as well as physicians and certain other professions.
The Medical Examining Board is composed of ten physicians and three public
members and is authorized to promulgate rules establishing licensing and practice
standards for PAs.

This bill transfers licensure and regulation of PAs to the newly created
Physician Assistant Examining Board. The new board is composed of seven PAs, one
member who may be either a physician or a PA, and one public member. In addition,
the bill makes various changes to the licensure, regulation, and practice of PAs,
including all of the following:

1. Instead of requiring that a PA practice under the supervision and direction
   of a physician, requires, subject to certain exceptions, that a PA who provides care
to patients maintain and provide to the board upon request either 1) evidence that,
pursuant to the physician assistant’s employment, there is a physician who is
primarily responsible for the overall direction and management of the physician
assistant’s professional activities and for assuring that the services provided by the
physician assistant are medically appropriate or 2) a written collaborative
agreement with a physician or, if the physician assistant’s practice is limited to the
practice of podiatry, a podiatrist, which must describe the PA’s scope of practice and
include other information as required by the board. However, the bill provides that
a PA is individually and independently responsible for the quality of the care he or
she renders.

2. Defines a PA’s practice similarly to the definition of the practice of medicine
   and surgery. The bill also explicitly provides that a PA may prescribe, dispense, and
administer drugs and may serve as a primary or specialty care provider. The bill
requires a PA to limit his or her practice to the scope of his or her experience,
education, and training, and retains a number of limitations on the practice of PAs.

3. Includes a number of additional provisions with respect to the obligations
   of PAs. These include a requirement that a PA have in effect malpractice liability
insurance coverage when practicing, subject to certain exceptions and other provisions.

4. Establishes licensure requirements for PAs, which differ in a number of respects from the requirements under current law, including that PAs submit additional information, including an employment history, with a licensure application. Under the bill, the board must require continuing education for PAs. Currently, PAs are not required to complete continuing education.

5. Specifies various grounds for professional discipline of a PA by the board and allows the board to impose professional discipline consistent with other professions.

Because this bill creates a new crime or revises a penalty for an existing crime, the Joint Review Committee on Criminal Penalties may be requested to prepare a report.

For further information see the state fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 15.08 (1m) (b) of the statutes is amended to read:

15.08 (1m) (b) The public members of the chiropractic examining board, the dentistry examining board, the hearing and speech examining board, the medical examining board, the physical therapy examining board, the perfusionists examining council, the respiratory care practitioners examining council and council on the physician assistants assistant examining board, the board of nursing, the nursing home administrator examining board, the veterinary examining board, the optometry examining board, the pharmacy examining board, the marriage and family therapy, professional counseling, and social work examining board, the psychology examining board, and the radiography examining board shall not be engaged in any profession or occupation concerned with the delivery of physical or mental health care.

SECTION 2. 15.405 (4) of the statutes is created to read:
15.405 (4) PHYSICIAN ASSISTANT EXAMINING BOARD. (a) There is created in the department of safety and professional services a physician assistant examining board consisting of the following members appointed for staggered 4-year terms:

1. Seven physician assistants licensed under ch. 461.
2. One individual who is either a physician licensed under subch. II of ch. 448 or a physician assistant licensed under ch. 461.
3. One public member.

(b) The governor may appoint a physician assistant to the physician assistant examining board under par. (a) 2. only if the governor has determined that there is no suitable physician who is willing to serve on the board.

SECTION 3. 15.407 (2) of the statutes is repealed.

SECTION 4. 16.417 (1) (e) 3m. of the statutes is amended to read:

16.417 (1) (e) 3m. A physician assistant who is licensed under s. 448.04 (1) (f) or 461.07.

SECTION 5. 46.03 (44) of the statutes is amended to read:

46.03 (44) SEXUALLY TRANSMITTED DISEASE TREATMENT INFORMATION. Prepare and keep current an information sheet to be distributed to a patient by a physician, physician assistant, or certified advanced practice nurse prescriber providing expedited partner therapy to that patient under s. 448.035 or 461.035. The information sheet shall include information about sexually transmitted diseases and their treatment and about the risk of drug allergies. The information sheet shall also include a statement advising a person with questions about the information to contact his or her physician, pharmacist, or local health department, as defined in s. 250.01 (4).

SECTION 6. 48.981 (2m) (b) 1. of the statutes is amended to read:
48.981 (2m) (b) 1. “Health care provider” means a physician, as defined under s. 448.01 (5), a physician assistant, as defined under s. 448.01 (6), 461.01 (3), or a nurse holding a license under s. 441.06 (1) or a license under s. 441.10.

SECTION 7. 49.45 (9r) (a) 7. a. of the statutes is amended to read:

49.45 (9r) (a) 7. a. A physician or physician assistant licensed under subch. II of ch. 448.

SECTION 8. 49.45 (9r) (a) 7. am. of the statutes is created to read:

49.45 (9r) (a) 7. am. A physician assistant licensed under ch. 461.

SECTION 9. 50.01 (4p) of the statutes is repealed.

SECTION 10. 50.08 (2) of the statutes is amended to read:

50.08 (2) A physician, an advanced practice nurse prescriber certified under s. 441.16 (2), or a physician assistant licensed under ch. 448, who prescribes a psychotropic medication to a nursing home resident who has degenerative brain disorder shall notify the nursing home if the prescribed medication has a boxed warning under 21 CFR 201.57.

SECTION 11. 50.39 (3) of the statutes is amended to read:

50.39 (3) Facilities governed by ss. 45.50, 48.62, 49.70, 49.72, 50.02, 51.09, and 252.10, juvenile correctional facilities as defined in s. 938.02 (10p), correctional institutions governed by the department of corrections under s. 301.02, and the offices and clinics of persons licensed to treat the sick under chs. 446, 447, and 448 are exempt from ss. 50.32 to 50.39. Sections 50.32 to 50.39 do not abridge the rights of the medical examining board, physician assistant examining board, physical therapy examining board, podiatry affiliated credentialing board, dentistry examining board, pharmacy examining board, chiropractic examining board, and board of nursing in carrying out their statutory duties and responsibilities.
**SECTION 12.** 50.60 (1) of the statutes is amended to read:

50.60 (1) “Health care provider” has the meaning given in s. 146.81 (1) (a) to (hp) (hr).

**SECTION 13.** 55.14 (8) (b) of the statutes is amended to read:

55.14 (8) (b) Order the individual to comply with the treatment plan under par. (a). The order shall provide that if the individual fails to comply with provisions of the treatment plan that require the individual to take psychotropic medications, the medications may be administered involuntarily with consent of the guardian. The order shall specify the methods of involuntary administration of psychotropic medication to which the guardian may consent. An order authorizing the forcible restraint of an individual shall specify that a person licensed under s. 441.06, 441.10, or 448.05 (2) or (5), or 461.07 shall be present at all times that psychotropic medication is administered in this manner and shall require the person or facility using forcible restraint to maintain records stating the date of each administration, the medication administered, and the method of forcible restraint utilized.

**SECTION 14.** 69.01 (6g) of the statutes is amended to read:

69.01 (6g) “Date of death” means the date that a person is pronounced dead by a physician, coroner, deputy coroner, medical examiner, deputy medical examiner, physician assistant, or hospice nurse.

**SECTION 15.** 69.18 (1) (ck) of the statutes is created to read:

69.18 (1) (ck) For purposes of preparation of the certificate of death and in accordance with accepted medical standards, a physician assistant who is directly involved with the care of a patient who dies may pronounce the date, time, and place of the patient’s death.

**SECTION 16.** 70.47 (8) (intro.) of the statutes is amended to read:
70.47 (8) HEARING. (intro.) The board shall hear upon oath all persons who appear before it in relation to the assessment. Instead of appearing in person at the hearing, the board may allow the property owner, or the property owner’s representative, at the request of either person, to appear before the board, under oath, by telephone or to submit written statements, under oath, to the board. The board shall hear upon oath, by telephone, all ill or disabled persons who present to the board a letter from a physician, osteopath, physician assistant, as defined in s. 448.01 (6), or advanced practice nurse prescriber certified under s. 441.16 (2) that confirms their illness or disability. At the request of the property owner or the property owner’s representative, the board may postpone and reschedule a hearing under this subsection, but may not postpone and reschedule a hearing more than once during the same session for the same property. The board at such hearing shall proceed as follows:

SECTION 17. 97.67 (5m) (a) 3. of the statutes is amended to read:

97.67 (5m) (a) 3. A physician assistant licensed under subch. II of ch. 448 461.

SECTION 18. 118.2925 (1) (f) of the statutes is amended to read:

118.2925 (1) (f) “Physician assistant” means a person licensed under s. 448.04 (1) (f) 461.07.

SECTION 19. 146.38 (1) (b) 1. of the statutes is amended to read:

146.38 (1) (b) 1. A person specified in s. 146.81 (1) (a) to (hr), (r), or (s).

SECTION 20. 146.81 (1) (d) of the statutes is amended to read:

146.81 (1) (d) A physician, physician assistant, perfusionist, or respiratory care practitioner licensed or certified under subch. II of ch. 448.

SECTION 21. 146.81 (1) (hr) of the statutes is created to read:

146.81 (1) (hr) A physician assistant licensed under ch. 461.
SECTION 22. 146.81 (1) (i) of the statutes is amended to read:

146.81 (1) (i) A partnership of any providers specified under pars. (a) to (hp) (hr).

SECTION 23. 146.81 (1) (j) of the statutes is amended to read:

146.81 (1) (j) A corporation or limited liability company of any providers specified under pars. (a) to (hp) (hr) that provides health care services.

SECTION 24. 146.82 (3) (a) of the statutes is amended to read:

146.82 (3) (a) Notwithstanding sub. (1), a physician, physician assistant, as defined in s. 448.01 (6), or advanced practice nurse prescriber certified under s. 441.16 (2) who treats a patient whose physical or mental condition in the physician’s, physician assistant’s, or advanced practice nurse prescriber’s judgment affects the patient’s ability to exercise reasonable and ordinary control over a motor vehicle may report the patient’s name and other information relevant to the condition to the department of transportation without the informed consent of the patient.

SECTION 25. 146.89 (1) (r) 1. of the statutes is amended to read:

146.89 (1) (r) 1. Licensed as a physician under ch. 448, a dentist or dental hygienist under ch. 447, a registered nurse, practical nurse, or nurse-midwife under ch. 441, an optometrist under ch. 449, a physician assistant under ch. 448, a pharmacist under ch. 450, a chiropractor under ch. 446, a podiatrist under subch. IV of ch. 448, or a physical therapist under subch. III of ch. 448.

SECTION 26. 146.997 (1) (d) 5. of the statutes is amended to read:

146.997 (1) (d) 5. An occupational therapist, occupational therapy assistant, physician assistant or respiratory care practitioner licensed or certified under ch. 448.

SECTION 27. 146.997 (1) (d) 13m. of the statutes is created to read:
SEC 27. 146.997 (1) (d) 13m. A physician assistant licensed under ch. 461.

SEC 28. 155.01 (7) of the statutes is amended to read:

155.01 (7) “Health care provider” means a nurse licensed or permitted under ch. 441, a chiropractor licensed under ch. 446, a dentist licensed under ch. 447, a physician, physician assistant, perfusionist, podiatrist, physical therapist, physical therapist assistant, occupational therapist, or occupational therapy assistant licensed under ch. 448, a person practicing Christian Science treatment, an optometrist licensed under ch. 449, a psychologist licensed under ch. 455, a physician assistant licensed under ch. 461, a partnership thereof, a corporation or limited liability company thereof that provides health care services, a cooperative health care association organized under s. 185.981 that directly provides services through salaried employees in its own facility, or a home health agency, as defined in s. 50.49 (1) (a).

SEC 29. 180.1901 (1m) (h) of the statutes is created to read:

180.1901 (1m) (h) Physician assistant examining board under ch. 461.

SEC 30. 252.01 (5) of the statutes is repealed.

SEC 31. 252.15 (1) (am) of the statutes is amended to read:

252.15 (1) (am) “Health care professional” means a physician or physician assistant who is licensed under ch. 448 or, a registered nurse or licensed practical nurse who is licensed under ch. 441, or a physician assistant licensed under ch. 461.

SEC 32. 252.15 (1) (ar) 1. of the statutes is amended to read:

252.15 (1) (ar) 1. A person or entity that is specified in s. 146.81 (1) (a) to (hm), (hr), and (i) to (p).

SEC 33. 255.07 (1) (d) of the statutes is amended to read:
255.07 (1) (d) “Health care practitioner” means a physician, a physician assistant licensed under s. 448.04 (1) (f), or an advanced practice nurse who is certified to issue prescription orders under s. 441.16.

SECTION 34. 255.07 (7) of the statutes is amended to read:

255.07 (7) HEALTH CARE PROVIDERS. Nothing in this section prohibits a health care provider, as defined in s. 146.81 (1) (a) to (hr) and (q) to (s), from acting within the scope of practice of the health care provider’s license, certificate, permit, or registration.

SECTION 35. 257.01 (5) (a) of the statutes is amended to read:

257.01 (5) (a) An individual who is licensed as a physician, a physician assistant, or a podiatrist under ch. 448, licensed as a registered nurse, licensed practical nurse, or nurse-midwife under ch. 441, licensed as a dentist under ch. 447, licensed as a pharmacist under ch. 450, licensed as a physician assistant under ch. 461, licensed as a veterinarian or certified as a veterinary technician under ch. 89, or certified as a respiratory care practitioner under ch. 448.

SECTION 36. 257.01 (5) (b) of the statutes is amended to read:

257.01 (5) (b) An individual who was at any time within the previous 10 years, but is not currently, licensed as a physician, a physician assistant, or a podiatrist under ch. 448, licensed as a registered nurse, licensed practical nurse or nurse-midwife, under ch. 441, licensed as a dentist under ch. 447, licensed as a pharmacist under ch. 450, licensed as a physician assistant under ch. 461 or as a physician assistant under ch. 448, 2017 stats., licensed as a veterinarian or certified as a veterinary technician under ch. 89, or certified as a respiratory care practitioner under ch. 448, if the individual’s license or certification was never revoked, limited, suspended, or denied renewal.
SECTION 37. 343.16 (5) (a) of the statutes is amended to read:

343.16 (5) (a) The secretary may require any applicant for a license or any licensed operator to submit to a special examination by such persons or agencies as the secretary may direct to determine incompetency, physical or mental disability, disease, or any other condition that might prevent such applicant or licensed person from exercising reasonable and ordinary control over a motor vehicle. If the department requires the applicant to submit to an examination, the applicant shall pay for the examination. If the department receives an application for a renewal or duplicate license after voluntary surrender under s. 343.265 or receives a report from a physician, physician assistant, as defined in s. 448.01 (6), advanced practice nurse prescriber certified under s. 441.16 (2), or optometrist under s. 146.82 (3), or if the department has a report of 2 or more arrests within a one-year period for any combination of violations of s. 346.63 (1) or (5) or a local ordinance in conformity with s. 346.63 (1) or (5) or a law of a federally recognized American Indian tribe or band in this state in conformity with s. 346.63 (1) or (5), or s. 346.63 (1m), 1985 stats., or s. 346.63 (2) or (6) or 940.25, or s. 940.09 where the offense involved the use of a vehicle, the department shall determine, by interview or otherwise, whether the operator should submit to an examination under this section. The examination may consist of an assessment. If the examination indicates that education or treatment for a disability, disease or condition concerning the use of alcohol, a controlled substance or a controlled substance analog is appropriate, the department may order a driver safety plan in accordance with s. 343.30 (1q). If there is noncompliance with assessment or the driver safety plan, the department shall revoke the person’s operating privilege in the manner specified in s. 343.30 (1q) (d).

SECTION 38. 440.035 (2m) (b) of the statutes is amended to read:
440.035 (2m) (b) The medical examining board, the physician assistant examining board, the podiatry affiliated credentialing board, the board of nursing, the dentistry examining board, or the optometry examining board may issue guidelines regarding best practices in prescribing controlled substances for persons credentialed by that board who are authorized to prescribe controlled substances.

SECTION 39. 440.035 (2m) (c) 1. (intro.) of the statutes is amended to read:

440.035 (2m) (c) 1. (intro.) The medical examining board, the physician assistant examining board, the podiatry affiliated credentialing board, the board of nursing, the dentistry examining board, and the optometry examining board shall, by November 1, 2018, and annually thereafter of each year, submit a report to the persons specified in subd. 2. that does all of the following:

SECTION 40. 448.01 (6) of the statutes is repealed.

SECTION 41. 448.015 (4) (am) 2. of the statutes is amended to read:

448.015 (4) (am) 2. Any act by a physician or physician assistant in violation of ch. 450 or 961.

SECTION 42. 448.02 (1) of the statutes is amended to read:

448.02 (1) LICENSE. The board may grant licenses, including various classes of temporary licenses, to practice medicine and surgery, to practice as an administrative physician, to practice perfusion, and to practice as an anesthesiologist assistant, and to practice as a physician assistant.

SECTION 43. 448.03 (1) (b) of the statutes is repealed.

SECTION 44. 448.03 (2) (a) of the statutes is amended to read:

448.03 (2) (a) Any person lawfully practicing within the scope of a license, permit, registration, certificate or certification granted to practice midwifery under subch. XIII of ch. 440, to practice professional or practical nursing or
nurse-midwifery under ch. 441, to practice chiropractic under ch. 446, to practice
dentistry or dental hygiene under ch. 447, to practice optometry under ch. 449, to
practice acupuncture under ch. 451 or under any other statutory provision, to
practice as a physician assistant under ch. 461, or as otherwise provided by statute.

SECTION 45. 448.03 (2) (e) of the statutes is amended to read:

448.03 (2) (e) Any person other than a physician assistant or an
anesthesiologist assistant who is providing patient services as directed, supervised
and inspected by a physician who has the power to direct, decide and oversee the
implementation of the patient services rendered.

SECTION 46. 448.03 (2) (k) of the statutes is amended to read:

448.03 (2) (k) Any persons, other than physician assistants, anesthesiologist
assistants, or perfusionists, who assist physicians.

SECTION 47. 448.03 (3) (e) of the statutes is repealed.

SECTION 48. 448.03 (5) (b) of the statutes is amended to read:

448.03 (5) (b) No physician or physician assistant shall be liable for any civil
damages for either of the following:

1. Reporting in good faith to the department of transportation under s. 146.82
(3) a patient’s name and other information relevant to a physical or mental condition
of the patient which in the physician’s or physician assistant’s judgment impairs the
patient’s ability to exercise reasonable and ordinary control over a motor vehicle.

2. In good faith, not reporting to the department of transportation under s.
146.82 (3) a patient’s name and other information relevant to a physical or mental
condition of the patient which in the physician’s or physician assistant’s judgment
does not impair the patient’s ability to exercise reasonable and ordinary control over
a motor vehicle.
SECTION 49. 448.035 (2) to (4) of the statutes are amended to read:

448.035 (2) Notwithstanding the requirements of s. 448.30, a physician, physician assistant, or certified advanced practice nurse prescriber may provide expedited partner therapy if the patient is diagnosed as infected with a chlamydial infection, gonorrhea, or trichomoniasis and the patient has had sexual contact with a sexual partner during which the chlamydial infection, gonorrhea, or trichomoniasis may have been transmitted to or from the sexual partner. The physician, physician assistant, or certified advanced practice nurse prescriber shall attempt to obtain the name of the patient’s sexual partner. A prescription order for an antimicrobial drug prepared under this subsection shall include the name and address of the patient’s sexual partner, if known. If the physician, physician assistant, or certified advanced practice nurse prescriber is unable to obtain the name of the patient’s sexual partner, the prescription order shall include, in ordinary bold-faced capital letters, the words, “expedited partner therapy” or the letters “EPT.”

(3) The physician, physician assistant, or certified advanced practice nurse prescriber shall provide the patient with a copy of the information sheet prepared by the department of health services under s. 46.03 (44) and shall request that the patient give the information sheet to the person with whom the patient had sexual contact.

(4) (a) Except as provided in par. (b), a physician, physician assistant, or certified advanced practice nurse prescriber is immune from civil liability for injury to or the death of a person who takes any antimicrobial drug if the antimicrobial drug is prescribed, dispensed, or furnished under this section and if expedited partner therapy is provided as specified under this section.
(b) The immunity under par. (a) does not extend to the donation, distribution, furnishing, or dispensing of an antimicrobial drug by a physician, physician assistant, or certified advanced practice nurse prescriber whose act or omission involves reckless, wanton, or intentional misconduct.

**SECTION 50.** 448.037 (2) (a) (intro.) and (b) and (3) of the statutes are amended to read:

448.037 (2) (a) (intro.) A physician or physician assistant may do any of the following:

(b) A physician or physician assistant who prescribes or delivers an opioid antagonist under par. (a) 1. shall ensure that the person to whom the opioid antagonist is prescribed has or has the capacity to provide the knowledge and training necessary to safely administer the opioid antagonist to an individual undergoing an opioid-related overdose and that the person demonstrates the capacity to ensure that any individual to whom the person further delivers the opioid antagonist has or receives that knowledge and training.

(3) A physician or physician assistant who, acting in good faith, prescribes or delivers an opioid antagonist in accordance with sub. (2), or who, acting in good faith, otherwise lawfully prescribes or dispenses an opioid antagonist, shall be immune from criminal or civil liability and may not be subject to professional discipline under s. 448.02 for any outcomes resulting from prescribing, delivering, or dispensing the opioid antagonist.

**SECTION 51.** 448.038 of the statutes is renumbered 461.038.

**SECTION 52.** 448.04 (1) (f) of the statutes is repealed.

**SECTION 53.** 448.05 (5) of the statutes is repealed.

**SECTION 54.** 448.20 of the statutes is repealed.
SECTION 55. 448.21 of the statutes is repealed.

SECTION 56. 448.40 (2) (f) of the statutes is repealed.

SECTION 57. 448.62 (7) of the statutes is amended to read:

448.62 (7) A physician assistant who is acting under the supervision and
direction of in collaboration with a podiatrist, subject to s. 448.21 (4) as described in
s. 461.10 (2) (a) 1. c. or an individual to whom the physician assistant delegates a task
or order under s. 461.10 (4).

SECTION 58. 448.695 (4) of the statutes is repealed.

SECTION 59. 450.01 (15r) of the statutes is repealed.

SECTION 60. 450.01 (16) (hm) 3. of the statutes is amended to read:

450.01 (16) (hm) 3. The patient's physician assistant, if the physician assistant
is under the supervision of the patient’s personal attending physician.

SECTION 61. 450.10 (3) (a) 5. of the statutes is amended to read:

450.10 (3) (a) 5. A physician, physician assistant, podiatrist, physical
therapist, physical therapist assistant, occupational therapist, or occupational
therapy assistant licensed under ch. 448.

SECTION 62. 450.10 (3) (a) 12. of the statutes is created to read:

450.10 (3) (a) 12. A physician assistant licensed under ch. 461.

SECTION 63. 450.11 (1) of the statutes is amended to read:

450.11 (1) DISPENSING. Except as provided in sub. (1i) (b) 2., no person may
dispense any prescribed drug or device except upon the prescription order of a
practitioner. All prescription orders shall, except as provided in sub. (1a), specify the
date of issue, the name and address of the practitioner, the name and quantity of the
drug product or device prescribed, directions for the use of the drug product or device,
the symptom or purpose for which the drug is being prescribed if required under sub.
(4) (a) 8., and, if the order is written by the practitioner, the signature of the practitioner. Except as provided in ss. 118.2925 (3), 255.07 (2), 441.18 (2) (a) 1., 448.035 (2), and 448.037 (2) (a) 1., 461.035 (2), and 461.037 (2) (a) 1., and except for standing orders issued under s. 441.18 (2) (a) 2. or 448.037 (2) (a) 2. or 461.037 (2) (a) 2., all prescription orders shall also specify the name and address of the patient. A prescription order issued under s. 118.2925 (3) shall specify the name and address of the school. A prescription order issued under s. 255.07 (2) shall specify the name and address of the authorized entity or authorized individual. Any oral prescription order shall be immediately reduced to writing by the pharmacist and filed according to sub. (2).

SECTION 64. 450.11 (1g) (b) of the statutes is amended to read:

450.11 (1g) (b) A pharmacist may, upon the prescription order of a practitioner providing expedited partner therapy, as specified in s. 448.035 or 461.035, that complies with the requirements of sub. (1), dispense an antimicrobial drug as a course of therapy for treatment of chlamydial infections, gonorrhea, or trichomoniasis to the practitioner’s patient or a person with whom the patient has had sexual contact for use by the person with whom the patient has had sexual contact. The pharmacist shall provide a consultation in accordance with rules promulgated by the board for the dispensing of a prescription to the person to whom the antimicrobial drug is dispensed. A pharmacist providing a consultation under this paragraph shall ask whether the person for whom the antimicrobial drug has been prescribed is allergic to the antimicrobial drug and advise that the person for whom the antimicrobial drug has been prescribed must discontinue use of the antimicrobial drug if the person is allergic to or develops signs of an allergic reaction to the antimicrobial drug.
SECTION 65. 450.11 (1i) (a) 1. of the statutes is amended to read:

450.11 (1i) (a) 1. A pharmacist may, upon and in accordance with the prescription order of an advanced practice nurse prescriber under s. 441.18 (2) (a) 1., or of a physician or physician assistant under s. 448.037 (2) (a) 1., or of a physician assistant under s. 461.037 (2) (a) 1. that complies with the requirements of sub. (1), deliver an opioid antagonist to a person specified in the prescription order and may, upon and in accordance with the standing order of an advanced practice nurse prescriber under s. 441.18 (2) (a) 2., or of a physician or physician assistant under s. 448.037 (2) (a) 2., or of a physician assistant under s. 461.037 (2) (a) 2. that complies with the requirements of sub. (1), deliver an opioid antagonist to an individual in accordance with the order. The pharmacist shall provide a consultation in accordance with rules promulgated by the board for the delivery of a prescription to the person to whom the opioid antagonist is delivered.

SECTION 66. 450.11 (1i) (b) 2. c. of the statutes is amended to read:

450.11 (1i) (b) 2. c. A physician or physician assistant may only deliver or dispense an opioid antagonist in accordance with s. 448.037 (2) or in accordance with his or her other legal authority to dispense prescription drugs.

SECTION 67. 450.11 (1i) (b) 2. cm. of the statutes is created to read:

450.11 (1i) (b) 2. cm. A physician assistant may only deliver or dispense an opioid antagonist in accordance with s. 461.037 (2) or in accordance with his or her other legal authority to dispense prescription drugs.

SECTION 68. 450.11 (1i) (c) 2. of the statutes is amended to read:

450.11 (1i) (c) 2. Subject to par. (a) 2. and ss. 441.18 (3) and 448.037 (3), and 461.037 (3), any person who, acting in good faith, delivers or dispenses an opioid
antagonist to another person shall be immune from civil or criminal liability for any
outcomes resulting from delivering or dispensing the opioid antagonist.

SECTION 69. 450.11 (8) (b) of the statutes is amended to read:

450.11 (8) (b) The medical examining board, insofar as this section applies to
physicians and physician assistants.

SECTION 70. 450.11 (8) (f) of the statutes is created to read:

450.11 (8) (f) The physician assistant examining board, insofar as this section
applies to physician assistants.

SECTION 71. Chapter 461 of the statutes is created to read:

CHAPTER 461
PHYSICIAN ASSISTANTS

461.01 Definitions. In this chapter, unless the context requires otherwise:

(1) “Board” means the physician assistant examining board.

(2) “Disease” means any pain, injury, deformity, or physical or mental illness
or departure from complete health or the proper condition of the human body or any
of its parts.

(3) “Physician assistant” means a person licensed under this chapter.

(4) “Podiatrist” has the meaning given in s. 448.60 (3).

(5) “Podiatry” has the meaning given in s. 448.60 (4).

(6) “Practice of medicine and surgery” has the meaning given in s. 448.01 (9).

461.03 License required; exceptions. (1) Except as provided in subs. (2)
and (3), no person may represent himself or herself as a “PA,” “physician assistant,”
“physician associate,” or “associate physician,” use or assume the title “PA,”
“physician assistant,” “physician associate,” or “associate physician,” or append to
the person’s name the words or letters “physician assistant,” “physician associate,”
“associate physician,” “PA,” “PA-C,” or any other titles, letters, or designation that represents or may tend to represent the person as a physician assistant, unless he or she is licensed by the board under this chapter.

(2) Subsection (1) does not apply with respect to any of the following:

(a) An individual employed and duly credentialed as a physician assistant or physician associate by the federal government while performing duties incident to that employment, unless a license under this chapter is required by the federal government.

(b) A person who satisfies the requirement under s. 461.07 (1) (a) 3. but who is not licensed under this chapter. This paragraph does not allow such a person to practice medicine and surgery in violation of s. 448.03 (1) (a) or to practice podiatry in violation of s. 448.61.

(3) A student who is enrolled in an accredited physician assistant educational program may use the title “physician assistant student,” “PA student,” or “PA-S.”

461.035 Expedited partner therapy. (1) In this section:

(b) “Antimicrobial drug” has the meaning given in s. 448.035 (1) (b).

(c) “Expedited partner therapy” has the meaning given in s. 448.035 (1) (c).

(2) Notwithstanding the requirements of s. 461.40, a physician assistant may provide expedited partner therapy if a patient is diagnosed as infected with a chlamydial infection, gonorrhea, or trichomoniasis and the patient has had sexual contact with a sexual partner during which the chlamydial infection, gonorrhea, or trichomoniasis may have been transmitted to or from the sexual partner. The physician assistant shall attempt to obtain the name of the patient’s sexual partner. A prescription order for an antimicrobial drug prepared under this subsection shall include the name and address of the patient’s sexual partner, if known. If the
physician assistant is unable to obtain the name of the patient’s sexual partner, the
prescription order shall include, in ordinary, bold-faced capital letters, the words,
“expedited partner therapy” or the letters “EPT.”

(3) The physician assistant shall provide the patient with a copy of the
information sheet prepared by the department of health services under s. 46.03 (44)
and shall request that the patient give the information sheet to the person with
whom the patient had sexual contact.

(4) (a) Except as provided in par. (b), a physician assistant is immune from civil
liability for injury to or the death of a person who takes any antimicrobial drug if the
antimicrobial drug is prescribed, dispensed, or furnished under this section and if
expedited partner therapy is provided as specified under this section.

(b) The immunity under par. (a) does not extend to the donation, distribution,
furnishing, or dispensing of an antimicrobial drug by a physician assistant whose act
or omission involves reckless, wanton, or intentional misconduct.

461.037 Prescriptions for and delivery of opioid antagonists. (1) In this
section:

(a) “Administer” has the meaning given in s. 450.01 (1).

(b) “Deliver” has the meaning given in s. 450.01 (5).

(c) “Dispense” has the meaning given in s. 450.01 (7).

(d) “Opioid antagonist” has the meaning given in s. 450.01 (13v).

(e) “Opioid-related drug overdose” has the meaning given in s. 256.40 (1) (d).

(f) “Standing order” has the meaning given in s. 450.01 (21p).

(2) (a) A physician assistant may do any of the following:

1. Prescribe an opioid antagonist to a person in a position to assist an individual
at risk of undergoing an opioid-related drug overdose and may deliver the opioid
antagonist to that person. A prescription order under this subdivision need not specify the name and address of the individual to whom the opioid antagonist will be administered, but shall instead specify the name of the person to whom the opioid antagonist is prescribed.

2. Issue a standing order to one or more persons authorizing the dispensing of an opioid antagonist.

(b) A physician assistant who prescribes or delivers an opioid antagonist under par. (a) 1. shall ensure that the person to whom the opioid antagonist is prescribed has or has the capacity to provide the knowledge and training necessary to safely administer the opioid antagonist to an individual undergoing an opioid-related overdose and that the person demonstrates the capacity to ensure that any individual to whom the person further delivers the opioid antagonist has or receives that knowledge and training.

(3) A physician assistant who, acting in good faith, prescribes or delivers an opioid antagonist in accordance with sub. (2) or who, acting in good faith, otherwise lawfully prescribes or dispenses an opioid antagonist shall be immune from criminal or civil liability and may not be subject to professional discipline under s. 461.30 for any outcomes resulting from prescribing, delivering, or dispensing the opioid antagonist.

461.05 Powers and duties of board. (1) (a) The board shall promulgate rules implementing s. 461.40.

(b) The board shall promulgate rules establishing continuing education requirements for physician assistants.

(c) The board may promulgate other rules to carry out the purposes of this chapter, including any of the following:
1. Rules defining what constitutes unprofessional conduct for physician assistants for purposes of s. 461.30 (2) (d).

2. Rules under s. 461.12 (2).

(2) The board shall include in the register the board maintains under s. 440.035 (1m) (d) the names of all persons whose licenses issued under this chapter were suspended or revoked within the past 2 years. The register shall be available for purchase at cost.

461.07 License; renewal. (1) (a) Except as provided in par. (b), the board shall grant an initial license to practice as a physician assistant to any applicant who is found qualified by three-fourths of the members of the board and satisfies all of the following requirements, as determined by the board:

1. The applicant submits an application on a form provided by the department and pays the initial credential fee determined by the department under s. 440.03 (9) (a).

2. The applicant is at least 18 years of age.

3. The applicant provides evidence of one of the following:

a. That the applicant has successfully completed an educational program for physician assistants or physician associates that is accredited by the Accreditation Review Commission on Education for the Physician Assistant or its successor or, prior to 2001, by the Committee on Allied Health Education and Accreditation or the Commission on Accreditation of Allied Health Education Programs.

b. If the applicant does not satisfy subd. 3. a., that the applicant, prior to January 1, 1986, successfully passed the Physician Assistant National Certifying Examination administered by the National Commission on Certification of Physician Assistants.
4. The applicant passes the National Commission on Certification of Physician Assistants examination or an equivalent national examination adopted by the board.

5. The applicant provides a listing with all employers, practice settings, internships, residencies, fellowships, and other employment for the past 7 years.

6. Subject to ss. 111.321, 111.322, and 111.335, the applicant does not have an arrest or conviction record.

(b) Paragraph (a) 3. does not apply to an applicant if the applicant provides evidence that he or she is licensed as a physician assistant or physician associate in another state, the District of Columbia, Puerto Rico, the United States Virgin Islands, or any territory or insular possession subject to the jurisdiction of the United States and the board determines that the requirements for obtaining the license in that state or territory are substantially equivalent to the requirements under par. (a).

(2) (a) The renewal date for a license issued under this chapter is specified under s. 440.08 (2) (a), and the renewal fees for such licenses are determined by the department under s. 440.03 (9) (a). Renewal of a license is subject to par. (b).

(b) An applicant for the renewal of a license under this chapter shall submit with his or her application for renewal proof of having satisfied the continuing education requirements imposed by the board under s. 461.05 (1) (b). This paragraph does not apply to an applicant for renewal of a license that expires on the first renewal date after the date on which the board initially granted the license.

(3) Notwithstanding sub. (1), an individual who, on the effective date of this subsection .... [LRB inserts date], was licensed by the medical examining board as a physician assistant under subch. II of ch. 448, 2017 stats., shall be considered to have been licensed under sub. (1) for purposes of this chapter.
461.10 Practice and employment. (1) (a) Subject to the limitations and requirements under sub. (2); the physician assistant’s experience, education, and training; and any rules promulgated under sub. (5), a physician assistant may do any of the following:

1. Examine into the fact, condition, or cause of human health or disease, or treat, operate, prescribe, or advise for the same, by any means or instrumentality.

2. Apply principles or techniques of medical sciences in the diagnosis or prevention of any of the conditions described in subd. 1. and in s. 461.01 (2).

3. Penetrate, pierce, or sever the tissues of a human being.

4. Offer, undertake, attempt, or hold oneself out in any manner as able to do any of the acts described in this paragraph.

(b) Subject to any rules promulgated by the board and consistent with his or her experience, education, and training, a physician assistant may order, prescribe, procure, dispense, and administer prescription drugs, medical devices, services, and supplies.

(c) A physician assistant may practice in ambulatory care, acute care, long-term care, home care, or other settings as a primary, specialty, or surgical care provider who may serve as a patient’s primary care provider or specialty care provider.

(2) (a) 1. Except as provided in subd. 3. and sub. (5) (a) or (b), a physician assistant who provides care to patients shall maintain and provide to the board upon request one of the following:

a. Evidence that, pursuant to the physician assistant’s employment, there is a physician who is primarily responsible for the overall direction and management of the physician assistant’s professional activities and for assuring that the services
provided by the physician assistant are medically appropriate. In this subd. 1. a., “employment” includes an arrangement between the physician assistant and a 3rd party in which the 3rd party receives payment for services provided by the physician assistant.

b. A written collaborative agreement with a physician that describes the physician assistant’s individual scope of practice and that includes other information as required by the board.

c. If the physician assistant’s practice is limited to the practice of podiatry, a written collaborative agreement with a podiatrist or physician that describes the physician assistant’s individual scope of podiatry practice and that includes other information as required by the board.

2. Subdivision 1. does not require the physical presence of a physician or podiatrist at the time and place a physician assistant renders a service.

3. Subdivision 1. does not apply with respect to a physician assistant who is employed by the federal government as a civilian or member of the uniformed services while performing duties incident to that employment or service.

(b) A physician assistant shall limit his or her practice to the scope of his or her experience, education, and training.

(c) No physician assistant may provide medical care, except routine screening and emergency care, in any of the following:

1. The practice of dentistry or dental hygiene within the meaning of ch. 447.

2. The practice of optometry within the meaning of ch. 449.

3. The practice of chiropractic within the meaning of ch. 446.

(3) (a) It shall be the obligation of a physician assistant to ensure all of the following:

1. That the scope of the practice of a physician assistant is identified and is appropriate with respect to his or her experience, education, and training.

2. For purposes of sub. (2) (a) 1. b. and c., that the relationship with and access to a collaborating physician or podiatrist by the physician assistant is defined.

3. That the requirements and standards of licensure under this chapter are complied with.

4. That consultation with and referral to other licensed health care providers with a scope of practice appropriate for a patient’s care needs occurs when the patient’s care needs exceed the physician assistant’s experience, education, or training. A physician assistant shall ensure that he or she has awareness of options for the management of situations that are beyond the physician assistant’s expertise.

(b) A physician assistant is individually and independently responsible for the quality of the care he or she renders.

(4) A physician assistant may delegate a care task or order to another clinically trained health care worker if the physician assistant is competent to perform the delegated task or order and has reasonable evidence that the clinically trained health care worker is minimally competent to perform the task or issue the order under the circumstances.

(5) The board shall promulgate any rules necessary to implement this section, including rules to do any of the following:

(a) Allow for temporary practice, specifically defined and actively monitored by the board, in the event of an interruption of a collaborative relationship under sub.

(2) (a) 1. b. or c.
(b) Allow a physician assistant, in the absence of an employment or collaborative relationship under sub. (2) (a) 1., to provide medical care at the scene of an emergency, during a declared state of emergency or other disaster, or when volunteering at sporting events or at camps.

(6) The practice permissions provided in this section are permissions granted by the state authorizing the licensed practice of physician assistants. Nothing in this section prohibits an employer, hospital, health plan, or other similar entity employing or with a relationship with a licensed physician assistant from establishing additional requirements for a licensed physician assistant as a condition of employment or relationship.

461.11 Civil liability. No physician assistant shall be liable for any civil damages for either of the following:

(1) Reporting in good faith to the department of transportation under s. 146.82 (3) a patient’s name and other information relevant to a physical or mental condition of the patient that in the physician assistant’s judgment impairs the patient’s ability to exercise reasonable and ordinary control over a motor vehicle.

(2) In good faith, not reporting to the department of transportation under s. 146.82 (3) a patient’s name and other information relevant to a physical or mental condition of the patient that in the physician assistant’s judgment does not impair the patient’s ability to exercise reasonable and ordinary control over a motor vehicle.

461.12 Malpractice liability insurance. (1) Except as provided in subs. (2) and (3), no physician assistant may practice as authorized under s. 461.10 unless he or she has in effect malpractice liability insurance coverage evidenced by one of the following:
(a) Personal liability coverage in the amounts specified for health care providers under s. 655.23 (4).

(b) Coverage under a group liability policy providing individual coverage for the physician assistant in the amounts under s. 655.23 (4).

(2) The board may promulgate rules requiring a practicing physician assistant to have in effect malpractice liability insurance coverage in amounts greater than those specified in sub. (1) (a) or (b) or (4). If the board promulgates rules under this subsection, no physician assistant may practice as authorized under s. 461.10 unless he or she has in effect malpractice liability insurance coverage as required under those rules, except as provided in sub. (3).

(3) A physician assistant who is a state, county, or municipal employee, or federal employee or contractor covered under the federal tort claims act, as amended, and who is acting within the scope of his or her employment or contractual duties is not required to maintain in effect malpractice insurance coverage.

(4) Except as provided in subs. (2) and (3), a physician assistant may comply with sub. (1) if the physician assistant’s employer has in effect malpractice liability insurance that is at least the minimum amount specified under s. 655.23 (4) and that provides coverage for claims against the physician assistant.

461.30 Professional discipline. (1) Subject to the rules promulgated under s. 440.03 (1), the board may conduct investigations and hearings to determine whether a person has violated this chapter or a rule promulgated under this chapter.

(2) Subject to the rules promulgated under s. 440.03 (1), if a person who applies for or holds a license issued under s. 461.07 does any of the following, the board may reprimand the person or deny, limit, suspend, or revoke the person’s license:
(a) Makes a material misstatement in an application for a license or an application for renewal of a license under s. 461.07.

(b) Violates any law of this state or federal law that substantially relates to the practice of a physician assistant, violates this chapter, or violates a rule promulgated under this chapter.

(c) Advertises, practices, or attempts to practice under another person’s name.

(d) Engages in unprofessional conduct. In this paragraph, “unprofessional conduct” does not include any of the following:

1. Providing expedited partner therapy as described in s. 461.035.

2. Prescribing or delivering an opioid antagonist in accordance with s. 461.037 (2).

(e) Subject to ss. 111.321, 111.322, and 111.335, is arrested for or convicted of a felony.

(f) Subject to ss. 111.321, 111.322, and 111.34, practices as a physician assistant while his or her ability is impaired by alcohol or other drugs.

(g) Engages in fraud or deceit in obtaining or using his or her license.

(h) Is adjudicated mentally incompetent by a court.

(i) Demonstrates gross negligence, incompetence, or misconduct in practice.

(j) Knowingly, recklessly, or negligently divulges a privileged communication or other confidential patient health care information except as required or permitted by state or federal law.

(k) Fails to cooperate with the board, or fails to timely respond to a request for information by the board, in connection with an investigation under this section.

(L) Prescribes, sells, administers, distributes, orders, or provides a controlled substance for a purpose other than a medical purpose.
(m) Demonstrates a lack of physical or mental ability to safely practice as a physician assistant.

(n) Engages in any practice that is outside the scope of his or her experience, education, or training.

(o) Is disciplined or has been disciplined by another state or jurisdiction based upon acts or conduct similar to acts or conduct prohibited under pars. (a) to (n).

461.40 Informed consent. Any physician assistant who treats a patient shall inform the patient about the availability of reasonable alternate medical modes of treatment and about the benefits and risks of these treatments. The reasonable physician assistant standard is the standard for informing a patient under this section. The reasonable physician assistant standard requires disclosure only of information that a reasonable physician assistant in the same or a similar medical specialty would know and disclose under the circumstances. The physician assistant’s duty to inform the patient under this section does not require disclosure of any of the following:

(1) Detailed technical information that in all probability a patient would not understand.

(2) Risks apparent or known to the patient.

(3) Extremely remote possibilities that might falsely or detrimentally alarm the patient.

(4) Information in emergencies where failure to provide treatment would be more harmful to the patient than treatment.

(5) Information in cases where the patient is incapable of consenting.
(6) Information about alternate medical modes of treatment for any condition
the physician assistant has not included in his or her diagnosis at the time the
physician informs the patient.

461.50 Penalties. Any person who violates this chapter is subject to a fine not
to exceed $10,000 or imprisonment not to exceed 9 months, or both.

461.51 Injunction. If it appears upon complaint to the board by any person
or if it is known to the board that any person is violating this subchapter, or rules
adopted by the board under this subchapter, the board or the attorney general may
investigate and may, in addition to any other remedies, bring action in the name and
on behalf of the state against any such person to enjoin such person from such
violation. The attorney general shall represent the board in all proceedings.

461.52 Duty to report. (1) A physician assistant who has reason to believe
any of the following about another physician assistant shall promptly submit a
written report to the board that includes facts relating to the conduct of the other
physician assistant:

(a) The other physician assistant is engaging or has engaged in acts that
constitute a pattern of unprofessional conduct.

(b) The other physician assistant is engaging or has engaged in an act that
creates an immediate or continuing danger to one or more patients or to the public.

(c) The other physician assistant is or may be medically incompetent.

(d) The other physician assistant is or may be mentally or physically unable
safely to engage in the practice of a physician assistant.

(2) No physician assistant who reports to the board under sub. (1) may be held
civilly or criminally liable or be found guilty of unprofessional conduct for reporting
in good faith.
SECTION 72. 462.02 (2) (e) of the statutes is amended to read:

462.02 (2) (e) A physician assistant licensed under s. 448.04 (1) (f) 461.07.

SECTION 73. 462.04 of the statutes is amended to read:

462.04 Prescription or order required. A person who holds a license or limited X-ray machine operator permit under this chapter may not use diagnostic X-ray equipment on humans for diagnostic purposes unless authorized to do so by prescription or order of a physician licensed under s. 448.04 (1) (a), a dentist licensed under s. 447.04 (1), a podiatrist licensed under s. 448.63, a chiropractor licensed under s. 446.02, an advanced practice nurse certified under s. 441.16 (2), a physician assistant licensed under s. 448.04 (1) (f) 461.07, or, subject to s. 448.56 (7) (a), a physical therapist licensed under s. 448.53.

SECTION 74. 895.48 (1m) (a) (intro.) of the statutes is amended to read:

895.48 (1m) (a) (intro.) Except as provided in par. (b), any physician, physician assistant, podiatrist, or athletic trainer licensed under ch. 448, chiropractor licensed under ch. 446, dentist licensed under ch. 447, physician assistant licensed under ch. 461, emergency medical services practitioner licensed under s. 256.15, emergency medical responder certified under s. 256.15 (8), registered nurse licensed under ch. 441, or a massage therapist or bodywork therapist licensed under ch. 460 who renders voluntary health care to a participant in an athletic event or contest sponsored by a nonprofit corporation, as defined in s. 66.0129 (6) (b), a private school, as defined in s. 115.001 (3r), a tribal school, as defined in s. 115.001 (15m), a public agency, as defined in s. 46.856 (1) (b), or a school, as defined in s. 609.655 (1) (c), is immune from civil liability for his or her acts or omissions in rendering that care if all of the following conditions exist:

SECTION 75. 961.01 (19) (a) of the statutes is amended to read:
961.01 (19) (a) A physician, advanced practice nurse, dentist, veterinarian, podiatrist, optometrist, scientific investigator or, subject to s. 448.21 (3), a physician assistant, or other person licensed, registered, certified or otherwise permitted to distribute, dispense, conduct research with respect to, administer, or use in teaching or chemical analysis a controlled substance in the course of professional practice or research in this state.

**SECTION 76.** 971.14 (4) (a) of the statutes is amended to read:

971.14 (4) (a) The court shall cause copies of the report to be delivered forthwith to the district attorney and the defense counsel, or the defendant personally if not represented by counsel. Upon the request of the sheriff or jailer charged with care and control of the jail in which the defendant is being held pending or during a trial or sentencing proceeding, the court shall cause a copy of the report to be delivered to the sheriff or jailer. The sheriff or jailer may provide a copy of the report to the person who is responsible for maintaining medical records for inmates of the jail, or to a nurse licensed under ch. 441, to a physician assistant licensed under ch. 461, or to a physician or physician assistant licensed under subch. II of ch. 448 who is a health care provider for the defendant or who is responsible for providing health care services to inmates of the jail. The report shall not be otherwise disclosed prior to the hearing under this subsection.

**SECTION 77.** 990.01 (27s) of the statutes is created to read:

990.01 (27s) **Physician assistant or physician associate.** “Physician assistant” or “physician associate” means a person licensed as a physician assistant under ch. 461.

**SECTION 78.** Chapter Med 8 of the administrative code is repealed.

**SECTION 79.** Nonstatutory provisions.
(1) BOARD; APPOINTMENTS.

(a) Notwithstanding the length of terms specified for the members of the physician assistant examining board under s. 15.405 (4), 3 of the initial members under s. 15.405 (4) (a) 1. and the initial member under s. 15.405 (4) (a) 2. shall be appointed for terms expiring on July 1, 2021; 3 of the initial members under s. 15.405 (4) (a) 1. and the initial member under s. 15.405 (4) (a) 3. shall be appointed for terms expiring on July 1, 2022; and the remaining initial member under s. 15.405 (4) (a) 1. shall be appointed for a term expiring on July 1, 2023.

(b) Notwithstanding s. 15.08 (1), the governor may provisionally appoint initial members of the physician assistant examining board under s. 15.405 (4). Those provisional appointments remain in force until withdrawn by the governor or acted upon by the senate and if confirmed by the senate, shall continue for the remainder of the unexpired term, if any, of the member and until a successor is chosen and qualifies. A provisional appointee may exercise all the powers and duties of board membership to which the person is appointed during the time in which the appointee qualifies.

(c) Notwithstanding s. 15.405 (4) (a) 1. and 2., for purposes of an initial appointment to the physician assistant examining board made before the date specified in SECTION 80 (intro.) of this act, including any provisional appointment made under par. (b), the governor may appoint physician assistants licensed under subch. II of ch. 448 to the positions on the board specified under s. 15.405 (4) (a) 1. and 2.

(2) EMERGENCY RULES.

(a) Using the procedure under s. 227.24, the physician assistant examining board may promulgate initial rules under ss. 461.05 (1) and 461.10 (5) as emergency
rules under s. 227.24 to allow for the licensure, discipline, and practice of physician
assistants. The authority granted under this subsection applies only to rules
described in this paragraph, and any other emergency rules promulgated by the
board shall be as provided in, and subject to, s. 227.24.

(b) Notwithstanding s. 227.24 (1) (a) and (3), the physician assistant examining
board is not required to provide evidence that promulgating a rule under this
subsection as an emergency rule is necessary for the preservation of the public peace,
health, safety, or welfare and is not required to provide a finding of emergency for a
rule promulgated under this subsection.

(c) Emergency rules promulgated under this subsection may not take effect
prior to the date specified in Section 80 (intro.) of this act.

(d) Notwithstanding s. 227.24 (1) (c), emergency rules promulgated under this
subsection remain in effect for one year, subject to extension under par. (e), or until
the date on which permanent rules take effect, whichever is sooner.

(e) Notwithstanding s. 227.24 (2) (a), the joint committee for review of
administrative rules may, at any time prior to the expiration date of the emergency
rule promulgated under this subsection, extend the effective period of the emergency
rule at the request of the physician assistant examining board for a period specified
by the committee not to exceed 180 days. Any number of extensions may be granted
under this paragraph, but the total period for all extensions may not extend beyond
the expiration date of the emergency rule's statement of scope under s. 227.135 (5).

Notwithstanding s. 227.24 (2) (b) 1., the physician assistant examining board is not
required to provide evidence that there is a threat to the public peace, health, safety,
or welfare that can be avoided only by extension of the emergency rule when making
a request for an extension under this subsection, but s. 227.24 (2) (am) to (c) shall otherwise apply to extensions under this paragraph.

(f) If the physician assistant examining board promulgates emergency rules under this subsection, the board shall submit a single statement of scope for both permanent emergency rules.

(3) Board; transfers.

(a) **Tangible personal property.** On the effective date of this paragraph, all tangible personal property, including records, of the medical examining board that the secretary of safety and professional services determines to be primarily related to the regulation of physician assistants is transferred to the physician assistant examining board.

(b) **Pending matters.** Any matter pending with the medical examining board on the effective date of this paragraph that is primarily related to the regulation of physician assistants, as determined by the secretary of safety and professional services, is transferred to the physician assistant examining board. All materials submitted to or actions taken by the medical examining board with respect to the pending matter are considered as having been submitted to or taken by the physician assistant examining board.

(c) **Contracts.** All contracts entered into by the medical examining board in effect on the effective date of this paragraph that are primarily related to the regulation of physician assistants, as determined by the secretary of safety and professional services, remain in effect and are transferred to the physician assistant examining board. The physician assistant examining board shall carry out any obligations under such a contract until the contract is modified or rescinded by the physician assistant examining board to the extent allowed under the contract.
(d) Assets and liabilities. On the effective date of this paragraph, the assets and liabilities of the medical examining board that are primarily related to the regulation of physician assistants, as determined by the secretary of safety and professional services, become the assets and liabilities of the physician assistant examining board.

(e) Orders. All orders issued by the medical examining board in effect on the effective date of this paragraph that are primarily related to the regulation of physician assistants remain in effect until their specified expiration dates or until modified or rescinded by the physician assistant examining board.

SECTION 80. Effective dates. This act takes effect on the first day of the 13th month beginning after publication, except as follows:

(1) The treatment of s. 15.405 (4) and SECTION 79 (1) and (2) of this act take effect on the day after publication.

(2) Notwithstanding s. 227.265, the treatment of ch. Med 8 of the administrative code takes effect on the first day of the 13th month beginning after publication.