

# SENATE BILL REPORT

## SHB 1737

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As Reported by Senate Committee On:  
Health Care, March 28, 2013

**Title:** An act relating to supervision of physician assistants.

**Brief Description:** Concerning supervision of physician assistants.

**Sponsors:** House Committee on Health Care & Wellness (originally sponsored by Representatives Morrell, Manweller, Clibborn and Moeller).

**Brief History:** Passed House: 3/11/13, 97-0.

**Committee Activity:** Health Care: 3/27/13, 3/28/13 [DP].

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### SENATE COMMITTEE ON HEALTH CARE

**Majority Report:** Do pass.

Signed by Senators Becker, Chair; Dammeier, Vice Chair; Keiser, Ranking Member; Bailey, Cleveland, Ericksen, Frockt, Parlette and Schlicher.

**Staff:** Kathleen Buchli (786-7488)

**Background:** The Board of Osteopathic Medicine and Surgery (Board) regulates the practice of osteopathic medicine by osteopathic physicians and physician assistants. An osteopathic physician assistant (OPA) is a person who has satisfactorily completed a Board-approved training program designed to prepare that person to practice osteopathic medicine to a limited extent. An OPA may not practice osteopathic medicine until a practice arrangement plan is approved. A practice arrangement plan delineates the manner and extent to which the OPA will practice and be supervised, and must jointly be submitted by the osteopathic physician or physician group and the OPA. An OPA also may not be employed or supervised by an osteopathic physician without approval of the Board. An OPA may practice medicine only to the extent permitted by the Board in a manner consistent with the approved practice arrangement plan.

The Medical Quality Assurance Commission (MQAC) regulates the quality of health care provided by physicians and physician assistants. A physician assistant (PA) is a person who is licensed by MQAC to practice medicine to a limited extent and who is academically and clinically prepared to provide health care services and perform diagnostic, therapeutic, preventative, and health maintenance services. A PA practices medicine under the

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supervision of a physician, but a PA cannot be employed or supervised by a physician or physician group without MQAC's approval. Before practicing, a PA must apply to MQAC for permission to be employed or supervised by a physician or physician group. A practice arrangement plan must be jointly submitted by the physician or physician group and the PA. A PA may practice medicine only to the extent permitted by MQAC in a manner consistent with the approved practice arrangement plan.

Osteopathic physicians may supervise three OPAs, and the Board may consider requests to supervise more than three OPAs, based on several factors including the individual's qualification and experience. Similarly, a physician may not serve as primary supervisor or sponsor for more than three PAs without authorization by MQAC. OPAs and PAs may be used at remote practice sites if approved by the relevant governing authority based upon need; adequate means for immediate communication between the osteopathic physician or physician and the OPA or PA; supervision; and the names of the supervising osteopathic physician or physician and OPA or PA being prominently displayed at the entrance of the site or reception area.

**Summary of Bill:** OPAs and PAs cannot be used at a remote site without the approval of their respective regulating bodies. A remote site is defined as a setting physically separate from the sponsoring or supervising physician's primary place for meeting patients or a setting where the physician is present less than 25 percent of the practice time of the OPA or the PA. Approval may be granted for the use of an OPA or a PA at a remote site if there is a demonstrated need; adequate ability for timely communication between the physician and the OPA or the PA; the responsible sponsoring or supervising physician spends at least 10 percent of the practice time of the OPA or the PA in the remote site, unless the sponsoring physician can demonstrate that adequate supervision is being maintained by an alternate method; and the names of the sponsoring or supervising physician and the OPA or the PA is prominently displayed at the entrance to the remote site. No OPA or PA with an interim permit may be utilized at a remote site.

An osteopathic physician or a physician may enter into a delegation agreement with up to five PAs, but may petition their respective regulating bodies for a waiver of the limit. An osteopathic physician or physician may not supervise more PAs than that physician can adequately supervise.

MQAC and the Board must work in collaboration with a statewide organization that represents the interests of PAs to modernize the current rules regulating PAs and report to the Legislature by December 31, 2014. The practice arrangement plan required for approval before a PA can practice is changed to be referred to as a delegation agreement.

**Appropriation:** None.

**Fiscal Note:** Available.

**Committee/Commission/Task Force Created:** No.

**Effective Date:** Ninety days after adjournment of session in which bill is passed.

**Staff Summary of Public Testimony:** PRO: This will permit physicians to supervise more PAs. This modernizes laws on PAs. Thirty-seven other states increased the number of PAs a physician may supervise and did not see an increase in their liability insurance. Supervision can be through telemedicine, which allows remote site supervision. Increasing the number of PAs a physician may supervise also benefits large institutions and will help address workforce shortages. This will require the Department of Health to undergo the rulemaking process and modernize their rules and will prepare the state for the implementation of health care expansion.

**Persons Testifying:** PRO: Representative Morrell, prime sponsor; Linda Dale, Lyle Larson, WA Academy of PAs; Carl Nelson, WA Academy of PAs, WA State Medical Assn.