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PERMANENT ADMINISTRATIVE ORDER

OMB 7-2024

CHAPTER 847
OREGON MEDICAL BOARD

FILED

01/08/2024 4:24 PM
ARCHIVES DIVISION
SECRETARY OF STATE
& LEGISLATIVE COUNSEL

FILING CAPTION: Implementing HB 2584 (2023) and HB 3036 (2021) shifting physician assistants to collaborative practice model.

EFFECTIVE DATE: 01/08/2024

AGENCY APPROVED DATE: 01/04/2024

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RULES:

847-050-0010, 847-050-0027, 847-050-0029, 847-050-0035, 847-050-0036, 847-050-0037, 847-050-0038, 847-050-0040, 847-050-0041, 847-050-0046, 847-050-0050, 847-050-0080, 847-050-0082

AMEND: 847-050-0010

RULE TITLE: Definitions

NOTICE FILED DATE: 10/18/2023

RULE SUMMARY: The Oregon Legislator passed HB 2584 (2023) to fully implement physician assistant (PA) collaborative practice created in HB 3036 (2021). The bill updates the employer definition for collaboration agreements. Additionally, all PAs were required to enter into a collaboration agreement by December 31, 2023. Practice agreements and practice descriptions are no longer valid on January 1, 2024. The rule amendments align with these updates.

RULE TEXT:

As used in OAR 847-050-0010 to 847-050-0082:

- (1) "Board" means the Oregon Medical Board for the State of Oregon.
- (2) "Collaboration" has the meaning given in ORS 677.495, as indicated by the patient's condition, community standards of care and a physician assistant's education, training and experience:
 - (a) Consultation between the physician assistant and a physician; or
 - (b) Referral by the physician assistant to a physician.
- (3) "Collaboration agreement" has the meaning given in ORS 677.495, a written agreement that describes the manner in which the physician assistant collaborates with physicians, that does not assign supervisory responsibility to, or represent acceptance of legal responsibility by, a physician for the care provided by the physician assistant and that is signed by the physician assistant and the physician or physician assistant's employer.
- (4) "Community standards of care" has the meaning given in ORS 677.095, which is that degree of care, skill, and diligence that is used by ordinarily careful licensees in the same or similar circumstances in the licensee's community or a similar community.

(5) "Employer" has the meaning given in ORS 677.495:

(a) An entity that employs a physician or podiatric physician and is organized to deliver health care services in this state:

(A) In accordance with ORS 58.375 or 58.376,

(B) In accordance with ORS chapter 63 as a limited liability company, or

(C) In accordance with ORS chapter 67 as a limited liability partnership.

(b) A group medical practice that is part of a health system; or

(c) A physician who employs a physician assistant.

(6) "Physician" means a physician licensed under ORS 677.100 to 677.228 and includes a podiatric physician licensed under ORS 677.805 to 677.840.

(7) "Physician assistant" has the meaning given in ORS 677.495, a person who is licensed as such in accordance with ORS 677.265 and 677.495 through 677.535.

STATUTORY/OTHER AUTHORITY: ORS 677.265

STATUTES/OTHER IMPLEMENTED: ORS 677.495, 677.510, 677.511, 677.512, 677.515

REPEAL: 847-050-0027

RULE TITLE: Approval of Supervising Physician

NOTICE FILED DATE: 10/18/2023

RULE SUMMARY: The Oregon Legislator passed HB 3036 (2021) shifting PAs to a collaborative practice model. As of July 15, 2022, a physician could no longer seek approval to be a PA's supervising physician. The rule repeal aligns with these updates.

RULE TEXT:

Prior to July 15, 2022:

- (1) Prior to using the services of a physician assistant under a practice agreement, a supervising physician, including the primary supervising physician and each supervising physician within a supervising physician organization, must be approved as a supervising physician by the Board.
- (2) Physicians applying to be a supervising physician must:
 - (a) Submit a supervising physician application and application fee; and
 - (b) Take an online course and pass an open-book exam on the supervising physician requirements and responsibilities given by the Board. A passing score on the exam is 75%. If the supervising physician applicant fails the exam three times, the physician's application will be reviewed by the Board. A supervising physician applicant who has failed the exam three times must also attend an informal meeting with a Board member, a Board investigator and/or the Medical Director of the Board to discuss the applicant's failure of the exam, before being given a fourth and final attempt to pass the examination. If the applicant does not pass the exam on the fourth attempt, the physician's application may be denied.
- (3) The Board will reduce the supervising physician application fee for physicians volunteering in free clinics or non-profit organizations.
- (4) The physician may be subject to Board investigation prior to approval or may be limited or denied approval as a supervising physician for the following:
 - (a) There are restrictions upon or actions against the physician's license; or
 - (b) Fraud or misrepresentation in applying to use the services of a physician assistant.
- (5) The Board may defer taking action upon a request for approval as a supervising physician pending the outcome of the investigation of the physician for violations of ORS 677.010–990.
- (6) Failure to apply and be approved as a supervising physician by the Board prior to using the services of a physician assistant under a practice agreement is a violation of ORS 677.510 and is grounds for a \$195 fine. The licensee may be subject to further disciplinary action by the Board.

STATUTORY/OTHER AUTHORITY: ORS 677.265

STATUTES/OTHER IMPLEMENTED: ORS 677.205, 677.510

AMEND: 847-050-0029

RULE TITLE: Locum Tenens Assignments

NOTICE FILED DATE: 10/18/2023

RULE SUMMARY: The Oregon Legislator passed HB 3036 (2021) shifting PAs to a collaborative practice model. All PAs were required to enter into a collaboration agreement by December 31, 2023. The rule amendment removes aspects of the PA supervision practice model.

RULE TEXT:

(1) Locum tenens means a temporary absence by the physician assistant which is filled by a substitute physician assistant.

(2) The substitute physician assistant who is filling the locum tenens assignment must be currently licensed in Oregon with practicing registration status and enter into a collaboration agreement.

STATUTORY/OTHER AUTHORITY: ORS 677.265

STATUTES/OTHER IMPLEMENTED: ORS 677.265, 677.510

AMEND: 847-050-0035

RULE TITLE: Grounds for Discipline

NOTICE FILED DATE: 10/18/2023

RULE SUMMARY: The Oregon Legislator passed HB 3036 (2021) shifting PAs to a collaborative practice model. All PAs were required to enter into a collaboration agreement by December 31, 2023. The rule amendment removes aspects of the PA supervision practice model.

RULE TEXT:

(1) The performance of unauthorized medical services by the physician assistant constitutes a violation of the Medical Practice Act. The physician assistant is subject to disciplinary action for violations. Proceedings under these rules are conducted in the manner specified in ORS 677.200.

(2) In addition to any of the reasons cited in ORS 677.190, the Board may refuse to grant, or may suspend or revoke a license to practice as a physician assistant for any of the following reasons:

(a) The physician assistant has held themselves out, or permitted another to represent the physician assistant to be a licensed physician.

(b) The physician assistant has in fact performed medical services without entering into a collaboration agreement.

(c) The physician assistant has performed medical services beyond the physician assistant's competence, education, training, experience, or outside the collaboration agreement as stated in OAR 847-050-0082. This is not intended to limit the ability of a physician assistant to learn new procedures.

STATUTORY/OTHER AUTHORITY: ORS 677.190, 677.205, 677.265

STATUTES/OTHER IMPLEMENTED: ORS 677.190, 677.205, 677.265, 677.505

REPEAL: 847-050-0036

RULE TITLE: Supervising Physician Organization

NOTICE FILED DATE: 10/18/2023

RULE SUMMARY: The Oregon Legislator passed HB 3036 (2021) shifting PAs to a collaborative practice model. All PAs were required to enter into a collaboration agreement by December 31, 2023. The rule repeal removes aspects of the PA supervision practice model.

RULE TEXT:

A group of supervising physicians may collectively supervise a physician assistant under a practice agreement or practice description by forming a Supervising Physician Organization subject to the following conditions:

- (1) A supervising physician organization must designate one physician within the supervising physician organization to also serve as the primary supervising physician of the supervising physician organization.
- (2) Prior to July 15, 2022, each supervising physician in a supervising physician organization, including the primary supervising physician, must be approved by the Board as a supervising physician.
- (3) Prior to July 15, 2022, the supervising physician organization must provide the Board with a letter containing:
 - (a) The name of the supervising physician organization;
 - (b) The address and phone number for the supervising physician organization;
 - (c) The name of the primary supervising physician; and
 - (d) The names of the supervising physicians in the supervising physician organization.
- (4) The supervising physician organization must notify the Board in writing within 10 days of any change in the name, address, phone number, or supervising physicians in the supervising physician organization.
- (5) A supervising physician organization may include any number of supervising physicians.
- (6) A supervising physician organization may supervise any number of physician assistants.
- (7) A physician assistant who is supervised by a supervising physician organization may be supervised by any of the supervising physicians in the supervising physician organization.
- (8) The Board may request a meeting with a supervising physician organization and a physician assistant to discuss a practice agreement.
- (9) Supervising physician organizations, as defined in this rule and OAR 847-050-0010, may not enter into collaboration agreements.

STATUTORY/OTHER AUTHORITY: ORS 677.265, 677.510

STATUTES/OTHER IMPLEMENTED: ORS 677.495, 677.510, 677.515

REPEAL: 847-050-0037

RULE TITLE: Supervision

NOTICE FILED DATE: 10/18/2023

RULE SUMMARY: The Oregon Legislator passed HB 3036 (2021) shifting PAs to a collaborative practice model. All PAs were required to enter into a collaboration agreement by December 31, 2023. The rule repeal removes aspects of the PA supervision practice model.

RULE TEXT:

Under a practice agreement or practice description:

- (1) A physician may not use the services of a physician assistant without first obtaining Board approval as a supervising physician.
- (2) The supervising physician, agent, or in the case of a supervising physician organization, the primary supervising physician and the supervising physician who is providing supervision for the physician assistant, are personally responsible for the direction, supervision and regular review of the medical services provided by the physician assistant, in keeping with the practice agreement or Board-approved practice description.
- (3) The type of supervision and maintenance of supervision provided for each physician assistant must be described in the practice agreement or Board-approved practice description.
- (4) The supervising physician, agent or, in the case of a supervising physician organization, the supervising physician who is providing supervision for the physician assistant must be available for direct communication with the physician assistant at all times in person, by telephone, or through other synchronous electronic means, whether the supervising physician and physician assistant practice in the same practice location or a practice location separate from each other.
- (5)(a) Each setting and licensed facility in which the physician assistant will provide services must be listed in the practice agreement or Board-approved practice description.
- (b) Additional, intermittent practice settings such as schools, sporting events, health fairs and long term care facilities, are not required to be listed in the practice agreement or Board-approved practice description if the duties are the same as those listed in the practice agreement or Board-approved practice description. The medical records for the patients seen at these additional practice settings must be held either at the supervising physician's primary practice setting or the additional practice settings. The supervision of the physician assistant must be the same as that described in the practice agreement or Board-approved practice description.
- (6) The supervising physician, agent or the supervising physicians in the supervising physician organization must provide regular and routine oversight and chart review.
- (7) Prior to January 15, 2022, the supervising physician may limit the degree of independent judgment that the physician assistant uses but may not extend it beyond the limits of the practice agreement or Board-approved practice description.
- (8) On or after January 15, 2022, the degree of autonomous judgment that a physician assistant may exercise shall be determined at the physician assistant's primary location of practice by the community standards of care and the physician assistant's education, training and experience.

STATUTORY/OTHER AUTHORITY: ORS 677.265

STATUTES/OTHER IMPLEMENTED: ORS 677.495, 677.510, 677.515

REPEAL: 847-050-0038

RULE TITLE: Agents

NOTICE FILED DATE: 10/18/2023

RULE SUMMARY: The Oregon Legislator passed HB 3036 (2021) shifting PAs to a collaborative practice model. All PAs were required to enter into a collaboration agreement by December 31, 2023. The rule repeal removes aspects of the PA supervision practice model.

RULE TEXT:

Under a practice agreement or practice description:

(1) The supervising physician who is not a member of a supervising physician organization may designate an agent or agents to direct and supervise the physician assistant when the supervising physician is unavailable for short periods of time. The agents must meet the following requirements:

(a) Be a physician licensed under ORS 677.100 to 677.228, or a podiatric physician and surgeon licensed under ORS 677.805 to 677.840, actively registered and in good standing with the Board;

(b) Practice in the same city or practice area as the supervising physician or physician assistant.

(c) Be qualified to supervise as designated in the practice agreement.

(2) The supervising physician is responsible for informing the agent of the duties of an agent. Prior to such time as the physician assistant is acting under the direction of an agent, the supervising physician must determine that the agent understands and accepts supervisory responsibility. The agent must sign an acknowledgement of all practice agreements between the supervising physician and the physician assistant(s) the agent will supervise, and a copy must be kept at the primary practice location. Supervision by the agent will continue for a certain, predetermined, limited period of time, after which supervisory duties revert to the supervising physician.

(3) In the absence of the supervising physician, the agent assumes the same responsibilities as the supervising physician.

STATUTORY/OTHER AUTHORITY: ORS 677.265

STATUTES/OTHER IMPLEMENTED: ORS 677.495, ORS 677.510

REPEAL: 847-050-0040

RULE TITLE: Method of Performance under a Practice Agreement or Practice Description

NOTICE FILED DATE: 10/18/2023

RULE SUMMARY: The Oregon Legislator passed HB 3036 (2021) shifting PAs to a collaborative practice model. All PAs were required to enter into a collaboration agreement by December 31, 2023. The rule repeal removes aspects of the PA supervision practice model.

RULE TEXT:

Under a practice agreement or practice description:

- (1) The physician assistant may perform at the direction of the supervising physician, agent or, in the case of a supervising physician organization, the primary supervising physician or the supervising physician who is providing supervision for the physician assistant only those medical services as included in the practice agreement or Board-approved practice description.
- (2) A medical service may be performed by a physician assistant if:
 - (a) The services are provided under the methods of supervision described in and in compliance with the practice agreement or Board-approved practice description;
 - (b) The services are within the scope of practice and the competency of the physician assistant;
 - (c) The services are generally described in and in compliance with the practice agreement or Board-approved practice description; and
 - (d) The physician assistant has obtained informed consent as provided in ORS 677.097, if informed consent is required.
- (3) The supervising physician shall ensure that the physician assistant is competent to perform all duties. The supervising physician or supervising physician organization and the physician assistant are responsible for ensuring the competent practice of the physician assistant.
- (4) The physician assistant or student must be clearly identified as such when performing duties. The physician assistant must at all times when on duty wear a name tag with the designation of "physician assistant" or "PA" thereon and clearly identify as a "physician assistant" or "PA" in oral communications with patients and other professionals.
- (5) The supervising physician must furnish reports, as required by the Board, on the performance of the physician assistant or student.
- (6) The practice agreement must be submitted to the Board within ten days after the physician assistant begins practice with the supervising physician or supervising physician organization.
- (7) The supervising physician must notify the Board of any changes to the practice agreement within ten days of the effective date of the change.
- (8) Supervising physicians must update the practice agreement biennially during the supervising physician's license renewal process.
- (9) Effective July 15, 2022, a supervising physician and physician assistant who have a Board-approved practice description that was approved prior to January 1, 2012, and who wish to make changes to the practice description must enter into a collaboration agreement in accordance with ORS 677.510(3)(a).
- (10) Effective July 15, 2022, a supervising physician and physician assistant who wish to make changes to an existing practice agreement must enter into a collaboration agreement in accordance with ORS 677.510(3)(a).
- (11) If the physician assistant has met the requirements of OAR 847-050-0041(3), Schedule II controlled substances prescription privileges may be included in and are limited by the practice agreement or Board-approved practice description and may be restricted further by the supervising physician at any time.
- (12)(a) A supervising physician and/or agent is responsible for the acts of the physician assistant practicing under a practice agreement or practice description and may be subject to disciplinary action for such violations by the physician assistant.
 - (b) Whenever the supervising physician is a member of a professional corporation or employee of a professional corporation or partnership, the primary supervising physician and any acting supervising physician are in all cases

personally responsible for the direction and supervision of the physician assistant's work. Such responsibility for supervision cannot be transferred to the corporation or partnership even though such corporation or partnership may pay the supervising physician and the physician assistant's salaries or enter into an employment agreement with such physician assistant or supervising physician.

(13) Failure to comply with any section of this rule is a violation of ORS 677.510 and is grounds for a \$195 fine imposed on the non-compliant licensee. The licensee may be subject to further disciplinary action by the Board.

STATUTORY/OTHER AUTHORITY: ORS 677.265

STATUTES/OTHER IMPLEMENTED: ORS 677.205, 677.510, 677.515

AMEND: 847-050-0041

RULE TITLE: Prescribing and Dispensing Privileges

NOTICE FILED DATE: 10/18/2023

RULE SUMMARY: The Oregon Legislator passed HB 3036 (2021) shifting PAs to a collaborative practice model. All PAs were required to enter into a collaboration agreement by December 31, 2023. The rule amendment removes aspects of the PA supervision practice model.

RULE TEXT:

(1) A physician assistant registered prior to July 12, 1984, who does not possess the qualifications of OAR 847-050-0020 may retain all practice privileges which have been granted prior to July 12, 1984. Under these conditions, a physician assistant may issue written, electronic or oral prescriptions for Schedule III-V medications, based on the physician assistant's education, training, experience, and commensurate with the collaboration agreement, if the physician assistant has passed a specialty examination approved by the Board prior to July 12, 1984, and the following conditions are met:

(a) The physician assistant has passed the Physician Assistant National Certifying Examination (PANCE); and
(b) The physician assistant has documented adequate education or experience in pharmacology commensurate with the collaboration agreement.

(2) A physician assistant may issue written, electronic, or oral prescriptions for Schedule III-V medications, based on the physician assistant's education, training, experience, and commensurate with the collaboration agreement.

(3) A physician assistant may issue written or electronic prescriptions or emergency oral prescriptions followed by a written authorization for Schedule II medications if the requirements in section (1) or (2) of this rule are fulfilled and if the physician assistant is currently certified by the National Commission for the Certification of Physician Assistants (NCCPA).

(4) All prescriptions given whether written, electronic, or oral must include the name, office address, and telephone number of the physician assistant. The prescription must also bear the name of the patient and the date on which the prescription was written, except as provided in OAR 847-015-0050 for expedited partner therapy for sexually transmitted disease. The physician assistant must sign the prescription and the signature must be followed by the letters "PA" Also the physician assistant's Federal Drug Enforcement Administration number must be shown on prescriptions for controlled substances.

(5) A physician assistant may register with the Board to dispense drugs commensurate with the collaboration agreement and the physician assistant's prescriptive authority.

(a) If the facility where the physician assistant will dispense medications serves population groups federally designated as underserved, geographic areas federally designated as health professional shortage areas or medically underserved areas, or areas designated as medically disadvantaged and in need of primary health care providers as designated by the State, the application must include:

(A) Location of the practice site;
(B) Accessibility to the nearest pharmacy; and
(C) Medical necessity for dispensing.

(b) If the facility where the physician assistant will be dispensing medications is not in one of the designated areas or populations described in subsection (5)(a) of this rule, the physician assistant may not dispense Schedule I through II controlled substances.

(6) A physician assistant with dispensing authority must:

(a) Dispense medications personally, except that nonjudgmental dispensing functions may be delegated to staff assistants when the accuracy and completeness of the prescription is verified by the physician assistant;
(b) Maintain records of the receipt and distribution of prescription drugs and the records must be readily accessible for inspection by the Board upon request;
(c) Dispense only medications that are pre-packaged by a licensed pharmacist, manufacturing drug outlet or wholesale

drug outlet authorized to do so under ORS 689;

(d) Label dispensed prescription drugs in compliance with the requirements of ORS 677.089(3);

(e) Dispense prescription drugs in containers complying with the federal Poison Prevention Packaging Act unless the patient requests a noncomplying container; and

(f) Register with the Drug Enforcement Administration and maintain a controlled substances log as required in OAR 847-015-0015.

(7) Distribution of samples, without charge, is not dispensing under this rule. Administering drugs in the facility is not dispensing under this rule. Distribution of samples and administration of drugs must be documented in the patient record. Documentation must include the name of the drug, the dose, the quantity distributed or administered, and the directions for use if applicable.

(8) Failure to comply with any section of this rule is a violation of the ORS Chapter 677 and is grounds for a \$195 fine. The licensee may be subject to further disciplinary action by the Board.

STATUTORY/OTHER AUTHORITY: ORS 677.265, ORS 677.511

STATUTES/OTHER IMPLEMENTED: ORS 677.190, ORS 677.205, ORS 677.265, ORS 677.470, ORS 677.511, ORS 677.515, ORS 677.545

AMEND: 847-050-0046

RULE TITLE: Emeritus Status

NOTICE FILED DATE: 10/18/2023

RULE SUMMARY: The Oregon Legislator passed HB 3036 (2021) shifting PAs to a collaborative practice model. All PAs were required to enter into a collaboration agreement by December 31, 2023. The rule amendment removes aspects of the PA supervision practice model.

RULE TEXT:

A physician assistant with Emeritus status pursuant OAR 847-008-0030 must enter into a collaboration agreement, prior to starting any temporary or volunteer assignments.

STATUTORY/OTHER AUTHORITY: ORS 677.265, 677.545

STATUTES/OTHER IMPLEMENTED: ORS 677.265, 677.510, 677.515

REPEAL: 847-050-0050

RULE TITLE: Termination of Supervision

NOTICE FILED DATE: 10/18/2023

RULE SUMMARY: The Oregon Legislator passed HB 3036 (2021) shifting PAs to a collaborative practice model. All PAs were required to enter into a collaboration agreement by December 31, 2023. The rule repeal removes aspects of the PA supervision practice model.

RULE TEXT:

(1) Under a practice agreement or practice description, upon termination of a supervisory relationship both the supervising physician and the physician assistant must submit to the Board a written report concerning the reason(s) for termination of the relationship. Such report must be submitted to the Board within 15 days following termination of supervision.

(2) All practice agreements and practice descriptions must be terminated no later than December 31, 2023.

STATUTORY/OTHER AUTHORITY: ORS 677.265

STATUTES/OTHER IMPLEMENTED: ORS 677.510

AMEND: 847-050-0080

RULE TITLE: Collaborative Practice Model

NOTICE FILED DATE: 10/18/2023

RULE SUMMARY: The Oregon Legislator passed HB 2584 (2023) to fully implement physician assistant (PA) collaborative practice created in HB 3036 (2021). The bill clarifies that PAs practice medicine. The rule amendment aligns with this update.

RULE TEXT:

(1) A physician assistant may practice medicine:

(a) Within the scope of practice of the physician assistant, based on the physician assistant's education, training, and experience; and

(b) For which the physician assistant has obtained informed consent as provided in ORS 677.097, if informed consent is required.

(2) A physician assistant is responsible for the care provided by the physician assistant.

(3) A physician assistant must engage in collaboration with the appropriate health care provider as indicated by the condition of the patient, the community standards of care, and the physician assistant's education, experience, and competence. The degree of collaboration must be determined at the physician assistant's primary location of practice. The determination may include decisions made by:

(a) A physician or employer with whom the physician assistant has entered into a collaboration agreement, or

(b) The group or hospital service and the credentialing and privileging systems of the physician assistant's primary location of practice.

(4) The degree of autonomous judgment that a physician assistant may exercise will be determined at the physician assistant's primary location of practice by the community standards of care and the physician assistant's education, training, and experience.

(5) If a physician assistant changes their specialty or emphasis of practice, the physician assistant must obtain applicable education, training, or experience required to meet the community standards of care.

(6) The physician assistant or student must be clearly identified as such when performing duties. The physician assistant must at all times when on duty wear a name tag with the designation of "physician assistant" or "PA" thereon and clearly identify as a "physician assistant" or "PA" in oral communications with patients and other professionals.

(7) Failure to comply with any section of this rule is a violation of ORS 677.510 and is grounds for a \$195 fine imposed on the non-compliant licensee. The licensee may be subject to further disciplinary action by the Board.

STATUTORY/OTHER AUTHORITY: ORS 677.265

STATUTES/OTHER IMPLEMENTED: ORS 677.265, ORS 677.510, ORS 677.515

AMEND: 847-050-0082

RULE TITLE: Collaboration Agreements

NOTICE FILED DATE: 10/18/2023

RULE SUMMARY: The Oregon Legislator passed HB 2584 (2023) to fully implement physician assistant (PA) collaborative practice created in HB 3036 (2021). The bill clarifies that PAs practice medicine and removes the requirement that a PA's collaboration agreement include the PA's performance assessment. The rule amendment aligns with this update.

RULE TEXT:

(1) A physician assistant may not practice medicine unless the physician assistant has entered into a written collaboration agreement signed by a physician or employer as defined in OAR 847-050-0010(4) and as described in this rule.

(2) The collaboration agreement must include, but is not limited to:

(a) The physician assistant's name, license number, and primary location of practice;

(b) The name of the physician or employer with whom the physician assistant is entering the collaboration agreement;

(c) A general description of the physician assistant's process for collaboration with physicians and if applicable, include any differences in the process for collaboration based on practice location; and

(d) If the physician assistant has fewer than 2,000 hours of post-graduate clinical experience, a plan for consistent and quality collaboration with a specified physician on a regular basis. If this plan is required:

(A) "Post-graduate clinical experience" means the professional practice as a physician assistant applying principles and methods to provide assessment, diagnosis, and treatment of patients.

(B) The physician assistant must provide evidence of at least 2,000 hours of post-graduate clinical experience to the physician or employer with whom the physician assistant is entering the collaboration agreement. The physician or employer is responsible for determining the physician assistant does not require a plan.

(C) Collaboration with a specified physician may occur in person and through synchronous and asynchronous technology.

(D) The physician assistant, or physician or employer with whom the physician assistant has entered into the collaboration agreement, is responsible for tracking the 2,000 hours of post-graduate clinical experience to determine when the plan is no longer required.

(E) A collaboration agreement must be amended in writing to remove or modify the plan.

(3) A collaboration agreement may include additional requirements specific to the physician assistant's practice as required by the physician or employer entering the collaboration agreement, including additional levels of oversight, limitations on autonomous judgment, and designating a primary contact for collaboration.

(4) As part of the performance assessment in ORS 677.510(4), a collaboration agreement must be reviewed and, if applicable, updated.

(5) A collaboration agreement must be replaced or amended in writing to add, remove, or change requirements.

(6) A physician assistant may enter multiple collaboration agreements for each employer or practice.

(7) The collaboration agreement must be available at the physician assistant's primary location of practice and made available to the Oregon Medical Board upon request.

(8) The physician or employer with whom the physician assistant enters a collaboration agreement must provide a copy of the collaboration agreement and any amendments to the physician assistant.

(9) The physician assistant and the physician or employer with whom the physician assistant has entered into the collaboration agreement are responsible for upholding the terms of the collaboration agreement and ensuring availability of collaboration.

(10) Failure to comply with any section of this rule is a violation of ORS 677.510 and is grounds for a \$195 fine imposed on the non-compliant licensee. The licensee may be subject to further disciplinary action by the Board.

STATUTORY/OTHER AUTHORITY: ORS 677.265

STATUTES/OTHER IMPLEMENTED: ORS 677.265, ORS 677.510, ORS 677.515