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House Bill 5653 (Substitute H-1 as passed by the House)

Sponsor: Representative Shelley Goodman Taub

House Committee: Health Policy Senate Committee: Health Policy

Date Completed: 5-3-06

CONTENT

The bill would amend the Public Health Code to allow a physician's assistant to practice under the supervision of a podiatrist.

The bill would take effect six months after it was enacted.

Health Profession Subfield

The Code specifies that practice as a physician's assistant is a health profession subfield of the practice of medicine and the practice of osteopathic medicine and surgery. Under the bill, practice as a physician's assistant also would be a health profession subfield of the practice of podiatric medicine and surgery.

License Requirement; Fees

Under Part 180 (Podiatric Medicine and Surgery), a person may not engage in the practice of podiatric medicine and surgery unless licensed or otherwise authorized under the Code. The bill also would prohibit a person from practicing as a physician's assistant under Part 180 unless licensed or otherwise authorized.

The Code prescribes the following fees for a person licensed or seeking licensure to engage in practice as a physician's assistant under Part 170 (Medicine) or 175 (Osteopathic Medicine and Surgery): a \$30 application processing fee, an annual license fee of \$50, a temporary license fee of \$35, and an annual limited license fee of \$25.

Under the bill, these fees also would apply to a person licensed or seeking licensure to engage in practice as a physician's assistant under Part 180.

Task Force

The bill would add a member of the Board of Podiatric Medicine and Surgery to the joint task force on physician's assistants created for the health profession subfields. (The task force currently includes a member of the Board of Medicine, a member of the Board of Osteopathic Medicine and Surgery, five physician's assistants, and two public members.)

The Board of Podiatric Medicine and Surgery would have to give the task force written recommendations on criteria for the approval of physician's assistants and on criteria for the valuation of physician's assistants training programs.

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Board of Podiatric Medicine & Surgery

The bill would add a physician's assistant to the Board of Podiatric Medicine and Surgery, and reduce the number of public Board members from four to three. (Currently, the Board consists of five podiatrists and four public members.)

The bill specifies that the Board would not have the powers and duties vested in the joint task force by Sections 17060 to 17084.

(Those sections prescribe the powers and duties of the task force, including the promulgation of rules regarding the education, training, and experience requirements of physician's assistants, and the evaluation of education and training programs; the development of guidelines on the appropriate delegation of functions to and supervision of physician's assistants; directing the Department of Community Health (DCH) to issue licenses to qualified applicants; and making written recommendations to the applicable boards concerning rules.)

Physician's Assistant Qualifications

Under the Code, the standards and decisions regarding the qualifications of physician's assistants must be designed to determine that each physician's assistant has the necessary knowledge and skill to perform in a safe and competent manner with due regard to the complexity and risks attendant to activities that may be delegated by a physician to a physician's assistant. The bill also would refer to activities that could be delegated by a podiatrist to a physician's assistant.

Supervising Podiatrist

Under the Code, a physician's assistant is the agent of the supervising physician. A communication made to a physician's assistant that would be a privileged communication if made to the supervising physician is a privileged communication to the physician's assistant and the supervising physician to the same extent as if the communication were made to the supervising physician. Additionally, a physician's assistant must conform to minimal standards of acceptable and prevailing practice for the supervising physician. The bill would refer to the supervising podiatrist, in addition to the supervising physician.

A physician's assistant acting under the supervision of a podiatrist could perform only those duties included within the scope of practice of the supervising podiatrist.

Supervision & Delegation

Under the bill, except as otherwise provided, a podiatrist who was a sole practitioner or who practiced in a group of podiatrists and treated patients on an outpatient basis could not supervise more than four physician's assistants. If such a podiatrist supervised physician's assistants at more than one practice site, the podiatrist could not supervise more than two physician's assistants by a method other than the podiatrist's actual physical presence at the practice site.

A podiatrist who was employed by or under contract or subcontract to or had privileges at a licensed health facility could supervise more than four physician's assistants at the health facility or agency.

The DCH could promulgate rules for the appropriate delegation and use of a physician's assistant by a podiatrist, including rules to prohibit or otherwise restrict the delegation of certain podiatric services or to require higher levels of supervision if the Board of Podiatric

Medicine and Surgery determined that such services required extensive training, education, or ability, or posed serious risks to the health or safety of patients.

In addition to the requirements described below, a podiatrist who supervised a physician's assistant would be responsible for all of the following:

- -- Verifying the physician's assistant's credentials.
- -- Evaluating the physician's assistant's performance.
- -- Monitoring the physician's assistant's practice and provision of podiatric services.

A podiatrist who supervised a physician's assistant could delegate to the physician's assistant only the performance of podiatric services for a patient who was under the podiatrist's case management responsibility, if the delegation were consistent with the physician's assistant's training. A podiatrist could supervise a physician's assistant only in the performance of those duties included within his or her scope of practice.

A podiatrist who supervised a physician's assistant would be responsible for the clinical supervision of each physician's assistant to whom the physician delegated the performance of podiatric services.

The podiatrist would have to keep on file in the physician's office or in the health facility or agency in which the podiatrist supervised the physician's assistant a permanent, written record that included the podiatrist's name and license number and the name and license number of each physician's assistant the podiatrist supervised.

A group of podiatrists practicing other than as sole practitioners could designate one or more podiatrists in the group to fulfill the requirements pertaining to verifying a physician's assistant's credentials, evaluating and monitoring a physician's assistant, and maintaining the written records.

Prohibition against Supervision

In addition to its other powers and duties under Article 15 (Occupations), the Board of Podiatric Medicine and Surgery could prohibit a podiatrist from supervising one or more physician's assistants for any of the grounds set forth in Section 16221 or for failure to supervise a physician's assistant in accordance with Part 180 and rules promulgated under it.

(Under Section 16221, the DCH may investigate activities related to the practice of a health profession by a licensee, a registrant, or an applicant for licensure or registration. The DCH must report its finding to the appropriate disciplinary subcommittee, which must impose administrative sanctions if it finds the existence of certain grounds, such as personal disqualifications, unethical business practices, prohibited acts, or the violation of specific provisions of the Code.)

Other Provisions

The bill specifies that Part 180 would not apply to a student in training to become a physician's assistant while performing duties assigned as part of the training.

The bill also states that Part 180 would not require new or additional third-party reimbursement or mandated worker's compensation benefits for services rendered by an individual authorized to practice as a physician's assistant.

The bill would repeal Section 17525, which created a joint task force to advise the Board of Osteopathic Medicine and Surgery and the Board of Medicine for the health profession subfields licensed under Parts 170 and 175.

MCL 333.16337 et al. Legislative Analyst: Julie Koval

FISCAL IMPACT

Permitting podiatrists to make use of physician's assistants could increase the number of licensed physician's assistants in the State. The Department currently charges a \$30 fee for the processing of an initial application for licensure and \$50 per year for licensure as a physician's assistant. Because the Department already has staff devoted to processing physician's assistant licensure requests, the fee revenue from an increase in the pool of applicants would likely be larger than the administrative costs associated with handling these applications, leading to a moderate positive fiscal impact on the State.

Fiscal Analyst: David Fosdick

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This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.