

SENATE BILL No. 384

May 18, 2011, Introduced by Senator MARLEAU and referred to the Committee on Health Policy.

A bill to amend 1978 PA 368, entitled "Public health code," by amending sections 17048, 17049, 17050, 17076, 17078, 17548, 17549, 17550, 17745, 17757, 18048, 18049, 18050, and 20201 (MCL 333.17048, 333.17049, 333.17050, 333.17076, 333.17078, 333.17548, 333.17549, 333.17550, 333.17745, 333.17757, 333.18048, 333.18049, 333.18050, and 333.20201), section 17048 as amended by 2010 PA 124, sections 17049 and 17549 as amended by 2004 PA 512, sections 17050 and 17550 as amended by 1990 PA 247, sections 17076 and 17548 as amended by 1996 PA 355, section 17078 as amended and sections 18048, 18049, and 18050 as added by 2006 PA 161, section 17745 as amended by 2006 PA 672, section 17757 as amended by 1986 PA 304, and section 20201 as amended by 2006 PA 38.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

1 Sec. 17048. (1) Except as otherwise provided in this section

1 and section 17049(5), a physician who is a sole practitioner or who
2 practices in a group of physicians and treats patients on an
3 outpatient basis shall not supervise more than 4 physician's
4 assistants **OR NURSE PRACTITIONERS**. If a physician described in this
5 subsection supervises physician's assistants **OR NURSE PRACTITIONERS**
6 at more than 1 practice site, the physician shall not supervise
7 more than 2 physician's assistants **OR NURSE PRACTITIONERS** by a
8 method other than the physician's actual physical presence at the
9 practice site.

10 (2) A physician who is employed by, under contract or
11 subcontract to, or has privileges at a health facility or agency
12 licensed under article 17 or a state correctional facility may
13 supervise more than 4 physician's assistants **OR NURSE PRACTITIONERS**
14 at the health facility or agency or state correctional facility.

15 (3) To the extent that a particular selected medical care
16 service requires extensive medical training, education, or ability
17 or poses serious risks to the health and safety of patients, the
18 board may prohibit or otherwise restrict the delegation of that
19 medical care service or may require higher levels of supervision.

20 (4) A physician shall not delegate ultimate responsibility for
21 the quality of medical care services, even if the medical care
22 services are provided by a physician's assistant **OR NURSE**
23 **PRACTITIONER**.

24 (5) The board may promulgate rules for the delegation by a
25 supervising physician to a physician's assistant **OR NURSE**
26 **PRACTITIONER** of the function of prescription of drugs. The rules
27 may define the drugs or classes of drugs the prescription of which

1 shall not be delegated and other procedures and protocols necessary
2 to promote consistency with federal and state drug control and
3 enforcement laws. ~~Until the rules are promulgated, a supervising~~
4 ~~physician may delegate the prescription of drugs other than~~
5 ~~controlled substances as defined by article 7 or federal law.~~ When
6 delegated prescription occurs, both the physician's assistant's **OR**
7 **NURSE PRACTITIONER'S** name and the supervising physician's name
8 shall be used, recorded, or otherwise indicated in connection with
9 each individual prescription.

10 (6) A supervising physician may delegate in writing to a
11 physician's assistant **OR NURSE PRACTITIONER** the ordering, receipt,
12 and dispensing of complimentary starter dose drugs ~~other than~~
13 **INCLUDING** ~~controlled substances as defined by article 7 or federal~~
14 ~~law~~ **THAT ARE INCLUDED IN SCHEDULES 2 TO 5 OF PART 72.** When the
15 delegated ordering, receipt, or dispensing of complimentary starter
16 dose drugs occurs, both the physician's assistant's **OR NURSE**
17 **PRACTITIONER'S** name and the supervising physician's name shall be
18 used, recorded, or otherwise indicated in connection with each
19 order, receipt, or dispensing. As used in this subsection,
20 "complimentary starter dose" means that term as defined in section
21 17745. It is the intent of the legislature in enacting this
22 subsection to allow a pharmaceutical manufacturer or wholesale
23 distributor, as those terms are defined in part 177, to distribute
24 complimentary starter dose drugs to a physician's assistant **OR**
25 **NURSE PRACTITIONER,** as described in this subsection, in compliance
26 with section 503(d) of the federal food, drug, and cosmetic act, 21
27 USC 353.

1 (7) Beginning on ~~the effective date of the amendatory act that~~
2 ~~added this subsection~~ **JULY 19, 2010**, if 1 or more individuals
3 licensed under part 170 to engage in the practice of medicine,
4 licensed under part 175 to engage in the practice of osteopathic
5 medicine and surgery, or licensed under part 180 to engage in the
6 practice of podiatric medicine and surgery, and 1 or more
7 physician's assistants organize a professional service corporation
8 pursuant to section 4 of the professional service corporation act,
9 1962 PA 192, MCL 450.224, or a professional limited liability
10 company pursuant to section 904 of the Michigan limited liability
11 company act, 1993 PA 23, MCL 450.4904, the individuals who are the
12 supervising physicians of the physician's assistants shall be
13 shareholders in the same professional service corporation or
14 members in the same professional limited liability company as the
15 physician's assistants and shall meet all of the applicable
16 requirements of part 170, 175, or 180. If 1 or more physician's
17 assistants organized a professional service corporation pursuant to
18 section 4 of the professional service corporation act, 1962 PA 192,
19 MCL 450.224, or a professional limited liability company pursuant
20 to section 904 of the Michigan limited liability company act, 1993
21 PA 23, MCL 450.4904, before ~~the effective date of the amendatory~~
22 ~~act that added this subsection~~ **JULY 19, 2010** that has only
23 physician's assistants as shareholders or members, the individuals
24 who are the supervising physicians of the physician's assistants
25 shall meet all of the applicable requirements of part 170, 175, or
26 180.

27 (8) In addition to the requirements of section 17068 and

1 beginning on ~~the effective date of the amendatory act that added~~
2 ~~this subsection~~ **JULY 19, 2010**, the department shall include on the
3 form used for renewal of licensure a space for a physician's
4 assistant to disclose whether he or she is a shareholder in a
5 professional service corporation pursuant to section 4 of the
6 professional service corporation act, 1962 PA 192, MCL 450.224, or
7 a member in a professional limited liability company pursuant to
8 section 904 of the Michigan limited liability company act, 1993 PA
9 23, MCL 450.4904, which corporation or company was organized ~~before~~
10 ~~the effective date of the amendatory act that added this subsection~~
11 **JULY 19, 2010**. A physician's assistant who is a shareholder in a
12 professional service corporation or a member in a professional
13 limited liability company described in this subsection shall
14 disclose all of the following in the form used for renewal of
15 licensure provided by the department:

16 (a) Whether any individuals licensed under part 170 to engage
17 in the practice of medicine, licensed under part 175 to engage in
18 the practice of osteopathic medicine and surgery, or licensed under
19 part 180 to engage in the practice of podiatric medicine and
20 surgery are shareholders in the professional service corporation or
21 members in the professional limited liability company.

22 (b) The name and license number of the individual licensed
23 under part 170 to engage in the practice of medicine, licensed
24 under part 175 to engage in the practice of osteopathic medicine
25 and surgery, or licensed under part 180 to engage in the practice
26 of podiatric medicine and surgery who supervises the physician's
27 assistant.

1 (c) Whether the individual licensed under part 170 to engage
2 in the practice of medicine, licensed under part 175 to engage in
3 the practice of osteopathic medicine and surgery, or licensed under
4 part 180 to engage in the practice of podiatric medicine and
5 surgery disclosed in subdivision (b) is a shareholder in the same
6 professional service corporation or member in a professional
7 limited liability company as the physician's assistant.

8 Sec. 17049. (1) In addition to the other requirements of this
9 section and subject to subsection (5), a physician who supervises a
10 physician's assistant **OR NURSE PRACTITIONER** is responsible for all
11 of the following:

12 (a) Verification of the physician's assistant's **OR NURSE**
13 **PRACTITIONER'S** credentials.

14 (b) Evaluation of the physician's assistant's **OR NURSE**
15 **PRACTITIONER'S** performance.

16 (c) Monitoring the physician's assistant's **OR NURSE**
17 **PRACTITIONER'S** practice and provision of medical care services.

18 (2) Subject to section **16215 OR 17048, AS APPLICABLE,** a
19 physician who supervises a physician's assistant **OR NURSE**
20 **PRACTITIONER** may delegate to the physician's assistant **OR NURSE**
21 **PRACTITIONER** the performance of medical care services for a patient
22 who is under the case management responsibility of the physician,
23 if the delegation is consistent with the physician's assistant's **OR**
24 **NURSE PRACTITIONER'S** training.

25 (3) A physician who supervises a physician's assistant **OR**
26 **NURSE PRACTITIONER** is responsible for the clinical supervision of
27 each physician's assistant **AND NURSE PRACTITIONER** to whom the

1 physician delegates the performance of medical care service under
2 subsection (2).

3 (4) Subject to subsection (5), a physician who supervises a
4 physician's assistant **OR NURSE PRACTITIONER** shall keep on file in
5 the physician's office or in the health facility or agency or
6 correctional facility in which the physician supervises the
7 physician's assistant **OR NURSE PRACTITIONER** a permanent, written
8 record that includes the physician's name and license number and
9 the name and license number of each physician's assistant **AND NURSE**
10 **PRACTITIONER** supervised by the physician.

11 (5) A group of physicians practicing other than as sole
12 practitioners may designate 1 or more physicians in the group to
13 fulfill the requirements of subsections (1) and (4).

14 (6) Notwithstanding any law or rule to the contrary, a
15 physician is not required to countersign orders written in a
16 patient's clinical record by a physician's assistant **OR NURSE**
17 **PRACTITIONER** to whom the physician has delegated the performance of
18 medical care services for a patient. **NOTWITHSTANDING ANY LAW OR**
19 **RULE TO THE CONTRARY, A PHYSICIAN IS NOT REQUIRED TO SIGN AN**
20 **OFFICIAL FORM THAT LISTS THE PHYSICIAN'S SIGNATURE AS THE REQUIRED**
21 **SIGNATORY IF THAT OFFICIAL FORM IS SIGNED BY A PHYSICIAN'S**
22 **ASSISTANT OR NURSE PRACTITIONER TO WHOM THE PHYSICIAN HAS DELEGATED**
23 **THE PERFORMANCE OF MEDICAL CARE SERVICES.**

24 Sec. 17050. In addition to its other powers and duties under
25 this article, the board may prohibit a physician from supervising 1
26 or more physician's assistants **OR NURSE PRACTITIONERS** for any of
27 the grounds set forth in section 16221 or for failure to supervise

1 a physician's assistant **OR NURSE PRACTITIONER** in accordance with
2 this part and rules promulgated under this part.

3 Sec. 17076. (1) Except in an emergency situation, a
4 physician's assistant **OR NURSE PRACTITIONER** shall provide medical
5 care services only under the supervision of a physician or properly
6 designated alternative physician, and only if those medical care
7 services are within the scope of practice of the supervising
8 physician and are delegated by the supervising physician.

9 (2) ~~A physician's assistant shall provide medical care~~
10 ~~services only in a medical care setting where the supervising~~
11 ~~physician regularly sees patients. However, a~~ **A physician's**
12 **assistant OR A NURSE PRACTITIONER** may make calls or go on rounds
13 under the supervision of a physician in private homes, public
14 institutions, emergency vehicles, ambulatory care clinics,
15 hospitals, intermediate or extended care facilities, health
16 maintenance organizations, nursing homes, or other health care
17 facilities. ~~to the extent permitted by the bylaws, rules, or~~
18 ~~regulations of the governing facility or organization, if any.~~
19 **NOTWITHSTANDING ANY LAW OR RULE TO THE CONTRARY, A PHYSICIAN'S**
20 **ASSISTANT OR A NURSE PRACTITIONER MAY MAKE CALLS OR GO ON ROUNDS AS**
21 **PROVIDED IN THIS SUBSECTION WITHOUT RESTRICTIONS ON THE TIME OR**
22 **FREQUENCY OF VISITS BY THE PHYSICIAN OR THE PHYSICIAN'S ASSISTANT**
23 **OR NURSE PRACTITIONER.**

24 (3) A physician's assistant **OR NURSE PRACTITIONER** may
25 prescribe drugs as a delegated act of a supervising physician ~~but~~
26 ~~shall do so only~~ in accordance with procedures and protocol for the
27 prescription established by rule of the appropriate board. ~~Until~~

1 ~~the rules are promulgated, a~~ **A** physician's assistant **OR NURSE**
2 **PRACTITIONER** may prescribe a drug, ~~other than~~ **INCLUDING** a
3 controlled substance ~~as defined by article 7 or federal law~~ **THAT IS**
4 **INCLUDED IN SCHEDULES 2 TO 5 OF PART 72**, as a delegated act of the
5 supervising physician. When delegated prescription occurs, **BOTH** the
6 **PHYSICIAN'S ASSISTANT'S OR NURSE PRACTITIONER'S NAME AND THE**
7 supervising physician's name shall be used, recorded, or otherwise
8 indicated in connection with each individual prescription so that
9 the individual who dispenses or administers the prescription knows
10 under whose delegated authority the physician's assistant **OR NURSE**
11 **PRACTITIONER** is prescribing.

12 (4) A physician's assistant **OR NURSE PRACTITIONER** may order,
13 receive, and dispense complimentary starter dose drugs, ~~other than~~
14 **INCLUDING** controlled substances ~~as defined by article 7 or federal~~
15 ~~law~~ **THAT ARE INCLUDED IN SCHEDULES 2 TO 5 OF PART 72**, as a
16 delegated act of a supervising physician. When the delegated
17 ordering, receipt, or dispensing of complimentary starter dose
18 drugs occurs, **BOTH** the **PHYSICIAN'S ASSISTANT'S OR NURSE**
19 **PRACTITIONER'S NAME AND THE** supervising physician's name shall be
20 used, recorded, or otherwise indicated in connection with each
21 order, receipt, or dispensing so that the individual who processes
22 the order or delivers the complimentary starter dose drugs or to
23 whom the complimentary starter dose drugs are dispensed knows under
24 whose delegated authority the physician's assistant **OR NURSE**
25 **PRACTITIONER** is ordering, receiving, or dispensing. As used in this
26 subsection, "complimentary starter dose" means that term as defined
27 in section 17745. It is the intent of the legislature in enacting

1 this subsection to allow a pharmaceutical manufacturer or wholesale
2 distributor, as those terms are defined in part 177, to distribute
3 complimentary starter dose drugs to a physician's assistant **OR**
4 **NURSE PRACTITIONER**, as described in this subsection, in compliance
5 with section 503(d) of the federal food, drug, and cosmetic act,
6 ~~chapter 675, 52 Stat. 1051, 21 U.S.C. 21 USC 353.~~

7 Sec. 17078. (1) A physician's assistant **OR A NURSE**
8 **PRACTITIONER** is the agent of ~~the~~**HIS OR HER** supervising physician
9 **UNDER THIS PART OR PART 175** or supervising podiatrist **UNDER PART**
10 **180**. A communication made to a physician's assistant **OR NURSE**
11 **PRACTITIONER** that would be a privileged communication if made to
12 the supervising physician **UNDER THIS PART OR PART 175** or
13 supervising podiatrist **UNDER PART 180** is a privileged communication
14 to the physician's assistant **OR NURSE PRACTITIONER** and the
15 supervising physician or supervising podiatrist to the same extent
16 as if the communication were made to the supervising physician or
17 supervising podiatrist.

18 (2) A physician's assistant **OR NURSE PRACTITIONER** shall
19 conform to minimal standards of acceptable and prevailing practice
20 for the supervising physician **UNDER THIS PART OR PART 175** or
21 supervising podiatrist **UNDER PART 180**.

22 Sec. 17548. (1) Except as otherwise provided in this
23 subsection and section 17549(5), a physician who is a sole
24 practitioner or who practices in a group of physicians and treats
25 patients on an outpatient basis shall not supervise more than 4
26 physician's assistants **OR NURSE PRACTITIONERS**. If a physician
27 described in this subsection supervises physician's assistants **OR**

1 **NURSE PRACTITIONERS** at more than 1 practice site, the physician
2 shall not supervise more than 2 physician's assistants **OR NURSE**
3 **PRACTITIONERS** by a method other than the physician's actual
4 physical presence at the practice site.

5 (2) A physician who is employed by or under contract or
6 subcontract to or has privileges at a health facility licensed
7 under article 17 or a state correctional facility may supervise
8 more than 4 physician's assistants **OR NURSE PRACTITIONERS** at the
9 health facility or agency or state correctional facility.

10 (3) To the extent that a particular selected medical care
11 service requires extensive medical training, education, or ability
12 or pose serious risks to the health and safety of patients, the
13 board may prohibit or otherwise restrict the delegation of that
14 medical care service or may require higher levels of supervision.

15 (4) A physician shall not delegate ultimate responsibility for
16 the quality of medical care services, even if the medical care
17 services are provided by a physician's assistant **OR NURSE**
18 **PRACTITIONER**.

19 (5) The board may promulgate rules for the delegation by a
20 supervising physician to a physician's assistant **OR NURSE**
21 **PRACTITIONER** of the function of prescription of drugs. The rules
22 may define the drugs or classes of drugs the prescription of which
23 shall not be delegated and other procedures and protocols necessary
24 to promote consistency with federal and state drug control and
25 enforcement laws. ~~Until the rules are promulgated, a supervising~~
26 ~~physician may delegate the prescription of drugs other than~~
27 ~~controlled substances as defined by article 7 or federal law. When~~

1 delegated prescription occurs, both the physician's assistant's **OR**
2 **NURSE PRACTITIONER'S** name and the supervising physician's name
3 shall be used, recorded, or otherwise indicated in connection with
4 each individual prescription.

5 (6) A supervising physician may delegate in writing to a
6 physician's assistant **OR NURSE PRACTITIONER** the ordering, receipt,
7 and dispensing of complimentary starter dose drugs ~~other than~~
8 **INCLUDING** controlled substances ~~as defined by article 7 or federal~~
9 ~~law~~ **THAT ARE INCLUDED IN SCHEDULES 2 TO 5 OF PART 72**. When the
10 delegated ordering, receipt, or dispensing of complimentary starter
11 dose drugs occurs, both the physician's assistant's **OR NURSE**
12 **PRACTITIONER'S** name and the supervising physician's name shall be
13 used, recorded, or otherwise indicated in connection with each
14 order, receipt, or dispensing. As used in this subsection,
15 "complimentary starter dose" means that term as defined in section
16 17745. It is the intent of the legislature in enacting this
17 subsection to allow a pharmaceutical manufacturer or wholesale
18 distributor, as those terms are defined in part 177, to distribute
19 complimentary starter dose drugs to a physician's assistant, as
20 described in this subsection, in compliance with section 503(d) of
21 the federal food, drug, and cosmetic act, ~~chapter 675, 52 Stat.~~
22 ~~1051, 21 U.S.C.~~ **21 USC 353**.

23 Sec. 17549. (1) In addition to the other requirements of this
24 section and subject to subsection (5), a physician who supervises a
25 physician's assistant **OR NURSE PRACTITIONER** is responsible for all
26 of the following:

27 (a) Verification of the physician's assistant's **OR NURSE**

1 **PRACTITIONER'S** credentials.

2 (b) Evaluation of the physician's assistant's **OR NURSE**
3 **PRACTITIONER'S** performance.

4 (c) Monitoring the physician's assistant's **OR NURSE**
5 **PRACTITIONER'S** practice and provision of medical care services.

6 (2) Subject to section **16215 OR 17548, AS APPLICABLE,** a
7 physician who supervises a physician's assistant **OR NURSE**
8 **PRACTITIONER** may delegate to the physician's assistant **OR NURSE**
9 **PRACTITIONER** the performance of medical care services for a patient
10 who is under the case management responsibility of the physician,
11 if the delegation is consistent with the physician's assistant's **OR**
12 **NURSE PRACTITIONER'S** training.

13 (3) A physician who supervises a physician's assistant **OR**
14 **NURSE PRACTITIONER** is responsible for the clinical supervision of
15 each physician's assistant **AND NURSE PRACTITIONER** to whom the
16 physician delegates the performance of medical care service under
17 subsection (2).

18 (4) Subject to subsection (5), a physician who supervises a
19 physician's assistant **OR NURSE PRACTITIONER** shall keep on file in
20 the physician's office or in the health facility or agency or state
21 correctional facility in which the physician supervises the
22 physician's assistant **OR NURSE PRACTITIONER** a permanent, written
23 record that includes the physician's name and license number and
24 the name and license number of each physician's assistant **AND NURSE**
25 **PRACTITIONER** supervised by the physician.

26 (5) A group of physicians practicing other than as sole
27 practitioners may designate 1 or more physicians in the group to

1 fulfill the requirements of subsections (1) and (4).

2 (6) Notwithstanding any law or rule to the contrary, a
3 physician is not required to countersign orders written in a
4 patient's clinical record by a physician's assistant **OR NURSE**
5 **PRACTITIONER** to whom the physician has delegated the performance of
6 medical care services for a patient. **NOTWITHSTANDING ANY LAW OR**
7 **RULE TO THE CONTRARY, A PHYSICIAN IS NOT REQUIRED TO SIGN AN**
8 **OFFICIAL FORM THAT LISTS THE PHYSICIAN'S SIGNATURE AS THE REQUIRED**
9 **SIGNATORY IF THAT OFFICIAL FORM IS SIGNED BY A PHYSICIAN'S**
10 **ASSISTANT OR NURSE PRACTITIONER TO WHOM THE PHYSICIAN HAS DELEGATED**
11 **THE PERFORMANCE OF MEDICAL CARE SERVICES.**

12 Sec. 17550. In addition to its other powers and duties under
13 this article, the board may prohibit a physician from supervising 1
14 or more physician's assistants **OR NURSE PRACTITIONERS** for any of
15 the grounds set forth in section 16221 or for failure to supervise
16 a physician's assistant **OR NURSE PRACTITIONER** in accordance with
17 this part and rules promulgated under this part.

18 Sec. 17745. (1) Except as otherwise provided in this
19 subsection, a prescriber who wishes to dispense prescription drugs
20 shall obtain from the board a drug control license for each
21 location in which the storage and dispensing of prescription drugs
22 occur. A drug control license is not necessary if the dispensing
23 occurs in the emergency department, emergency room, or trauma
24 center of a hospital licensed under article 17 or if the dispensing
25 involves only the issuance of complimentary starter dose drugs.

26 (2) A dispensing prescriber shall dispense prescription drugs
27 only to his or her own patients.

1 (3) A dispensing prescriber shall include in a patient's chart
2 or clinical record a complete record, including prescription drug
3 names, dosages, and quantities, of all prescription drugs dispensed
4 directly by the dispensing prescriber or indirectly under his or
5 her delegatory authority. If prescription drugs are dispensed under
6 the prescriber's delegatory authority, the delegatee who dispenses
7 the prescription drugs shall initial the patient's chart, clinical
8 record, or log of prescription drugs dispensed. In a patient's
9 chart or clinical record, a dispensing prescriber shall distinguish
10 between prescription drugs dispensed to the patient and
11 prescription drugs prescribed for the patient. A dispensing
12 prescriber shall retain information required under this subsection
13 for not less than 5 years after the information is entered in the
14 patient's chart or clinical record.

15 (4) A dispensing prescriber shall store prescription drugs
16 under conditions that will maintain their stability, integrity, and
17 effectiveness and will assure that the prescription drugs are free
18 of contamination, deterioration, and adulteration.

19 (5) A dispensing prescriber shall store prescription drugs in
20 a substantially constructed, securely lockable cabinet. Access to
21 the cabinet shall be limited to individuals authorized to dispense
22 prescription drugs in compliance with this part and article 7.

23 (6) Unless otherwise requested by a patient, a dispensing
24 prescriber shall dispense a prescription drug in a safety closure
25 container that complies with the poison prevention packaging act of
26 1970, ~~Public Law 91-601, 84 Stat. 1670~~ **15 USC 1471 TO 1477**.

27 (7) A dispensing prescriber shall dispense a drug in a

1 container that bears a label containing all of the following
2 information:

3 (a) The name and address of the location from which the
4 prescription drug is dispensed.

5 (b) The patient's name and record number.

6 (c) The date the prescription drug was dispensed.

7 (d) The prescriber's name **AND, IF DISPENSED UNDER THE**
8 **PRESCRIBER'S DELEGATORY AUTHORITY, THE NAME OF THE DELEGATEE.**

9 (e) The directions for use.

10 (f) The name and strength of the prescription drug.

11 (g) The quantity dispensed.

12 (h) The expiration date of the prescription drug or the
13 statement required under section 17756.

14 (8) A dispensing prescriber who dispenses a complimentary
15 starter dose drug to a patient shall give the patient at least all
16 of the following information, either by dispensing the
17 complimentary starter dose drug to the patient in a container that
18 bears a label containing the information or by giving the patient a
19 written document which may include, but is not limited to, a
20 preprinted insert that comes with the complimentary starter dose
21 drug, that contains the information:

22 (a) The name and strength of the complimentary starter dose
23 drug.

24 (b) Directions for the patient's use of the complimentary
25 starter dose drug.

26 (c) The expiration date of the complimentary starter dose drug
27 or the statement required under section 17756.

1 (9) The information required under subsection (8) is in
2 addition to, and does not supersede or modify, other state or
3 federal law regulating the labeling of prescription drugs.

4 (10) In addition to meeting the requirements of this part, a
5 dispensing prescriber who dispenses controlled substances shall
6 comply with section 7303a.

7 (11) The board may periodically inspect locations from which
8 prescription drugs are dispensed.

9 (12) The act, task, or function of dispensing prescription
10 drugs shall be delegated only as provided in ~~section 16215 and this~~
11 part **AND SECTIONS 16215, 17048, 17076, 17212, AND 17548.**

12 (13) A supervising physician may delegate in writing to a
13 pharmacist practicing in a hospital pharmacy within a hospital
14 licensed under article 17 the receipt of complimentary starter dose
15 drugs other than controlled substances as defined by article 7 or
16 federal law. When the delegated receipt of complimentary starter
17 dose drugs occurs, both the pharmacist's name and the supervising
18 physician's name shall be used, recorded, or otherwise indicated in
19 connection with each receipt. A pharmacist described in this
20 subsection may dispense a prescription for complimentary starter
21 dose drugs written or transmitted by facsimile, electronic
22 transmission, or other means of communication by a prescriber.

23 (14) As used in this section, "complimentary starter dose"
24 means a prescription drug packaged, dispensed, and distributed in
25 accordance with state and federal law that is provided to a
26 dispensing prescriber free of charge by a manufacturer or
27 distributor and dispensed free of charge by the dispensing

1 prescriber to his or her patients.

2 Sec. 17757. (1) Upon a request made in person or by telephone,
3 a pharmacist engaged in the business of selling drugs at retail
4 shall provide the current selling price of a drug dispensed by that
5 pharmacy or comparative current selling prices of generic and brand
6 name drugs dispensed by that pharmacy. The information shall be
7 provided to the person making the request before a drug is
8 dispensed to the person. A person who makes a request for price
9 information under this subsection shall not be obligated to
10 purchase the drug for which the price or comparative prices are
11 requested.

12 (2) A pharmacist engaged in the business of selling drugs at
13 retail shall conspicuously display the notice described in
14 subsection (3) at each counter over which prescription drugs are
15 dispensed.

16 (3) The notice required under subsection (2) shall be in
17 substantially the following form:

18 NOTICE TO CONSUMERS

19 ABOUT PRESCRIPTION DRUGS

20 Under Michigan law, you have the right to find out the price
21 of a prescription drug before the pharmacist fills the
22 prescription. You are under no obligation to have the prescription
23 filled here and may use this price information to shop around at
24 other pharmacies. You may request price information in person or by
25 telephone.

26 Every pharmacy has the current selling prices of both generic
27 and brand name drugs dispensed by the pharmacy.

1 Ask your pharmacist if a lower-cost generic drug is available
2 to fill your prescription. A generic drug contains the same
3 medicine as a brand name drug and is a suitable substitute in most
4 instances.

5 A generic drug may not be dispensed by your pharmacist if your
6 doctor has written "dispense as written" or the initials "d.a.w."
7 on the prescription.

8 If you have questions about the drugs which have been
9 prescribed for you, ask your doctor or pharmacist for more
10 information.

11 To avoid dangerous drug interactions, let your doctor and
12 pharmacist know about any other medications you are taking. This is
13 especially important if you have more than 1 doctor or have
14 prescriptions filled at more than 1 pharmacy.

15 (4) The notice required under subsection (2) shall also
16 contain the address and phone number of the board and the
17 department. The text of the notice shall be in at least 32-point
18 bold type and shall be printed on paper at least 11 inches by 17
19 inches in size. The notice may be printed on multiple pages.

20 (5) A copy of the notice required under subsection (2) shall
21 be provided to each licensee by the department. Additional copies
22 shall be available if needed from the department. A person may
23 duplicate or reproduce the notice if the duplication or
24 reproduction is a true copy of the notice as produced by the
25 department, without any additions or deletions whatsoever.

26 (6) The pharmacist shall furnish to the purchaser of a
27 prescription drug at the time the drug is delivered to the

1 purchaser a receipt evidencing the transactions, which contains the
2 following:

3 (a) The brand name of the drug, if applicable.

4 (b) The name of the manufacturer or the supplier of the drug,
5 if the drug does not have a brand name.

6 (c) The strength of the drug, if significant.

7 (d) The quantity dispensed, if applicable.

8 (e) The name and address of the pharmacy.

9 (f) The serial number of the prescription.

10 (g) The date the prescription was originally dispensed.

11 (h) The name of the prescriber **AND, IF PRESCRIBED UNDER THE**
12 **PRESCRIBER'S DELEGATORY AUTHORITY, THE NAME OF THE DELEGATEE.**

13 (i) The name of patient for whom the drug was prescribed.

14 (j) The price for which the drug was sold to the purchaser.

15 (7) Subsection (6) (a), (b), and (c) may be omitted by a
16 pharmacist only if the omission is expressly required by the
17 prescriber. The pharmacist shall retain a copy of each receipt for
18 90 days. The inclusion of subsection (6) on the prescription
19 container label is a valid receipt to the purchaser. Including
20 subsection (6) on the written prescription form and retaining the
21 form constitutes retention of a copy of the receipt.

22 (8) The board may promulgate rules to implement this section.

23 Sec. 18048. (1) Except as otherwise provided in this section
24 **AND SECTION 18049(5)**, a podiatrist who is a sole practitioner or
25 who practices in a group of podiatrists and treats patients on an
26 outpatient basis shall not supervise more than 4 physician's
27 assistants **OR NURSE PRACTITIONERS**. If a podiatrist described in

1 this subsection supervises physician's assistants **OR NURSE**
2 **PRACTITIONERS** at more than 1 practice site, the podiatrist shall
3 not supervise more than 2 physician's assistants **OR NURSE**
4 **PRACTITIONERS** by a method other than the podiatrist's actual
5 physical presence at the practice site.

6 (2) A podiatrist who is employed by or under contract or
7 subcontract to or has privileges at a health facility licensed
8 under article 17 may supervise more than 4 physician's assistants
9 **OR NURSE PRACTITIONERS** at the health facility or agency.

10 (3) The department may promulgate rules for the appropriate
11 delegation and utilization of a physician's assistant **OR NURSE**
12 **PRACTITIONER** by a podiatrist, including, but not limited to, rules
13 to prohibit or otherwise restrict the delegation of certain
14 podiatric services or require higher levels of supervision if the
15 board determines that ~~such~~**THESE** services require extensive
16 training, education, or ability or pose serious risks to the health
17 or safety of patients.

18 Sec. 18049. (1) In addition to the other requirements of this
19 section and subject to subsection (5), a podiatrist who supervises
20 a physician's assistant **OR NURSE PRACTITIONER** is responsible for
21 all of the following:

22 (a) Verification of the physician's assistant's **OR NURSE**
23 **PRACTITIONER'S** credentials.

24 (b) Evaluation of the physician's assistant's **OR NURSE**
25 **PRACTITIONER'S** performance.

26 (c) Monitoring the physician's assistant's **OR NURSE**
27 **PRACTITIONER'S** practice and provision of podiatric services.

1 (2) Subject to section **16215 OR 18048, AS APPLICABLE**, a
2 podiatrist who supervises a physician's assistant **OR NURSE**
3 **PRACTITIONER** may only delegate to the physician's assistant **OR**
4 **NURSE PRACTITIONER** the performance of podiatric services for a
5 patient who is under the case management responsibility of the
6 podiatrist, if the delegation is consistent with the physician's
7 assistant's **OR NURSE PRACTITIONER'S** training. A podiatrist shall
8 only supervise a physician's assistant **OR NURSE PRACTITIONER** in the
9 performance of those duties included within his or her scope of
10 practice.

11 (3) A podiatrist who supervises a physician's assistant **OR**
12 **NURSE PRACTITIONER** is responsible for the clinical supervision of
13 each physician's assistant **AND NURSE PRACTITIONER** to whom the
14 physician delegates the performance of podiatric services under
15 subsection (2).

16 (4) Subject to subsection (5), a podiatrist who supervises a
17 physician's assistant **OR NURSE PRACTITIONER** shall keep on file in
18 the physician's office or in the health facility or agency in which
19 the podiatrist supervises the physician's assistant **OR NURSE**
20 **PRACTITIONER** a permanent, written record that includes the
21 podiatrist's name and license number and the name and license
22 number of each physician's assistant **AND NURSE PRACTITIONER**
23 supervised by the podiatrist.

24 (5) A group of podiatrists practicing other than as sole
25 practitioners may designate 1 or more podiatrists in the group to
26 fulfill the requirements of subsections (1) and (4).

27 Sec. 18050. In addition to its other powers and duties under

1 this article, the board may prohibit a podiatrist from supervising
2 1 or more physician's assistants **OR NURSE PRACTITIONERS** for any of
3 the grounds set forth in section 16221 or for failure to supervise
4 a physician's assistant **OR NURSE PRACTITIONER** in accordance with
5 this part and rules promulgated under this part.

6 Sec. 20201. (1) A health facility or agency that provides
7 services directly to patients or residents and is licensed under
8 this article shall adopt a policy describing the rights and
9 responsibilities of patients or residents admitted to the health
10 facility or agency. Except for a licensed health maintenance
11 organization, which shall comply with chapter 35 of the insurance
12 code of 1956, 1956 PA 218, MCL 500.3501 to 500.3580, the policy
13 shall be posted at a public place in the health facility or agency
14 and shall be provided to each member of the health facility or
15 agency staff. Patients or residents shall be treated in accordance
16 with the policy.

17 (2) The policy describing the rights and responsibilities of
18 patients or residents required under subsection (1) shall include,
19 as a minimum, all of the following:

20 (a) A patient or resident shall not be denied appropriate care
21 on the basis of race, religion, color, national origin, sex, age,
22 disability, marital status, sexual preference, or source of
23 payment.

24 (b) An individual who is or has been a patient or resident is
25 entitled to inspect, or receive for a reasonable fee, a copy of his
26 or her medical record upon request in accordance with the medical
27 records access act, 2004 PA 47, MCL 333.26261 to 333.26271. Except

1 as otherwise permitted or required under the health insurance
2 portability and accountability act of 1996, Public Law 104-191, or
3 regulations promulgated under that act, 45 CFR parts 160 and 164, a
4 third party shall not be given a copy of the patient's or
5 resident's medical record without prior authorization of the
6 patient or resident.

7 (c) A patient or resident is entitled to confidential
8 treatment of personal and medical records, and may refuse their
9 release to a person outside the health facility or agency except as
10 required because of a transfer to another health care facility, as
11 required by law or third party payment contract, or as permitted or
12 required under the health insurance portability and accountability
13 act of 1996, Public Law 104-191, or regulations promulgated under
14 that act, 45 CFR parts 160 and 164.

15 (d) A patient or resident is entitled to privacy, to the
16 extent feasible, in treatment and in caring for personal needs with
17 consideration, respect, and full recognition of his or her dignity
18 and individuality.

19 (e) A patient or resident is entitled to receive adequate and
20 appropriate care, and to receive, from the appropriate individual
21 within the health facility or agency, information about his or her
22 medical condition, proposed course of treatment, and prospects for
23 recovery, in terms that the patient or resident can understand,
24 unless medically contraindicated as documented ~~by the attending~~
25 ~~physician~~ **in the medical record BY THE ATTENDING PHYSICIAN OR A**
26 **PHYSICIAN'S ASSISTANT OR NURSE PRACTITIONER TO WHOM THE PHYSICIAN**
27 **HAS DELEGATED THE PERFORMANCE OF MEDICAL CARE SERVICES.**

1 (f) A patient or resident is entitled to refuse treatment to
2 the extent provided by law and to be informed of the consequences
3 of that refusal. If a refusal of treatment prevents a health
4 facility or agency or its staff from providing appropriate care
5 according to ethical and professional standards, the relationship
6 with the patient or resident may be terminated upon reasonable
7 notice.

8 (g) A patient or resident is entitled to exercise his or her
9 rights as a patient or resident and as a citizen, and to this end
10 may present grievances or recommend changes in policies and
11 services on behalf of himself or herself or others to the health
12 facility or agency staff, to governmental officials, or to another
13 person of his or her choice within or outside the health facility
14 or agency, free from restraint, interference, coercion,
15 discrimination, or reprisal. A patient or resident is entitled to
16 information about the health facility's or agency's policies and
17 procedures for initiation, review, and resolution of patient or
18 resident complaints.

19 (h) A patient or resident is entitled to information
20 concerning an experimental procedure proposed as a part of his or
21 her care and has the right to refuse to participate in the
22 experimental procedure without jeopardizing his or her continuing
23 care.

24 (i) A patient or resident is entitled to receive and examine
25 an explanation of his or her bill regardless of the source of
26 payment and to receive, upon request, information relating to
27 financial assistance available through the health facility or

1 agency.

2 (j) A patient or resident is entitled to know who is
3 responsible for and who is providing his or her direct care, is
4 entitled to receive information concerning his or her continuing
5 health needs and alternatives for meeting those needs, and to be
6 involved in his or her discharge planning, if appropriate.

7 (k) A patient or resident is entitled to associate and have
8 private communications and consultations with his or her physician
9 **OR A PHYSICIAN'S ASSISTANT OR NURSE PRACTITIONER TO WHOM THE**
10 **PHYSICIAN HAS DELEGATED THE PERFORMANCE OF MEDICAL CARE SERVICES,**
11 attorney, or any other person of his or her choice and to send and
12 receive personal mail unopened on the same day it is received at
13 the health facility or agency, unless medically contraindicated as
14 documented ~~by the attending physician~~ in the medical record **BY THE**
15 **ATTENDING PHYSICIAN OR A PHYSICIAN'S ASSISTANT OR NURSE**
16 **PRACTITIONER TO WHOM THE PHYSICIAN HAS DELEGATED THE PERFORMANCE OF**
17 **MEDICAL CARE SERVICES.** A patient's or resident's civil and
18 religious liberties, including the right to independent personal
19 decisions and the right to knowledge of available choices, shall
20 not be infringed and the health facility or agency shall encourage
21 and assist in the fullest possible exercise of these rights. A
22 patient or resident may meet with, and participate in, the
23 activities of social, religious, and community groups at his or her
24 discretion, unless medically contraindicated as documented ~~by the~~
25 ~~attending physician~~ in the medical record **BY THE ATTENDING**
26 **PHYSICIAN OR A PHYSICIAN'S ASSISTANT OR NURSE PRACTITIONER TO WHOM**
27 **THE PHYSICIAN HAS DELEGATED THE PERFORMANCE OF MEDICAL CARE**

1 **SERVICES.**

2 (l) A patient or resident is entitled to be free from mental
3 and physical abuse and from physical and chemical restraints,
4 except those restraints authorized in writing by the attending
5 physician **OR A PHYSICIAN'S ASSISTANT OR NURSE PRACTITIONER TO WHOM**
6 **THE PHYSICIAN HAS DELEGATED THE PERFORMANCE OF MEDICAL CARE**
7 **SERVICES** for a specified and limited time or as are necessitated by
8 an emergency to protect the patient or resident from injury to self
9 or others, in which case the restraint may only be applied by a
10 qualified professional who shall set forth in writing the
11 circumstances requiring the use of restraints and who shall
12 promptly report the action to the attending physician, **PHYSICIAN'S**
13 **ASSISTANT, OR NURSE PRACTITIONER.** In case of a chemical restraint,
14 a physician shall be consulted within 24 hours after the
15 commencement of the chemical restraint.

16 (m) A patient or resident is entitled to be free from
17 performing services for the health facility or agency that are not
18 included for therapeutic purposes in the plan of care.

19 (n) A patient or resident is entitled to information about the
20 health facility or agency rules and regulations affecting patient
21 or resident care and conduct.

22 (o) A patient or resident is entitled to adequate and
23 appropriate pain and symptom management as a basic and essential
24 element of his or her medical treatment.

25 (3) The following additional requirements for the policy
26 described in subsection (2) apply to licensees under parts 213 and
27 217:

1 (a) The policy shall be provided to each nursing home patient
2 or home for the aged resident upon admission, and the staff of the
3 facility shall be trained and involved in the implementation of the
4 policy.

5 (b) Each nursing home patient may associate and communicate
6 privately with persons of his or her choice. Reasonable, regular
7 visiting hours, which shall be not less than 8 hours per day, and
8 which shall take into consideration the special circumstances of
9 each visitor, shall be established for patients to receive
10 visitors. A patient may be visited by the patient's attorney or by
11 representatives of the departments named in section 20156, during
12 other than established visiting hours. Reasonable privacy shall be
13 afforded for visitation of a patient who shares a room with another
14 patient. Each patient shall have reasonable access to a telephone.
15 A married nursing home patient or home for the aged resident is
16 entitled to meet privately with his or her spouse in a room that
17 assures privacy. If both spouses are residents in the same
18 facility, they are entitled to share a room unless medically
19 contraindicated and documented ~~by the attending physician~~ in the
20 medical record **BY THE ATTENDING PHYSICIAN OR A PHYSICIAN'S**
21 **ASSISTANT OR NURSE PRACTITIONER TO WHOM THE PHYSICIAN HAS DELEGATED**
22 **THE PERFORMANCE OF MEDICAL CARE SERVICES.**

23 (c) A nursing home patient or home for the aged resident is
24 entitled to retain and use personal clothing and possessions as
25 space permits, unless to do so would infringe upon the rights of
26 other patients or residents, or unless medically contraindicated as
27 documented ~~by the attending physician~~ in the medical record **BY THE**

1 **ATTENDING PHYSICIAN OR A PHYSICIAN'S ASSISTANT OR NURSE**
2 **PRACTITIONER TO WHOM THE PHYSICIAN HAS DELEGATED THE PERFORMANCE OF**
3 **MEDICAL CARE SERVICES.** Each nursing home patient or home for the
4 aged resident shall be provided with reasonable space. At the
5 request of a patient, a nursing home shall provide for the
6 safekeeping of personal effects, funds, and other property of a
7 patient in accordance with section 21767, except that a nursing
8 home is not required to provide for the safekeeping of a property
9 that would impose an unreasonable burden on the nursing home.

10 (d) A nursing home patient or home for the aged resident is
11 entitled to the opportunity to participate in the planning of his
12 or her medical treatment. ~~A—THE ATTENDING PHYSICIAN OR A~~
13 ~~PHYSICIAN'S ASSISTANT OR NURSE PRACTITIONER TO WHOM THE PHYSICIAN~~
14 ~~HAS DELEGATED THE PERFORMANCE OF MEDICAL CARE SERVICES SHALL FULLY~~
15 ~~INFORM THE~~ nursing home patient ~~shall be fully informed by the~~
16 ~~attending physician~~ of the patient's medical condition unless
17 medically contraindicated as documented ~~by a physician~~ in the
18 medical record **BY A PHYSICIAN OR A PHYSICIAN'S ASSISTANT OR NURSE**
19 **PRACTITIONER TO WHOM THE PHYSICIAN HAS DELEGATED THE PERFORMANCE OF**
20 **MEDICAL CARE SERVICES.** Each nursing home patient shall be afforded
21 the opportunity to discharge himself or herself from the nursing
22 home.

23 (e) A home for the aged resident may be transferred or
24 discharged only for medical reasons, for his or her welfare or that
25 of other residents, or for nonpayment of his or her stay, except as
26 provided by title XVIII or title XIX. A nursing home patient may be
27 transferred or discharged only as provided in sections 21773 to

1 21777. A nursing home patient or home for the aged resident is
2 entitled to be given reasonable advance notice to ensure orderly
3 transfer or discharge. Those actions shall be documented in the
4 medical record.

5 (f) A nursing home patient or home for the aged resident is
6 entitled to be fully informed before or at the time of admission
7 and during stay of services available in the facility, and of the
8 related charges including any charges for services not covered
9 under title XVIII, or not covered by the facility's basic per diem
10 rate. The statement of services provided by the facility shall be
11 in writing and shall include those required to be offered on an as-
12 needed basis.

13 (g) A nursing home patient or home for the aged resident is
14 entitled to manage his or her own financial affairs, or to have at
15 least a quarterly accounting of personal financial transactions
16 undertaken in his or her behalf by the facility during a period of
17 time the patient or resident has delegated those responsibilities
18 to the facility. In addition, a patient or resident is entitled to
19 receive each month from the facility an itemized statement setting
20 forth the services paid for by or on behalf of the patient and the
21 services rendered by the facility. The admission of a patient to a
22 nursing home does not confer on the nursing home or its owner,
23 administrator, employees, or representatives the authority to
24 manage, use, or dispose of a patient's property.

25 (h) A nursing home patient or a person authorized by the
26 patient in writing may inspect and copy the patient's personal and
27 medical records. The records shall be made available for inspection

1 and copying by the nursing home within a reasonable time, not
2 exceeding 1 week, after the receipt of a written request.

3 (i) If a nursing home patient desires treatment by a licensed
4 member of the healing arts, the treatment shall be made available
5 unless it is medically contraindicated, and the medical
6 contraindication is justified in the patient's medical record by
7 the attending physician **OR A PHYSICIAN'S ASSISTANT OR NURSE**
8 **PRACTITIONER TO WHOM THE PHYSICIAN HAS DELEGATED THE PERFORMANCE OF**
9 **MEDICAL CARE SERVICES.**

10 (j) A nursing home patient has the right to have his or her
11 parents, if a minor, or his or her spouse, next of kin, or
12 patient's representative, if an adult, stay at the facility 24
13 hours a day if the patient is considered terminally ill by the
14 physician responsible for the patient's care **OR A PHYSICIAN'S**
15 **ASSISTANT OR NURSE PRACTITIONER TO WHOM THE PHYSICIAN HAS DELEGATED**
16 **THE PERFORMANCE OF MEDICAL CARE SERVICES.**

17 (k) Each nursing home patient shall be provided with meals
18 that meet the recommended dietary allowances for that patient's age
19 and sex and that may be modified according to special dietary needs
20 or ability to chew.

21 (l) Each nursing home patient has the right to receive
22 representatives of approved organizations as provided in section
23 21763.

24 (4) A nursing home, its owner, administrator, employee, or
25 representative shall not discharge, harass, or retaliate or
26 discriminate against a patient because the patient has exercised a
27 right protected under this section.

1 (5) In the case of a nursing home patient, the rights
2 enumerated in subsection (2)(c), (g), and (k) and subsection
3 (3)(d), (g), and (h) may be exercised by the patient's
4 representative.

5 (6) A nursing home patient or home for the aged resident is
6 entitled to be fully informed, as evidenced by the patient's or
7 resident's written acknowledgment, before or at the time of
8 admission and during stay, of the policy required by this section.
9 The policy shall provide that if a patient or resident is
10 adjudicated incompetent and not restored to legal capacity, the
11 rights and responsibilities set forth in this section shall be
12 exercised by a person designated by the patient or resident. The
13 health facility or agency shall provide proper forms for the
14 patient or resident to provide for the designation of this person
15 at the time of admission.

16 (7) This section does not prohibit a health facility or agency
17 from establishing and recognizing additional patients' rights.

18 (8) As used in this section:

19 (a) "Patient's representative" means that term as defined in
20 section 21703.

21 (b) "Title XVIII" means title XVIII of the social security
22 act, 42 USC 1395 to ~~1395hhh~~ **1395KKK-1**.

23 (c) "Title XIX" means title XIX of the social security act, 42
24 USC 1396 to ~~1396v~~ **1396W-5**.