
HOUSE BILL 1737

State of Washington 63rd Legislature 2013 Regular Session

By Representatives Morrell, Manweller, Clibborn, and Moeller

Read first time 02/06/13. Referred to Committee on Health Care & Wellness.

1 AN ACT Relating to supervision of physician assistants; amending
2 RCW 18.57A.030, 18.57A.040, 18.57A.080, and 18.71A.030; reenacting and
3 amending RCW 18.71A.040; adding a new section to chapter 18.57A RCW;
4 adding a new section to chapter 18.71A RCW; and creating a new section.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

6 NEW SECTION. **Sec. 1.** The legislature finds that failure to review
7 and approve delegation agreements in a timely manner is harmful to
8 patient access to care. It is therefore the intent of the legislature
9 that delegation agreements, found to be without issue, be processed in
10 no more than one business week.

11 NEW SECTION. **Sec. 2.** A new section is added to chapter 18.57A RCW
12 to read as follows:

13 (1) No licensee may be utilized in a remote site without approval
14 by the board or its designee. A "remote site" is defined as a setting
15 physically separate from the sponsoring or supervising physician's
16 primary place for meeting patients or a setting where the physician is
17 present less than twenty-five percent of the practice time of the
18 licensee.

1 (2)(a) Approval by the commission or its designee may be granted to
2 utilize a licensee in a remote site if:

3 (i) There is a demonstrated need for the utilization;

4 (ii) Adequate provision for timely communication between the
5 primary or alternate physician and the licensee exists;

6 (iii) The responsible sponsoring or supervising physician spends at
7 least ten percent of the practice time of the licensee in the remote
8 site unless the sponsoring physician demonstrates that adequate
9 supervision is being maintained by an alternate method such as
10 telecommunication.

11 (b) The names of the sponsoring or supervising physician and the
12 licensee must be prominently displayed at the entrance to the clinic or
13 in the reception area.

14 (3) No physician assistant holding an interim permit may be
15 utilized in a remote site setting.

16 NEW SECTION. **Sec. 3.** A new section is added to chapter 18.71A RCW
17 to read as follows:

18 (1) No licensee may be utilized in a remote site without approval
19 by the commission or its designee. A "remote site" is defined as a
20 setting physically separate from the sponsoring or supervising
21 physician's primary place for meeting patients or a setting where the
22 physician is present less than twenty-five percent of the practice time
23 of the licensee.

24 (2)(a) Approval by the commission or its designee may be granted to
25 utilize a licensee in a remote site if:

26 (i) There is a demonstrated need for the utilization;

27 (ii) Adequate provision for timely communication between the
28 primary or alternate physician and the licensee exists;

29 (iii) The responsible sponsoring or supervising physician spends at
30 least ten percent of the practice time of the licensee in the remote
31 site unless the sponsoring physician demonstrates that adequate
32 supervision is being maintained by an alternate method such as
33 telecommunication.

34 (b) The names of the sponsoring or supervising physician and the
35 licensee must be prominently displayed at the entrance to the clinic or
36 in the reception area.

1 (3) No physician assistant holding an interim permit may be
2 utilized in a remote site setting.

3 **Sec. 4.** RCW 18.57A.030 and 1993 c 28 s 2 are each amended to read
4 as follows:

5 An osteopathic physician assistant as defined in this chapter may
6 practice osteopathic medicine in this state only with the approval of
7 the ((~~practice arrangement plan~~)) delegation agreement by the board and
8 only to the extent permitted by the board. An osteopathic physician
9 assistant who has received a license but who has not received board
10 approval of the ((~~practice arrangement plan~~)) delegation agreement
11 under RCW 18.57A.040 may not practice. An osteopathic physician
12 assistant shall be subject to discipline by the board under the
13 provisions of chapter 18.130 RCW.

14 **Sec. 5.** RCW 18.57A.040 and 1993 c 28 s 3 are each amended to read
15 as follows:

16 (1) No osteopathic physician assistant practicing in this state
17 shall be employed or supervised by an osteopathic physician or
18 physician group without the approval of the board.

19 (2) Prior to commencing practice, an osteopathic physician
20 assistant licensed in this state shall apply to the board for
21 permission to be employed or supervised by an osteopathic physician or
22 physician group. The ((~~practice arrangement plan~~)) delegation
23 agreement shall be jointly submitted by the osteopathic physician or
24 physician group and osteopathic physician assistant. The secretary may
25 charge a fee as provided in RCW 43.70.250 to recover the cost for the
26 plan review. The ((~~practice arrangement plan~~)) delegation agreement
27 shall delineate the manner and extent to which the physician assistant
28 would practice and be supervised. Whenever an osteopathic physician
29 assistant is practicing in a manner inconsistent with the approved
30 ((~~practice arrangement plan~~)) delegation agreement, the board may take
31 disciplinary action under chapter 18.130 RCW.

32 (3) An osteopathic physician may enter into practice arrangement
33 plans with five physician assistants, but may petition the board for a
34 waiver of this limit. However, no osteopathic physician may have under
35 his or her supervision more physician assistants than the osteopathic
36 physician can adequately supervise.

1 **Sec. 6.** RCW 18.57A.080 and 2007 c 264 s 2 are each amended to read
2 as follows:

3 An osteopathic physician(~~(+s)~~) assistant may sign and attest to any
4 certificates, cards, forms, or other required documentation that the
5 osteopathic physician(~~(+s)~~) assistant's supervising osteopathic
6 physician or osteopathic physician group may sign, provided that it is
7 within the osteopathic physician(~~(+s)~~) assistant's scope of practice
8 and is consistent with the terms of the osteopathic physician(~~(+s)~~)
9 assistant's (~~(practice arrangement plan)~~) delegation agreement as
10 required by this chapter.

11 **Sec. 7.** RCW 18.71A.030 and 1994 sp.s. c 9 s 320 are each amended
12 to read as follows:

13 A physician assistant may practice medicine in this state only with
14 the approval of the (~~(practice arrangement plan)~~) delegation agreement
15 by the commission and only to the extent permitted by the commission.
16 A physician assistant who has received a license but who has not
17 received commission approval of the (~~(practice arrangement plan)~~)
18 delegation agreement under RCW 18.71A.040 may not practice. A
19 physician assistant shall be subject to discipline under chapter 18.130
20 RCW.

21 **Sec. 8.** RCW 18.71A.040 and 1996 c 191 s 58 and 1996 c 191 s 40 are
22 each reenacted and amended to read as follows:

23 (1) No physician assistant practicing in this state shall be
24 employed or supervised by a physician or physician group without the
25 approval of the commission.

26 (2) Prior to commencing practice, a physician assistant licensed in
27 this state shall apply to the commission for permission to be employed
28 or supervised by a physician or physician group. The (~~(practice
29 arrangement plan)~~) delegation agreement shall be jointly submitted by
30 the physician or physician group and physician assistant.
31 Administrative procedures, administrative requirements, and fees shall
32 be established as provided in RCW 43.70.250 and 43.70.280. The
33 (~~(practice arrangement plan)~~) delegation agreement shall delineate the
34 manner and extent to which the physician assistant would practice and
35 be supervised. Whenever a physician assistant is practicing in a

1 manner inconsistent with the approved (~~practice arrangement plan~~)
2 delegation agreement, the commission may take disciplinary action under
3 chapter 18.130 RCW.

4 (3) A physician may enter into practice arrangement plans with five
5 physician assistants, but may petition the commission for a waiver of
6 this limit. However, no physician may have under his or her
7 supervision more physician assistants than the physician can adequately
8 supervise.

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