

HCS HB 2127 -- ASSISTANT PHYSICIANS

SPONSOR: Frederick

COMMITTEE ACTION: Voted "Do Pass with HCS" by the Standing Committee on Health and Mental Health Policy by a vote of 8 to 2. Voted "Do Pass" by the Rules- Administrative Oversight Committee by a vote of 9 to 4.

The bill changes the examination requirement for an assistant physician so that an assistant physician needs to complete Step 2 or Step 3 of the United States Medical Licensing Examination within a four-year period before applying for licensure (but in no event more than four years after graduation from a medical college). Currently, an assistant physician has to complete Step 1 and Step 2 of the licensing examination within two years before applying for licensure (and in no event more than three years after graduation).

The bill allows an assistant physician to provide any services in specified locations. Currently, an assistant physician can only provide primary care services. The bill allows an assistant physician to provide services in a health care facility with internship or residency training programs.

An assistant physician shall be considered a physician assistant for reimbursement purposes and the Department of Social Services must seek any necessary waivers to implement this requirement.

The bill requires that an assistant physician licensure fee cannot be more than the licensure fee for a physician assistant. Additionally, no rules can require an assistant physician to complete more hours of continuing medical education than a licensed physician. Any rules or regulations in effect as of the effective date of this section that conflicts with the provisions of this section will be null and void.

The bill removes the requirement that an assistant physician has to enter into a collaborative practice agreement within six months of initial licensure.

A health carrier must reimburse an assistant physician on the same basis that it covers a service when it is provided by another comparable mid-level provider including, but not limited to, a physician assistant.

The bill specifies that although a collaborating physician must be continuously present with the assistant physician for a one-month period before the assistant physician can practice, "continuously present" only means that the collaborating physician and assistant

physician are practicing in the same location; it does not mean that the collaborating physician must physically present while the assistant physician is seeing patients. Additionally, no rule can require that the collaborating physician must review more than 10% of the assistant physician's patient charts during this one-month period.

An assistant physician may prescribe buprenorphine for up to a 30-day supply without refill.

Nothing in this bill shall be construed to limit the authority of hospitals to make employment or medical staff credentialing or privileging decisions.

PROPOSERS: Supporters say that the assistant physician program allows doctors to gain experience while waiting to enter residency and that more physicians means increased access to care.

Testifying for the bill were Representative Frederick; Dr. Junaid Syed; Brent McGinty, Missouri Coalition for Community Behavioral Healthcare; Ray Paguntalan; Missouri State Medical Association; and the Missouri Psychiatric Physicians Association.

OPPOSERS: Those who oppose the bill say that the assistant physician program has not been implemented long enough to know if expansion is necessary and that medical school was not designed to produce practitioners without residency.

Testifying against the bill were Jennifer Allen MD, Missouri Academy of Family Physicians; Washington University Medical School; SLU Medical School; Missouri Academy of Physicians Assistants; Blue Cross Blue Shield of Kansas City, Missouri Insurance Coalition; Heidi N Lucas, Missouri Nurses Association; and Missouri Nurse Practitioner Association.

OTHERS: Others testifying on the bill say that the assistant physician program improves access to care, educational opportunities for physicians and recruitment tools for small towns.

Testifying on the bill were Dr. Amanda Turner and Elizabeth Muknerjee.