

HB 2127 -- ASSISTANT PHYSICIANS

SPONSOR: Frederick

The bill states that an assistant physician need only complete Step 2 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.

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

The Director of the Department of Health and Senior Services may collaborate with any number of assistant physicians for the treatment of substance abuse disorders if the treatment is provided using Extension for Community Healthcare Outcomes (ECHO) technology.

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, like 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.