



Ohio Legislative Service Commission

Justin Pinsker

Fiscal Note & Local Impact Statement

Bill: [H.B. 412 of the 130th G.A.](#)

Date: February 12, 2014

Status: As Introduced

Sponsor: Rep. Gonzales

Local Impact Statement Procedure Required: No

Contents: To revise the law governing the practice of physician assistants

State Fiscal Highlights

- The bill eliminates the physician assistant certificate to prescribe and the provisional certificate to prescribe. As a result, the State Medical Board would lose approximately \$24,300 per year in certificate fee revenue. This loss of fee revenue could be offset by a reduction in administrative costs, as applications for the certificate to prescribe will no longer be processed. The current fee for the certificate to prescribe is \$200.
- The bill removes several current law requirements regarding materials that must be submitted to and approved by the State Medical Board detailing a physician's supervision of physician assistants. The Board currently charges \$25 for supervision agreement approval and \$15 for approval to an amendment of a supervision agreement. As a result, the Board would lose fee revenue from supervision agreement approvals. The loss of revenue could be offset by a reduction in administrative costs, as these agreements will no longer require Board approval. According to the Ohio Hospital Association (OHA), there could also be a small reduction in administrative costs to state hospitals as these supervisory documents will no longer need to be submitted to the Board.
- The bill makes several changes to the physician assistant supervision agreement between the supervising physician and the physician assistant. According to OHA, there could be a small reduction in costs to state hospitals if there is a reduction in the paperwork required.
- The bill changes the name of the "certificate to practice" issued to physician assistants to "license." According to the State Medical Board, there could be an increase in administrative costs to the Board to begin issuing licenses instead of certificates.
- The bill revises the education and experience requirements for physician assistants and the requirements to receive a prescriber number from the State Medical Board.

As a result, there could be an increase in administrative costs to the Board to accept the new educational qualifications.

- The bill modifies the services that a physician assistant can perform. According to OHA, there could be a reduction in costs for state and county hospitals if a physician assistant is available and can perform these services, allowing a supervising physician to attend to other patients.

Local Fiscal Highlights

- The bill modifies the services that a physician assistant can perform. The bill also permits a physician assistant to delegate a task the supervising physician is authorized to perform that implements the plan of care for a patient. According to OHA, there could be a reduction in costs for county hospitals if a physician assistant is available and can perform these services, allowing a supervising physician to attend to other patients. There could also be a reduction in costs for county hospitals if a delegated individual is able to perform a service instead of the physician assistant.
- The bill makes several changes to the physician assistant supervision agreement between the supervising physician and the physician assistant. According to OHA, there could be a small reduction in costs to county hospitals if there is a reduction in paperwork required.

Detailed Fiscal Analysis

Prescriptive authority

The bill eliminates the physician assistant certificate to prescribe and the provisional certificate to prescribe. Under the bill, a physician assistant who holds a valid prescriber number issued by the State Medical Board is authorized to prescribe and personally furnish drugs and therapeutic devices in exercise of physician-delegated prescriptive authority. As a result, the Board would lose approximately \$24,300 per year in certificate fee revenue. This loss of fee revenue could be offset by a reduction in administrative costs, as applications for the certificate to prescribe will no longer be processed. The current fee for the certificate to prescribe is \$200.

Physician supervision of physician assistants

The bill removes several current law requirements regarding materials that must be submitted to and approved by the State Medical Board detailing a physician's supervision of physician assistants. These include the supervision agreement, amendments to the supervision agreement, and any "special services" to be performed by a physician assistant. The Board currently charges \$25 for supervision agreement approval and \$15 for approval to an amendment of a supervision agreement. As a result, the Board would lose fee revenue from supervision agreement approvals. The loss of revenue could be offset by a reduction in administrative costs, as these agreements will no longer require Board approval. According to the Ohio Hospital Association (OHA), there could also be a small reduction in administrative costs to state and county hospitals as these supervisory documents will no longer need to be submitted to the Board.

The bill also makes several changes to the physician assistant supervision agreement between the supervising physician and the physician assistant. These changes include: modifying the distance a physician assistant can be from where a physician assistant is practicing, removing the requirement that the supervising physician regularly review the condition of the patients treated by the physician assistant, and increasing the number of physician assistants a physician may supervise from two to five. According to OHA, there could be a small reduction in costs to state and county hospitals if there is a reduction in the paperwork required.

Physician assistant license

The bill changes the name of the "certificate to practice" issued to physician assistants to "license" and requires the State Medical Board to begin issuing licenses instead of certificates to practice not later than 90 days after the bill takes effect. According to the State Medical Board, there could be an increase in administrative costs to the Board to begin issuing licenses instead of certificates.

Educational requirements of physician assistants

The bill revises the education and experience requirements for physician assistants and the requirements to receive a prescriber number from the State Medical Board. The bill provides that a physician assistant who holds a license issued by the Board may exercise physician-delegated prescriptive authority if the physician assistant holds a master's or higher degree or had prescriptive authority while practicing in another jurisdiction or the military. The bill also permits the Board to grant authority to exercise physician-delegated prescriptive authority to a physician assistant who obtained a license without having first obtained a master's or higher degree if the physician assistant later obtains such a degree. As a result, there could be an increase in administrative costs to the Board to accept the new educational qualifications.

Physician assistant services

The bill modifies the services that a physician assistant can perform. The bill also permits a physician assistant to delegate a task the supervising physician is authorized to perform that implements the plan of care for a patient. According to OHA, there could be a reduction in costs for state and county hospitals if a physician assistant is available and can perform these services, allowing a supervising physician to attend to other patients. There could also be a reduction in costs for state and county hospitals if a delegated individual is able to perform a service instead of the physician assistant.