

BILL # 2. HB 699-Relating to Health Care Practitioners:

Continuing education requirements for Board of Medicine Licenses are changed as follows:

- HIV/AIDS and Domestic Violence CE are no longer required for initial licensure,
- HIV/AIDS CE is now a one-time, 1-hour CE requirement to be completed prior to the first renewal (if you taken a 1-hour course on HIV/AIDS, you have completed the requirement), and
- Domestic Violence CE is now a 2-hour requirement every third renewal. For example, if you renew your license on January 31, 2007, you are required to complete the Domestic Violence CE before the January 31, 2011 renewal.

Supervisory relationships with Physician Assistants (PA) and Advanced Registered Nurse Practitioners (ARNP) in medical office settings are now subject to new requirements/limitations:

- An M.D. may supervise PA and ARNP offering primary health care services at no more than (4) satellite offices, in addition to the primary place of practice.
- An M.D. may supervise PA and ARNP offering specialty health care services at no more than two (2) satellite offices, in addition to the primary place of practice.
- An M.D. may supervise PA or ARNP offering primarily dermatologic or skin care services, which include, aesthetic skin care services other than plastic surgery, may only supervise PA and ARNPS at one (1) satellite office, in addition to the primary place of practice. The following apply only to satellite offices offering primarily dermatologic or skin care services, which include, aesthetic skin care services other than plastic surgery:
 - **The supervising physician may supervise a second satellite office until July 1, 2011, if he/she immediately notifies the Board of Medicine of the address of the two satellite offices no later than June 30, 2006. See special notice on this web site for details and notice addresses,**
 - The physician must be board certified or board-eligible in dermatology or plastic surgery,
 - The satellite office must be within 25 miles of the supervising physician, unless it is in an adjacent county, in which case the distance must be no more than 75 miles from the primary practice location, and
 - A PA in these satellite offices are not required to have their charts reviewed by the supervising physician.
- An M.D. who supervises any satellite office must post in each of the offices a current schedule of the regular hours that the physician is

present in that office, and the hours that the office is open when the physician is not present.

- An M.D. receiving a referral must ensure that the patient is informed of the type of license held by the physician and the type of license held by any other practitioner who will be providing services to the patient. When scheduling the initial examination or consultation following such referral, the patient may decide to see the physician or any other licensed practitioner supervised by the physician, and prior to the initial examination or consultation shall sign a form indicating the patient's choice of practitioner. The supervising physician must review the medical record of the initial examination or consultation, and ensure that a written report on the initial examination or consultation is furnished to the referring practitioner within 10 business days following the completion of the initial examination or consultation.

- The bill exempts most institutional supervised settings, such as hospitals, rural health clinics, nursing homes, and medical student and resident training.

- **The bill does NOT:**

- Change current law regarding what services an ARNP or PA may provide,
- Change current law regarding who may perform hair removal,
- Change current law regarding who may utilize a laser,
- Change current law regarding who may perform dermatologic services, including aesthetic skin care services, or
- Change current law regarding what services a physician may offer in his or her primary place of practice.

The bill affects ARNP protocols:

- ARNP protocols will be posted on the licensee's Practitioner Profile, which is accessible on-line,
- The Board of Nursing will review protocols for regulatory compliance, and
- Protocols not in compliance will be sent to the Department