

SECOND REGULAR SESSION

# HOUSE BILL NO. 2906

## 101ST GENERAL ASSEMBLY

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INTRODUCED BY REPRESENTATIVE COLEMAN (32).

5874H.011

DANA RADEMAN MILLER, Chief Clerk

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### AN ACT

To repeal section 334.036, RSMo, and to enact in lieu thereof one new section relating to licensing of assistant physicians.

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*Be it enacted by the General Assembly of the state of Missouri, as follows:*

Section A. Section 334.036, RSMo, is repealed and one new section enacted in lieu thereof, to be known as section 334.036, to read as follows:

334.036. 1. For purposes of this section, the following terms shall mean:

(1) "Assistant physician", any **graduate of a North American** medical school ~~[graduate]~~ **accredited by the Liaison Committee on Medical Education or the Commission on Osteopathic College Accreditation** who:

(a) Is a resident and citizen of the United States or is a legal resident alien;

(b) Has successfully completed Step 2 of the United States Medical Licensing Examination or the equivalent of such step of any other board-approved medical licensing examination within the three-year period immediately preceding application for licensure as an assistant physician, or within three years after graduation from a medical college or osteopathic medical college, whichever is later;

(c) Has not completed an approved postgraduate residency and has successfully completed Step 2 of the United States Medical Licensing Examination or the equivalent of such step of any other board-approved medical licensing examination within the immediately preceding three-year period unless when such three-year anniversary occurred he or she was serving as a resident physician in an accredited residency in the United States and continued to do so within thirty days prior to application for licensure as an assistant physician; and

(d) Has proficiency in the English language.

EXPLANATION — Matter enclosed in bold-faced brackets ~~[thus]~~ in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

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19 Any **graduate of a North American** medical school [~~graduate~~] who could have applied for  
20 licensure and complied with the provisions of this subdivision at any time between August  
21 28, 2014, and August 28, 2017, may apply for licensure and shall be deemed in compliance  
22 with the provisions of this subdivision;

23 (2) "Assistant physician collaborative practice arrangement", an agreement between a  
24 physician and an assistant physician that meets the requirements of this section and section  
25 334.037];

26 ~~(3) "Medical school graduate", any person who has graduated from a medical college  
27 or osteopathic medical college described in section 334.031].~~

28 2. (1) An assistant physician collaborative practice arrangement shall limit the  
29 assistant physician to providing only primary care services and only in medically underserved  
30 rural or urban areas of this state [~~or in any pilot project areas established in which assistant  
31 physicians may practice~~].

32 (2) For a physician-assistant physician team working in a rural health clinic under the  
33 federal Rural Health Clinic Services Act, P.L. 95-210, as amended:

34 (a) An assistant physician shall be considered a physician assistant for purposes of  
35 regulations of the Centers for Medicare and Medicaid Services (CMS); and

36 (b) No supervision requirements in addition to the minimum federal law shall be  
37 required.

38 3. (1) For purposes of this section, the licensure of assistant physicians shall take  
39 place within processes established by rules of the state board of registration for the healing  
40 arts. The board of healing arts is authorized to establish rules under chapter 536 establishing  
41 licensure and renewal procedures, supervision, collaborative practice arrangements, fees, and  
42 addressing such other matters as are necessary to protect the public and discipline the  
43 profession. No licensure fee for an assistant physician shall exceed the amount of any  
44 licensure fee for a physician assistant. An application for licensure may be denied or the  
45 licensure of an assistant physician may be suspended or revoked by the board in the same  
46 manner and for violation of the standards as set forth by section 334.100, or such other  
47 standards of conduct set by the board by rule. No rule or regulation shall require an assistant  
48 physician to complete more hours of continuing medical education than that of a licensed  
49 physician.

50 (2) Any rule or portion of a rule, as that term is defined in section 536.010, that is  
51 created under the authority delegated in this section shall become effective only if it complies  
52 with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028.  
53 This section and chapter 536 are nonseverable and if any of the powers vested with the  
54 general assembly under chapter 536 to review, to delay the effective date, or to disapprove

55 and annul a rule are subsequently held unconstitutional, then the grant of rulemaking  
56 authority and any rule proposed or adopted after August 28, 2014, shall be invalid and void.

57 (3) Any rules or regulations regarding assistant physicians in effect as of the effective  
58 date of this section that conflict with the provisions of this section and section 334.037 shall  
59 be null and void as of the effective date of this section.

60 4. An assistant physician shall clearly identify himself or herself as an assistant  
61 physician and shall be permitted to use the terms "doctor", "Dr.", or "doc". No assistant  
62 physician shall practice or attempt to practice without an assistant physician collaborative  
63 practice arrangement, except as otherwise provided in this section and in an emergency  
64 situation.

65 5. The collaborating physician is responsible at all times for the oversight of the  
66 activities of and accepts responsibility for primary care services rendered by the assistant  
67 physician.

68 6. The provisions of section 334.037 shall apply to all assistant physician  
69 collaborative practice arrangements. Any renewal of licensure under this section shall  
70 include verification of actual practice under a collaborative practice arrangement in  
71 accordance with this subsection during the immediately preceding licensure period.

72 7. Each health carrier or health benefit plan that offers or issues health benefit plans  
73 that are delivered, issued for delivery, continued, or renewed in this state shall reimburse an  
74 assistant physician for the diagnosis, consultation, or treatment of an insured or enrollee on  
75 the same basis that the health carrier or health benefit plan covers the service when it is  
76 delivered by another comparable mid-level health care provider including, but not limited to,  
77 a physician assistant.

78 **8. No individual shall hold an assistant physician license for more than three**  
79 **years. However, any individual currently licensed as an assistant physician in this state**  
80 **as of the effective date of this subsection shall have three years from the effective date of**  
81 **this subsection before his or her current license expires. At the end of the three-year**  
82 **period, any individual licensed in good standing as an assistant physician shall**  
83 **automatically be licensed as a physician assistant under the provisions of sections**  
84 **334.735 to 334.749 without having to meet any additional requirements under such**  
85 **sections.**

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