



Reprinted
March 30, 1999

ENGROSSED SENATE BILL No. 138

DIGEST OF SB 138 (Updated March 29, 1999 3:08 pm - DI 98)

Citations Affected: IC 24-5; IC 25-22.5; IC 25-23; IC 25-27.5; IC 34-30.

Synopsis: Authority to claim doctorate degree or title. Provides that certain professional boards in Indiana may authorize an individual to claim to have a doctorate degree or to use a title associated with a doctorate degree. Provides that an individual may not claim to be a physician unless the individual holds an unlimited license to practice medicine or a chiropractic physician unless the individual holds a limited license as a chiropractor. Requires the medical licensing board of Indiana to adopt rules that establish continuing education requirements designed to maintain the competency of physicians. Requires physicians to submit a statement attesting that they have
(Continued next page)

Effective: Upon passage; July 1, 1999.

Meeks R

(HOUSE SPONSORS — KLINKER, SCHOLER)

January 6, 1999, read first time and referred to Committee on Health and Provider Services.

January 28, 1999, amended, reported favorably — Do Pass.

February 11, 1999, read second time, amended, ordered engrossed.

February 12, 1999, engrossed.

February 15, 1999, read third time, passed. Yeas 50, nays 0.

HOUSE ACTION

March 3, 1999, read first time and referred to Committee on Public Health.

March 25, 1999, amended, reported — Do Pass.

March 29, 1999, read second time, amended, ordered engrossed.

ES 138—LS 6644/DI 44+



C
O
P
Y

Digest Continued

obtained the necessary continuing education requirements to renew their licenses. Requires the Indiana state board of nursing to adopt rules that establish continuing education requirements designed to maintain the competency of nurses. Requires nurses to submit a statement attesting that they have obtained the necessary continuing education requirements. Allows for random continuing education compliance audits. Changes the certification process for a physician assistant to a licensure process. Authorizes a licensed physician to delegate prescribing privileges to a physician assistant. Authorizes the supervising physician to supervise two physician assistants. Authorizes a physician assistant to certify the health status of patients. Authorizes a physician assistant to provide care in a disaster or emergency situation without liability unless the physician assistant is grossly, willfully, or wantonly negligent.

C
o
p
y



Reprinted
March 30, 1999

First Regular Session 111th General Assembly (1999)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 1998 General Assembly.

ENGROSSED SENATE BILL No. 138

A BILL FOR AN ACT to amend the Indiana Code concerning professions and occupations.

Be it enacted by the General Assembly of the State of Indiana:

- 1 SECTION 1. IC 24-5-0.5-12 IS AMENDED TO READ AS
2 FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 12. (a) It is an
3 incurable deceptive act for an individual, while soliciting or performing
4 a consumer transaction, to claim, either orally or in writing, to possess
5 a doctorate degree or use a title, a word, letters, an insignia, or an
6 abbreviation associated with a doctorate degree, unless the individual:
7 (1) has been awarded a doctorate degree from an institution that
8 is:
9 (A) accredited by a regional or professional accrediting agency
10 recognized by the United States Department of Education or
11 the Council on Postsecondary Accreditation;
12 (B) a religious seminary, institute, college, or university whose
13 certificates, diplomas, or degrees clearly identify the religious
14 character of the educational program; or
15 (C) operated and supported by a governmental agency; or
16 (2) meets the requirements approved by a ~~board listed in~~

ES 138—LS 6644/DI 44+



C
O
P
Y

1 ~~IC 25-1-2-6~~. one (1) of the following boards:

- 2 (1) Medical licensing board of Indiana.
 3 (2) State board of dental examiners.
 4 (3) Indiana optometry board.
 5 (4) Board of podiatric medicine.
 6 (5) State psychology board.
 7 (6) Board of chiropractic examiners.
 8 (7) Indiana board of veterinary medical examiners.
 9 (8) Indiana board of pharmacy.
 10 (9) Indiana state board of nursing.

11 (b) It is an incurable deceptive act for an individual, while
 12 soliciting or performing a consumer transaction, to claim to be a:

- 13 (1) physician unless the individual holds an unlimited license
 14 to practice medicine under IC 25-22.5; or
 15 (2) chiropractic physician unless the individual holds a limited
 16 license as a chiropractor under IC 25-10-1.

17 ~~(b)~~ (c) The attorney general shall enforce this section in the same
 18 manner as any other incurable deceptive act under this chapter.

19 SECTION 2. IC 25-22.5-2-7 IS AMENDED TO READ AS
 20 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 7. The board shall do
 21 the following:

22 (1) Adopt rules and forms necessary to implement this article that
 23 concern, but are not limited to, the following areas:

24 (A) Qualification by education, residence, citizenship,
 25 training, and character for admission to an examination for
 26 licensure or by endorsement for licensure.

27 (B) The examination for licensure.

28 (C) The license or permit.

29 (D) Fees for examination, permit, licensure, and registration.

30 (E) Reinstatement of licenses and permits.

31 (F) Payment of costs in disciplinary proceedings conducted by
 32 the board.

33 (G) **Establishment of mandatory continuing education**
 34 **requirements designed to maintain the competency of**
 35 **individuals licensed under this chapter, including**
 36 **requirements providing that only educational activities**
 37 **that meet professional role expectations satisfy continuing**
 38 **education requirements.**

39 (2) Administer oaths in matters relating to the discharge of its
 40 official duties.

41 (3) Enforce this article and assign service bureau personnel duties
 42 as may be necessary in the discharge of the board's duty.



C
O
P
Y

- 1 (4) Maintain, through the service bureau, full and complete
 2 records of all applicants for licensure or permit and of all licenses
 3 and permits issued.
- 4 (5) Make available, upon request, the complete schedule of
 5 minimum requirements for licensure or permit.
- 6 (6) Issue, at the board's discretion, a temporary permit to an
 7 applicant for the interim from the date of application until the
 8 next regular meeting of the board.
- 9 (7) Issue an unlimited license, a limited license, or a temporary
 10 medical permit, depending upon the qualifications of the
 11 applicant, to any applicant who successfully fulfills all of the
 12 requirements of this article.
- 13 (8) Adopt rules establishing standards for the competent practice
 14 of medicine, osteopathic medicine, or any other form of practice
 15 regulated by a limited license or permit issued under this article.
- 16 (9) Adopt rules regarding the appropriate prescribing of Schedule
 17 III or Schedule IV controlled substances for the purpose of weight
 18 reduction or to control obesity.
- 19 SECTION 3. IC 25-22.5-7-1 IS AMENDED TO READ AS
 20 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 1. (a) A license issued
 21 under this article expires on June 30 of each odd-numbered year.
 22 Before June 30 of an odd-numbered year, an applicant for renewal shall
 23 pay the biennial renewal fee set by the board under IC 25-22.5-2-7.
- 24 (b) If the holder of a license does not renew the license by June 30
 25 of each odd-numbered year, the license expires and becomes invalid
 26 without any action taken by the board. A license that becomes invalid
 27 under this subsection may be reinstated by the board up to three (3)
 28 years after the invalidation if the holder of the invalid license: ~~pays:~~
- 29 (1) **pays** the penalty fee set by the board under IC 25-22.5-2-7;
 30 ~~and~~
- 31 (2) **pays** the renewal fee for the biennium; **and**
- 32 (3) **completes the continuing education requirement**
 33 **established by the board.**
- 34 (c) If a license that becomes invalid under this section is not
 35 reinstated by the board within three (3) years of its invalidation, the
 36 holder of the invalid license may be required by the board to take an
 37 examination for competence before the board will reinstate the holder's
 38 license.
- 39 (d) The board may adopt rules under IC 25-22.5-2-7 establishing
 40 requirements for the reinstatement of a lapsed license.
- 41 (e) **An individual may not renew a license under this article**
 42 **unless the individual has completed the continuing education**

C
O
P
Y

1 requirements established under IC 25-22.5-2-7(1)(G). An
 2 application under this section must contain a sworn statement
 3 signed by the applicant attesting that the applicant has fulfilled the
 4 continuing education requirements.

5 (f) Every two (2) years, the board may randomly audit for
 6 compliance at least one percent (1%) but not more than ten
 7 percent (10%) of the practitioners required to take continuing
 8 education courses.

9 (g) Notwithstanding IC 25-22.5-2-7(1)(G), the continuing
 10 education requirement does not apply to the following:

11 (1) A practitioner who has held an initial license for less than
 12 two (2) years.

13 (2) A practitioner who the board has determined is unable to
 14 meet the requirement due to a disability.

15 (h) For each continuing education course attended or completed,
 16 the practitioner shall retain:

17 (1) a record of the number of hours spent in each continuing
 18 education course;

19 (2) the subject matter presented;

20 (3) the name of the sponsoring organization; and

21 (4) verification of attendance or completion;

22 for three (3) years after the date the practitioner's license was
 23 renewed.

24 SECTION 4. IC 25-23-1-7 IS AMENDED TO READ AS
 25 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 7. (a) The board shall
 26 do the following:

27 (1) Adopt under IC 4-22-2 rules necessary to enable it to carry
 28 into effect this chapter.

29 (2) Prescribe standards and approve curricula for nursing
 30 education programs preparing persons for licensure under this
 31 chapter.

32 (3) Provide for surveys of such programs at such times as it
 33 considers necessary.

34 (4) Accredite such programs as meet the requirements of this
 35 chapter and of the board.

36 (5) Deny or withdraw accreditation from nursing education
 37 programs for failure to meet prescribed curricula or other
 38 standards.

39 (6) Examine, license, and renew the license of qualified
 40 applicants.

41 (7) Issue subpoenas, compel the attendance of witnesses, and
 42 administer oaths to persons giving testimony at hearings.



C
O
P
Y

- 1 (8) Cause the prosecution of all persons violating this chapter and
 2 have power to incur necessary expenses for these prosecutions.
 3 (9) Adopt rules under IC 4-22-2 that do the following:
 4 (A) Prescribe standards for the competent practice of
 5 registered, practical, and advanced practice nursing.
 6 (B) Establish with the approval of the medical licensing board
 7 created by IC 25-22.5-2-1 requirements that advanced practice
 8 nurses must meet to be granted authority to prescribe legend
 9 drugs and to retain that authority.
 10 **(C) Establish continuing education requirements designed**
 11 **to maintain the competency of individuals licensed under**
 12 **this chapter, including requirements providing that only**
 13 **educational activities that meet professional role**
 14 **expectations satisfy continuing education requirements.**
 15 (10) Keep a record of all its proceedings.
 16 (11) Collect and distribute annually demographic information on
 17 the number and type of registered nurses and licensed practical
 18 nurses employed in Indiana.
 19 (12) Notify each registered nurse and licensed practical nurse
 20 residing in Indiana when final rules concerning the practice of
 21 nursing are published in the Indiana register.
 22 (b) The board may do the following:
 23 (1) Create ad hoc subcommittees representing the various nursing
 24 specialties and interests of the profession of nursing. Persons
 25 appointed to a subcommittee serve for terms as determined by the
 26 board.
 27 (2) Utilize the appropriate subcommittees so as to assist the board
 28 with its responsibilities. The assistance provided by the
 29 subcommittees may include the following:
 30 (A) Recommendation of rules necessary to carry out the duties
 31 of the board.
 32 (B) Recommendations concerning educational programs and
 33 requirements.
 34 (C) Recommendations regarding examinations and licensure
 35 of applicants.
 36 (3) Appoint nurses to serve on each of the ad hoc subcommittees.
 37 (c) Nurses appointed under subsection (b) must:
 38 (1) be committed to advancing and safeguarding the nursing
 39 profession as a whole; and
 40 (2) represent nurses who practice in the field directly affected by
 41 a subcommittee's actions.
 42 SECTION 5. IC 25-23-1-16.1 IS AMENDED TO READ AS

C
O
P
Y

1 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 16.1. (a) A license to
 2 practice as a registered nurse expires on October 31 in each
 3 odd-numbered year. Failure to renew the license on or before the
 4 expiration date will automatically render the license invalid without
 5 any action by the board.

6 (b) A license to practice as a licensed practical nurse expires on
 7 October 31 in each even-numbered year. Failure to renew the license
 8 on or before the expiration date will automatically render the license
 9 invalid without any action by the board.

10 (c) The procedures and fee for renewal shall be set by the board.

11 (d) At the time of license renewal, each registered nurse and each
 12 licensed practical nurse shall pay an additional three dollar (\$3) fee.
 13 The lesser of the following amounts from fees collected under this
 14 subsection shall be deposited in the impaired nurses account of the
 15 state general fund established by section 34 of this chapter:

16 (1) Three dollars (\$3) per license renewed under this section.

17 (2) The cost per license to operate the impaired nurses program,
 18 as determined by the health professions bureau.

19 (e) **To renew a license under this section, an individual must**
 20 **have completed the continuing education requirements established**
 21 **by the board under section 7(a)(9)(C) of this chapter. An**
 22 **application under this section must contain a sworn statement**
 23 **signed by the applicant attesting that the applicant has fulfilled the**
 24 **continuing education requirements.**

25 (f) Every two (2) years, the board may randomly audit for
 26 compliance at least one percent (1%) but not more than ten
 27 percent (10%) of the nurses required to take continuing education
 28 courses.

29 (g) **Notwithstanding IC 25-22.5-2-7(1)(G), the continuing**
 30 **education requirement does not apply to the following:**

31 (1) A nurse who has held an initial license for less than two (2)
 32 years.

33 (2) A nurse who the board has determined is unable to meet
 34 the requirement due to a disability.

35 (h) **For each continuing education course attended or completed,**
 36 **the nurse shall retain:**

37 (1) **a record of the number of hours spent in each continuing**
 38 **education course;**

39 (2) **the subject matter presented;**

40 (3) **the name of the sponsoring organization; and**

41 (4) **verification of attendance or completion;**

42 **for three (3) years after the date the nurse's license was renewed.**



C
O
P
Y

1 SECTION 6. IC 25-27.5-1-1 IS AMENDED TO READ AS
 2 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 1. This article does not
 3 apply to the following:

4 (1) A physician assistant trainee or a student enrolled in a
 5 physician assistant or a surgeon assistant educational program
 6 accredited by ~~the~~ CAHEA, **CAAHEP, or a successor agency.**

7 (2) A physician assistant employed in the service of the federal
 8 government while performing duties incident to that employment.

9 (3) A health care professional, technician, ~~and~~ **or** other assistant
 10 or employee of a physician who performs delegated tasks in the
 11 office of a physician but who does not render services as a
 12 physician assistant or profess to be a physician assistant.

13 SECTION 7. IC 25-27.5-2-1.5 IS ADDED TO THE INDIANA
 14 CODE AS A **NEW** SECTION TO READ AS FOLLOWS
 15 [EFFECTIVE JULY 1, 1999]: **Sec. 1.5 "Administer a drug" means**
 16 **the direct application of a drug, whether by injection, inhalation,**
 17 **ingestion, or any other means to the body of a patient.**

18 SECTION 8. IC 25-27.5-2-2 IS AMENDED TO READ AS
 19 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 2. "Approved program"
 20 means a physician assistant or a surgeon assistant program accredited
 21 by CAHEA, **CAAHEP, or a successor agency.**

22 SECTION 9. IC 25-27.5-2-4.5 IS ADDED TO THE INDIANA
 23 CODE AS A **NEW** SECTION TO READ AS FOLLOWS
 24 [EFFECTIVE JULY 1, 1999]: **Sec. 4.5. "CAAHEP" refers to the**
 25 **Commission on Accreditation of Allied Health Education**
 26 **Programs.**

27 SECTION 10. IC 25-27.5-2-7.3 IS ADDED TO THE INDIANA
 28 CODE AS A **NEW** SECTION TO READ AS FOLLOWS
 29 [EFFECTIVE JULY 1, 1999]: **Sec. 7.3. "Dispense" means issuing**
 30 **one (1) or more doses of a drug in a suitable container with**
 31 **appropriate labeling for subsequent administration to, or use by,**
 32 **a patient or issuing medical devices.**

33 SECTION 11. IC 25-27.5-2-10 IS AMENDED TO READ AS
 34 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 10. "Physician
 35 assistant" means an individual who has:

36 (1) graduated from a physician assistant or a surgeon assistant
 37 program accredited by ~~the~~ CAHEA, **CAAHEP, or a successor**
 38 **agency; and**

39 (2) passed the certifying examination **administered by the**
 40 **NCCPA** and maintains certification by the NCCPA; **and**

41 (3) **been licensed by the committee.**

42 SECTION 12. IC 25-27.5-3-2 IS AMENDED TO READ AS

C
O
P
Y

1 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 2. (a) The committee
 2 consists of five (5) members appointed by the governor for terms of
 3 three (3) years.

4 (b) The committee must include the following:

5 (1) Three (3) physician assistants who:

6 (A) are residents of Indiana;

7 (B) have at least three (3) years experience as physician
 8 assistants; and

9 (C) are ~~certified~~ **licensed** under this article.

10 (2) A physician licensed under IC 25-22.5 who:

11 (A) is familiar with the practice of physician assistants; **and**

12 (B) **is a resident of Indiana.**

13 (3) An individual who:

14 (A) is a resident of Indiana; and

15 (B) is not associated with physician assistants in any way other
 16 than as a consumer.

17 SECTION 13. IC 25-27.5-3-5 IS AMENDED TO READ AS
 18 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 5. The committee shall
 19 do the following:

20 (1) Consider the qualifications of individuals who apply for
 21 ~~certificates~~ **licensure** under this article.

22 (2) Provide for examinations required under this article.

23 (3) ~~Certify~~ **License** qualified individuals.

24 (4) Propose rules to the board concerning the competent practice
 25 of physician assistants and the administration of this article.

26 (5) Recommend to the board the amounts of fees required under
 27 this article.

28 SECTION 14. IC 25-27.5-3-6 IS AMENDED TO READ AS
 29 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 6. (a) After considering
 30 the committee's proposed rules, the board shall adopt rules under
 31 IC 4-22-2 establishing standards for the following:

32 (1) The competent practice of physician assistants.

33 (2) The renewal of ~~certificates~~ **licenses** issued under this article.

34 (3) Standards for the administration of this article.

35 (b) After considering the committee's recommendations for fees, the
 36 board shall establish fees under IC 25-1-8-2.

37 SECTION 15. IC 25-27.5-3-9 IS ADDED TO THE INDIANA
 38 CODE AS A **NEW** SECTION TO READ AS FOLLOWS
 39 [EFFECTIVE JULY 1, 1999]: **Sec. 9. In the event of a vacancy on the**
 40 **committee, the governor shall appoint a successor to complete the**
 41 **unexpired term.**

42 SECTION 16. IC 25-27.5-3-10 IS ADDED TO THE INDIANA



C
O
P
Y

1 CODE AS A NEW SECTION TO READ AS FOLLOWS
 2 [EFFECTIVE JULY 1, 1999]: **Sec. 10. A member of the committee**
 3 **may not serve more than two (2) consecutive three (3) year terms**
 4 **and each member shall serve on the committee until a successor is**
 5 **appointed.**

6 SECTION 17. IC 25-27.5-3-11 IS ADDED TO THE INDIANA
 7 CODE AS A NEW SECTION TO READ AS FOLLOWS
 8 [EFFECTIVE JULY 1, 1999]: **Sec. 11. The committee shall elect a**
 9 **chairperson and a secretary from among its members at the**
 10 **committee's first meeting of each fiscal year. The committee shall**
 11 **meet on a regular basis. A committee meeting may be called upon**
 12 **reasonable notice at the discretion of the chairperson and shall be**
 13 **called at any time upon reasonable notice by a petition of three (3)**
 14 **committee members to the chairperson.**

15 SECTION 18. IC 25-27.5-4-1 IS AMENDED TO READ AS
 16 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 1. An individual must
 17 be ~~certified~~ **licensed** by the committee before the individual may
 18 practice as a physician assistant. The committee may grant a ~~certificate~~
 19 **license** as a physician assistant to an applicant who does the following:

20 (1) Submits an application on forms approved by the committee.

21 (2) Pays the fee established by the board.

22 (3) Has:

23 (A) successfully completed an educational program for
 24 physician assistants or surgeon assistants accredited by the
 25 CAHEA, **CAAHEP, or a successor agency;** and

26 (B) ~~has~~ passed the Physician Assistant National Certifying
 27 Examination administered by the NCCPA ~~or other~~
 28 ~~examination approved by the committee and maintains~~
 29 **current NCCPA certification.**

30 (4) Submits to the committee any other information the committee
 31 ~~requires~~ **considers necessary** to evaluate the applicant's
 32 qualifications.

33 (5) Presents satisfactory evidence to the committee that the
 34 individual has not been:

35 (A) engaged in an act that would constitute grounds for a
 36 disciplinary sanction under IC 25-1-9; ~~and or~~

37 (B) the subject of a disciplinary action by a licensing or
 38 certification agency of another state or jurisdiction on the
 39 grounds that the individual was not able to practice as a
 40 physician assistant without endangering the public.

41 SECTION 19. IC 25-27.5-4-2 IS AMENDED TO READ AS
 42 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 2. The committee may

C
O
P
Y

1 refuse to issue a **certificate license** or may issue a probationary
2 **certificate license** to an individual if:

3 (1) the individual has been disciplined by an administrative
4 agency in another jurisdiction or been convicted for a crime that
5 has a direct bearing on the individual's ability to practice
6 competently; and

7 (2) the committee determines that the act for which the individual
8 was disciplined or convicted has a direct bearing on the
9 individual's ability to practice as a physician assistant.

10 SECTION 20. IC 25-27.5-4-3 IS AMENDED TO READ AS
11 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 3. (a) If the committee
12 issues a probationary **certificate license** under section 2 of this chapter,
13 the committee may require the individual who holds the **certificate**
14 **license** to meet at least one (1) of the following conditions:

15 (1) Report regularly to the committee upon a matter that is the
16 basis for the probation.

17 (2) Limit practice to areas prescribed by the committee.

18 (3) Continue or renew professional education.

19 (4) Engage in community service without compensation for a
20 number of hours specified by the committee.

21 (5) **Submit to the care, counseling, or treatment of a physician**
22 **or physicians designated by the committee.**

23 (b) The committee shall remove a limitation placed on a
24 probationary **certificate license** if, after a hearing, the committee finds
25 that the deficiency that caused the limitation has been remedied.

26 SECTION 21. IC 25-27.5-4-4 IS AMENDED TO READ AS
27 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 4. (a) The committee
28 may grant temporary **certification licensure** to an applicant who:

29 (1) meets the qualifications for **certification licensure** under
30 section 1 of this chapter except:

31 (A) for the taking of the **next scheduled** NCCPA examination;
32 or

33 (B) if the applicant has taken the NCCPA examination and is
34 awaiting the results; or

35 (2) meets the qualifications for **certification licensure** under
36 section 1 of this chapter but is awaiting the next scheduled
37 meeting of the committee.

38 (b) A temporary **certification license** is valid until: ~~the earliest of the~~
39 ~~following:~~

40 (1) the results of an applicant's examination are available; **and**

41 (2) the committee makes a final decision on the applicant's
42 request for **certification licensure**.

C
O
P
Y

1 **(c) The temporary license is immediately revoked upon notice**
 2 **to the health professions bureau that the temporary license holder**
 3 **has failed the exam. The committee may extend a temporary**
 4 **license at its terms and discretion by a majority vote of the**
 5 **committee.**

6 ~~(c)~~ **(d) A physician assistant practicing under a temporary certificate**
 7 **license must practice with onsite physician supervision. and;**
 8 **notwithstanding IC 25-27.5-5-4, may not dispense drugs or medical**
 9 **devices.**

10 ~~(d)~~ **(e) A physician assistant who notifies the board in writing may**
 11 **elect to:**

12 **(1) place the physician assistant's certification licensure on a**
 13 **inactive status if previously employed by a supervising**
 14 **physician; or**

15 **(2) apply for an inactive license if not currently employed at**
 16 **the time of initial application.**

17 **(f) A physician assistant with an inactive license shall be excused**
 18 **from payment of renewal fees and may not practice as a physician**
 19 **assistant.**

20 **(g) A licensee who engages in practice while the licensee's license**
 21 **is lapsed or on inactive status shall be considered to be practicing**
 22 **without a license, which is grounds for discipline under IC 25-1-9.**

23 SECTION 22. IC 25-27.5-4-5 IS AMENDED TO READ AS
 24 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 5. (a) A ~~certificate~~
 25 **license** issued by the committee expires on a date established by the
 26 health professions bureau under IC 25-1-5-4 in the next even-numbered
 27 year following the year in which the ~~certificate license~~ was issued.

28 (b) An individual may renew a ~~certificate license~~ by paying a
 29 renewal fee on or before the expiration date of the ~~certificate license~~.

30 (c) If an individual fails to pay a renewal ~~fee~~ on or before the
 31 expiration date of a ~~certificate license~~, the ~~certificate license~~ becomes
 32 invalid.

33 SECTION 23. IC 25-27.5-4-6 IS AMENDED TO READ AS
 34 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 6. (a) The committee
 35 may reinstate an invalid ~~certificate license~~ up to three (3) years after
 36 the expiration date of the ~~certificate license~~ if the individual holding
 37 the invalid ~~certificate license~~:

38 (1) pays a penalty fee for late renewal; and

39 (2) pays the renewal fee under section 5(b) of this chapter.

40 (b) If more than three (3) years have elapsed since the date a
 41 ~~certificate license~~ expired, the individual holding the ~~certificate license~~
 42 may renew the ~~certificate license~~ by satisfying the requirements for

C
O
P
Y



1 renewal established by the board.

2 SECTION 24. IC 25-27.5-4-7 IS AMENDED TO READ AS
3 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 7. (a) An individual
4 who is ~~certified~~ **licensed** under this chapter shall notify the committee
5 in writing when the individual retires from practice.

6 (b) Upon receipt of the notice, the committee shall:

7 (1) record the fact the individual is retired; and

8 (2) release the individual from further payment of renewal fees.

9 SECTION 25. IC 25-27.5-4-8 IS AMENDED TO READ AS
10 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 8. (a) If an individual
11 surrenders a ~~certificate~~ **license** to the committee, the committee may
12 reinstate the ~~certificate~~ **license** upon written request by the individual.

13 (b) If the committee reinstates a ~~certificate~~ **license**, the committee
14 may impose conditions on the ~~certificate~~ **license** appropriate to the
15 reinstatement.

16 (c) An individual may not surrender a ~~certificate~~ **license** without
17 written approval by the committee if a disciplinary proceeding under
18 this article is pending against the individual.

19 SECTION 26. IC 25-27.5-4-9 IS ADDED TO THE INDIANA
20 CODE AS A NEW SECTION TO READ AS FOLLOWS
21 [EFFECTIVE JULY 1, 1999]: **Sec. 9. The committee may reinstate
22 a physician assistant's inactive license if the physician assistant
23 requesting reinstatement pays the current renewal fee.**

24 SECTION 27. IC 25-27.5-5-1 IS AMENDED TO READ AS
25 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 1. (a) This chapter does
26 not apply to the practice of other health care professionals set forth
27 under IC 25-22.5-1-2(a)(1) through IC 25-22.5-1-2(a)(19).

28 (b) **This chapter does not allow the independent practice by a
29 physician assistant of any of the activities of other health care
30 professionals set forth under IC 25-22.5-1-2(a)(1) through
31 IC 25-22.5-1-2(a)(19).**

32 SECTION 28. IC 25-27.5-5-2 IS AMENDED TO READ AS
33 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 2. A physician assistant
34 must engage in a dependent practice with physician supervision. A
35 physician assistant may perform the duties and responsibilities,
36 **including the prescribing and dispensing of drugs and medical
37 devices**, that are delegated by the supervising physician.

38 SECTION 29. IC 25-27.5-5-4 IS AMENDED TO READ AS
39 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 4. (a) ~~The board may
40 adopt rules under IC 4-22-2 to determine the appropriate use of
41 prescription drugs by a physician assistant. A physician assistant may
42 prescribe, dispense, and administer drugs and medical devices or~~



C
O
P
Y

1 **services to the extent delegated by the supervising physician.**

2 (b) **Notwithstanding subsection (a), a physician assistant may**
 3 **not prescribe, dispense, or administer ophthalmic devices,**
 4 **including glasses, contacts, and low vision devices.**

5 (c) **As permitted by the board, a physician assistant may use or**
 6 **dispense only drugs prescribed or approved by the supervising**
 7 **physician. Prescription and administration of drugs may include:**

8 (1) **all legend drugs that have been approved by the**
 9 **supervising physician; and**

10 (2) **not more than a seven (7) day supply of scheduled**
 11 **substances as listed under IC 35-48-2 that have been approved**
 12 **by the supervising physician.**

13 (c) (d) **Notwithstanding subsection (b), a physician assistant may**
 14 **not dispense a scheduled substance listed under IC 35-48-2. Physician**
 15 **assistants may request, receive, and sign for professional samples**
 16 **and may distribute professional samples to patients if the samples**
 17 **are within the scope of the physician assistant's prescribing**
 18 **privileges delegated by the supervising physician.**

19 SECTION 30. IC 25-27.5-5-5 IS AMENDED TO READ AS
 20 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 5. A physician assistant
 21 **certified licensed** under IC 25-27.5 shall:

22 (1) **keep the physician assistant's ~~certificate~~ license available for**
 23 **inspection at the primary place of business; and**

24 (2) **when engaged in the physician assistant's professional**
 25 **activities, wear a name tag identifying the individual as a**
 26 **physician assistant.**

27 SECTION 31. IC 25-27.5-5-6 IS ADDED TO THE INDIANA
 28 CODE AS A NEW SECTION TO READ AS FOLLOWS
 29 [EFFECTIVE JULY 1, 1999]: Sec. 6. (a) **A supervising physician**
 30 **may delegate authority to a physician assistant to prescribe:**

31 (1) **legend drugs;**

32 (2) **not more than a seven (7) day supply of controlled**
 33 **substances (as defined in IC 35-48-1-9) at one (1) time; and**

34 (3) **medical devices except ophthalmic devices, including**
 35 **glasses, contacts, and low vision devices.**

36 (b) **Any prescribing authority delegated to a physician assistant**
 37 **must be expressly delegated in writing by the physician assistant's**
 38 **supervising physician.**

39 (c) **A physician assistant who is delegated the authority to**
 40 **prescribe legend drugs or medical devices must do the following:**

41 (1) **Enter on each prescription form that the physician**
 42 **assistant uses to prescribe a legend drug or medical device:**



C
O
P
Y

- 1 (A) the signature of the physician assistant;
- 2 (B) the initials indicating the credentials awarded to the
- 3 physician assistant by the NCCPA; and
- 4 (C) the physician assistant's state license number.
- 5 (2) Comply with all applicable state and federal laws
- 6 concerning prescriptions for legend drugs and medical
- 7 devices.
- 8 (d) A supervising physician may delegate to a physician
- 9 assistant the authority to prescribe only legend drugs and medical
- 10 devices that are within the scope of practice of the licensed
- 11 supervising physician or the physician designee.
- 12 (e) A physician assistant who is delegated the authority to
- 13 prescribe controlled substances under subsection (a) must do the
- 14 following:
- 15 (1) Obtain an Indiana controlled substance registration and
- 16 a federal Drug Enforcement Administration registration.
- 17 (2) Enter on each prescription form that the physician
- 18 assistant uses to prescribe a controlled substance:
- 19 (A) the signature of the physician assistant;
- 20 (B) the initials indicating the credentials awarded to the
- 21 physician assistant by the NCCPA;
- 22 (C) the physician assistant's state license number; and
- 23 (D) the physician assistant's federal DEA number.
- 24 (3) Comply with all applicable state and federal laws
- 25 concerning prescriptions for controlled substances.
- 26 (f) A supervising physician may delegate to a physician assistant
- 27 the authority to prescribe only controlled substances that are
- 28 within the scope of practice of the licensed supervising physician or
- 29 the physician designee.
- 30 SECTION 32. IC 25-27.5-6-1 IS AMENDED TO READ AS
- 31 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 1. (a) Supervision by
- 32 the supervising physician or the physician designee must be continuous
- 33 but does not require the physical presence of the supervising physician
- 34 at the time and the place that the services are rendered.
- 35 (b) A supervising physician or physician designee shall review all
- 36 patient encounters not later than ~~twenty-four (24) hours~~ **two (2)**
- 37 **working days** after the physician assistant has seen the patient.
- 38 SECTION 33. IC 25-27.5-6-2 IS AMENDED TO READ AS
- 39 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 2. A physician may
- 40 **employ more than two (2) physician assistants but may not**
- 41 supervise ~~not~~ more than two (2) physician assistants **at any given time.**
- 42 SECTION 34. IC 25-27.5-6-5 IS AMENDED TO READ AS

COPY



1 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 5. (a) Before initiating
 2 practice, the supervising physician and the physician assistant must
 3 submit, on forms approved by the board, the following information:

4 (1) The name, the business address, and the telephone number of
 5 the supervising physician.

6 (2) The name, the business address, and the telephone number of
 7 the physician assistant.

8 (3) A brief description of **the extent to which and** the setting in
 9 which the physician assistant will practice.

10 (4) Any other information required by the board.

11 (b) A physician assistant must notify the board of any changes or
 12 additions in practice sites or supervising physicians not more than
 13 thirty (30) days after the change or addition.

14 (c) **The board shall notify the committee of all information**
 15 **received from each supervising physician and physician assistant**
 16 **under this section. The board shall also notify the committee of any**
 17 **changes or additions made under this section.**

18 SECTION 35. IC 25-27.5-6.3 IS ADDED TO THE INDIANA
 19 CODE AS A NEW CHAPTER TO READ AS FOLLOWS
 20 [EFFECTIVE JULY 1, 1999]:

21 **Chapter 6.3. Certification of Health Status**

22 **Sec. 1. A physician assistant may be delegated the ability to:**

23 (1) **evaluate and sign forms that certify the health status of**
 24 **patients by the supervising physician, including school**
 25 **physicals, employment physicals, and handicap parking**
 26 **permits; and**

27 (2) **authenticate with a signature any form that may be**
 28 **authenticated by the supervising physician's signature.**

29 SECTION 36. IC 25-27.5-6.5 IS ADDED TO THE INDIANA
 30 CODE AS A NEW CHAPTER TO READ AS FOLLOWS
 31 [EFFECTIVE JULY 1, 1999]:

32 **Chapter 6.5. Participation in Disaster and Emergency Care**

33 **Sec. 1. This chapter does not apply to medical assistance**
 34 **provided at a hospital, physician's office, or other health care**
 35 **facility where medical services are normally provided.**

36 **Sec. 2. (a) A physician assistant licensed in this state or licensed**
 37 **or authorized to practice in another state who is responding to a**
 38 **need for medical care created by an emergency or a state or local**
 39 **disaster may render care that the physician assistant is able to**
 40 **provide without supervision, as defined in IC 25-27.5-6, or with**
 41 **supervision as is available. For purposes of this chapter, an**
 42 **emergency or state or local disaster does not include an emergency**



C
O
P
Y

1 **situation that occurs in the place of one's employment.**

2 **(b) A physician assistant who:**

- 3 **(1) is licensed in this state or licensed or authorized to practice**
- 4 **in another state;**
- 5 **(2) voluntarily and gratuitously provides medical care during**
- 6 **an emergency in this state; and**
- 7 **(3) provides that care without a supervising physician being**
- 8 **present;**

9 **is not liable for civil damages for any personal injuries that result**
10 **from acts or omissions by the physician assistant providing the**
11 **emergency medical care unless such acts or omissions constitute**
12 **gross, willful, or wanton negligence.**

13 **Sec. 3. A physician who voluntarily and gratuitously supervises**
14 **a physician assistant who is voluntarily and gratuitously providing**
15 **emergency medical care is not:**

- 16 **(1) required to meet the requirements for an approved**
- 17 **supervising physician under IC 25-27.5-6; or**
- 18 **(2) liable for civil damages for any personal injuries that**
- 19 **result from acts or omissions by the physician assistant**
- 20 **providing emergency medical care.**

21 SECTION 37. IC 25-27.5-7-1 IS AMENDED TO READ AS
22 FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 1. (a) An individual
23 may not:

- 24 (1) profess to be a physician assistant;
- 25 (2) use the title "physician assistant", including the use of the title
- 26 by a physician who is not licensed under IC 25-22.5; ~~or~~
- 27 (3) use the initials "P.A." or any other words, letters,
- 28 abbreviations, or insignia indicating or implying that the
- 29 individual is a physician assistant ~~certified~~ **licensed** under this
- 30 article; ~~or~~
- 31 **(4) practice as a physician assistant;**

32 unless the individual is ~~certified~~ **licensed** under this article.

33 **(b) However** Use of the initials "PA" by a public accountant who is
34 authorized to use the initials "PA" by IC 25-2.1-12-6 is not a violation
35 of this section.

36 SECTION 38. IC 25-27.5-7-4 IS ADDED TO THE INDIANA
37 CODE AS A NEW SECTION TO READ AS FOLLOWS
38 [EFFECTIVE JULY 1, 1999]: **Sec. 4. The committee shall establish**
39 **and administer a program for the rehabilitation of physician**
40 **assistants whose competency is impaired due to the abuse of drugs**
41 **or alcohol. The committee may contract with any state agency or**
42 **private corporation to perform duties under this section. The**

C
O
P
Y



1 **program shall be similar to that available to other health**
2 **professionals in Indiana.**

3 SECTION 39. IC 34-30-2-101.5 IS ADDED TO THE INDIANA
4 CODE AS A NEW SECTION TO READ AS FOLLOWS
5 [EFFECTIVE JULY 1, 1999]: **Sec. 101.5. IC 25-27.5-6.5 (concerning**
6 **actions of a physician assistant and a supervising physician in an**
7 **emergency situation).**

8 SECTION 40. **An emergency is declared for this act.**

C
o
p
y



COMMITTEE REPORT

Mr. President: The Senate Committee on Health and Provider Services, to which was referred Senate Bill No. 138, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

Page 1, line 6, after "individual" insert ":",

Page 1, line 7, before "(1)" begin a new line block indented.

Page 1, line 7, reset in roman "(1)".

Page 1, line 8, before "(A)" begin a new line double block indented.

Page 1, line 8, reset in roman "(A)".

Page 1, line 8, delete "(1)".

Page 1, line 11, before "(B)" begin a new line double block indented.

Page 1, line 11, reset in roman "(B)".

Page 1, line 11, delete "(2)".

Page 1, line 14, before "(C)" begin a new line double block indented.

Page 1, line 14, reset in roman "(C)".

Page 1, line 14, delete "(3)".

Page 1, line 14, delete "." and insert ";".

Page 1, line 14, reset in roman "or".

Page 1, line 15, reset in roman "(2) meets the requirements approved by".

Page 1, line 16, after "IC 25-1-2-6." insert "**one (1) of the following boards:**".

Page 1, between lines 16 and 17, begin a new line double block indented and insert:

"(1) Medical licensing board of Indiana.

(2) State board of dental examiners.

(3) Indiana optometry board.

(4) Board of podiatric medicine.

(5) State psychology board.

(6) Board of chiropractic examiners.

(7) Indiana board of veterinary medical examiners.

In addition, it is an incurable deceptive act for an individual, while soliciting or performing a consumer transaction, to claim to be a physician unless the individual holds an unlimited license to practice medicine under IC 25-22.5."



C
O
P
Y

and when so amended that said bill do pass.

(Reference is to SB 138 as introduced.)

MILLER, Chairperson

Committee Vote: Yeas 8, Nays 0.

C
o
p
y



SENATE MOTION

Mr. President: I move that Senate Bill 138 be amended to read as follows:

Page 2, line 8, delete "In addition, it", begin a new paragraph and insert:

"(b) It".

Page 2, line 9, after "be a" insert ":".

Page 2, line 10, before "physician" begin a new line block indented and insert:

"(1)".

Page 2, line 11, delete "." and insert "; or

(2) chiropractic physician unless the individual holds a limited license as a chiropractic physician under IC 25-10-1."

Page 2, line 12, strike "(b)" and insert "(c)".

(Reference is to SB 138 as printed January 29, 1999.)

MILLER

C
O
P
Y



COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred Senate Bill 138, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Delete the title and insert the following:

A BILL FOR AN ACT to amend the Indiana Code concerning professions and occupations.

Page 2, between lines 7 and 8, begin a new line block indented and insert:

"(8) Indiana board of pharmacy.

(9) Indiana state board of nursing."

Page 2, line 13, delete "chiropractic physician" and insert "**chiropractor**".

Page 2, between lines 15 and 16, begin a new paragraph and insert: "SECTION 2. IC 25-22.5-2-7 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 7. The board shall do the following:

(1) Adopt rules and forms necessary to implement this article that concern, but are not limited to, the following areas:

(A) Qualification by education, residence, citizenship, training, and character for admission to an examination for licensure or by endorsement for licensure.

(B) The examination for licensure.

(C) The license or permit.

(D) Fees for examination, permit, licensure, and registration.

(E) Reinstatement of licenses and permits.

(F) Payment of costs in disciplinary proceedings conducted by the board.

(G) Establishment of mandatory continuing education requirements designed to maintain the competency of individuals licensed under this chapter, including requirements providing that only educational activities that meet professional role expectations satisfy continuing education requirements.

(2) Administer oaths in matters relating to the discharge of its official duties.

(3) Enforce this article and assign service bureau personnel duties as may be necessary in the discharge of the board's duty.

(4) Maintain, through the service bureau, full and complete records of all applicants for licensure or permit and of all licenses and permits issued.



C
O
P
Y

(5) Make available, upon request, the complete schedule of minimum requirements for licensure or permit.

(6) Issue, at the board's discretion, a temporary permit to an applicant for the interim from the date of application until the next regular meeting of the board.

(7) Issue an unlimited license, a limited license, or a temporary medical permit, depending upon the qualifications of the applicant, to any applicant who successfully fulfills all of the requirements of this article.

(8) Adopt rules establishing standards for the competent practice of medicine, osteopathic medicine, or any other form of practice regulated by a limited license or permit issued under this article.

(9) Adopt rules regarding the appropriate prescribing of Schedule III or Schedule IV controlled substances for the purpose of weight reduction or to control obesity.

SECTION 3. IC 25-22.5-7-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 1. (a) A license issued under this article expires on June 30 of each odd-numbered year. Before June 30 of an odd-numbered year, an applicant for renewal shall pay the biennial renewal fee set by the board under IC 25-22.5-2-7.

(b) If the holder of a license does not renew the license by June 30 of each odd-numbered year, the license expires and becomes invalid without any action taken by the board. A license that becomes invalid under this subsection may be reinstated by the board up to three (3) years after the invalidation if the holder of the invalid license: ~~pays:~~

(1) ~~pays~~ the penalty fee set by the board under IC 25-22.5-2-7; ~~and~~

(2) ~~pays~~ the renewal fee for the biennium; ~~and~~

(3) ~~completes the continuing education requirement established by the board.~~

(c) If a license that becomes invalid under this section is not reinstated by the board within three (3) years of its invalidation, the holder of the invalid license may be required by the board to take an examination for competence before the board will reinstate the holder's license.

(d) The board may adopt rules under IC 25-22.5-2-7 establishing requirements for the reinstatement of a lapsed license.

(e) **An individual may not renew a license under this article unless the individual has completed the continuing education requirements established under IC 25-22.5-2-7(1)(G). An application under this section must contain a sworn statement signed by the applicant attesting that the applicant has fulfilled the**

C
O
P
Y



continuing education requirements.

(f) Every two (2) years, the board may randomly audit for compliance at least one percent (1%) but not more than ten percent (10%) of the practitioners required to take continuing education courses.

(g) Notwithstanding IC 25-22.5-2-7(1)(G), the continuing education requirement does not apply to the following:

- (1) A practitioner who has held an initial license for less than two (2) years.
- (2) A practitioner who the board has determined is unable to meet the requirement due to a disability.

(h) For each continuing education course attended or completed, the practitioner shall retain:

- (1) a record of the number of hours spent in each continuing education course;
- (2) the subject matter presented;
- (3) the name of the sponsoring organization; and
- (4) verification of attendance or completion;

for three (3) years after the date the practitioner's license was renewed.

SECTION 4. IC 25-23-1-7 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 7. (a) The board shall do the following:

- (1) Adopt under IC 4-22-2 rules necessary to enable it to carry into effect this chapter.
- (2) Prescribe standards and approve curricula for nursing education programs preparing persons for licensure under this chapter.
- (3) Provide for surveys of such programs at such times as it considers necessary.
- (4) Accredite such programs as meet the requirements of this chapter and of the board.
- (5) Deny or withdraw accreditation from nursing education programs for failure to meet prescribed curricula or other standards.
- (6) Examine, license, and renew the license of qualified applicants.
- (7) Issue subpoenas, compel the attendance of witnesses, and administer oaths to persons giving testimony at hearings.
- (8) Cause the prosecution of all persons violating this chapter and have power to incur necessary expenses for these prosecutions.
- (9) Adopt rules under IC 4-22-2 that do the following:



C
O
P
Y

(A) Prescribe standards for the competent practice of registered, practical, and advanced practice nursing.

(B) Establish with the approval of the medical licensing board created by IC 25-22.5-2-1 requirements that advanced practice nurses must meet to be granted authority to prescribe legend drugs and to retain that authority.

(C) Establish continuing education requirements designed to maintain the competency of individuals licensed under this chapter, including requirements providing that only educational activities that meet professional role expectations satisfy continuing education requirements.

(10) Keep a record of all its proceedings.

(11) Collect and distribute annually demographic information on the number and type of registered nurses and licensed practical nurses employed in Indiana.

(12) Notify each registered nurse and licensed practical nurse residing in Indiana when final rules concerning the practice of nursing are published in the Indiana register.

(b) The board may do the following:

(1) Create ad hoc subcommittees representing the various nursing specialties and interests of the profession of nursing. Persons appointed to a subcommittee serve for terms as determined by the board.

(2) Utilize the appropriate subcommittees so as to assist the board with its responsibilities. The assistance provided by the subcommittees may include the following:

(A) Recommendation of rules necessary to carry out the duties of the board.

(B) Recommendations concerning educational programs and requirements.

(C) Recommendations regarding examinations and licensure of applicants.

(3) Appoint nurses to serve on each of the ad hoc subcommittees.

(c) Nurses appointed under subsection (b) must:

(1) be committed to advancing and safeguarding the nursing profession as a whole; and

(2) represent nurses who practice in the field directly affected by a subcommittee's actions.

SECTION 5. IC 25-23-1-16.1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 16.1. (a) A license to practice as a registered nurse expires on October 31 in each odd-numbered year. Failure to renew the license on or before the



C
O
P
Y

expiration date will automatically render the license invalid without any action by the board.

(b) A license to practice as a licensed practical nurse expires on October 31 in each even-numbered year. Failure to renew the license on or before the expiration date will automatically render the license invalid without any action by the board.

(c) The procedures and fee for renewal shall be set by the board.

(d) At the time of license renewal, each registered nurse and each licensed practical nurse shall pay an additional three dollar (\$3) fee. The lesser of the following amounts from fees collected under this subsection shall be deposited in the impaired nurses account of the state general fund established by section 34 of this chapter:

- (1) Three dollars (\$3) per license renewed under this section.
- (2) The cost per license to operate the impaired nurses program, as determined by the health professions bureau.

(e) To renew a license under this section, an individual must have completed the continuing education requirements established by the board under section 7(a)(9)(C) of this chapter. An application under this section must contain a sworn statement signed by the applicant attesting that the applicant has fulfilled the continuing education requirements.

(f) Every two (2) years, the board may randomly audit for compliance at least one percent (1%) but not more than ten percent (10%) of the nurses required to take continuing education courses.

(g) Notwithstanding IC 25-22.5-2-7(1)(G), the continuing education requirement does not apply to the following:

- (1) A nurse who has held an initial license for less than two (2) years.
- (2) A nurse who the board has determined is unable to meet the requirement due to a disability.

(h) For each continuing education course attended or completed, the nurse shall retain:

- (1) a record of the number of hours spent in each continuing education course;
- (2) the subject matter presented;
- (3) the name of the sponsoring organization; and
- (4) verification of attendance or completion;

for three (3) years after the date the nurse's license was renewed."

Renumber all SECTIONS consecutively.



C
O
P
Y

and when so amended that said bill do pass.

(Reference is to SB 138 as reprinted February 12, 1999.)

BROWN C, Chair

Committee Vote: yeas 11, nays 2.

C
o
p
y



HOUSE MOTION

Mr. Speaker: I move that Engrossed Senate Bill 138 be amended to read as follows:

Page 7, before line 1, begin a new paragraph and insert:

"SECTION 6. IC 25-27.5-1-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 1. This article does not apply to the following:

- (1) A physician assistant trainee or a student enrolled in a physician assistant or a surgeon assistant educational program accredited by ~~the~~ CAHEA, **CAAHEP, or a successor agency.**
- (2) A physician assistant employed in the service of the federal government while performing duties incident to that employment.
- (3) A health care professional, technician, ~~and~~ **or** other assistant or employee of a physician who performs delegated tasks in the office of a physician but who does not render services as a physician assistant or profess to be a physician assistant.

SECTION 7. IC 25-27.5-2-1.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: **Sec. 1.5 "Administer a drug" means the direct application of a drug, whether by injection, inhalation, ingestion, or any other means to the body of a patient.**

SECTION 8. IC 25-27.5-2-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 2. "Approved program" means a physician assistant or a surgeon assistant program accredited by CAHEA, **CAAHEP, or a successor agency.**

SECTION 9. IC 25-27.5-2-4.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: **Sec. 4.5. "CAAHEP" refers to the Commission on Accreditation of Allied Health Education Programs.**

SECTION 10. IC 25-27.5-2-7.3 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: **Sec. 7.3. "Dispense" means issuing one (1) or more doses of a drug in a suitable container with appropriate labeling for subsequent administration to, or use by, a patient or issuing medical devices.**

SECTION 11. IC 25-27.5-2-10 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 10. "Physician assistant" means an individual who has:

- (1) graduated from a physician assistant or a surgeon assistant program accredited by ~~the~~ CAHEA, **CAAHEP, or a successor agency; and**

ES 138—LS 6644/DI 44+



C
O
P
Y

- (2) passed the certifying examination **administered by the NCCPA** and maintains certification by the NCCPA; **and**
(3) been licensed by the committee.

SECTION 12. IC 25-27.5-3-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 2. (a) The committee consists of five (5) members appointed by the governor for terms of three (3) years.

(b) The committee must include the following:

- (1) Three (3) physician assistants who:
 - (A) are residents of Indiana;
 - (B) have at least three (3) years experience as physician assistants; and
 - (C) are **certified licensed** under this article.
- (2) A physician licensed under IC 25-22.5 who:
 - (A) is familiar with the practice of physician assistants; **and**
 - (B) **is a resident of Indiana.**
- (3) An individual who:
 - (A) is a resident of Indiana; and
 - (B) is not associated with physician assistants in any way other than as a consumer.

SECTION 13. IC 25-27.5-3-5 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 5. The committee shall do the following:

- (1) Consider the qualifications of individuals who apply for **certificates licensure** under this article.
- (2) Provide for examinations required under this article.
- (3) **Certify License** qualified individuals.
- (4) Propose rules to the board concerning the competent practice of physician assistants and the administration of this article.
- (5) Recommend to the board the amounts of fees required under this article.

SECTION 14. IC 25-27.5-3-6 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 6. (a) After considering the committee's proposed rules, the board shall adopt rules under IC 4-22-2 establishing standards for the following:

- (1) The competent practice of physician assistants.
- (2) The renewal of **certificates licenses** issued under this article.
- (3) Standards for the administration of this article.

(b) After considering the committee's recommendations for fees, the board shall establish fees under IC 25-1-8-2.

SECTION 15. IC 25-27.5-3-9 IS ADDED TO THE INDIANA CODE AS A **NEW SECTION** TO READ AS FOLLOWS



C
O
P
Y

[EFFECTIVE JULY 1, 1999]: **Sec. 9. In the event of a vacancy on the committee, the governor shall appoint a successor to complete the unexpired term.**

SECTION 16. IC 25-27.5-3-10 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: **Sec. 10. A member of the committee may not serve more than two (2) consecutive three (3) year terms and each member shall serve on the committee until a successor is appointed.**

SECTION 17. IC 25-27.5-3-11 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: **Sec. 11. The committee shall elect a chairperson and a secretary from among its members at the committee's first meeting of each fiscal year. The committee shall meet on a regular basis. A committee meeting may be called upon reasonable notice at the discretion of the chairperson and shall be called at any time upon reasonable notice by a petition of three (3) committee members to the chairperson.**

SECTION 18. IC 25-27.5-4-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 1. An individual must be ~~certified~~ **licensed** by the committee before the individual may practice as a physician assistant. The committee may grant a ~~certificate~~ **license** as a physician assistant to an applicant who does the following:

- (1) Submits an application on forms approved by the committee.
- (2) Pays the fee established by the board.
- (3) Has:
 - (A) successfully completed an educational program for physician assistants or surgeon assistants accredited by the CAHEA, **CAAHEP, or a successor agency**; and
 - (B) ~~has~~ passed the Physician Assistant National Certifying Examination administered by the NCCPA ~~or other examination approved by the committee and maintains current NCCPA certification.~~
- (4) Submits to the committee any other information the committee ~~requires~~ **considers necessary** to evaluate the applicant's qualifications.
- (5) Presents satisfactory evidence to the committee that the individual has not been:
 - (A) engaged in an act that would constitute grounds for a disciplinary sanction under IC 25-1-9; ~~and or~~
 - (B) the subject of a disciplinary action by a licensing or certification agency of another state or jurisdiction on the



C
O
P
Y

grounds that the individual was not able to practice as a physician assistant without endangering the public.

SECTION 19. IC 25-27.5-4-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 2. The committee may refuse to issue a ~~certificate~~ **license** or may issue a probationary ~~certificate~~ **license** to an individual if:

- (1) the individual has been disciplined by an administrative agency in another jurisdiction or been convicted for a crime that has a direct bearing on the individual's ability to practice competently; and
- (2) the committee determines that the act for which the individual was disciplined or convicted has a direct bearing on the individual's ability to practice as a physician assistant.

SECTION 20. IC 25-27.5-4-3 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 3. (a) If the committee issues a probationary ~~certificate~~ **license** under section 2 of this chapter, the committee may require the individual who holds the ~~certificate~~ **license** to meet at least one (1) of the following conditions:

- (1) Report regularly to the committee upon a matter that is the basis for the probation.
- (2) Limit practice to areas prescribed by the committee.
- (3) Continue or renew professional education.
- (4) Engage in community service without compensation for a number of hours specified by the committee.
- (5) Submit to the care, counseling, or treatment of a physician or physicians designated by the committee.**

(b) The committee shall remove a limitation placed on a probationary ~~certificate~~ **license** if, after a hearing, the committee finds that the deficiency that caused the limitation has been remedied.

SECTION 21. IC 25-27.5-4-4 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 4. (a) The committee may grant temporary ~~certification~~ **licensure** to an applicant who:

- (1) meets the qualifications for ~~certification~~ **licensure** under section 1 of this chapter except:
 - (A) for the taking of the **next scheduled** NCCPA examination; or
 - (B) if the applicant has taken the NCCPA examination and is awaiting the results; or
 - (2) meets the qualifications for ~~certification~~ **licensure** under section 1 of this chapter but is awaiting the next scheduled meeting of the committee.
- (b) A temporary ~~certification~~ **license** is valid until: ~~the earliest of the~~



C
O
P
Y

following:

- (1) the results of an applicant's examination are available; **and**
- (2) the committee makes a final decision on the applicant's request for ~~certification~~ **licensure**.

(c) The temporary license is immediately revoked upon notice to the health professions bureau that the temporary license holder has failed the exam. The committee may extend a temporary license at its terms and discretion by a majority vote of the committee.

~~(c)~~ **(d) A physician assistant practicing under a temporary certificate license must practice with onsite physician supervision. and, notwithstanding IC 25-27.5-5-4, may not dispense drugs or medical devices.**

~~(d)~~ **(e) A physician assistant who notifies the board in writing may elect to:**

- (1) place the physician assistant's certification licensure on an inactive status if previously employed by a supervising physician; or**
- (2) apply for an inactive license if not currently employed at the time of initial application.**

(f) A physician assistant with an inactive license shall be excused from payment of renewal fees and may not practice as a physician assistant.

(g) A licensee who engages in practice while the licensee's license is lapsed or on inactive status shall be considered to be practicing without a license, which is grounds for discipline under IC 25-1-9.

SECTION 22. IC 25-27.5-4-5 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 5. (a) A ~~certificate~~ **license** issued by the committee expires on a date established by the health professions bureau under IC 25-1-5-4 in the next even-numbered year following the year in which the ~~certificate~~ **license** was issued.

(b) An individual may renew a ~~certificate~~ **license** by paying a renewal fee on or before the expiration date of the ~~certificate~~ **license**.

(c) If an individual fails to pay a renewal **fee** on or before the expiration date of a ~~certificate~~ **license**, the ~~certificate~~ **license** becomes invalid.

SECTION 23. IC 25-27.5-4-6 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 6. (a) The committee may reinstate an invalid ~~certificate~~ **license** up to three (3) years after the expiration date of the ~~certificate~~ **license** if the individual holding the invalid ~~certificate~~ **license**:

- (1) pays a penalty fee for late renewal; and



C
O
P
Y

(2) pays the renewal fee under section 5(b) of this chapter.

(b) If more than three (3) years have elapsed since the date a ~~certificate license~~ expired, the individual holding the ~~certificate license~~ may renew the ~~certificate license~~ by satisfying the requirements for renewal established by the board.

SECTION 24. IC 25-27.5-4-7 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 7. (a) An individual who is ~~certified licensed~~ under this chapter shall notify the committee in writing when the individual retires from practice.

(b) Upon receipt of the notice, the committee shall:

(1) record the fact the individual is retired; and

(2) release the individual from further payment of renewal fees.

SECTION 25. IC 25-27.5-4-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 8. (a) If an individual surrenders a ~~certificate license~~ to the committee, the committee may reinstate the ~~certificate license~~ upon written request by the individual.

(b) If the committee reinstates a ~~certificate license~~, the committee may impose conditions on the ~~certificate license~~ appropriate to the reinstatement.

(c) An individual may not surrender a ~~certificate license~~ without written approval by the committee if a disciplinary proceeding under this article is pending against the individual.

SECTION 26. IC 25-27.5-4-9 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: **Sec. 9. The committee may reinstate a physician assistant's inactive license if the physician assistant requesting reinstatement pays the current renewal fee.**

SECTION 27. IC 25-27.5-5-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 1. **(a)** This chapter does not apply to the practice of other health care professionals set forth under IC 25-22.5-1-2(a)(1) through IC 25-22.5-1-2(a)(19).

(b) This chapter does not allow the independent practice by a physician assistant of any of the activities of other health care professionals set forth under IC 25-22.5-1-2(a)(1) through IC 25-22.5-1-2(a)(19).

SECTION 28. IC 25-27.5-5-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 2. A physician assistant must engage in a dependent practice with physician supervision. A physician assistant may perform the duties and responsibilities, **including the prescribing and dispensing of drugs and medical devices**, that are delegated by the supervising physician.

SECTION 29. IC 25-27.5-5-4 IS AMENDED TO READ AS



C
O
P
Y

FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 4. (a) ~~The board may adopt rules under IC 4-22-2 to determine the appropriate use of prescription drugs by a physician assistant. A physician assistant may prescribe, dispense, and administer drugs and medical devices or services to the extent delegated by the supervising physician.~~

(b) ~~Notwithstanding subsection (a), a physician assistant may not prescribe, dispense, or administer ophthalmic devices, including glasses, contacts, and low vision devices.~~

(c) As permitted by the board, a physician assistant may use or dispense only drugs prescribed or approved by the supervising physician. **Prescription and administration of drugs may include:**

- (1) **all legend drugs that have been approved by the supervising physician; and**
- (2) **not more than a seven (7) day supply of scheduled substances as listed under IC 35-48-2 that have been approved by the supervising physician.**

~~(c)~~ (d) ~~Notwithstanding subsection (b), a physician assistant may not dispense a scheduled substance listed under IC 35-48-2. Physician assistants may request, receive, and sign for professional samples and may distribute professional samples to patients if the samples are within the scope of the physician assistant's prescribing privileges delegated by the supervising physician.~~

SECTION 30. IC 25-27.5-5-5 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 5. A physician assistant **certified licensed** under IC 25-27.5 shall:

- (1) keep the physician assistant's ~~certificate~~ **license** available for inspection at the primary place of business; and
- (2) when engaged in the physician assistant's professional activities, wear a name tag identifying the individual as a physician assistant.

SECTION 31. IC 25-27.5-5-6 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 6. (a) **A supervising physician may delegate authority to a physician assistant to prescribe:**

- (1) **legend drugs;**
- (2) **not more than a seven (7) day supply of controlled substances (as defined in IC 35-48-1-9) at one (1) time; and**
- (3) **medical devices except ophthalmic devices, including glasses, contacts, and low vision devices.**

(b) **Any prescribing authority delegated to a physician assistant must be expressly delegated in writing by the physician assistant's supervising physician.**



C
O
P
Y

(c) A physician assistant who is delegated the authority to prescribe legend drugs or medical devices must do the following:

- (1) Enter on each prescription form that the physician assistant uses to prescribe a legend drug or medical device:
 - (A) the signature of the physician assistant;
 - (B) the initials indicating the credentials awarded to the physician assistant by the NCCPA; and
 - (C) the physician assistant's state license number.
- (2) Comply with all applicable state and federal laws concerning prescriptions for legend drugs and medical devices.

(d) A supervising physician may delegate to a physician assistant the authority to prescribe only legend drugs and medical devices that are within the scope of practice of the licensed supervising physician or the physician designee.

(e) A physician assistant who is delegated the authority to prescribe controlled substances under subsection (a) must do the following:

- (1) Obtain an Indiana controlled substance registration and a federal Drug Enforcement Administration registration.
- (2) Enter on each prescription form that the physician assistant uses to prescribe a controlled substance:
 - (A) the signature of the physician assistant;
 - (B) the initials indicating the credentials awarded to the physician assistant by the NCCPA;
 - (C) the physician assistant's state license number; and
 - (D) the physician assistant's federal DEA number.
- (3) Comply with all applicable state and federal laws concerning prescriptions for controlled substances.

(f) A supervising physician may delegate to a physician assistant the authority to prescribe only controlled substances that are within the scope of practice of the licensed supervising physician or the physician designee.

SECTION 32. IC 25-27.5-6-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 1. (a) Supervision by the supervising physician or the physician designee must be continuous but does not require the physical presence of the supervising physician at the time and the place that the services are rendered.

(b) A supervising physician or physician designee shall review all patient encounters not later than ~~twenty-four (24) hours~~ **two (2) working days** after the physician assistant has seen the patient.

SECTION 33. IC 25-27.5-6-2 IS AMENDED TO READ AS



C
O
P
Y

FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 2. A physician may **employ more than two (2) physician assistants but may not supervise not more than two (2) physician assistants at any given time.**

SECTION 34. IC 25-27.5-6-5 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 5. (a) Before initiating practice, the supervising physician and the physician assistant must submit, on forms approved by the board, the following information:

- (1) The name, the business address, and the telephone number of the supervising physician.
- (2) The name, the business address, and the telephone number of the physician assistant.
- (3) A brief description of **the extent to which and** the setting in which the physician assistant will practice.
- (4) Any other information required by the board.

(b) A physician assistant must notify the board of any changes or additions in practice sites or supervising physicians not more than thirty (30) days after the change or addition.

(c) The board shall notify the committee of all information received from each supervising physician and physician assistant under this section. The board shall also notify the committee of any changes or additions made under this section.

SECTION 35. IC 25-27.5-6.3 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]:

Chapter 6.3. Certification of Health Status

Sec. 1. A physician assistant may be delegated the ability to:

- (1) evaluate and sign forms that certify the health status of patients by the supervising physician, including school physicals, employment physicals, and handicap parking permits; and
- (2) authenticate with a signature any form that may be authenticated by the supervising physician's signature.

SECTION 36. IC 25-27.5-6.5 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]:

Chapter 6.5. Participation in Disaster and Emergency Care

Sec. 1. This chapter does not apply to medical assistance provided at a hospital, physician's office, or other health care facility where medical services are normally provided.

Sec. 2. (a) A physician assistant licensed in this state or licensed or authorized to practice in another state who is responding to a need for medical care created by an emergency or a state or local

C
O
P
Y



disaster may render care that the physician assistant is able to provide without supervision, as defined in IC 25-27.5-6, or with supervision as is available. For purposes of this chapter, an emergency or state or local disaster does not include an emergency situation that occurs in the place of one's employment.

(b) A physician assistant who:

- (1) is licensed in this state or licensed or authorized to practice in another state;
- (2) voluntarily and gratuitously provides medical care during an emergency in this state; and
- (3) provides that care without a supervising physician being present;

is not liable for civil damages for any personal injuries that result from acts or omissions by the physician assistant providing the emergency medical care unless such acts or omissions constitute gross, willful, or wanton negligence.

Sec. 3. A physician who voluntarily and gratuitously supervises a physician assistant who is voluntarily and gratuitously providing emergency medical care is not:

- (1) required to meet the requirements for an approved supervising physician under IC 25-27.5-6; or
- (2) liable for civil damages for any personal injuries that result from acts or omissions by the physician assistant providing emergency medical care.

SECTION 37. IC 25-27.5-7-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 1. (a) An individual may not:

- (1) profess to be a physician assistant;
- (2) use the title "physician assistant", including the use of the title by a physician who is not licensed under IC 25-22.5; or
- (3) use the initials "P.A." or any other words, letters, abbreviations, or insignia indicating or implying that the individual is a physician assistant ~~certified~~ **licensed** under this article; or

(4) practice as a physician assistant;

unless the individual is ~~certified~~ **licensed** under this article.

(b) However Use of the initials "PA" by a public accountant who is authorized to use the initials "PA" by IC 25-2.1-12-6 is not a violation of this section.

SECTION 38. IC 25-27.5-7-4 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: **Sec. 4. The committee shall establish**



C
O
P
Y

and administer a program for the rehabilitation of physician assistants whose competency is impaired due to the abuse of drugs or alcohol. The committee may contract with any state agency or private corporation to perform duties under this section. The program shall be similar to that available to other health professionals in Indiana.

SECTION 39. IC 34-30-2-101.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 1999]: **Sec. 101.5. IC 25-27.5-6.5 (concerning actions of a physician assistant and a supervising physician in an emergency situation).**".

Renumber all SECTIONS consecutively.

(Reference is to ESB 138 as printed March 26, 1999.)

LINDER

C
o
p
y

