ARTICLE 2.2. PHYSICIAN ASSISTANTS

Rule 1. Definitions

844 IAC 2.2-1-1 Applicability

Authority: IC 25-22.5-2-7 Affected: IC 25-22.5-1

Sec. 1. The definitions in this rule apply throughout this title. (Medical Licensing Board of Indiana; 844 IAC 2.2-1-1; filed May 26, 2000, 8:52 a.m.: 23 IR 2498; readopted filed Nov 16, 2006, 10:49 a.m.: 20061129-IR-844060239RFA)

844 IAC 2.2-1-2 "Board" defined

Authority: IC 25-22.5-2-7 Affected: IC 25-22.5-1

Sec. 2. "Board" refers to the medical licensing board of Indiana. (Medical Licensing Board of Indiana; 844 IAC 2.2-1-2; filed May 26, 2000, 8:52 a.m.: 23 IR 2498; readopted filed Nov 16, 2006, 10:49 a.m.: 20061129-IR-844060239RFA)

844 IAC 2.2-1-3 "Committee" defined

Authority: IC 25-22.5-2-7

Affected: IC 25-22.5-1; IC 25-27.5-3-1

Sec. 3. "Committee" refers to the physician assistant committee established by IC 25-27.5-3-1. (Medical Licensing Board of Indiana; 844 IAC 2.2-1-3; filed May 26, 2000, 8:52 a.m.: 23 IR 2498; readopted filed Nov 16, 2006, 10:49 a.m.: 20061129-IR-844060239RFA)

844 IAC 2.2-1-4 "NCCPA" defined

Authority: IC 25-22.5-2-7 Affected: IC 25-22.5-1

Sec. 4. "NCCPA" refers to the National Commission on Certification of Physician Assistants. (Medical Licensing Board of Indiana; 844 IAC 2.2-1-4; filed May 26, 2000, 8:52 a.m.: 23 IR 2498; readopted filed Nov 16, 2006, 10:49 a.m.: 20061129-IR-844060239RFA)

844 IAC 2.2-1-5 "Physician assistant" defined

Authority: IC 25-22.5-2-7 Affected: IC 25-22.5-1

Sec. 5. "Physician assistant" means an individual who has:

- (1) graduated from an approved physician assistant or surgeon assistant program; and
- (2) passed the certifying examination and maintains certification by the NCCPA.

(Medical Licensing Board of Indiana; 844 IAC 2.2-1-5; filed May 26, 2000, 8:52 a.m.: 23 IR 2498; readopted filed Nov 16, 2006, 10:49 a.m.: 20061129-IR-844060239RFA)

Rule 2. General Provisions

844 IAC 2.2-2-1 Applications

Authority: IC 25-22.5-2-7; IC 25-27.5-3-5 Affected: IC 25-22.5-1-2; IC 25-27.5

Sec. 1. (a) The application for certification of a physician assistant must be made upon forms supplied by the committee. (b) Each application for certification as a physician assistant or for a temporary permit while waiting for the next committee meeting shall include all of the following information:

- (1) Complete names, address, and telephone number of the physician assistant.
- (2) Satisfactory evidence of the following:
 - (A) Completion of an approved educational program.
 - (B) Passage of the Physician Assistant National Certifying Examination administered by the NCCPA.
 - (C) A current NCCPA certificate.
- (3) All names used by the physician assistant, explaining the reason for such name change or use.
- (4) Date and place of birth of the physician assistant, and age at the time of application.
- (5) Citizenship and visa status if applicable.
- (6) Whether the physician assistant has been licensed, certified, or registered in any other jurisdiction and, if so, the dates thereof.
- (7) Whether the physician assistant has had any disciplinary action taken against the license, certificate, or registration by the licensing or regulatory agency of any other state or jurisdiction, and the details and dates thereof.
- (8) A complete listing of all places of employment, including:
 - (A) the name and address of employers;
 - (B) the dates of each employment; and
 - (C) employment responsibilities held or performed;

that the applicant has had since becoming a physician assistant in any state or jurisdiction.

- (9) Whether the physician assistant is, or has been, addicted to, or is chemically dependent upon, any narcotic drugs, alcohol, or other drugs, and if so, the details thereof.
- (10) Whether the applicant has been denied a license, certificate, approval, or registration as physician assistant by any other state or jurisdiction, and, if so, the details thereof, including the following:
 - (A) The name and location of the state or jurisdiction denying licensure.
 - (B) Certification, approval, or registration.
 - (C) The date of denial of the certification, approval, or registration.
 - (D) The reasons relating to the denial of certification, approval, or registration.
- (11) Whether the physician assistant has been convicted of, or pleaded guilty to, any violation of federal, state, or local law relating the use, manufacturing, distributing, sale, dispensing, or possession of controlled substances or of drug addiction, and, if so, all of the details relating thereto.
- (12) Whether the physician assistant has been convicted of, or pleaded guilty to, any federal or state criminal offense, felony, or misdemeanor, except for traffic violations that resulted only in fines, and, if so, all of the details thereto.
- (13) Whether the physician assistant was denied privileges in any hospital or health care facility, or had such privileges revoked, suspended, or subjected to any restriction, probation, or other type of discipline or limitation, and, if so, all of the details relating thereto, including the name and address of the hospital or health care facility, the date of such action, and the reasons therefore.
- (14) Whether the physician assistant has ever been admonished, censured, reprimanded, or requested to withdraw, resign, or retire from any hospital or health care facility in which the physician assistant was employed, worked, or held privileges.
- (15) Whether the physician assistant has had any malpractice judgments entered against him or her or settled any malpractice action or cause of action, and, if so, a complete, detailed description of the facts and circumstances relating thereto.
- (16) A statement from the supervising physician that the physician assistant is, or will be, supervised by that physician.
- (17) A description of the setting in which the physician assistant shall be working under the physician supervision.
- (18) The name, business address, and telephone number of the physician under whose supervision the physician assistant will be supervised.
- (19) One (1) passport-type photo taken of the applicant within the last eight (8) weeks.
- (c) All information in the application shall be submitted under oath or affirmation, subject to the penalties of perjury.
- (d) Each applicant for certification as a physician assistant shall submit an executed authorization and release form supplied by the committee that:
 - (1) authorizes the committee or any of its authorized representatives to inspect, receive, and review;
 - (2) authorizes and directs any:
 - (A) person;
 - (B) corporation;
 - (C) partnership;

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- (D) association;
- (E) organization;
- (F) institute;
- (G) forum; or
- (H) officer thereof;

to furnish, provide, and supply to the committee all relevant documents, records, or other information pertaining to the applicant; and

- (3) releases the committee, or any of its authorized representatives, and any:
 - (A) person;
 - (B) corporation;
 - (C) partnership;
 - (D) association;
 - (E) organization;
 - (F) institute;
 - (G) forum: or
 - (H) officer thereof;

from any and all liability regarding such inspection, review, receipt, furnishing, or supply of any such information.

- (e) Application forms submitted to the committee must be complete in every detail. All supporting documents required by the application must be submitted with the application.
- (f) Applicants for a temporary permit to practice as a physician assistant while waiting to take the examination or waiting for results of the examination must submit all requirements of subsection (b), except for subsection (b)(2)(B) and (b)(2)(C), in order to apply for a temporary permit.
- (g) A temporary permit becomes invalid if the temporary permit holder fails to register for the next available examination. (Medical Licensing Board of Indiana; 844 IAC 2.2-2-1; filed May 26, 2000, 8:52 a.m.: 23 IR 2498; errata filed Sep 21, 2000, 3:21 p.m.: 24 IR 382; filed Jan 2, 2003, 10:38 a.m.: 26 IR 1558; readopted filed Dec 1, 2009, 9:13 a.m.: 20091223-IR-844090779RFA)

844 IAC 2.2-2-2 Registration of supervising physician

Authority: IC 25-22.5-2-7; IC 25-27.5-3-5

Affected: IC 25-27.5-6

- Sec. 2. (a) A physician licensed under IC 25-22.5 who intends to supervise a physician assistant shall register his or her intent to do so with the board on a form approved by the board prior to commencing supervision of a physician assistant. The supervising physician shall include the following information on the form supplied by the board:
 - (1) The name, business address, and telephone number of the supervising physician.
 - (2) The name, business address, telephone number, and certification number of the physician assistant.
 - (3) The current license number of the physician.
 - (4) A statement that the physician will be supervising no more than two (2) physician assistants, and the name and certificate numbers of the physician assistants he or she is currently supervising.
 - (5) A description of the setting in which the physician assistant will practice under the supervising physician, including the specialty, if any, of the supervising physician.
 - (6) A statement that the supervising physician:
 - (A) will exercise continuous supervision over the physician assistant in accordance with IC 25-27.5-6 and this article;
 - (B) shall review all patient encounters maintained by the physician assistant within twenty-four (24) hours after the physician assistant has seen a patient; and
 - (C) at all times, retain professional and legal responsibility for the care rendered by the physician assistant.
 - (7) Detailed description of the process maintained by the physician for evaluation of the physician assistant's performance.
- (b) The supervising physician may not be the designated supervising physician for more than two (2) physician assistants and may not supervise more than two (2) physician assistants at one (1) time as the primary or designated supervising physician.
- (c) The designated supervising physician is to accept responsibility of supervising the physician assistant in the absence of the primary supervising physician of record. Protocol is to be established by the physician practice.

(d) The supervising physician shall, within fifteen (15) days, notify the board when the supervising relationship with the physician assistant is terminated, and the reason for such termination. In addition, notification shall be submitted to the committee. (Medical Licensing Board of Indiana; 844 IAC 2.2-2-2; filed May 26, 2000, 8:52 a.m.: 23 IR 2499; errata filed Sep 21, 2000, 3:21 p.m.: 24 IR 382; filed Jan 2, 2003, 10:38 a.m.: 26 IR 1559; readopted filed Dec 1, 2009, 9:13 a.m.: 20091223-IR-844090779RFA)

844 IAC 2.2-2-3 Certification renewal

Authority: IC 25-22.5-2-7 Affected: IC 25-27.5-5-2

- Sec. 3. (a) Every physician assistant holding a certificate issued by the committee shall renew his or her certificate every two (2) years, in even-numbered years.
- (b) On or before April 30 every two (2) years in even-numbered years, the committee, or its duly authorized agent, shall notify each certificate holder that the certificate holder is required to renew with the committee. The committee, or its agent, shall furnish a certificate holder a form to be completed for renewal.
 - (c) Applications for all renewals must be made under oath or affirmation.
 - (d) Each certificate holder shall submit evidence of current NCCPA certification.
- (e) Each certificate holder shall submit a fee as determined by the committee, in the form of a check, certified check, cashier's check, or postal money order payable to the order of the "Health Professions Bureau".
- (f) Each certificate holder shall inform the committee, in writing, of all changes in address or name within thirty (30) days of the change.
- (g) A certificate holder's failure to receive notification of renewal due to failure to notify the committee of a change of address or name shall not constitute an error on the part of the committee or the health professions bureau, nor shall it exonerate or otherwise excuse the certificate holder from renewing such certificate.
- (h) A physician assistant who is less than three (3) years delinquent in renewing a certificate may be reinstated upon receipt of the renewed application, renewal fees, and penalty fee.
- (i) If more than three (3) years have elapsed since the expiration of a certificate to practice as a physician assistant, the applicant may be required by the committee to take and pass examination approved by the committee prior to reinstatement. (Medical Licensing Board of Indiana; 844 IAC 2.2-2-3; filed May 26, 2000, 8:52 a.m.: 23 IR 2500; readopted filed Nov 16, 2006, 10:49 a.m.: 20061129-IR-844060239RFA)

844 IAC 2.2-2-4 Reporting requirements

Authority: IC 25-22.5-2-7 Affected: IC 25-22.5-1-2

Sec. 4. If for any reason a physician assistant discontinues working at the direction and/or under the supervision of the physician under which the physician assistant is registered with the board, such physician assistant shall inform the committee, in writing, within fifteen (15) days of such event. The physician assistant shall not commence practice under a new supervising physician until that physician registers his or her intent to supervise the physician assistant to the board under section 2 of this rule. The physician assistant, in such written report, shall inform the board of the specific reason for the discontinuation of supervision of the physician assistant. In addition, notification shall be submitted to the committee. (Medical Licensing Board of Indiana; 844 IAC 2.2-2-4; filed May 26, 2000, 8:52 a.m.: 23 IR 2500; readopted filed Nov 16, 2006, 10:49 a.m.: 20061129-IR-844060239RFA)

844 IAC 2.2-2-5 Privileges and duties

Authority: IC 25-22.5-2-7; IC 25-27.5-3-5 Affected: IC 25-22.5-1-2; IC 25-27.5

- Sec. 5. (a) When engaged in the physician assistant's professional activities, a physician assistant shall wear a name tag identifying the individual as a physician assistant and shall inform patients that he or she is a physician assistant. A physician assistant shall not portray himself or herself as a licensed physician.
 - (b) A physician assistant shall make available for inspection at his or her primary place of business:
 - (1) the physician assistant's certificate issued by the committee;

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- (2) a statement from the supervising physician that the physician assistant is, or will be, supervised by that physician;
- (3) a description of the setting in which the physician assistant shall be working under the physician supervision;
- (4) a job description with duties to be performed by the physician assistant and to be signed by both the physician and physician assistant; and
- (5) the name, business address, and telephone number of the physician under whose supervision the physician assistant will be supervised.
- (c) The physician assistant may perform, under the supervision of the supervising physician, such duties and responsibilities within the scope of the supervising physician's practice. (Medical Licensing Board of Indiana; 844 IAC 2.2-2-5; filed May 26, 2000, 8:52 a.m.: 23 IR 2500; filed Jan 2, 2003, 10:38 a.m.: 26 IR 1560; readopted filed Dec 1, 2009, 9:13 a.m.: 20091223-IR-844090779RFA)

844 IAC 2.2-2-6 Competent practice of physician assistants

Authority: IC 25-22.5-2-7

Affected: IC 25-22.5-1-2; IC 25-27.5; IC 35-48-2

- Sec. 6. It shall be deemed willful misconduct or the incompetent practice as a physician assistant under IC 25-27.5 if a physician assistant certified by the committee has committed any of the following acts:
 - (1) The physician assistant has held himself or herself out or permitted another to represent him or her as a licensed physician.
 - (2) The physician assistant has, in fact, performed otherwise than under the direction and under the supervision of a physician licensed by the board.
 - (3) The physician assistant has been delegated a task or performed a task beyond his or her competence unless there may be some mitigating circumstances, such as the physician assistant attending a patient in a life-threatening emergency with no physician immediately available.
 - (4) The physician assistant has used intoxicants or drugs to such an extent that he or she is unable to perform competently and with safety as a physician assistant.
 - (5) The physician assistant has been convicted of a felony or other criminal offense involving moral turpitude in this state or any other state, territory, or country. As used in this subdivision, "conviction" includes:
 - (A) a conviction of an offense that, if committed in this state, would be deemed a felony or other criminal offense without regard to its designation elsewhere; or
 - (B) a criminal proceeding in which a finding or verdict of guilty is made or returned but the adjudication of guilt is either withheld or not entered thereon.
 - (6) The physician assistant has been judicially adjudicated as mentally or physically incompetent and/or his or her condition renders him or her unable to safely perform as a physician assistant.
 - (7) The physician assistant has failed, while on duty, to wear a name tag with a designation of physician assistant thereon, or if he or she has failed to make available for inspection his or her certificate as a physician assistant in the office of his or her primary employment as a physician assistant.
 - (8) The physician assistant has failed to be of good moral character and to abide by ethical standards.
 - (9) The physician assistant has engaged in independent practice or has received remuneration for medical services directly from the patient or a third party on his or her behalf, except for provisions as mandated by federal and state law.
 - (10) The physician assistant has failed to work under the supervision of the supervising physician designee.
 - (11) The physician assistant has advertised himself or herself in any manner that would tend to mislead the public generally or the patients of the supervising physician as to the physician assistant's role and status.
 - (12) The physician assistant has failed to maintain certification issued by the NCCPA.
 - (13) The physician assistant has neglected or failed to keep adequate patient records of services performed by the physician assistant and/or has not submitted those encounters for review by the supervising physician within twenty-four (24) hours of the time services were performed.
 - (14) The physician assistant has failed to follow the request of a patient to be seen, examined, and/or treated by a physician. In the event a patient makes such a request, the physician assistant and supervising physician shall take all necessary and appropriate actions to comply with the patient's request.
 - (15) The physician assistant has prescribed the use of a drug or medicine.
 - (16) The physician assistant has made a diagnosis or has instituted a treatment without the authorization of the supervising

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physician or physician designee.

(17) The physician assistant has dispensed or prescribed a schedule substance listed under IC 35-48-2. (Medical Licensing Board of Indiana; 844 IAC 2.2-2-6; filed May 26, 2000, 8:52 a.m.: 23 IR 2501; readopted filed Nov 16, 2006, 10:49 a.m.: 20061129-IR-844060239RFA)

844 IAC 2.2-2-7 Discipline of physician assistants

Authority: IC 25-22.5-2-7 Affected: IC 25-27.5

Sec. 7. Disciplinary action may be taken against a physician assistant for violation of any of the following:

- (1) Section 5 of this rule.
- (2) IC 25-27.5.
- (3) Section 6 of this rule.

(Medical Licensing Board of Indiana; 844 IAC 2.2-2-7; filed May 26, 2000, 8:52 a.m.: 23 IR 2501; readopted filed Nov 16, 2006, 10:49 a.m.: 20061129-IR-844060239RFA)

844 IAC 2.2-2-8 Certification of physician assistants; fees

Authority: IC 25-22.5-2-7; IC 25-27.5-3-5

Affected: IC 25-22.5-1-1.1; IC 25-22.5-1-2; IC 25-27.5

Sec. 8. (a) A nonrefundable fee of one hundred dollars (\$100) shall accompany the initial application for certification.

- (b) A nonrefundable fee of fifty dollars (\$50) shall accompany an application for changing supervising physicians.
- (c) A fee of fifty dollars (\$50) shall accompany each biennial application for renewal of the physician assistant certificate.
- A fee of fifty dollars (\$50) shall accompany each request for a temporary permit in addition to the fee for initial certification.
 - (d) A fee of ten dollars (\$10) shall accompany each request for verification of licensure to another state.
- (e) All such fees are nonrefundable. (Medical Licensing Board of Indiana; 844 IAC 2.2-2-8; filed May 26, 2000, 8:52 a.m.: 23 IR 2501; filed Jan 2, 2003, 10:38 a.m.: 26 IR 1560; readopted filed Dec 1, 2009, 9:13 a.m.: 20091223-IR-844090779RFA)

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