

SENATE BILL 671

By Bell

AN ACT to amend Tennessee Code Annotated, Title 4; Title 33; Title 38; Title 48; Title 49; Title 53; Title 55; Title 56; Title 63; Title 68 and Title 71, relative to medical professionals.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated, Section 4-29-242(a)(10), is amended by deleting the subdivision.

SECTION 2. Tennessee Code Annotated, Section 4-29-246(a), is amended by adding the following as a new subdivision:

Board of physician assistants, created by § 63-19-103;

SECTION 3. Tennessee Code Annotated, Section 38-8-106(7), is amended by deleting the subdivision and substituting the following:

(A) Have passed a physical examination by a licensed physician or nurse practitioner, so long as the task is expressly included in the written protocol developed jointly by the supervising physician and the nurse practitioner, whichever is applicable, setting forth the range of services that may be performed by the nurse practitioner; or

(B) Have passed a physical examination by a licensed physician assistant;

SECTION 4. Tennessee Code Annotated, Section 48-101-610(d)(1), is amended by adding the following as a new subdivision:

(E) Physician assistants licensed under title 63, chapter 19, part 1, and podiatrists licensed under title 63, chapter 3.

SECTION 5. Tennessee Code Annotated, Section 48-248-401(d)(1), is amended by adding the following as a new subdivision:

(E) Physician assistants licensed under title 63, chapter 19, part 1, and podiatrists licensed under title 63, chapter 3.

SECTION 6. Tennessee Code Annotated, Section 48-249-1109(e)(1), is amended by adding the following as new subdivisions:

(F) Physician assistants licensed under title 63, chapter 19, part 1; and physicians licensed under title 63, chapter 6 or 9, except radiologists, pathologists, and anesthesiologists; and advance practice registered nurses licensed under title 63, chapter 7, part 1; and

(G) Physician assistants licensed under title 63, chapter 19, part 1; and advance practice nurses licensed under title 63, chapter 7, part 1.

SECTION 7. Tennessee Code Annotated, Section 49-4-939(i), is amended by deleting "committee on physician assistants" and substituting "board of physician assistants".

SECTION 8. Tennessee Code Annotated, Section 53-10-303(a)(1)(H), is amended by deleting "board of medical examiners' committee on physician assistants" and substituting "board of physician assistants".

SECTION 9. Tennessee Code Annotated, Section 55-21-113, is amended by deleting the section and substituting the following:

(a) A nurse practitioner licensed under title 63, chapter 7, has the same authority that a physician has under this part to issue certified statements of disability or deafness to accompany the application of disabled or deaf persons to obtain the appropriate registration, license plates, placards, and decals from the department, as described in this part, only if the authority is expressly included in the written protocol developed jointly by the supervising physician and the nurse practitioner, setting forth the range of services that may be performed by the nurse practitioner.

(b) A physician assistant licensed under title 63, chapter 19, has the same authority that a physician has under this part to issue certified statements of disability or deafness to accompany the application of disabled or deaf persons to obtain the appropriate registration, license plates, placards, and decals from the department, as described in this part.

SECTION 10. Tennessee Code Annotated, Section 56-7-1004(a), is amended by deleting "under the physician's supervision" wherever it appears.

SECTION 11. Tennessee Code Annotated, Section 63-1-160(c), is amended by deleting "or physician assistant" wherever it appears.

SECTION 12. Tennessee Code Annotated, Section 63-1-162(a)(7), is amended by deleting "board of medical examiners' committee on physician assistants" and substituting "board of physician assistants".

SECTION 13. Tennessee Code Annotated, Section 63-3-118, is amended by deleting the section and substituting the following:

An orthopedic physician assistant collaborating with a licensed podiatrist shall not provide services that are outside of the scope of practice of a podiatrist as set forth in § 63-3-101.

SECTION 14. Tennessee Code Annotated, Section 63-6-204(b), is amended by deleting the subsection and substituting the following:

(1) This chapter does not prohibit service rendered by a physician assistant pursuant to a collaborative pharmacy practice agreement.

(2) This chapter does not prohibit service rendered by a registered nurse, a licensed practical nurse, or a pharmacist pursuant to a collaborative pharmacy practice agreement, if the service is rendered under the supervision, control, and responsibility of a licensed physician or to prohibit the provision of anesthesiology services in licensed

healthcare facilities by a dentist licensed in this state who completed a residency program in anesthesiology at an accredited medical school in years 1963 through 1977.

SECTION 15. Tennessee Code Annotated, Section 63-6-243(b)(1), is amended by deleting the subdivision and substituting the following:

(1) Hormone replacement therapy must be performed by a physician licensed under this chapter or chapter 9 of this title or a physician assistant licensed pursuant to chapter 19 of this title, or must be delegated by the physician to a certified nurse practitioner licensed pursuant to chapter 7 of this title; and

SECTION 16. Tennessee Code Annotated, Section 63-6-802(9), is amended by deleting the subdivision and substituting the following:

(9) "Referral" means a written or telecommunicated authorization for genetic counseling services from a physician licensed to practice medicine in all its branches or a physician assistant; or an advanced practice registered nurse who has an agreement and signed protocols with a supervising physician that authorizes referrals to a genetic counselor; and

SECTION 17. Tennessee Code Annotated, Section 63-9-113, is amended by deleting the section and substituting the following:

(a) This chapter does not prohibit osteopathic medical service rendered by a physician assistant.

(b) This chapter does not prohibit osteopathic medical service rendered by a registered nurse, a licensed practical nurse, or a pharmacist pursuant to a collaborative pharmacy practice agreement, if the osteopathic medical service is rendered under the supervision, control, and responsibility of a licensed osteopathic physician.

SECTION 18. Tennessee Code Annotated, Title 63, Chapter 19, Part 1, is amended by deleting the part and substituting the following:

63-19-101. Short title.

This part shall be known and may be cited as the "Physician Assistants Act."

63-19-102. Part definitions.

As used in this part:

(1) "Board" means the board of physician assistants, created by § 63-19-103 ;

(2) "Orthopedic physician assistant" (OPA-C) means an individual who renders service in collaboration with a licensed orthopedic physician or surgeon and who has been licensed by the board of physician assistants pursuant to this chapter as an orthopedic physician assistant;

(3) "Physician" means an individual lawfully licensed to practice medicine and surgery pursuant to chapter 6 of this title, osteopathic medicine pursuant to chapter 9 of this title, or podiatry pursuant to chapter 3 of this title; and

(4) "Physician assistant" means an individual who is licensed to render services, whether diagnostic or therapeutic, that are acts constituting the practice of medicine or osteopathic medicine and who meets the qualifications defined in this part.

63-19-103. Board of physician assistants.

(a) There is established the board of physician assistants to regulate the practice of physician assistants. The board must consist of nine (9) members appointed by the governor, each of whom is a resident of this state, seven (7) of whom are physician assistants who meet the criteria for licensure as established by this part, one (1) of whom is a physician licensed under chapter 6 or 9 of this title, and one (1) of whom is a public member who is not licensed under this title.

(b) Each regular appointment is for a term of four (4) years. The governor shall fill any vacant term for the balance of the unexpired term. A member shall not serve more than two (2) consecutive four-year terms and each member shall serve on the board until a successor is appointed. In making appointments to the board, the governor shall strive to ensure that at least one (1) person serving on the board is sixty (60) years of age or older and that at least one (1) person serving on the board is a member of a racial minority.

(c) While engaged in the business of the board, board members shall receive a per diem of one hundred dollars (\$100) and shall also receive compensation for actual expenses to be paid in accordance with comprehensive travel regulations promulgated by the commissioner of finance and administration and approved by the attorney general and reporter.

(d) The board shall elect a chair and secretary from among its members at the first meeting held in each fiscal year. A board meeting may be called upon reasonable notice in the discretion of the chair and must be called at any time upon reasonable notice by a petition of three (3) board members to the chair.

63-19-104. Powers and duties of board.

(a) The board has the duty to:

(1) Promulgate, in accordance with the Uniform Administrative Procedures Act, compiled in title 4, chapter 5, all rules that are reasonably necessary for the performance of the duties of the physician assistants, including, but not limited to, rules that specify the acts and offenses that subject the license holder to disciplinary action by the board pursuant to subdivision (a)(7);

(2) Set fees, subject to the maximum limitations prescribed by this part, relative to the examination, licensure, and licensure renewal of physician assistants in an amount sufficient to pay all of the expenses of the board and establish and collect a late renewal fee from those physician assistants who fail to renew their licenses in a timely manner;

(3) Review the qualifications of, and approve or reject each applicant for initial licensure as a physician assistant;

(4) Biennially review the qualifications of, and approve or reject each applicant for biennial licensure renewal. The board shall condition approval for renewal on the receipt of evidence satisfactory to the board of the applicant's successful completion, within a two-year period prior to the application for license renewal, of one hundred (100) hours of continuing medical education approved by the American Academy of Physician Assistants, the American Medical Association, or the Accreditation Council for Continuing Medical Education. The two-year period within which an applicant must have obtained the required continuing medical education hours is either the twenty-four (24) months prior to submitting the application for renewal or the most recent two-year period utilized by the National Commission on Certification of Physician Assistants to determine whether that person has obtained sufficient continuing medical education hours to maintain that person's professional certification. The board may, in its discretion, waive or modify the continuing medical education requirement in cases of retirement, illness, disability, or other undue hardship;

(5) Issue all approved physician assistant licenses and renewals;

(6) Collect or receive all fees, fines, and moneys owed pursuant to this part and to pay the same into the general fund of the state. For the purpose of

implementing subdivision (a)(2), all fees, fines, and moneys collected pursuant to the regulation of physician assistants shall be so designated; and

(7) Deny, suspend, or revoke the license of, or to otherwise discipline by a fine, or by reprimand, a license holder who is guilty of violating any of the provisions of this part or who is guilty of violating the rules of the board promulgated pursuant to subdivision (a)(1). When sanctions are imposed on a license holder pursuant to this subdivision (a)(7), the license holder may, in addition, be required to pay the actual and reasonable costs of the investigation and prosecution of the case, including the costs incurred and assessed for the time of the prosecuting attorney or attorneys, the investigator or investigators and any other persons involved in the investigation, prosecution and hearing of the case. The board may limit, restrict, or impose one (1) or more conditions on a license at the time it is issued, renewed, or reinstated or as a sanction imposed at the conclusion of a disciplinary hearing.

(b) Any actions taken under this section are only effective after adoption by a majority vote of the board members.

63-19-105. Qualifications and licensure.

(a)

(1) An individual shall not represent to be or function as a physician assistant under this part unless the individual holds a valid physician assistant license or temporary license issued by the board. The board shall not license an individual as a physician assistant unless the individual:

(A) Has successfully completed a physician assistant educational program accredited by the Accreditation Review Commission on Education for the Physician Assistant, Inc., or its successor accrediting

agency; or prior to 2001 either by the Committee on Allied Health Education and Accreditation, or the Commission on Accreditation of Allied Health Education Programs;

(B) Has passed the examination of the National Commission on Certification of Physician Assistants, or its successor agency;

(C) Submits an application on forms approved by the board;

(D) Pays the appropriate fees as determined by the board;

(E) Is mentally and physically able to engage safely in practice as a physician assistant;

(F) Has no license as a physician assistant under current discipline, revocation, suspension, or probation for cause resulting from the applicant's practice as a physician assistant, unless the board considers the condition and agrees to licensure; and

(G) Submits to the board any other information the board deems necessary to evaluate the applicant's qualifications.

(2) Notwithstanding subdivisions (a)(1)(A) and (B), the board may license a person qualified as a physician assistant prior to April 26, 1983, and who has continued to represent to be or functioned as a physician assistant since that time. However, the board shall not license any person as a physician assistant after July 1, 1991, unless the person meets the requirements of subdivisions (a)(1)(A) and (B); provided, the board may continue to issue license renewals to any person who was licensed as a physician assistant prior to July 1, 1991.

(b) An individual licensed, registered, or certified as a physician assistant in another jurisdiction may be licensed as a physician assistant by the board if the individual meets the requirements and standards of this part. The board shall charge an

applicant with any reasonable expense incurred by the board in verifying the licensure, registration, or certification by another jurisdiction of the applicant for licensure under this chapter.

(c) The board may issue a temporary license to an individual that allows the individual to function as a physician assistant under this part:

(1) For a period of twelve (12) months immediately following graduation to allow the individual an opportunity to attempt the examination;

(2) For a period of one (1) additional year thereafter in which to attempt and successfully complete the examination if the individual is not successful on the first attempt; or

(3) As provided in § 63-1-104, for an individual who has been out of clinical practice or inactive in their practice for an extended period of time, or who has been or is at the time of their application engaged exclusively in administrative practice.

(d) While an individual's application is pending, the board may issue a temporary license to that individual if the individual is licensed, registered, or certified as a physician assistant in another jurisdiction and if the board finds that the application is complete. The temporary license allows the individual to function as a physician assistant under this chapter. A temporary license issued under this subsection (d) is valid for a period of six (6) months and is not renewable. The board may require that an applicant for licensure as a physician assistant appear before the board to answer any questions regarding the applicant's fitness for licensure.

(e)

(1) The board may authorize any of its members or its consultant to conduct a review of the qualifications of an applicant for a license to practice as a

physician assistant in this state and to make an initial determination as to whether the applicant has met all the requirements for licensure. If the board member or board consultant determines that the applicant has met all the requirements for licensure, then the applicant is authorized to practice as a physician assistant in this state until the board makes a final decision on the application for licensure. The board may authorize the use of this procedure with respect to applicants for license renewal or reinstatement as well. A temporary authorization issued pursuant to a determination made by the committee member or committee consultant must not be effective for longer than a six-month period measured from the date of issuance. The applicant shall not utilize this process more than once.

(2) If temporary authorization pursuant to subdivision (e)(1) is issued to an applicant for a license to practice as a physician assistant in this state and if the subsequent decision of the board is to deny the application based upon a good faith determination that the applicant has not, in fact, complied with all the requirements for licensure, then the doctrine of estoppel does not apply against the state based upon its issuance of temporary authorization and its subsequent denial of licensure.

63-19-106. Authorized services – Scope of practice.

(a) A physician assistant is authorized to perform medical services for which the physician assistant has been prepared by the physician assistant's education, training, and experience and is competent to perform. Medical and surgical services provided by physician assistants include, but are not limited to:

(1) Obtaining and performing comprehensive health histories and physical examinations;

- (2) Evaluating, diagnosing, managing, and providing medical treatment;
- (3) Ordering, performing, and interpreting diagnostic studies and therapeutic procedures;
- (4) Educating patients on health promotion and disease prevention;
- (5) Providing consultation upon request; and
- (6) Writing medical orders.

(b) A physician assistant may provide services in healthcare facilities or programs, including, but not limited to:

- (1) Hospitals;
- (2) Nursing facilities;
- (3) Assisted living facilities; and
- (4) Hospices.

(c) A physician assistant may obtain informed consent for purposes of title 29.

(d) A physician assistant may supervise, delegate, and assign therapeutic and diagnostic measures to licensed or unlicensed personnel.

(e) A physician assistant may certify the health or disability of a patient as required by any local, state, or federal program.

(f) A physician assistant may authenticate any document with their signature, certification, stamp, verification, affidavit, or endorsement if it may be so authenticated by the signature, certification, stamp, verification, affidavit, or endorsement of a physician.

(g) A physician assistant may prescribe, dispense, order, administer, and procure drugs and medical devices.

(h) A physician assistant may plan and initiate a therapeutic regimen that includes ordering and prescribing non-pharmacological interventions, including, but not limited to:

- (1) Durable medical equipment;
- (2) Nutrition;
- (3) Blood and blood products; and
- (4) Diagnostic support services, including, but not limited to, home healthcare, hospice, and speech, physical, and occupational therapy.

(i) The authority to prescribe and dispense drugs described in this part includes Schedule II through V substances, as described in title 53, chapter 11, and all legend drugs.

(j) All dispensing activities of a physician assistant must:

- (1) Comply with appropriate federal and state regulations;
- (2) Occur only when pharmacy services are not reasonably available, or when it is in the best interest of the patient, or when it is an emergency; and
- (3) Include only medications that may be dispensed by a physician.

(k) A physician assistant may request, receive, and sign for professional samples. A physician assistant may distribute professional samples to patients.

(l) A physician assistant who prescribes or dispenses controlled substances must register with the federal drug enforcement administration and the controlled substance database as provided in title 53, chapter 10, part 3.

(m) A physician assistant shall collaborate with, consult with, or refer to the appropriate member of the healthcare team as indicated by the patient's condition, the education, experience, and competencies of the physician assistant and the standard of care. The degree of collaboration should be determined by the practice, which may

include decisions made by the employer, group, hospital services, and the credentialing and privileging systems of licensed facilities. A physician assistant is fully responsible for the care the physician assistant provides.

63-19-107. Practices for physician assistants.

(a) A physician assistant may only prescribe or issue a Schedule II or III opioid for a maximum of a nonrefillable, course of treatment in a manner consistent with § 63-1-164. This subsection (a) does not apply to prescriptions issued in a hospital, a nursing home licensed under title 68, or inpatient facilities licensed under title 33.

(b) The board shall monitor the prescriptive practices of physician assistants. As used in this subsection (b), "monitor" does not include the regulation of the practice of medicine or the regulation of the practice of a physician assistant, but may include site visits by board members.

(c) Any complaints against physician assistants must be reported to the director of the division of health related boards and to the board.

(d)

(1) Every prescription order issued by a physician assistant pursuant to this section must be entered in the medical records of the patient and must comply with all requirements of the federal drug enforcement administration, and of state law. The physician assistant shall sign each prescription order so written.

(2) Any handwritten prescription order for a drug prepared by a physician assistant must be legible so that it is comprehensible by the pharmacist who fills the prescription. The handwritten prescription order must contain the name of the prescribing physician assistant, the name and strength of the drug prescribed, the quantity of the drug prescribed, handwritten in letters or in

numerals, instructions for the proper use of the drug and the month and day that the prescription order was issued, recorded in letters or in numerals or a combination thereof. The prescribing physician assistant shall sign the handwritten prescription order on the day it is issued, unless it is a standing order issued in a hospital, a nursing home, or an assisted-care living facility, as defined in § 68-11-201.

(3) Any typed or computer-generated prescription order for a drug issued by a physician assistant must be legible so that it is comprehensible by the pharmacist who fills the prescription order. The typed or computer-generated prescription order must contain the name of the prescribing physician assistant, the name and strength of the drug prescribed, the quantity of the drug prescribed, recorded in letters or in numerals, instructions for the proper use of the drug and the month and day that the typed or computer-generated prescription order was issued, recorded in letters or in numerals or a combination thereof. The prescribing physician assistant shall sign the typed or computer-generated prescription order on the day it is issued, unless it is a standing order issued in a hospital, nursing home, or an assisted-care living facility, as defined in § 68-11-201.

(4) This subsection (d) does not prevent a physician assistant from issuing a verbal prescription order.

(e) The patient of any physician assistant receiving services from that physician assistant must be fully informed that the individual is a physician assistant or a sign must be conspicuously placed within the office of the physician assistant indicating that certain services may be rendered by a physician assistant.

(f)

(1) A physician assistant shall only perform invasive procedures involving any portion of the spine, spinal cord, sympathetic nerves of the spine, or block of major peripheral nerves of the spine in any setting not licensed under title 68, chapter 11 under the direct supervision of a Tennessee physician licensed pursuant to chapter 6 or 9 of this title who is actively practicing spinal injections and has current privileges to do so at a facility licensed pursuant to title 68, chapter 11. The direct supervision provided by a physician in this subdivision (f)(1) must only be offered by a physician who meets the qualifications established in § 63-6-244(a)(1) or (a)(3) or § 63-9-121(a)(1) or (a)(3).

(2) For purposes of this subsection (f), "direct supervision" means being physically present in the same building as the physician assistant at the time the invasive procedure is performed.

(3) This subsection (f) does not apply to a physician assistant performing major joint injections, except sacroiliac injections, or to performing soft tissue injections or epidurals for surgical anesthesia or labor analgesia in unlicensed settings.

63-19-108. Unlicensed medical practice by physician assistants.

A physician assistant rendering professional services inconsistent with this part is considered to be practicing medicine without a license and is subject to appropriate legal action by the board.

63-19-109. Exclusions of limitations on employment.

This part does not limit the employment arrangement of a physician assistant licensed under this part.

63-19-110. Exemptions.

(a) This part does not:

(1) Modify or supersede any existing laws relating to other paramedical professions or services;

(2) Permit a physician assistant to:

(A) Measure the powers or range of human vision, or determine the refractive state of the human eye or the scope of its functions in general or prescribe or direct the use of ophthalmic lenses or prisms to remedy or relieve defects of vision or muscular anomalies;

(B) Prescribe or fit or adapt contact lenses to or for the human eye; or

(C) Practice chiropractic or to analyze or palpate the articulations of the spinal column for the purposes of giving a spinal adjustment; or

(3) Prohibit a physician assistant from testing visual acuity or performing routine vision screening.

(b) This part does not apply to registered nurses or licensed practical nurses utilized by a physician under § 63-6-204 or § 63-9-113, or to technicians, other assistants, or employees of a physician not rendering services as a physician assistant and who perform delegated tasks in the office of a physician or to students enrolled in physician assistant training programs accredited by the Accreditation Review Commission on Education for the Physician Assistant, Inc., or its successor entity.

63-19-111. Administrative proceedings.

The board shall conduct all administrative proceedings for disciplinary action against a license holder under this part in accordance with the Uniform Administrative Procedures Act, compiled in title 4, chapter 5.

63-19-112. Licensure renewal by retired physician assistants.

A person licensed by the board as a physician assistant who has retired or may retire from practice in this state is not required to biennially renew the person's license as required by this part, if the person files with the board an affidavit on a form to be furnished by the board, which affidavit states the date on which the person retired from practice and any other facts, as the board considers necessary, that tend to verify the retirement. If the person thereafter reengages in practice in this state, then the person must apply for licensure by the board as provided by this part and is not liable for payment of licensure renewal fees that accrued during the period of retirement.

63-19-113. Use of title "physician assistant" or abbreviation "PA."

(a) A person who holds a valid license or temporary license from the board has the right to use the title "physician assistant" or the abbreviation "PA". No other person may assume that title or use those abbreviations, or any words, signs, letters, or devices to indicate that the person using them is a physician assistant.

(b) A person who meets the qualifications for licensure under this chapter but does not possess a current license may use the title "PA" or "physician assistant" but may not act or practice as a PA unless licensed under this chapter.

(c) This section does not apply to public accountants or certified public accountants. This section does not prevent a public accountant from using the abbreviation "P.A.".

63-19-114. Special volunteer license for practice in free health clinic — Exemption from fees — Renewal.

A physician assistant licensed pursuant to this chapter under a special volunteer license who is a medical practitioner, as defined by § 63-1-201, engaged in practice at a free health clinic is not subject to license fees under this chapter. The board may issue a special volunteer license, as defined in § 63-1-201, to qualified applicants without fee

or charge. The license is for a period of two (2) years and may be renewed on a biennial basis.

SECTION 19. Tennessee Code Annotated, Section 63-19-201, is amended by deleting the section and substituting the following:

(a) Licensed orthopedic physician assistants are under the jurisdiction of the board of physician assistants created by § 63-19-103.

(b) The board of physician assistants has the duty to:

(1) Promulgate, in accordance with the Uniform Administrative Procedures Act, compiled in title 4, chapter 5, all rules that are reasonably necessary for the performance of the duties of orthopedic physician assistants, including, but not limited to, rules that specify the acts and offenses that subject the license holder to disciplinary action by the board pursuant to subdivision

(b)(7);

(2) Set fees relative to the examination, licensure, and licensure renewal of orthopedic physician assistants in an amount sufficient to pay all of the expenses of the board, and to establish and collect a late renewal fee from those orthopedic physician assistants who fail to renew their licenses in a timely manner;

(3) Review and approve or reject the qualifications of each applicant for initial licensure as an orthopedic physician assistant;

(4) Biennially review and approve or reject the qualifications of each applicant for biennial licensure renewal. The board shall condition approval for renewal on the receipt of evidence satisfactory to the board of the applicant's successful completion of sixty (60) hours of continuing medical education approved by the American Medical Association or other appropriate professional

association. The board may, in its discretion, waive or modify the continuing medical education requirement in cases of retirement, illness, disability, or other undue hardship;

(5) Issue all approved orthopedic physician assistant licenses and renewals;

(6) Collect or receive all fees, fines, and moneys owed pursuant to this part and pay the fees, fines, and moneys into the general fund of the state. For the purpose of implementing subdivision (b)(2), all fees, fines, and moneys collected pursuant to the regulation of orthopedic physician assistants must be so designated; and

(7) Deny, suspend, or revoke the license of, or otherwise discipline by a fine not to exceed five hundred dollars (\$500), or by reprimand, a license holder who is guilty of violating this part or who is guilty of violating the rules of the board promulgated pursuant to subdivision (b)(1). If sanctions are imposed on a licensee pursuant to this subdivision (b)(7), then the licensee may, in addition, be required to pay the actual and reasonable costs of the investigation and prosecution of the case, including the costs incurred and assessed for the time of the prosecuting attorney or attorneys, the investigator or investigators, and any other persons involved in the investigation, prosecution, and hearing of the case. The board may limit, restrict, or impose one (1) or more conditions on a license at the time it is issued, renewed, or reinstated or as a sanction imposed at the conclusion of a disciplinary hearing.

(c) Any actions taken under this section are only effective after adoption by majority vote of the members of the board of physician assistants.

(d) For purposes of this part, unless the context requires otherwise, "physician" means a person lawfully licensed to practice orthopedic medicine and surgery pursuant to chapter 6 of this title, or osteopathic medicine pursuant to chapter 9 of this title.

SECTION 20. Tennessee Code Annotated, Section 63-19-202, is amended by deleting the section and substituting the following:

(a) A person shall not claim to be or function as an orthopedic physician assistant unless the person holds a valid orthopedic physician assistant license issued by the board.

(b) The board shall not license a person as an orthopedic physician assistant or renew the license of an orthopedic physician assistant unless:

(1) The person is a graduate of an orthopedic physician assistant training program approved by the board;

(2) The person has successfully completed the examination of the National Board for Certification of Orthopedic Physician Assistants; and

(3) The person was performing services as an orthopedic physician assistant in this state on January 1, 2021.

(c) The board may require that an applicant for licensure as an orthopedic physician assistant appear before the board to answer any questions regarding the applicant's fitness for licensure.

SECTION 21. Tennessee Code Annotated, Section 63-19-203, is amended by deleting the section and substituting the following:

(a) A licensed orthopedic physician assistant is authorized to perform services only in collaboration with a licensed orthopedic physician or surgeon within the specialty of orthopedic medicine and surgery.

(b) Collaboration between a collaborating physician and a licensed orthopedic physician assistant requires active and continuous overview by the collaborating physician to ensure that the physician's directions, orders, and advice are in fact being implemented but does not require the constant physical presence of the collaborating physician. The collaborating physician shall, however, make a personal review of historical, physical, and therapeutic data on all patients and their condition and so certify by personal signature in a timely manner.

SECTION 22. Tennessee Code Annotated, Section 63-19-204, is amended by deleting the section and substituting the following:

(a) The licensed orthopedic physician assistant shall function in accordance with written policies and procedures involving management of care that have been established by the collaborating physician and the orthopedic physician assistant.

(b) The licensed orthopedic physician assistant is authorized to provide follow-up care rendered in a clinic, hospital, nursing home, or patient's home and in similar situations in accordance with a therapeutic regimen, policy, or protocol that has been established by the collaborating physician. The licensed orthopedic physician assistant may check and record the patient's progress within the confines of the written regimen, policy or protocol and report the patient's progress and changes to the physician after each visit. If a patient presents with a new problem, then the collaborating physician shall undertake personal review of the patient's problem or complaint and determine the therapeutic regimen, policy, or protocol.

(c) The orthopedic physician assistant may render emergency services in accordance with guidelines previously established by the collaborating physician, pending the arrival of a responsible physician in cases where immediate diagnosis and treatment are necessary to avoid disability or death.

SECTION 23. Tennessee Code Annotated, Section 63-32-105(a)(19), is amended by deleting the subdivision.

SECTION 24. Tennessee Code Annotated, Section 63-32-115(a), is amended by deleting the following language:

The department shall also allow a collaborating physician at any time the opportunity to review, accept, and update the existence of a collaborating relationship between the physician and a physician assistant licensed under § 63-19-105.

SECTION 25. Tennessee Code Annotated, Section 63-32-115(d)(2), is amended by deleting the subdivision.

SECTION 26. Tennessee Code Annotated, Section 68-1-101(a)(8)(O), is amended by deleting "Board of medical examiners' committee on physician assistants" and substituting "Board of physician assistants".

SECTION 27. Tennessee Code Annotated, Section 68-1-128(a)(2), is amended by deleting "and each physician assistant".

SECTION 28. Tennessee Code Annotated, Section 68-1-128(b)(1)(A), is amended by deleting "and physician assistant" and "and physician assistants".

SECTION 29. Tennessee Code Annotated, Section 68-3-512, is amended by deleting the section and substituting the following:

The determination and pronouncement of death may be made by a physician assistant licensed under title 63, chapter 19, part 1.

SECTION 30. Tennessee Code Annotated, Section 68-11-222(b)(4), is amended by deleting "Board of medical examiners' committee on physician assistants" and substituting "Board of physician assistants".

SECTION 31. Tennessee Code Annotated, Section 68-55-501(3), is amended by deleting "who is a member of a health care team supervised by a Tennessee licensed medical doctor or osteopathic physician".

SECTION 32. Tennessee Code Annotated, Section 68-10-104(c)(2), is amended by deleting "with an appropriate supervising physician".

SECTION 33. Tennessee Code Annotated, Section 68-11-224(c), is amended by deleting "physician assistants," in subdivision (2) and deleting the language "physician assistant," in subdivision (4).

SECTION 34. Tennessee Code Annotated, Section 71-5-201(b), is amended by deleting the subsection.

SECTION 35. The headings to sections in this act are for reference purposes only and do not constitute a part of the law enacted by this act. However, the Tennessee Code Commission is requested to include the headings in any compilation or publication containing this act.

SECTION 36. The board of physician assistants may promulgate rules to effectuate the purposes of this act. All rules must be promulgated in accordance with the Uniform Administrative Procedures Act, compiled in Tennessee Code Annotated, Title 4, Chapter 5.

SECTION 37. For purposes of establishing the board and promulgating rules, this act takes effect upon becoming a law, the public welfare requiring it. For all other purposes, this act takes effect January 1, 2022, the public welfare requiring it.