

OVERVIEW

Analysis of a Proposal to Modify the Regulation of Physician Assistants

Report No. 98-19, November 1998

Summary

This study was conducted in response to House Concurrent Resolution No. 14, House Draft 1, Senate Draft 1 of the 1998 Regular Session which requested the State Auditor to conduct an analysis of the probable effects of the proposed regulatory changes for physician assistants contained in Senate Bill No. 3234 (1998). S.B. No. 3234, *Relating to Physician Assistants*, proposes to change the terminology from “certification” to “licensure” for persons authorized to perform services as physician assistants. Although the proposal was generally supported by the medical community, the Department of Public Safety’s Narcotics Enforcement Division expressed concern over the possible expansion of prescriptive authority to physician assistants.

We found that physician assistants are, in effect, already licensed by the State of Hawaii. The Department of Commerce and Consumer Affairs and the Board of Medical Examiners currently treat physician assistants as being licensed. That being the case, a change in statutory terminology will have minimal fiscal and operational impact on the department and its division charged with issuing and renewing physician assistant certificates. In addition, the use of “licensure” is supported by all stakeholders and national trends point to a shift to that term for physician assistants. We also believe that “licensing” more accurately reflects the regulatory intent than does “certification.”

Changing to the term “licensure” will allow physician assistants to prescribe and dispense controlled substances. Although the Board of Medical Examiners’ administrative rules give supervising physicians the authorization to allow physician assistants to prescribe, dispense, and administer medications including controlled substances, the Uniform Controlled Substances Act (Chapter 329, HRS) excludes physician assistants from prescribing controlled substances. Under Chapter 329, only individual practitioners who are *licensed* and registered with the Department of Public Safety may write prescriptions for controlled substances (emphasis added). The Department of Public Safety’s Narcotics Enforcement Division does not interpret physician assistants as being *licensed* practitioners and will not register them as persons authorized to prescribe controlled substances.

We also found that changing the regulatory nomenclature for physician assistants from certified to licensed will have little to no effect on the public’s health, safety, or welfare. As evidenced by the few complaints made against physician assistants, it appears that the safeguards currently implemented by statute or administrative rules are sufficient to ensure consumer protection. First, physician assistants must meet state and national criteria to practice medicine. Physician assistants cannot legally practice medicine independently of physician supervision and will continue to work within the scopes of practice allowed by their supervising physicians. In



addition, physician assistants will be subject to state and national registration requirements if given the authority to prescribe controlled substances. Lastly, a change in nomenclature will not result in a negative financial impact to consumers in the form of higher health insurance costs.

Recommendations and Response

We recommend that Sections 453-5.3 and 453-5.4, Hawaii Revised Statutes, be amended as proposed in S.B. No. 3234 (1998) to require each person practicing medicine under the supervision of a physician to be licensed, rather than certified, as a physician assistant.

We transmitted a draft of this study to the Department of Commerce and Consumer Affairs; however, the department did not submit a written response.

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