DEPARTMENT OF REGULATORY AGENCIES

Colorado Medical Board

RULE 410 - DEMONSTRATION OF CONTINUED COMPETENCY BY PHYSICIAN ASSISTANT APPLICANTS FOR LICENSURE, <u>LICENSURE PURSUANT TO THE OCCUPATIONAL CREDENTIAL</u> <u>PORTABILITY PROGRAM</u>, REINSTATEMENT <u>OF AN EXPIRED LICENSE</u>, OR REACTIVATION OF A LICENSE

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[Editor's Notes follow the text of the rules at the end of this CCR Document.]

29.1 INTRODUCTION

- A. <u>Basis</u>: The authority for promulgation of these rules and regulations by the Colorado Medical Board ("Board") is set forth in sections 24-4-103, 12-20-204(1), 12-240-119, 12-240-106(1)(a), 12-240-120(1)(d), 12-20-202(2)(c)(II), and 12-240-141(5), C.R.S.
- Β. Purpose: The purpose of these rules and regulations is to set forth the process by which a physician assistant may demonstrate continued competency for the purpose of complying with the statutory sections referenced above to obtain a Colorado physician assistant license: demonstrate qualifications substantially equivalent for licensure by endorsement in this state pursuant to the Occupational Credential Portability Program as set forth in section 12-20-202 C.R.S.-e;r to reinstate an expired license; or reactivate an existing Colorado physician assistant license. The Board finds that due to the significant differences between the nature of physician assistant practice and the nature of physician practice, it is necessary and appropriate to delineate different methods by which physician assistants and physicians shall demonstrate continued competency as required by the Medical Practice Act. The significant differences between the two types of practice include the requirements that all physician assistants must be supervised by a licensed physician in accordance with existing Board rules and regulations. The Board finds, however, that if a physician assistant has ceased clinical practice for four or more years, the nature of the physician assistant/physician supervisory relationship in and of itself cannot compensate for potential knowledge and clinical deficiencies, which may exist due to the lack of practice experience for such an extended period of time.

29.2 RULES AND REGULATIONS

- A. LICENSURE BY ENDORSEMENT PURSUANT TO THE OCCUPATIONAL CREDENTIAL PORTABILITY PROGRAM PURSUANT TO SECTION 12-20-202(3), C.R.S.
 - For the purpose of licensure by endorsement through the occupational credential portability program, "substantially equivalent experience or credentials" means the applicant holds a current, valid, and unrestricted license in another U.S. jurisdiction that requires qualifications substantially equivalent to the gualifications for licensure in this state; the applicant submits written verification they have actively practiced as a physician assistant in another jurisdiction for at <u>least</u> of the immediately preceding the last two years or has otherwise maintained continued competency as determined by the Beoard; and submits proof satisfactory to the Beoard and attests that they have not been and are not subject to final or pending disciplinary or other action by any state or jurisdiction in which the applicant is or has been previously licensed except that, if the applicant is or has been subject to action, the Beoard may review the action to

Commented [MD1]: (1) Notwithstanding any other provision of this article 240, the board may issue a reentry license to a physician, physician assistant, or anesthesiologist assistant who has not actively practiced medicine, practiced as a physician assistant, or practiced as an anesthesiologist assistant, as applicable, for the two-year period immediately preceding the filing of an application for a reentry license, or who has not otherwise maintained continued competency during that period, as determined by the board. The board may charge a fee for a reentry license.

(2)

(a) In order to qualify for a reentry license, the physician, physician assistant, or anesthesiologist assistant shall submit to evaluations, assessments, and an educational program as required by the board. The board may work with a private entity that specializes in physician, physician assistant, or anesthesiologist assistant assessment to:

Commented [MD2]: (1) The board may refrain from issuing a license or may grant a license subject to terms of probation if the board determines that an applicant for a license:...(d) Has not actively practiced medicine, practiced as a physician assistant, or practiced as an anesthesiologist assistant for the two-year period immediately preceding the filing of an application or otherwise maintained continued competency during that period, as determined by the board.

Commented [MD3]: (II) If the license, registration, or certificate has been expired for more than two years, the person with the expired license, registration, or certificate shall pay all applicable renewal and reinstatement fees and shall satisfactorily demonstrate to the regulator that the person is competent to practice within his or her profession. The regulator, as it deems appropriate, shall accept one or more of the following as a demonstration of competency to practice:

Commented [MD4]: (5) Any person licensed under this section who wishes to resume the practice of medicine or to resume practice as a physician assistant shall file an application in the form and manner the board shall designate, pay the license fee promulgated by the board pursuant to section 12-240-130, and meet the financial responsibility requirements promulgated by the board pursuant to section 13-64-301 (1). The board may approve the application and issue 4

Commented [KE5]: Should this be 2 years to be consistent with physicians and anesthesiologist assistants?

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determine whether the underlying conduct warrants refusal of a license pursuant to section 12-240-120, C.R.S.

- 2. To demonstrate continued competency for purposes of complying with section <u>12-20-202(3), C.R.S., a physician assistant may: s 12-240-120(1)(d), 12-20-202(2)(c)(II), or 12-240-141(5), C.R.S., a physician assistant must either:</u>
 - aA. Submit proof satisfactory to the Board of active practice as a physician assistant in another jurisdiction for the two year period immediately preceding the filing of the application. (If the physician assistant has practiced as a physician assistant only for a portion of the two year period immediately preceding the filing of the application, the Board may determine on a case by case basis in its discretion whether the physician assistant has adequately demonstrated continued competency to practice as a physician assistant.); Or,
 - Bb. Submit to the Board the following: (a) proof satisfactory to the Board that the physician assistant has been out of practice as a physician assistant for less than four years; (b) proof of current certification by the National Commission on Certification of Physician Assistants, Inc. ("NCCPA"); (c) proof of 100 hours of continuing medical education within the past two years, including twenty-five hours of category I continuing medical education in the past twelve months; and (d) a written plan satisfactory to the Board, documenting the nature, extent, and duration of supervision that will be provided by the supervising physician to the physician assistant as the physician assistant makes the transition back into clinical practice; Or,
 - Gc. Submit to the Board proof of participation in numerous professional activities, including but not limited to: -maintenance of certification (MOC) activities; successful completion of the National Commission on Certification of Physician Assistants (NCCPA); of board certificat exams for ABME or AOA member boards; category 1 approved CME educational courses with relevance to practice; teaching/lecturing/mentoring activities; non-patient care hospital or organization committee participation, including quality, safety, pharmacy and therapeutics, peer review, tumor board or other clinically relevant activities; clinically applicable research; surveying on behalf of accreditation organizations; or volunteer medical care provided overseas or in other jurisdictions.- The Board's Licensing Panel shall have discretion to consider an applicant's activities on a case-by-case basis and may determine an applicant has met continued competency through a combination of any of the above activities or other relevant professional activities: orOr.
 - d. For those physician assistants who have been out of practice as a physician assistant for four or more years, (a) submit to the Board a personalized competency evaluation report prepared by a program approved by the Board, and (b) complete any education and/or training recommended by the program as a result of the evaluation prior to obtaining a license. In the discretion of the Board, the physician assistant may be able to receive a re-entry license prior to completing the education and/or training recommended by the program of such education and/or training. All expenses resulting from the evaluation and/or any recommended

Commented [KE6]: Should this be 2 years to be consistent with physicians and anesthesiologist assistants?

Commented [KE7]: EK: Remove language (potential throughout) to fit the professional requirements of PAs.

Commented [KE8]: Should there be a section for Reentry Licenses similar to Rule 120 for physicians?

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	education and/or training are the responsibility of the physician assistant and not of the Board.
B.	REINSTATEMENT OR REACTIVATION OF A LICENSE
	In support of any application for reinstatement or reactivation of a license to practice as a physician assistant, for the purpose of complying with sections 12-20-202(2)(c)(II), 12-240-120(1)(d), or 12-240-141(5), C.R.S., a physician assistant may demonstrate continued competency in accordance with the methods identified in 29.2(A)(2), identified above.
D.	Where appropriate, the Board may determine that demonstration of continued competency
	requires an additional or different approach. For example, due to the length of time the physician assistant has been out of practice, the Board may require a written plan documenting the nature, extent, and duration of supervision that will be provided by the supervising physician to the physician assistant as the physician assistant makes the transition back into clinical practice. This written plan may be in addition to the personalized competency evaluation and/or recommended education and/or training. The decision as to the method of determining continued competency shall be at the discretion of the Board.
	ted 8/15/02, Effective 10/30/02, Revised 2/13/03, Effective 4/30/03, Revised 4/14/05, Effective 05, Revised 5/17/07, Effective July 30, 2007; Revised 08/19/10; Effective 10/15/10.

Editor's Notes

History

Entire rule eff. 07/30/2007. Entire rule eff. 10/15/2010. **Commented [KE9]:** Should this be its own subsection? If so, it needs a title.