### DEPARTMENT OF REGULATORY AGENCIES

#### **Colorado Medical Board**

RULE 520 - DEMONSTRATION OF CONTINUED COMPETENCY BY ANESTHESIOLOGIST ASSISTANT APPLICANTS FOR LICENSURE, <u>LICENSURE PURSUANT TO THE OCCUPATIONAL</u> <u>CREDENTIAL 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.]

### 42.1 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, 12-240-119, 12-20-204(1), 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 an anesthesiologist assistant may demonstrate continued competency for the purpose of complying with the statutory sections referenced above to obtain a Colorado anesthesiologist 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.; or to reinstate an expired license; or reactivate an existing Colorado anesthesiologist assistant license. The Board finds that due to the significant differences between the nature of anesthesiologist assistant practice and the nature of physician practice, it is necessary and appropriate to delineate different methods by which anesthesiologist 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 anesthesiologist assistants must be supervised by a licensed physician in accordance with existing Board rules and regulations. The Board finds, however, that if an anesthesiologist assistant has ceased clinical practice for two or more years, the nature of the anesthesiologist 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.

# 42.2 RULES AND REGULATIONS

### A. LICENSURE BY ENDORSEMENT PURSUANT TO THE OCCUPATIONAL CREDENTIAL PORTABILITY PROGRAM PURSUANT TO SECTION 12-20-202(3), C.R.S.

1. 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 qualifications for licensure in this state; the applicant submits written verification they have actively practiced as an anesthesiologist assistant in another jurisdiction for at least 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,

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	to de	applicant is or has been subject to action, the <b>Bb</b> oard may review the action termine whether the underlying conduct warrants refusal of a license junt to section 12-240-120, C.R.S.	
2.		o demonstrate continued competency for purposes of complying with section 2-20-202(3), C.R.S., an anesthesiologist assistant may:	
A.—	To demonstrate continued competency for purposes of complying with sections 12-240-120(1)(d), 12-20-202(2)(c)(II), or 12-240-141(5), C.R.S., an anesthesiologist assistant must either:		
	a.	4. Submit proof satisfactory to the Board of active practice as an anesthesiologist assistant in another jurisdiction for the two year period immediately preceding the filing of the application. (If the anesthesiologist assistant has practiced as an anesthesiologist assistant for only 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 anesthesiologist assistant has adequately demonstrated continued competency to practice as an anesthesiologist assistant assistant <sub>i</sub> , or,	
	<u>b.</u>	2. Submit to the Board the following: (a) proof satisfactory to the Board that the anesthesiologist assistant has been out of practice as an anesthesiologist assistant for less than four years; (b) proof of current certification by the National Commission on Certification of Anesthesiologist Assistants ("NCCAA"); (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 monthsCME hours as required by the certifying body; 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 anesthesiologist assistant as the anesthesiologist assistant makes the transition back into clinical practice; or,	
	<u>C.</u>	Submit to the Board proof of participation in numerous professional activities, including but not limited to: maintenance of certification (MOC) activities; successful completion of National Commission on Certification of Anesthesiologist Assistants (NCCAA);board certification exams for <u>ABME or AOA member boards</u> : 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 has met continued competency through a combination of any of the above activities or other relevant professional activities; or OFr,	

d. 3. For those anesthesiologist assistants who have been out of practice as an anesthesiologist 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 **Commented [KE1]:** Should this be changed to 2 years? Consistent with Physicians Rule 120 and 42.2(A)(1) of this Rule?

**Commented [KE2]:** BOARD 2/17: CME hours as required by certifying body.

**Commented [KE3]:** Should this be 2 years, consistent with physicians?

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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 anesthesiologist assistant may be able to receive a re-entry license prior to completing the education and/or training recommended by the program for the purpose of facilitating the completion of such education and/or training. All expenses resulting from the evaluation and/or any recommended education and/or training are the responsibility of the anesthesiologist assistant and not of the Board.

# REINSTATEMENT OR REACTIVATION OF A LICENSE

In support of any application for reinstatement or reactivation of a license to practice as an anesthesiologist 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., an anesthesiologist assistant may demonstrate continued competency in accordance with the methods identified in 29.2(A)(2), identified above.

BC. 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 anesthesiologist 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 anesthesiologist assistant as the anesthesiologist 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.

Adopted 5/22/14: Effective 7/15/14.

### **Editor's Notes**

В

History Entire rule eff. 07/15/2014. **Commented [KE4]:** Should there be a section for Reentry Licenses similar to Rule 120 for physicians?

**Commented [KE5]:** Should this be its own subsection? If so, it needs a title.