



Checklist for Board Member Interviews with Physician Assistant / Supervising Physician(s)

STATUTE/RULE TO BE REVIEWED:

POSSIBLE QUESTIONS TO ASK:

MCA 37-20-101 (Qualifications of Physician and Physician Assistant)

- Both must have Active license.
- Physician retains professional and legal responsibility for care and treatment by PA.

(Active licensure will be obvious from Supervision Agreement)

- To Physician: “Do you understand your legal responsibility for this PA’s care and treatment of patients?”

MCA 37-20-104 (Unlicensed practice)

- PA cannot practice without license and Supervision Agreement.

- To PA (if no SA yet): “Do you understand you cannot work until you get your Supervision Agreement?”

MCA 37-20-301 (Supervision Agreements, Duties and Delegation Agreements)

- PA cannot be employed without submitting SA to Board with fee.
- Physician and PA shall execute a Duties and Delegation Agreement.
- No specified form—can be in any form PA and Physician choose.
- D&D defines PA’s professional relationship with Physician & limitations on practice.
- D&D must be kept current to reflect changes in duties of either Physician or PA.
- SA and D&D must be kept at the place of work; copy must be provided to any requestor.

- To PA (If no SA yet): “What are your plans to get a Supervising Physician?”
- To both: “Do you have a Duties and Delegation Agreement in place?”
- To both: “How have you written and organized it?”
- To both: “What did you put in it?”
- To both: “Any limitations on practice?”
- To both: “Do you understand you must keep it current?”
- To both: “Do you understand that it must be kept at the workplace?”
- To both: “Who will make it available if it’s requested?”

STATUTE/RULE TO BE REVIEWED:

POSSIBLE QUESTIONS TO ASK:

MCA 37-20-302 (PA License Renewal) / ARM 24.101.404 Expiration) / ARM 24.156.1618 (Fees)

- PA licenses are good for two years and expire on Oct. 31.
- Renewal fees: \$300 for Active license; \$150 for Inactive license

- To PA: “Do you understand when your license will expire?”
- To PA: “Do you understand what your renewal will cost?”

MCA 37-20-403 (PA Scope of practice)

- PA is agent of supervising Physician.
- PA can do any diagnosis or treatment authorized by Physician.
- PA is responsible for care and treatment of patients as delegated by Physician.
- Onsite or direct supervision not required if PA can communicate with Physician.

- To both: “Do you understand this role and relationship?”
- To Physician: “How do you plan to communicate with the PA?”

MCA 37-20-404 (Prescribing)

- PA may prescribe and administer any drug authorized by Physician.
- Prescribing of Schedule II drugs (if authorized) is limited to 34 days.
- Records on dispensing and administration of schedule drugs must be kept.
- PA must be registered with DEA if prescribing controlled substances.
- PA must comply with Board of Pharmacy requirements for prescriptions.

- To Physician: “What will you authorize the PA to prescribe?”
- To both: “Do you understand this responsibility about record-keeping?”
- To PA: “Are you registered with the DEA?”
- To PA: “Do you know where to find the Pharmacy Board’s regulations?”

ARM 24.174.831 (Board of Pharmacy Prescription Requirements)

- To PA: “Please review the Board of Pharmacy’s regulations.”

STATUTE/RULE TO BE REVIEWED:

POSSIBLE QUESTIONS TO ASK:

ARM 24.156.1621 (PA's Obligation to Report)

- PA must report to the Board any final judgement, order or action within three months.
- If PA receives a complaint, PA must provide name of Supervising Physician to Board within ten days.
- PA with known or suspected impairment shall self-report to Board or MPAP.
- PA may report impairment of other providers to Board or MPAP.

- To PA: "Do you understand these obligations and responsibilities?"

ARM 24.156.1601 (Definitions)

- Direct supervision—Physician within sight and sound of the PA.
- Onsite supervision—Physician in the facility and quickly available to the PA.
- General supervision—Physician oversees PA by various means of communication.

- To both: "Do you understand these different kinds of supervision?"

ARM 24.156.1622 (Supervision of Physician Assistant)

- Physician may provide direct, onsite or general supervision.
- Physician is responsible for PA regardless of the kind of supervision.
- Physician must consider location, nature of practice and experience of PA.
- Physician and PA must meet face-to-face at least once a month.
- Video is acceptable for "face-to-face" meetings.
- D&D must address frequency and duration of meetings and amount of chart review.

- To Physician: "What kind of supervision do you plan to use?"
- To Physician: "What kind of practice is it?"
- To Physician: "Where will the PA be located?"
- To Physician: "Are you planning your supervision with these things in mind?"
- To Physician: "Are you making any adjustments to account for the PA's experience?"
- To Physician: "Do you understand the requirements for face-to-face meetings?"

STATUTE/RULE TO BE REVIEWED:

POSSIBLE QUESTIONS TO ASK:

ARM 24.156.1623 (Chart Review)

- Chart review by Supervising Physician shall occur in some form for all PA's.
- Amount of chart review must be in D&D.
- For PA with less than one year of full-time practice in Montana (i.e. new licensee):
 1. 20% chart review by Physician for the first six months of practice.
 2. 10% chart review by Physician for the second six months of practice.
 3. Some level of chart review after 12 months of practice.
 4. If the PA acquires a new Supervising Physician, the "chart review clock" does not re-set. The "one year" begins with the start of full-time practice and ends after 12 months, regardless of whether the PA gets a new Supervising Physician.

- To Physician: "What are your plans for chart review?"
- To both: "Is your chart review plan in the D&D at the workplace?"

- To both (if PA is new to Montana): "Do you understand these minimums and timeframes?"

MCA 37-3-104 / ARM 24.156.401 (Medical Assistants)

- PA's can delegate tasks to Med Asst.
- PA responsible for assessing Med Asst's education, training, knowledge and skill for delegated clinical tasks.
- Med Asst must work in PA's "office."
- Some tasks require direct supervision.
- Med Asst cannot perform surgery or any task outside PA's scope or authorization as per D&D.

- To PA: "Do you understand your responsibilities when delegating to an unlicensed Medical Assistant?"