




# 0912A Site Physician Assistant Agreement

RotaCare Bay Area, Inc. Policies and Procedures

<b>Issued</b> 06/01/2009	<b>Revision Date</b> 06/01/2009 <b>Reviewed Date</b> 04/12/2020	<b>Chief Executive Officer</b> 	<b>Page No.</b> 1 of 2
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## Physician Assistant Practice Agreement (DEA Registration, but Controlled Substances Education Course Not Completed)

This Practice Agreement has been developed through collaboration among physician(s) and physician assistant(s) in ROTACARE FREE MEDICAL CLINICS, an Organized Health Care System (as defined in Business & Professions Code (BPC) §3501(j) and hereinafter referred to as the "Practice"), for the purpose of defining the medical services which each and every physician assistant ("PA") who executes this Practice Agreement is authorized to perform and to meet the statutory requirement set forth in BPC §3502.3.

- 1. Medical Services Authorized:** Pursuant to BPC §3502, the PA is authorized to perform those medical services for which the PA has demonstrated competency through education, training, or experience, under physician supervision as provided in Section 3 of this Practice Agreement. Subject to the foregoing, the PA is further authorized to: (a) perform the medical functions set forth in BPC §3502.3(b); to supervise medical assistants pursuant to BPC §2069; (c) to provide care and sign forms under the workers' compensation program pursuant to Labor Code §3209.10; and (d) any other services or activities authorized under California law.
- 2. Ordering and Furnishing of Drugs and Devices:** In compliance with State and Federal prescribing laws, the PA may order and furnish those drugs and devices, including schedule III through V controlled substances, as indicated by the patient's condition, the applicable standard of care, and in accordance with the PA's education, training, experience, and competency, under physician supervision as provided in Section 3 of this Practice Agreement. The furnishing and ordering of Schedule II drugs shall be only based on a patient-specific order approved by the treating or supervising physician. The PA may dispense drugs and devices as provided for in BPC §4170 and request, sign, and receive drug samples as provided for in BPC §4061.
- 3. Physician Supervision:** Any physician of the Practice, who meets the definition of a supervising physician in BPC §3501(e), may provide supervision of a PA in the Practice acting under this Practice Agreement. A supervising physician need not be physically present while the PA provides medical services, but be available by telephone or other electronic means at the time the PA is providing medical services in the Practice. Supervision means that a physician and surgeon oversees and accepts responsibility for the activities of the PA.
- 4. Patient Care Policies and Procedure:** PA shall consult with, and/or refer the patient to, a supervising physician or other healthcare professional when providing medical services to a patient which exceeds the PA's competency, education, training, or experience.

5. **PA Competency and Qualification Evaluation:** Through a peer review process based on the standard of care, the Practice shall regularly evaluate the competency of a PA. The Practice may credential and privilege the PA to ensure that the PA has the qualifications, training, and experience, to perform the medical services, procedures, and drug and device ordering and furnishing authorized under this Practice Agreement.

6. **Review of Practice Agreement:** This Practice Agreement shall be reviewed on a regular basis and updated by the Practice when warranted by a change in conditions or circumstances.

The physician and PA(s) listed below collaboratively approve this Practice Agreement governing the medical services of PA(s) in the Practice, on behalf of the Practice, and authorize the physicians on the staff of the Practice to supervise the PA(s) named below effective as of the date signed by the PA. The physician named below authorizing this Practice Agreement may or may not also serve as a supervising physician of a PA. Signing this Practice Agreement does not mean the named physician below is accepting responsibility for the medical services provided by the PA(s) named below, rather any physician of the Practice, including a physician named below, would only accept responsibility for a specific PA if, and only during those times, they are serving as a supervising physician as set forth in Section 3 of this Practice Agreement.

**Name of RotaCare clinic:**

Physician: \_\_\_\_\_ Title: \_\_\_\_\_

\_\_\_\_\_  
Physician Signature Date

PA: \_\_\_\_\_

PA: \_\_\_\_\_

\_\_\_\_\_  
PA Signature Date

\_\_\_\_\_  
PA Signature Date

PA: \_\_\_\_\_

PA: \_\_\_\_\_

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PA Signature Date

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PA: \_\_\_\_\_

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PA Signature Date

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PA Signature Date