

NEW MICHIGAN LAW CHANGES THE WAY PHYSICIANS AND PHYSICIAN'S ASSISTANTS WORK TOGETHER

Law Significantly Impacts PAs, Physicians, and Health Care Facilities

By: Brandon M. Dalziel, Member, Health Care Practice Group

Michigan Public Act 379 of 2016 (MCL §333.7303a, et seq.) took effect on March 22, 2017. It changes the framework for the scope of practice for physician's assistants (PAs).

Physicians and PAs will continue to work together as a team. However, PAs are now required to work with a "participating physician" under the terms of a practice agreement. This is a transition from the prior scope of practice regulations where PAs worked under supervision or delegation of a physician.

PAs are now independent prescribers. As

independent prescribers, they must have their own Michigan Controlled Substance license, as well as a DEA registration, to prescribe Schedules 2 to 5 drugs. However, the Michigan Department of Licensing and Regulatory Affairs must still promulgate rules to set forth procedures and protocols for PAs' prescribing authority pursuant to new law. Until then, it is advisable that the practice agreements include language that is consistent with the delegation and supervision provisions under the old law.

There are no longer strict PA/physician ratio limitations. Although there is increased flexibility, disciplinary action can result if the number of PAs per physician

exceeds a reasonable standard-of-practice threshold.

The law significantly impacts PAs,

Disciplinary action can result if the number of PAs per physician exceeds a reasonable standard-of-practice threshold.

physicians, and health care facilities. The existence and content of practice agreements are critical. Practice

agreements generally define the communication and decision making process by which the PA and the participating physician provide medical care to their patients, but there are also specific requirements that practice agreements must meet. In addition, physicians should understand their role and responsibilities as a potential “participating physician.”



About the Author. *Brandon M. Dalziel* represents health care industry clients in a variety of transactional issues, including joint ventures, compliance matters, contractual matters, and hospital by-law issues. Before becoming an attorney, Brandon managed clinical studies and integrated genetics into drug development with Pfizer Global Research & Development.

Bodman’s Health Care Practice Group:

E. William S. Shipman

Chair, Health Care

313.393.7562

wshipman@bodmanlaw.com

Dennis J. Levasseur

313.393.7596

dlevasseur@bodmanlaw.com

David C. Stone

248.743.6045

dstone@bodmanlaw.com

Brandon M. Dalziel

313.393.7507

bdalziel@bodmanlaw.com

Nicholas P. McElhinny

313.393.7570

nmcelhinny@bodmanlaw.com

David B. Walters

248.743.6052

dwalters@bodmanlaw.com

Michael M. Antovski

313.393.7519

mantovski@bodmanlaw.com

Maureen Rouse-Ayoub

313.392.1058

mrouse-ayoub@bodmanlaw.com

Sarah J. Williams

734.930.2485

swilliams@bodmanlaw.com

Steven J. Fishman

248.743.6070

sfishman@bodmanlaw.com

Michael A. Stack

231.627.8003

mstack@bodmanlaw.com