

Colorado Medical Board Rules and Regulations Regarding the Demonstration of Continued Competency by Physician Assistant Applicants for Licensure, Reinstatement, or Reactivation of a License

INTRODUCTION

BASIS: The authority for promulgation of these rules and regulations by the Colorado Medical Board (“Board”) is set forth in Sections 24-4-103, 12-36-114.5, 12-36-104(1)(a), 12-36-116(1)(d), 24-34-102(8)(d)(II) and 12-36-137(5), C.R.S.

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 or to reinstate 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.

REQUIREMENTS: To demonstrate continued competency for purposes of complying with sections 12-36-116(1)(d), 24-34-102(8)(d)(II), or 12-36-137(5), C.R.S., a physician assistant must either:

- 1) 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,
- 2) 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 25 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,

3) 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 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 physician assistant and not of the Board.

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.

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