

Notice: Legislative Changes Regarding Physician Assistants
Arizona Regulatory Board of Physician Assistants (ARBoPA)
Effective January 1, 2011

Diligent care has been taken to avoid any contradiction between this Notice and the actual enacted legislation. Any inconsistency or conflict is unintentional. To the extent that there is an appearance of conflict or inconsistency, the actual legislation shall take precedence.

Effective January 1, 2011, there will no longer be a requirement to file a "Notice of Supervision" (NOS) with the ARBoPA, nor to wait for approval before the PA can begin working under the physician's supervision. Each PA must, however, have a Prescribing Authority Form on file with the ARBoPA in order to prescribe. Supervising Physicians are still responsible for the health care services provided by all PAs under their supervision.

Effective January 1, 2011:

- There will be no requirement to file a "Notice of Supervision" (NOS) with the Board.
- A Delegation Agreement shall be signed by the PA and each Supervising Physician, filed in the practice's office, and be available for inspection by the ARBoPA. Although there is no specific format required, the required elements of the Delegation appear in statute.
- Each PA must have a Prescribing Authority Form on file with the ARBoPA in order to prescribe. There will be no fee for filing this form. A PA can check his/her the profile at www.azpa.gov to verify that prescribing authority is on file before prescribing. (*See A.R.S. 32-2532*) (*See sample below*)
- There is no limit to the number of PA's with whom a physician may have a delegation agreement. However, the physician may only engage in supervising four PA's at one time, regardless of where they are geographically located.
- There is no longer a category of Supervising Physician "agent." Any qualified physician who has completed a Delegation Agreement can act as a Supervising Physician for a PA.
- There will be no requirement for temporary or student licensing.

Effective June 1, 2011:

- The fee for PA license renewal will increase from \$100.00 to \$185.00.

32-2532. Prescribing, administering and dispensing drugs: limits and requirements: notice

A. Except as provided in subsection F of this section, a physician assistant shall not prescribe, dispense or administer:

1. A schedule II or schedule III controlled substance as defined in the federal controlled substances act of 1970 (P.L. 91-513; 84 Stat. 1242; 21 United States Code section 802) without delegation by the supervising physician, board approval and drug enforcement administration registration.
2. A schedule IV or schedule V controlled substance as defined in the federal controlled substances act of 1970 without drug enforcement administration registration and delegation by the supervising physician.
3. Prescription-only medication without delegation by the supervising physician.

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J. The board shall advise the state board of pharmacy and the United States drug enforcement administration of all physician assistants who are authorized to prescribe or dispense drugs and any modification of their authority.

Link to A.R.S. 32-2501 Definitions

<http://www.azleg.gov/FormatDocument.asp?inDoc=/ars/32/02501.01.htm&Title=32&DocType=ARS>

A.R.S. 32-2531 PA Scope of Practice; health care tasks

<http://www.azleg.gov/FormatDocument.asp?inDoc=/ars/32/02531.01.htm&Title=32&DocType=ARS>

A.R.S. 32-2533 Supervising Physician responsibilities

<http://www.azleg.gov/FormatDocument.asp?inDoc=/ars/32/02533.01.htm&Title=32&DocType=ARS>

Link to [Frequently Asked Questions](#)

**Arizona Regulatory Board of Physician Assistants
SUPERVISING PHYSICIAN PRESCRIBING AUTHORITY FORM**

(Please Type in Spaces Provided - Form can be faxed or mailed to the Board)

SP First Name: Initial: Last Name:

SP License Number:

PA First Name: Initial: Last Name:

PA License Number:

I delegate the following prescribing authorities to the PA: *(check all that apply)*

	Prescribe	
Schedule II controlled substances	<input type="checkbox"/> 14 Days *	<input type="checkbox"/> 72 hours
Schedule III controlled substances	<input type="checkbox"/> 14 Days *	<input type="checkbox"/> 72 hours
Schedule IV controlled substances	<input type="checkbox"/>	
Schedule V controlled substances	<input type="checkbox"/>	
Non-controlled substances <i>(prescription only drugs)</i>	<input type="checkbox"/>	

* The following applies to 14 day prescribing only

Per A.R.S § 32-2504 (a) (12): I certify that within the preceding two years of this application, PA listed above is currently certified by the National Commission on the Certification of Physician Assistants (NCCPA), (Verified by Board); or Has completed 45 hours of Pharmacology (copy attached) or Has completed 45 hours of clinical management of drug therapy (copy attached).

Recordation and Review: As a supervising physician, I have a system for recordation and review of all 14 day schedule II and III controlled substance prescriptions. I agree to record & review all 14 day schedule II & III controlled substance prescriptions by retaining a duplicate prescription in the medical record/patient file OR make a notation in the patient's medical record OR make a notation in a notebook, log or computer database.

I agree to review at least every 90 days the PA's prescribing of 14-day schedule II and schedule III controlled substances:

Supervising Physician Signature: Date:

**Check PA Profile to verify Authority above has been posted prior to prescribing.

(If your prescribing authority of this PA ends, please check the box below and return to the board by fax or mail)

I withdraw the above prescribing authority as I no longer supervise this physician assistant.

Supervising Physician Signature: Date: