

00:12:56 rich: When does the law take effect?  
00:13:19 Ron: 90 days after session ends, Aug 8th 2023.  
00:21:34 rich: Thank you, Ron!  
00:29:03 Michael Seward, Docs Who Care: Reacted to "90 days after sessio..." with 👍  
00:32:11 Leslie Yedor: Do the hours have to be consecutive? Or is it just a total number of hours completed at any point in your career?  
00:33:12 Harlan David: How many years (approx) is 3000hr and 5000hr if you are a full time PA?  
00:33:40 Michael Hugus: 2080 hrs in a full time (40hr/wk) year  
00:34:49 Kellie Lyons: Reacted to "2080 hrs in a full t..." with 🔥  
00:35:16 Ron: Leslie, the bill does not specify.  
00:35:52 Ron: Sorry Rich, a few days off  
00:35:55 Jeff McElwain: Consecutive versus total hrs is not spelled out in legislation. That may be one of the cleanup issues  
00:36:20 Leslie Yedor: Thank you Ron and Jeff!  
00:36:54 Molly McCabe: Will PAs be able to own >49% practice?  
00:37:09 Summer Scheid: What does "change in speciality" mean?  
00:37:25 Kellie Lyons: Replying to "Will PAs be able to ..."  
Not under this bill, no.  
00:37:34 Jeff McElwain: Yes, 49% - current law  
00:37:45 sarahkurts: So this removes liability of a PA from the doctor, correct? A collaborating physician cannot be sued for something a PA does?  
00:37:50 Natalie Giampolo: If someone has experience in one area (like fam practice or urgent care) and has the hours, then goes to a specialty, do they have to go back to the higher level of "supervision" to go back to family practice or urgent care?  
00:38:02 Jeff McElwain: Change in specialty - moving from FP to ortho, etc.  
00:38:59 Summer Scheid: What about moving within pediatric med--say from primary care to hospital med?  
00:39:06 Ron: Sarah, This again is a legal question and would depend on the relationship in the specific case.  
00:39:08 Jeff McElwain: Yes to liability, but we already carry liability (usually through employer) with more than 3 yrs of experience, now will be from day one  
00:39:46 Ron: Summer, this will most likely be addressed more in rule making.  
00:41:23 Amanda: Replying to "Will PAs be able to ..."  
So you can own max of 49%?  
00:41:48 Jeff McElwain: Natalie, not stated in legislation  
00:42:02 Jeff McElwain: Replying to "Will PAs be able to ..."

Yes

00:42:14 Jolie Eirich: Can you expand on the supervision required for trauma centers/ED providers?  
00:42:24 Amanda: If we are trained to do procedures under anesthesia, we are able to do so?

00:43:39 Natalie Giampolo: It would be limiting to those of us with more experience to have to return to the first level if we have worked in multiple specialties; hopefully we can advocate that it is career experience not consecutive.

00:43:55 Jeff McElwain: Reacted to "It would be limiting..." with 👍

00:44:05 Leslie Yedor: Reacted to "It would be limiting..." with 👍

00:44:16 Leslie Yedor: Removed a 👍 reaction from "It would be limiting..."

00:44:49 sarahkurts: Replying to "Will PAs be able to ..."

Is this on the agenda to get rid of at some point in the future? It's ridiculous. An RN can own 100% of a medical practice, as can an aesthetician, or Joe Shmo!

00:45:51 Kirsten DeKoster: Reacted to "Is this on the agend..." with 🙌

00:47:19 Jeff McElwain: Amanda - that is what the law says

00:48:53 iPhone: You may have answered this, but do we have to work in facilities that have physicians, or would be be employable in NP owned businesses?

00:49:18 CH: Because of the explicit mentioning that this bill doesn't change PA ownership of practice law do we think it will put a target on the backs of those PAs who own provider networks at more than 49%?

00:50:18 Natalie Giampolo: Just to point out, that to utilize veteran business owner benefits there does have to be 51% ownership

00:54:26 Sstuart: Can I now call myself a PA even if I am not employed and therefore not registered with the BME

00:54:52 Sstuart: Yaaay!!

00:54:57 Beth H: A big thank you to the government affairs committee!

00:55:04 Sstuart: It's a long time in coming!

00:55:05 Samantha Stevens: Will there still be 8 PAs to 1 physician or does that come in rules

00:55:09 Kelly Peters: Thank you

00:55:20 Amanda: When you say legal review does that mean within our practice or with you/the state?

00:55:28 sarahkurts: Can we get a copy of this chat somehow please for our records?

00:55:32 iPhone: Will you provide collaborative agreement templates?

00:56:02 Ron: legal review by group based on how the collaborative agreement is created, CAPA will try to provide some very basic templates for PA's and employers.

00:56:05 Rachel Frederickson: Would you suggest that we begin to discuss these changes with our employers, or should we wait until Rule 400 is rewritten?

00:56:06 Kelli Perry: Do we register our collaborative agreement with DORA like we currently register our supervising physician?

00:56:23 Forrest Fairy: Will the collaborative physician still need to get an add on malpractice insurance? Like if the collaborative physician isn't in a group policy they typically have to pay for extra malpractice

00:56:46 Shasta Van Sickle: Thank you all for all of this work! I have been waiting years for this in order to be able to practice at the top of my license! Go PAs!!

00:57:04 Michael Hugus: Reacted to "Thank you all for al..." with 👍

00:57:14 Ashley's iPhone: Reacted to "Do we register our c..." with 👍

00:57:16 Shasta Van Sickle: Reacted to "Thank you all for al..." with 👍

00:57:17 Shasta Van Sickle: Removed a 👍 reaction from "Thank you all for al..."

00:57:20 Rebecca: Yes agree- thanks to everyone for your hard work!!

00:57:54 Laura Hundemann: Common question I've heard: does the collaborating physician need to be in the same specialty as the PA?

00:57:58 Kellie Lyons: Replying to "Thank you all for al..."  
We can't do it without membership and buy in. Consider being involved!

00:58:04 Michael Seward, Docs Who Care: Reacted to "Yes agree- thanks to..." with ❤️

00:58:08 Michael Seward, Docs Who Care: Removed a ❤️ reaction from "Yes agree- thanks to..."

00:58:11 Michael Seward, Docs Who Care: Reacted to "Yes agree- thanks to..." with ❤️

00:58:21 Ron: Kellie, you wont register with DOPRA, the Collaborative agreement must be kept at the primary practice.

00:58:47 Jolie Eirich: Ron can you speak a little more about how medical staff offices/credentialing review boards are handling the doing away with supervising physicians for all PAs in large orgs except those in ED setting

00:59:44 CH: What if the PA owns the organization that currently employs or contracts with a supervising physician?

01:00:39 Alexi Perkins: If a PA floats between specialties all under one hospital group, there would only need to be 1 collaborative agreement?

01:01:20 CH: Thank you

01:02:31 Jim Keller: Ron et al, great to see you, and to obtain clarification of all the hard work you have accomplished in getting this legislation passed. Having been a PA for 47 years, I think this is historic fo our profession! Thank you1

01:02:50 Ashley's iPhone: Reacted to "Ron et al, great to ..." with ❤️

01:02:55 Kellie Lyons: Reacted to "Ron et al, great to ..." with ❤️

01:02:56 Ron: Thank you for your service Mr Keller.

01:03:06 Linsey Weller: Do you have any tips to approach big organizations that treat NP differently than PAs?

01:03:06 Michael Hugus: Reacted to "Ron et al, great to ..." with 👍

01:03:14 Laura Hundemann: Reacted to "Ron et al, great to ..." with 👍

01:03:37 Rachel Frederickson: Should we begin to discuss these changes with our employers now or should we wait until Rule 400 is rewritten?

01:03:44 Jolie Eirich: I am an NP so remember some of this!

01:03:54 sakrydg: Thanks to the CAPA Team for all of their work over the past few years!!

01:03:59 Melanie: Reacted to "Thanks to the CAPA T..." with ❤️

01:04:05 Hilary Johnson: Reacted to "Ron et al, great to ..." with 👍

01:04:18 Laura Hundemann: Reacted to "Thank you all for al..." with 👍

01:04:26 Shasta Van Sickle: Replying to "Thank you all for al..."  
I am a member. And, yes, I would like to be more involved.

01:04:39 Leslie Yedor: Thank you thank you CAPA for all of this!!

01:04:46 iPhone: Just to clarify, the end goal is autonomy?

01:05:01 Kellie Lyons: Replying to "Thank you all for al..."

Director at large is a great start!

01:05:17 Kellie Lyons: Replying to "Thank you all for al..."

Sit on the board :) have a seat at the table.

01:05:27 rich: What responsibility does the collaborating physician take on?

01:05:44 Jeff McElwain: Reacted to "Just to clarify, the..." with 👍

01:05:55 Sarah Flick: Replying to "Thank you all for al..."

Come on Shasta :)

01:06:36 Shasta Van Sickle: Reacted to "Director at large is..." with 👍

01:06:45 rich: Ok, thank you

01:06:45 Shasta Van Sickle: Reacted to "Come on Shasta :)" with 😊

01:07:14 Jeff McElwain: Reacted to "Director at large is..." with 👍

01:08:07 iPhone: You guys are the best! Thank you

01:08:13 Danielle Mashburn: Thank you!! Appreciate your tireless advocacy on our behalf.

01:08:32 Jolie Eirich: Linsey asked if you have tips on how to engage w/ orgs who treat NPs differently than PAs.

01:09:06 Laura Hundemann: No supervising physician needed to be listed on prescriptions

01:09:19 Linsey Weller: Can you help with that education piece?

01:09:53 sarahkurts: Can we get a copy of this chat somehow please for our records?

01:09:59 Shasta Van Sickle: Reacted to "Sit on the board :) ..." with 👍

01:10:08 Jenn Quigley: Thank you, everyone, for your hard work on this!

01:10:13 Kellie Lyons: Reacted to "Thank you, everyone,..." with 🙌

01:10:32 Alexi Perkins: THANK YOU ALL!