

(1) A DELEGATION AGREEMENT HAS BEEN EXECUTED AND SUBMITTED TO THE COMMITTEE FOR REVIEW TO ENSURE THE DELEGATION AGREEMENT CONTAINS THE REQUIREMENTS OF THIS SUBTITLE; AND

(2) THE BOARD HAS REVIEWED AND APPROVED A FAVORABLE RECOMMENDATION BY THE COMMITTEE THAT THE REQUIREMENTS OF THIS SUBTITLE HAVE BEEN MET.

(B) THE DELEGATION AGREEMENT SHALL CONTAIN:

(1) A DESCRIPTION OF THE QUALIFICATIONS OF THE SUPERVISING PHYSICIAN AND PHYSICIAN ASSISTANT;

(2) A DESCRIPTION OF THE SETTINGS IN WHICH THE PHYSICIAN ASSISTANT WILL PRACTICE;

(3) A DESCRIPTION OF THE CONTINUOUS PHYSICIAN SUPERVISION MECHANISMS THAT ARE REASONABLE AND APPROPRIATE TO THE PRACTICE SETTING;

(4) AN ATTESTATION THAT ALL MEDICAL ACTS TO BE DELEGATED TO THE PHYSICIAN ASSISTANT ARE WITHIN THE SCOPE OF PRACTICE OF THE SUPERVISING PHYSICIAN AND APPROPRIATE TO THE PHYSICIAN ASSISTANT'S EDUCATION, TRAINING, AND LEVEL OF COMPETENCE;

(5) AN ATTESTATION OF CONTINUOUS SUPERVISION OF THE PHYSICIAN ASSISTANT BY THE SUPERVISING PHYSICIAN THROUGH THE MECHANISMS DESCRIBED IN THE DELEGATION AGREEMENT;

(6) AN ATTESTATION BY THE SUPERVISING PHYSICIAN OF ~~ASSUMPTION OF PROFESSIONAL AND LEGAL LIABILITY FOR THE PHYSICIAN ASSISTANT'S PATIENT CARE ACTIVITIES, AND~~ THE PHYSICIAN'S ACCEPTANCE OF RESPONSIBILITY FOR ANY CARE GIVEN BY THE PHYSICIAN ASSISTANT;

(7) AN ATTESTATION BY THE SUPERVISING PHYSICIAN THAT THE PHYSICIAN WILL RESPOND IN A TIMELY MANNER WHEN CONTACTED BY THE PHYSICIAN ASSISTANT; AND

~~(7)~~ (8) ANY OTHER INFORMATION DEEMED NECESSARY BY THE BOARD OR COMMITTEE TO CARRY OUT THE PROVISIONS OF THIS SUBTITLE.

(C) (1) THE DELEGATION AGREEMENT SHALL BE SUBMITTED WITH THE APPLICATION FEE ESTABLISHED BY THE BOARD AND THE SUPERVISING PHYSICIAN AND PHYSICIAN ASSISTANT SHALL COMPLY WITH ALL OTHER REQUIREMENTS ESTABLISHED BY THE BOARD IN ACCORDANCE WITH THIS TITLE.

(2) THE BOARD SHALL SET THE APPLICATION FEE SO AS TO PRODUCE FUNDS TO APPROXIMATE THE COST OF REVIEWING AND APPROVING DELEGATION AGREEMENTS AND ANY OTHER RELATED SERVICES PROVIDED.