

**Senator Curtis S. Bramble** proposes the following substitute bill:

**PHYSICIAN ASSISTANT ACT AMENDMENTS**

2021 GENERAL SESSION

STATE OF UTAH

**Chief Sponsor: Curtis S. Bramble**

House Sponsor: James A. Dunnigan

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**LONG TITLE**

**General Description:**

This bill amends provisions relating to the practice of a physician assistant.

**Highlighted Provisions:**

This bill:

- ▶ amends the scope of practice for a physician assistant;
  - ▶ removes the requirement that a physician assistant maintain a specific relationship with a physician or any other health care provider;
  - ▶ changes the membership of the Physician Assistant Licensing Board;
  - ▶ authorizes a physician assistant to be eligible for direct payment by all public and private payers;
  - ▶ creates requirements for newly graduated physician assistants;
  - ▶ permits a physician assistant to respond during a health care emergency or disaster;
- and
- ▶ makes technical and corresponding changes.

**Money Appropriated in this Bill:**

None

**Other Special Clauses:**

None



26 **Utah Code Sections Affected:**

27 AMENDS:

28 **58-70a-102**, as last amended by Laws of Utah 2017, Chapter 309

29 **58-70a-201**, as last amended by Laws of Utah 2010, Chapter 37

30 **58-70a-302**, as last amended by Laws of Utah 2020, Chapter 339

31 **58-70a-305**, as last amended by Laws of Utah 2019, Chapter 349

32 **58-70a-306**, as last amended by Laws of Utah 2020, Chapter 339

33 **58-70a-501**, as last amended by Laws of Utah 2017, Chapter 309

34 **58-70a-502**, as last amended by Laws of Utah 2014, Chapter 72

35 **58-70a-503**, as last amended by Laws of Utah 2020, Chapter 25



37 *Be it enacted by the Legislature of the state of Utah:*

38 Section 1. Section **58-70a-102** is amended to read:

39 **58-70a-102. Definitions.**

40 In addition to the definitions in Section **58-1-102**, as used in this chapter:

41 (1) "Board" means the Physician Assistant Licensing Board created in Section

42 **58-70a-201**.

43 ~~[(2) (a) "Delegation of services agreement" means written criteria jointly developed by~~  
44 ~~a physician assistant's supervising physician and substitute supervising physicians and the~~  
45 ~~physician assistant, that permits a physician assistant, working under the direction or review of~~  
46 ~~the supervising physician, to assist in the management of common illnesses and injuries.]~~

47 ~~[(b) The agreement defines the working relationship and delegation of duties between~~  
48 ~~the supervising physician and the physician assistant as specified by division rule and shall~~  
49 ~~include:]~~

50 ~~[(i) the prescribing of controlled substances;]~~

51 ~~[(ii) the degree and means of supervision;]~~

52 ~~[(iii) the frequency and mechanism of quality review, including the mechanism for~~  
53 ~~review of patient data and documentation of the review, as determined by the supervising~~  
54 ~~physician and the physician assistant;]~~

55 ~~[(iv) procedures addressing situations outside the scope of practice of the physician~~  
56 ~~assistant; and]~~

57 ~~[(v) procedures for providing backup for the physician assistant in emergency~~  
 58 ~~situations.]~~

59 ~~[(3) "Direct supervision" means the supervising physician is:]~~

60 ~~[(a) physically present at the point of patient treatment on site where the physician~~  
 61 ~~assistant he is supervising is practicing; and]~~

62 ~~[(b) immediately available for consultation with the physician assistant.]~~

63 (2) "Competence" means possessing the requisite cognitive, non-cognitive, and  
 64 communicative abilities and qualities to perform effectively within the scope of practice of the  
 65 physician assistant's practice while adhering to professional and ethical standards.

66 (3) "Health care facility" means the same as that term is defined in Section [26-21-2](#).

67 (4) "Physician" means the same as that term is defined in Section [58-67-102](#).

68 (5) "Physician assistant" means an individual who is licensed to practice medicine  
 69 under this chapter.

70 ~~[(4)] (6) "Practice as a physician assistant" means[:(a)] the professional activities and~~  
 71 ~~conduct of a physician assistant, also known as a PA, in diagnosing, treating, advising, or~~  
 72 ~~prescribing for any human disease, ailment, injury, infirmity, deformity, pain, or other~~  
 73 ~~condition[~~, dependent upon and under the supervision of a supervising physician or substitute~~~~  
 74 ~~supervising physician in accordance with a delegation of services agreement; and].~~

75 ~~[(b) the physician assistant acts as the agent of the supervising physician or substitute~~  
 76 ~~supervising physician when acting in accordance with a delegation of services agreement.]~~

77 ~~[(5) "Substitute supervising physician" means an individual who meets the~~  
 78 ~~requirements of a supervising physician under this chapter and acts as the supervising physician~~  
 79 ~~in the absence of the supervising physician.]~~

80 ~~[(6) "Supervising physician" means an individual who:]~~

81 ~~[(a) is currently licensed to practice under Title 58, Chapter 67, Utah Medical Practice~~  
 82 ~~Act, or Title 58, Chapter 68, Utah Osteopathic Medical Practice Act;]~~

83 ~~[(b) acts as the primary supervisor of a physician assistant and takes responsibility for~~  
 84 ~~the professional practice and conduct of a physician assistant in accordance with this chapter;~~  
 85 ~~and]~~

86 ~~[(c) is not an employee of the physician assistant whom the individual supervises.]~~

87 ~~[(7) "Supervision" means the supervising physician is available for consultation with~~

88 ~~the physician assistant, either personally or by other means permitting direct verbal~~  
89 ~~communication between the physician and the physician assistant.]~~

90 ~~[(8)] (7) "Unlawful conduct" means the same as that term is [as] defined in Sections~~  
91 ~~58-1-501 and 58-70a-502.~~

92 ~~[(9)] (8) "Unprofessional conduct" [is] means "unprofessional conduct":~~

93 ~~(a) as defined in Sections 58-1-501 and 58-70a-503; and [as may be further defined by~~  
94 ~~rule.]~~

95 ~~(b) as further defined by the division by rule.~~

96 Section 2. Section **58-70a-201** is amended to read:

97 **58-70a-201. Board.**

98 (1) There is created the Physician Assistant Licensing Board, which consists of seven  
99 members:

100 (a) ~~[three] two~~ licensed physicians ~~[, at least two of whom are individuals who are~~  
101 ~~supervising or who have supervised a physician assistant] who currently work or have~~  
102 ~~previously worked collaboratively with a physician assistant;~~

103 (b) ~~[three] four~~ physician assistants, one of whom is involved in the administration of  
104 an approved physician assistant education program within the state; and

105 (c) one person from the general public.

106 (2) The board shall be appointed and serve in accordance with Section 58-1-201.

107 (3) (a) The duties and responsibilities of the board are in accordance with Sections  
108 58-1-202 and 58-1-203. ~~[In addition, the]~~

109 (b) The board shall designate one of its members on a permanent or rotating basis to:

110 ~~[(a)] (i)~~ assist the division in reviewing complaints concerning the unlawful or  
111 unprofessional conduct of a licensee; and

112 ~~[(b)] (ii)~~ advise the division in ~~[its] the division's~~ investigation of these complaints.

113 (4) (a) A board member who has, under Subsection (3), reviewed a complaint or  
114 advised in its investigation may be disqualified from participating with the board when the  
115 board serves as a presiding officer in an adjudicative proceeding concerning the complaint.

116 (b) The board member described in Subsection (4)(a) may be disqualified:

117 ~~[(a)] (i)~~ on the member's own motion, due to actual or perceived bias or lack of  
118 objectivity; or

119            ~~[(b)]~~ (ii) upon challenge for cause raised on the record by any party to the adjudicative  
120 proceeding.

121            Section 3. Section **58-70a-302** is amended to read:

122            **58-70a-302. Qualifications for licensure.**

123            Each applicant for licensure as a physician assistant shall:

- 124            (1) submit an application in a form prescribed by the division;
- 125            (2) pay a fee determined by the department under Section [63J-1-504](#);
- 126            (3) have successfully completed a physician assistant program accredited by ~~[the]~~:
  - 127            (a) the Accreditation Review Commission on Education for the Physician Assistant; or
  - 128            (b) if prior to January 1, 2001, either the:
    - 129            (i) Committee on Accreditation of Allied Health Education Programs; or
    - 130            (ii) Committee on Allied Health Education and Accreditation;
- 131            (4) have passed the licensing examinations required by division rule made in  
132 collaboration with the board; and
- 133            (5) meet with the board and representatives of the division, if requested, for the  
134 purpose of evaluating the applicant's qualifications for licensure~~;~~ and.

135            ~~[(6) (a) if the applicant desires to practice in Utah, complete a form provided by the  
136 division indicating:]~~

137            ~~[(i) the applicant has completed a delegation of services agreement signed by the  
138 physician assistant and the supervising physician; and]~~

139            ~~[(ii) the agreement is on file at the Utah practice sites; or]~~

140            ~~[(b) complete a form provided by the division indicating the applicant is not practicing  
141 in Utah and, prior to practicing in Utah, the applicant will meet the requirements of Subsection  
142 (6)(a).]~~

143            Section 4. Section **58-70a-305** is amended to read:

144            **58-70a-305. Exemptions from licensure.**

145            (1) In addition to the exemptions from licensure in Section [58-1-307](#),~~[the following  
146 persons]~~ an individual described in Subsection (2) may engage in acts included within the  
147 definition of practice as a physician assistant, subject to the stated circumstances and  
148 limitations, without being licensed under this chapter~~;~~.

149            ~~[(+)]~~ (2) Subsection (1) applies to a student enrolled in an accredited physician

150 assistant education program while engaged in activities as a physician assistant:

- 151 (a) that are a part of the education program;
- 152 (b) that are conducted at an affiliated medical facility under the direct supervision of a:
  - 153 (i) physician associated with the program; or
  - 154 (ii) licensed physician assistant associated with the medical faculty; and
- 155 (c) for which the program accepts in writing the responsibility for the student[; ~~and~~].
- 156 [~~(2) a "medical assistant," as defined in Sections 58-67-102 and 58-68-102, who:~~
- 157 [~~(a) does not diagnose, advise, independently treat, or prescribe to or on behalf of any~~
- 158 ~~person; and]~~
- 159 [~~(b) for whom the supervising physician accepts responsibility.]~~

160 Section 5. Section **58-70a-306** is amended to read:

161 **58-70a-306. Temporary license.**

162 (1) An applicant for licensure as a physician assistant who has met all qualifications for  
163 licensure except passing an examination component as required in Section **58-70a-302**, may  
164 apply for and be granted a temporary license to practice under Subsection (2).

165 (2) (a) The applicant shall submit to the division evidence of completion of a physician  
166 assistant program as defined in Subsection **58-70a-302**(3).

167 (b) (i) The temporary license shall be issued for a period not to exceed 120 days to  
168 allow the applicant to pass the Physician Assistant National Certifying Examination.

169 (ii) The temporary license may not be renewed or extended.

170 [~~(c) A physician assistant holding a temporary license may work only under the direct~~  
171 ~~supervision of an approved supervising or substitute supervising physician in accordance with~~  
172 ~~a delegation of services agreement, and all patient charts shall be reviewed and countersigned~~  
173 ~~by the supervising or substitute supervising physician.]~~

174 (c) A temporary license holder shall work under the direct supervision of:

175 (i) a physician;

176 (ii) a physician assistant; or

177 (iii) an individual licensed to engage in the practice of advanced practice registered  
178 nursing as defined in Section **58-31b-102**.

179 Section 6. Section **58-70a-501** is amended to read:

180 **58-70a-501. Scope of practice.**

181 (1) (a) A physician assistant may provide any medical services that are not specifically  
 182 prohibited under this chapter or rules adopted under this chapter, and that are~~[(a)]~~ within the  
 183 physician assistant's skills and scope of competence~~;~~.

184 ~~[(b) within the usual scope of practice of the physician assistant's supervising~~  
 185 ~~physician, and]~~

186 ~~[(c) provided under the supervision of a supervising physician and in accordance with a~~  
 187 ~~delegation of services agreement.]~~

188 (b) A physician assistant shall consult, collaborate with, and refer to appropriate  
 189 members of the health care team:

190 (i) as indicated by the patient's condition;

191 (ii) based on the physician assistant's education, experience, and competencies; and

192 (iii) the applicable standard of care.

193 (c) The degree of collaboration under Subsection (1)(b) shall be determined at the  
 194 physician assistant's practice, including decisions made by ~~Ŝ~~ → :

194a (i) ~~←Ŝ~~ the physician assistant's:

195 ~~Ŝ~~ → ~~[(i)]~~ (A) ~~←Ŝ~~ employer;

196 ~~Ŝ~~ → ~~[(ii)]~~ (B) ~~←Ŝ~~ group;

197 ~~Ŝ~~ → ~~[(iii)]~~ (C) ~~←Ŝ~~ hospital service; or

198 ~~Ŝ~~ → ~~[(iv)]~~ (D) ~~←Ŝ~~ health care facility credentialing and privileging system ~~Ŝ~~ → [E] ; or

198a (ii) a managed care organization with whom the physician assistant is a network provider.

198b (d) A person described in Subsection (1)(c) may not require a clinical supervisory relationship

198c between a physician assistant and another healthcare provider. ~~←Ŝ~~

199 ~~Ŝ~~ → ~~[(d)]~~ (e) ~~←Ŝ~~ The services provided by a physician assistant includes, but is not limited  
 199a to:

200 (i) obtaining a comprehensive health history;

201 (ii) performing a physical examination;

202 (iii) evaluating, diagnosing, managing, and providing medical treatment;

203 (iv) ordering, performing, and interpreting diagnostic studies and therapeutic  
 204 procedures;

205 (v) educating a patient on health promotion and disease prevention;

206 (vi) providing a consultation upon request; and

207 (vii) writing medical orders.

208 ~~Ŝ~~ → ~~[(e)]~~ (f) ~~←Ŝ~~ A physician assistant may, within the physician assistant's scope of  
 208a practice:

209 (i) provide a service in any health care facility or program including:

210 (A) a hospital;

211 (B) a nursing care facility;

212 (C) an assisted living facility; and  
 213 (D) hospice;  
 214 (ii) obtain informed consent;  
 215 (iii) supervise, delegate, and assign therapeutic and diagnostic measures;  
 216 (iv) certify the health or disability of a patient for any local, state, or federal program;  
 217 and  
 218 (v) authenticate through a signature, certification, stamp, verification, affidavit, or  
 219 endorsement any document that may be authenticated by a physician.

220 ~~Ŝ~~ → ~~[(f)]~~ (g) ← ~~Ŝ~~ A physician assistant is responsible for the care that the physician assistant  
 221 provides.

222 ~~Ŝ~~ → ~~[(g)]~~ An insurer as defined in Section 31A-1-301 may not:

223 ~~——~~ (i) solely on the basis that a physician assistant is licensed as a physician assistant;

224 ~~——~~ (A) prohibit the physician assistant from billing and receiving direct payment for a  
 225 medically necessary service that the physician assistant provides to the insurer's enrollee;

226 ~~——~~ (B) deny a claim for a medically necessary service that the physician assistant provides  
 227 to the insurer's enrollee; or

228 ~~——~~ (C) prohibit a physician assistant from being listed as the provider in the billing and  
 229 claims process for payment of the service; or

230 ~~——~~ (ii) impose a practice, education, or collaboration requirement on a physician assistant  
 231 that is inconsistent with or more restrictive than the requirements in this title.] ← ~~Ŝ~~

232 (h) (i) A physician assistant may provide health care services as a volunteer for a  
 233 charitable organization or at a public or private event, including a religious event, youth camp,  
 234 community event, or health fair, if the physician assistant:

235 (A) receives no compensation for such services; and

236 (B) provides the health care services in a manner that is consistent with the physician  
 237 assistant's education, experience, and competence.

238 (ii) Notwithstanding Subsection (2), a physician assistant who is providing volunteer  
 239 health services under this Subsection (1)(h) may not issue a prescription to a patient for a  
 240 controlled substance.

241 (2) (a) A physician assistant~~[, in accordance with a delegation of services agreement,]~~  
 242 may prescribe or administer an appropriate controlled substance if~~[-(a)-]~~ the physician assistant



243 holds a Utah controlled substance license and a DEA registration[; and].

244 ~~[(b) the prescription or administration of the controlled substance is within the~~  
 245 ~~prescriptive practice of the supervising physician and also within the delegated prescribing~~  
 246 ~~stated in the delegation of services agreement.]~~

247 (b) A physician assistant may prescribe, dispense, order, administer, and procure a drug  
 248 or medical device.

249 (c) A physician assistant may plan and initiate a therapeutic regimen that may include  
 250 ordering and prescribing:

251 (i) non-pharmacological interventions, including durable medical equipment, nutrition,  
 252 blood, and blood products; and

253 (ii) diagnostic support services, including home health care, hospice, physical therapy,  
 254 and occupational therapy.

255 (3) ~~§~~ (a) ~~§~~ A physician assistant with less than ~~§~~ [4,000] 5,000 ~~§~~ hours of  
 255a post-graduate clinical practice

256 experience shall ~~§~~ :

256a (i) ~~§~~ practice under written policies and procedures established at a practice level  
 257 that:

258 ~~§~~ [(a)] (A) ~~§~~ describe how collaboration will occur under Subsections (1)(b) and (c);

259 ~~§~~ [(b)] (B) ~~§~~ describe methods for evaluating the physician assistant's competency,  
 259a knowledge,

260 and skills; ~~§~~ [and

261 ~~§~~ [(e)] (ii) ~~§~~ provide a copy of the written policies and procedures and documentation of  
 262 compliance with this Subsection (3) to the board upon the board's request ~~§~~ [;] ; and

262a (iii) collaborate with a physician for at least 1,000 hours.

262b (b) A physician assistant who wishes to change specialties to another specialty in which  
 262c the PA has less than 2,000 hours of experience shall collaborate for a minimum of 2,000 hours  
 262d with a physician who is trained and experienced in the specialty to which the physician  
 262e assistant is changing. ~~§~~

263 (4) (a) This Subsection (4) applies to a physician assistant who:

264 (i) has less than 10,000 hours of practice experience; and

265 (ii) does not practice at:

266 (A) a licensed health care facility;

267 (B) a facility with a credentialing and privileging system; or

268 (C) a physician-owned office, facility, or practice.

269 (b) A physician assistant described in Subsection (4)(a) shall enter into a written  
270 collaborative agreement with:

271 (i) a physician; or

272 (ii) a licensed physician assistant with more than 10,000 hours of practice experience in  
273 the same specialty as the physician assistant;

274 (c) The collaborative practice agreement described in Subsection (4)(b) shall:  
 275 (i) describe how collaboration under Subsection (1)(b) will occur;  
 276 (ii) be kept on file at the physician assistant's practice location; and  
 277 (iii) be provided by the physician assistant to the board upon the board's request.

278 (5) Notwithstanding any other provision of state law, a physician assistant may provide

279 ~~Ŝ→ [mental health care and mental health therapy and treatment]~~ behavioral change support  
 279a services ←Ŝ in a non-psychiatric practice setting  
 280 if the services are consistent with:

280a ~~Ŝ→~~ (a) the physician assistant's education, training, and experience; ←Ŝ  
 281 ~~Ŝ→ [(a)]~~ (b) ←Ŝ customary and accepted practices in similar practice settings; and  
 282 ~~Ŝ→ [(b)]~~ (c) ←Ŝ applicable standards of care.

283 ~~[(3)]~~ (6) A physician assistant [~~shall~~], while practicing as a physician assistant[~~;~~]:

284 (a) shall wear an identification badge showing the physician assistant's license  
 285 classification as a physician assistant[~~;~~]; and

286 ~~[(4) A physician assistant may not:]~~

287 ~~[(a) independently charge or bill a patient, or others on behalf of the patient, for~~  
 288 ~~services rendered;]~~

289 (b) may not identify himself or herself to any person in connection with activities  
 290 allowed under this chapter other than as a physician assistant[~~;~~] or PA.

291 ~~[(c) use the title "doctor" or "physician," or by any knowing act or omission lead or~~  
 292 ~~permit anyone to believe the physician assistant is a physician.]~~

293 Section 7. Section **58-70a-502** is amended to read:

294 **58-70a-502. Unlawful conduct.**

295 ~~["Unlawful conduct" includes engaging in practice as a licensed physician assistant~~  
 296 ~~while not under the supervision of a supervising physician or substitute supervising physician.]~~

297 Reserved.

298 Section 8. Section **58-70a-503** is amended to read:

299 **58-70a-503. Unprofessional conduct.**

300 (1) "Unprofessional conduct" includes:

301 (a) violation of a patient confidence to any person who does not have a legal right and a  
 302 professional need to know the information concerning the patient;

303 (b) knowingly prescribing, selling, giving away, or directly or indirectly administering,  
 304 or offering to prescribe, sell, furnish, give away, or administer any prescription drug except for

305 a legitimate medical purpose upon a proper diagnosis indicating use of that drug in the amounts  
306 prescribed or provided;

307 (c) prescribing prescription drugs for oneself or administering prescription drugs to  
308 oneself, except those that have been legally prescribed for the physician assistant by a licensed  
309 practitioner and that are used in accordance with the prescription order for the condition  
310 diagnosed;

311 ~~[(d) failure to maintain at the practice site a delegation of services agreement that~~  
312 ~~accurately reflects current practices;]~~

313 ~~[(e) failure to make the delegation of services agreement available to the division for~~  
314 ~~review upon request;]~~

315 ~~[(f) in a practice that has physician assistant ownership interests, failure to allow the~~  
316 ~~supervising physician the independent final decision making authority on patient treatment~~  
317 ~~decisions, as set forth in the delegation of services agreement or as defined by rule;]~~

318 ~~[(g)]~~ (d) violating the dispensing requirements of Chapter 17b, Part 8, Dispensing  
319 Medical Practitioner and Dispensing Medical Practitioner Clinic Pharmacy, if applicable; ~~[or]~~  
320 and

321 ~~[(h)]~~ (e) falsely making an entry in, or altering, a medical record with the intent to  
322 conceal:

323 (i) a wrongful or negligent act or omission of an individual licensed under this chapter  
324 or an individual under the direction or control of an individual licensed under this chapter; or

325 (ii) conduct described in Subsections (1)(a) through ~~[(g)]~~ (d) or Subsection  
326 [58-1-501\(1\)](#).

327 (2) (a) "Unprofessional conduct" does not include, in accordance with Title 26, Chapter  
328 61a, Utah Medical Cannabis Act, when registered as a qualified medical provider, as that term  
329 is defined in Section [26-61a-102](#), recommending the use of medical cannabis.

330 ~~[(3)]~~ (b) Notwithstanding Subsection (2)(a), the division, in consultation with the board  
331 and in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, shall  
332 define unprofessional conduct for a physician assistant described in Subsection (2)(a).