1	PHYSICIAN ASSISTANT ACT AMENDMENTS
2	2021 GENERAL SESSION
3	STATE OF UTAH
4	Chief Sponsor: Curtis S. Bramble
5	House Sponsor: James A. Dunnigan
6	
7	LONG TITLE
8	Committee Note:
9	The Business and Labor Interim Committee recommended this bill.
10	Legislative Vote: 12 voting for 2 voting against 6 absent
11	General Description:
12	This bill amends provisions relating to the practice of a physician assistant.
13	Highlighted Provisions:
14	This bill:
15	<ul> <li>amends the scope of practice for a physician assistant;</li> </ul>
16	<ul> <li>removes the requirement that a physician assistant maintain a specific relationship</li> </ul>
17	with a physician or any other health care provider;
18	<ul> <li>changes the membership of the Physician Assistant Licensing Board;</li> </ul>
19	<ul> <li>authorizes a physician assistant to be eligible for direct payment by all public and</li> </ul>
20	private payers;
21	<ul> <li>creates requirements for newly graduated physician assistants;</li> </ul>
22	<ul> <li>permits a physician assistant to respond during a health care emergency or disaster;</li> </ul>
23	and
24	<ul> <li>makes technical and corresponding changes.</li> </ul>
25	Money Appropriated in this Bill:
26	None
27	Other Special Clauses:



28	None
29	<b>Utah Code Sections Affected:</b>
30	AMENDS:
31	58-70a-102, as last amended by Laws of Utah 2017, Chapter 309
32	58-70a-201, as last amended by Laws of Utah 2010, Chapter 37
33	58-70a-302, as last amended by Laws of Utah 2020, Chapter 339
34	58-70a-305, as last amended by Laws of Utah 2019, Chapter 349
35	58-70a-306, as last amended by Laws of Utah 2020, Chapter 339
36	58-70a-501, as last amended by Laws of Utah 2017, Chapter 309
37	58-70a-502, as last amended by Laws of Utah 2014, Chapter 72
38	58-70a-503, as last amended by Laws of Utah 2020, Chapter 25
39	
40	Be it enacted by the Legislature of the state of Utah:
41	Section 1. Section 58-70a-102 is amended to read:
42	58-70a-102. Definitions.
43	In addition to the definitions in Section 58-1-102, as used in this chapter:
44	(1) "Board" means the Physician Assistant Licensing Board created in Section
45	58-70a-201.
46	[(2) (a) "Delegation of services agreement" means written criteria jointly developed by
47	a physician assistant's supervising physician and substitute supervising physicians and the
48	physician assistant, that permits a physician assistant, working under the direction or review of
49	the supervising physician, to assist in the management of common illnesses and injuries.]
50	[(b) The agreement defines the working relationship and delegation of duties between
51	the supervising physician and the physician assistant as specified by division rule and shall
52	include:]
53	[(i) the prescribing of controlled substances;]
54	[(ii) the degree and means of supervision;]
55	[(iii) the frequency and mechanism of quality review, including the mechanism for
56	review of patient data and documentation of the review, as determined by the supervising
57	physician and the physician assistant;]
58	[(iv) procedures addressing situations outside the scope of practice of the physician

59	assistant; and
60	[(v) procedures for providing backup for the physician assistant in emergency
61	situations.]
62	[(3) "Direct supervision" means the supervising physician is:]
63	[(a) physically present at the point of patient treatment on site where the physician
64	assistant he is supervising is practicing; and]
65	[(b) immediately available for consultation with the physician assistant.]
66	(2) "Competence" means possessing the requisite cognitive, non-cognitive, and
67	communicative abilities and qualities to perform effectively within the scope of practice of the
68	physician assistant's practice while adhering to professional and ethical standards.
69	(3) "Physician" means the same as that term is defined in Section 58-67-102.
70	(4) "Physician assistant" means an individual who is licensed to practice medicine
71	under this chapter.
72	(5) "Physician assistant's facility" means a facility or practice described in Section
73	<u>58-70a-501.5.</u>
74	[4] (6) "Practice as a physician assistant" means $[4]$ the professional activities and
75	conduct of a physician assistant, also known as a PA, in diagnosing, treating, advising, or
76	prescribing for any human disease, ailment, injury, infirmity, deformity, pain, or other
77	condition[, dependent upon and under the supervision of a supervising physician or substitute
78	supervising physician in accordance with a delegation of services agreement; and].
79	[(b) the physician assistant acts as the agent of the supervising physician or substitute
80	supervising physician when acting in accordance with a delegation of services agreement.]
81	[(5) "Substitute supervising physician" means an individual who meets the
82	requirements of a supervising physician under this chapter and acts as the supervising physician
83	in the absence of the supervising physician.]
84	[(6) "Supervising physician" means an individual who:]
85	[(a) is currently licensed to practice under Title 58, Chapter 67, Utah Medical Practice
86	Act, or Title 58, Chapter 68, Utah Osteopathic Medical Practice Act;]
87	[(b) acts as the primary supervisor of a physician assistant and takes responsibility for
88	the professional practice and conduct of a physician assistant in accordance with this chapter;
89	and]

90	(c) is not an employee of the physician assistant whom the individual supervises.
91	[(7) "Supervision" means the supervising physician is available for consultation with
92	the physician assistant, either personally or by other means permitting direct verbal
93	communication between the physician and the physician assistant.]
94	[ <del>(8)</del> ] <u>(7)</u> "Unlawful conduct" means the same as that term is [as] defined in Sections
95	58-1-501 and 58-70a-502.
96	[(9)] (8) "Unprofessional conduct" [is] means "unprofessional conduct":
97	(a) as defined in Sections 58-1-501 and 58-70a-503; and [as may be further defined by
98	rule.]
99	(b) as further defined by the division by rule.
100	Section 2. Section 58-70a-201 is amended to read:
101	58-70a-201. Board.
102	(1) There is created the Physician Assistant Licensing Board, which consists of seven
103	members:
104	(a) [three] two licensed physicians[, at least two of whom are individuals who are
105	supervising or who have supervised a physician assistant] who currently work or have
106	previously worked collaboratively with a physician assistant;
107	(b) [three] four physician assistants, one of whom is involved in the administration of
108	an approved physician assistant education program within the state; and
109	(c) one person from the general public.
110	(2) The board shall be appointed and serve in accordance with Section 58-1-201.
111	(3) (a) The duties and responsibilities of the board are in accordance with Sections
112	58-1-202 and 58-1-203. [ <del>In addition, the</del> ]
113	(b) The board shall designate one of its members on a permanent or rotating basis to:
114	[(a)] (i) assist the division in reviewing complaints concerning the unlawful or
115	unprofessional conduct of a licensee; and
116	[(b)] (ii) advise the division in [its] the division's investigation of these complaints.
117	(4) (a) A board member who has, under Subsection (3), reviewed a complaint or
118	advised in its investigation may be disqualified from participating with the board when the
119	board serves as a presiding officer in an adjudicative proceeding concerning the complaint.
120	(b) The board member described in Subsection (4)(a) may be disqualified:

121	[(a)] (i) on the member's own motion, due to actual or perceived bias or lack of
122	objectivity; or
123	[(b)] (ii) upon challenge for cause raised on the record by any party to the adjudicative
124	proceeding.
125	Section 3. Section <b>58-70a-302</b> is amended to read:
126	58-70a-302. Qualifications for licensure.
127	Each applicant for licensure as a physician assistant shall:
128	(1) submit an application in a form prescribed by the division;
129	(2) pay a fee determined by the department under Section 63J-1-504;
130	(3) have successfully completed a physician assistant program accredited by [the]:
131	(a) the Accreditation Review Commission on Education for the Physician Assistant; or
132	(b) if prior to January 1, 2001, either the:
133	(i) Committee on Accreditation of Allied Health Education Programs; or
134	(ii) Committee on Allied Health Education and Accreditation;
135	(4) have passed the licensing examinations required by division rule made in
136	collaboration with the board; and
137	(5) meet with the board and representatives of the division, if requested, for the
138	purpose of evaluating the applicant's qualifications for licensure[; and].
139	[(6) (a) if the applicant desires to practice in Utah, complete a form provided by the
140	division indicating:
141	[(i) the applicant has completed a delegation of services agreement signed by the
142	physician assistant and the supervising physician; and]
143	[(ii) the agreement is on file at the Utah practice sites; or]
144	[(b) complete a form provided by the division indicating the applicant is not practicing
145	in Utah and, prior to practicing in Utah, the applicant will meet the requirements of Subsection
146	<del>(6)(a).</del> ]
147	Section 4. Section <b>58-70a-305</b> is amended to read:
148	58-70a-305. Exemptions from licensure.
149	(1) In addition to the exemptions from licensure in Section 58-1-307,[-the following
150	persons] an individual described in Subsection (2) may engage in acts included within the
151	definition of practice as a physician assistant, subject to the stated circumstances and

152	limitations, without being licensed under this chapter[:].
153	[(1)] (2) Subsection (1) applies to a student enrolled in an accredited physician
154	assistant education program while engaged in activities as a physician assistant:
155	(a) that are a part of the education program;
156	(b) that are conducted at an affiliated medical facility under the direct supervision of a:
157	(i) physician associated with the program; or
158	(ii) licensed physician assistant associated with the medical faculty; and
159	(c) for which the program accepts in writing the responsibility for the student[; and].
160	[(2) a "medical assistant," as defined in Sections 58-67-102 and 58-68-102, who:]
161	[(a) does not diagnose, advise, independently treat, or prescribe to or on behalf of any
162	person; and]
163	[(b) for whom the supervising physician accepts responsibility.]
164	Section 5. Section <b>58-70a-306</b> is amended to read:
165	58-70a-306. Temporary license.
166	(1) An applicant for licensure as a physician assistant who has met all qualifications for
167	licensure except passing an examination component as required in Section 58-70a-302, may
168	apply for and be granted a temporary license to practice under Subsection (2).
169	(2) (a) The applicant shall submit to the division evidence of completion of a physician
170	assistant program as defined in Subsection 58-70a-302(3).
171	(b) (i) The temporary license shall be issued for a period not to exceed 120 days to
172	allow the applicant to pass the Physician Assistant National Certifying Examination.
173	(ii) The temporary license may not be renewed or extended.
174	[(c) A physician assistant holding a temporary license may work only under the direct
175	supervision of an approved supervising or substitute supervising physician in accordance with
176	a delegation of services agreement, and all patient charts shall be reviewed and countersigned
177	by the supervising or substitute supervising physician.]
178	(c) A temporary license holder shall work under the direct supervision of:
179	(i) a physician;
180	(ii) a physician assistant; or
181	(iii) an individual licensed to engage in the practice of advanced practice registered
182	nursing as defined in Section 58-31b-102.

183	Section 6. Section <b>58-70a-501</b> is amended to read:
184	58-70a-501. Scope of practice.
185	(1) (a) A physician assistant may provide any medical services that are not specifically
186	prohibited under this chapter or rules adopted under this chapter, and that are[:(a)-] within the
187	physician assistant's skills and scope of competence[;].
188	[(b) within the usual scope of practice of the physician assistant's supervising
189	physician; and]
190	[(c) provided under the supervision of a supervising physician and in accordance with a
191	delegation of services agreement.]
192	(b) A physician assistant shall consult, collaborate with, and refer to appropriate
193	members of the health care team:
194	(i) as indicated by the patient's condition;
195	(ii) based on the physician assistant's education, experience, and competencies; and
196	(iii) the applicable standard of care.
197	(c) The degree of collaboration under Subsection (1)(b) shall be determined at the
198	physician assistant's practice, including decisions made by the physician assistant's:
199	(i) employer;
200	(ii) group;
201	(iii) hospital service; or
202	(iv) health care facility credentialing and privileging system.
203	(d) The services provided by a physician assistant includes, but is not limited to:
204	(i) obtaining a comprehensive health history;
205	(ii) performing a physical examination;
206	(iii) evaluating, diagnosing, managing, and providing medical treatment;
207	(iv) ordering, performing, and interpreting diagnostic studies and therapeutic
208	procedures;
209	(v) educating a patient on health promotion and disease prevention;
210	(vi) providing a consultation upon request; and
211	(vii) writing medical orders.
212	(e) A physician assistant may, within the physician assistant's scope of practice:
213	(i) provide a service in any health care facility or program including:

214	(A) a hospital;
215	(B) a nursing care facility;
216	(C) an assisted living facility; and
217	(D) hospice;
218	(ii) obtain informed consent;
219	(iii) supervise, delegate, and assign therapeutic and diagnostic measures;
220	(iv) certify the health or disability of a patient for any local, state, or federal program;
221	<u>and</u>
222	(v) authenticate through a signature, certification, stamp, verification, affidavit, or
223	endorsement any document that may be authenticated by a physician.
224	(f) A physician assistant is responsible for the care that the physician assistant
225	provides.
226	(2) (a) A physician assistant[, in accordance with a delegation of services agreement,]
227	may prescribe or administer an appropriate controlled substance if[: (a)] the physician assistant
228	holds a Utah controlled substance license and a DEA registration[; and].
229	[(b) the prescription or administration of the controlled substance is within the
230	prescriptive practice of the supervising physician and also within the delegated prescribing
231	stated in the delegation of services agreement.]
232	(b) A physician assistant may prescribe, dispense, order, administer, and procure a drug
233	or medical device.
234	(c) A physician assistant may plan and initiate a therapeutic regimen that may include
235	ordering and prescribing:
236	(i) non-pharmacological interventions, including durable medical equipment, nutrition,
237	blood, and blood products; and
238	(ii) diagnostic support services, including home health care, hospice, physical therapy,
239	and occupational therapy.
240	(3) A physician assistant with less than 2,000 hours of post-graduate clinical practice
241	experience shall practice under written policies and procedures established at a practice level
242	that describe:
243	(a) how collaboration will occur under Subsection (1); and
244	(b) methods for evaluating the physician assistant's competency, knowledge, and skills.

245	(4) Notwithstanding any other provision of state law, a physician assistant may provide
246	mental health care and mental health therapy and treatment in a non-psychiatric practice setting
247	if the services are consistent with:
248	(a) customary and accepted practices in similar practice settings; and
249	(b) applicable standards of care.
250	[(3)] (5) A physician assistant shall, while practicing as a physician assistant, wear an
251	identification badge showing the physician assistant's license classification as a physician
252	assistant.
253	[ <del>(4)</del> ] <u>(6)</u> A physician assistant may not:
254	[(a) independently charge or bill a patient, or others on behalf of the patient, for
255	services rendered;]
256	[(b)] (a) identify himself or herself to any person in connection with activities allowed
257	under this chapter other than as a physician assistant; or
258	[(c)] (b) use the title ["doctor"] "doctor of osteopathic medicine," "medical doctor," or
259	"physician," or by any knowing act or omission lead or permit anyone to believe the physician
260	assistant is a physician.
261	Section 7. Section <b>58-70a-502</b> is amended to read:
262	58-70a-502. Unlawful conduct.
263	["Unlawful conduct" includes engaging in practice as a licensed physician assistant
264	while not under the supervision of a supervising physician or substitute supervising physician.]
265	Reserved.
266	Section 8. Section <b>58-70a-503</b> is amended to read:
267	58-70a-503. Unprofessional conduct.
268	(1) "Unprofessional conduct" includes:
269	(a) violation of a patient confidence to any person who does not have a legal right and a
270	professional need to know the information concerning the patient;
271	(b) knowingly prescribing, selling, giving away, or directly or indirectly administering,
272	or offering to prescribe, sell, furnish, give away, or administer any prescription drug except for
273	a legitimate medical purpose upon a proper diagnosis indicating use of that drug in the amounts
274	prescribed or provided;
275	(c) prescribing prescription drugs for oneself or administering prescription drugs to

276 oneself, except those that have been legally prescribed for the physician assistant by a licensed practitioner and that are used in accordance with the prescription order for the condition 277 278 diagnosed; 279 [(d) failure to maintain at the practice site a delegation of services agreement that 280 accurately reflects current practices; 281 (e) failure to make the delegation of services agreement available to the division for 282 review upon request;] 283 I(f) in a practice that has physician assistant ownership interests, failure to allow the 284 supervising physician the independent final decision making authority on patient treatment 285 decisions, as set forth in the delegation of services agreement or as defined by rule; 286 [<del>(g)</del>] (d) violating the dispensing requirements of Chapter 17b, Part 8, Dispensing 287 Medical Practitioner and Dispensing Medical Practitioner Clinic Pharmacy, if applicable; [or] 288 and 289 [(h)] (e) falsely making an entry in, or altering, a medical record with the intent to 290 conceal: 291 (i) a wrongful or negligent act or omission of an individual licensed under this chapter 292 or an individual under the direction or control of an individual licensed under this chapter; or 293 (ii) conduct described in Subsections (1)(a) through [(g)] (d) or Subsection 294 58-1-501(1). 295 (2) (a) "Unprofessional conduct" does not include, in accordance with Title 26, Chapter 296 61a, Utah Medical Cannabis Act, when registered as a qualified medical provider, as that term 297 is defined in Section 26-61a-102, recommending the use of medical cannabis. 298 [(3)] (b) Notwithstanding Subsection (2)(a), the division, in consultation with the board 299 and in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, shall

define unprofessional conduct for a physician assistant described in Subsection (2)(a).

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