

# SENATE BILL REPORT

## HB 1917

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As Passed Senate, February 28, 2024

**Title:** An act relating to the physician assistant compact.

**Brief Description:** Adopting the physician assistant compact.

**Sponsors:** Representatives Leavitt, Ybarra, Ryu, Volz, Schmidt, Christian, Slatter, Bateman, Chambers, Reeves, Reed, Graham, Simmons, Jacobsen, Timmons, Macri, Gregerson, Caldier, Tharinger, Nance, Riccelli, Harris and Shavers.

**Brief History:** Passed House: 1/29/24, 96-0.

**Committee Activity:** Health & Long Term Care: 2/15/24, 2/16/24 [DP].

**Floor Activity:** Passed Senate: 2/28/24, 49-0.

### Brief Summary of Bill

- Enacts the Physician Assistant Licensure Compact (Compact).
- Exempts information distributed to the Washington Medical Commission through the Compact from the Public Records Act.

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## SENATE COMMITTEE ON HEALTH & LONG TERM CARE

**Majority Report:** Do pass.

Signed by Senators Cleveland, Chair; Robinson, Vice Chair; Muzzall, Assistant Ranking Member; Conway, Dhingra, Holy, Padden, Randall and Van De Wege.

**Staff:** Kevin Black (786-7747)

**Background:** Physician Assistants. A physician assistant (PA) is a person licensed by the Washington Medical Commission to practice medicine in Washington according to a practice agreement with one or more supervisory physicians. A PA must be academically and clinically prepared to provide health care services, and prepared to perform diagnostic,

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therapeutic, preventative, and health maintenance services.

PAs must complete an accredited PA training program and successfully pass an examination approved by the Washington Medical Commission. A PA's practice must be limited to both the terms of their practice agreement and to the performance of services for which they have been trained.

Physician Assistant Licensure Compact. The PA Licensure Compact (Compact) is an agreement between states facilitating the practice of PAs across state lines among states participating in the Compact. A state becomes a member of the Compact by enacting legislation allowing a remote state PA to apply for a compact privilege to practice in the enacting state, either in person or by telemedicine, upon payment of a compact privilege fee and verification of other requirements. The Compact was created through an initiative started in 2019 by the American Academy of Physician Associates (AAPA), the Federation of State Medical Boards, and the National Commission on Certification of Physician Assistants, with technical assistance provided by The Council on State Governments. The Compact was finalized in 2023, and according to AAPA it has been enacted in Delaware, Utah, and Wisconsin, with 2024 Compact bills filed in Colorado, Maine, Michigan, Minnesota, Nebraska, New Hampshire, New York, Ohio, Oklahoma, Rhode Island, Tennessee, Vermont, Virginia, and Washington. The Compact is activated when seven states enact the Compact, after which AAPA reports it may take up to 24 months for the Compact to become fully operational.

**Summary of Bill:** The Compact is enacted in Washington State.

State Requirements. Washington must grant a compact privilege to a licensed PA in a remote state which participates in the Compact. Washington must notify the PA Licensure Compact Commission (Commission) of any adverse action taken against the license of a PA or a PA license applicant, or of the existence of significant investigative information. Washington agrees to participate in the Commission's data system, share licensure data related to PAs and PA license applicants, and abide by the rules of the Commission. Washington must maintain its criminal background check and disciplinary systems related to PAs and continue to require PAs to pass a recognized national exam for licensure. Washington agrees to enforce and implement the Compact.

Physician Assistant Requirements to Exercise a Compact Privilege. To exercise compact privileges a PA must, among other administrative requirements:

- be licensed in good standing in their home state;
- hold a current certification from the National Commission on Certification of PAs;
- meet any jurisprudence requirement of the remote state where the PA is seeking a compact privilege;
- have no felony or misdemeanor convictions; and
- have no revocation or suspension of a controlled substance license by the Drug Enforcement Administration.

The PA must agree to report any adverse actions taken against them by nonparticipating states to the Commission. If the PA has previously had a limitation or restriction on their home state license or compact privilege due to an adverse action, at least two years must have elapsed since the restriction or limitation was lifted before the PA may exercise a compact privilege. The PA's home licensing state may exclusively impose adverse actions against the PA's license; however, the remote state may take adverse action against the PA's compact privilege and may conduct investigations and issue subpoenas for this purpose. A subpoena may not be used to gather information about a PA's conduct in another state which is legal in that state. The home state may discipline a PA for conduct in a remote state and must give the same priority and effect to reported conduct in a remote state as it would if the conduct had occurred in the home state, applying its own state laws to determine appropriate action.

The Physician Assistant Licensure Compact Commission. The Commission is a joint government agency established by member states. Each participating state must have one delegate selected by the participating state's licensing board, who shall have one vote and participate in the business and affairs of the Commission. The Commission must meet at least once a year, and may establish a code of ethics, bylaws, rules, and fees. Meetings of the Commission are open to the public, but may be closed to receive legal advice or to discuss matters of high sensitivity or legal consequence. The Commission may collect an annual assessment from participating states to cover the cost of operations and activities of the Commission and its staff. The Commission must select seven voting members to form an executive committee with two ex officio members. Members of the Commission must be immune from suit and liability, and defended and indemnified by the Commission. A majority vote of the Commission may expel a state which defaults on its Compact obligations.

Public Disclosure. Information distributed to the Washington Medical Commission by the Compact is exempt from disclosure under the Public Records Act. This does not include documents created by the Washington Medical Commission using this information.

**Appropriation:** None.

**Fiscal Note:** Available.

**Creates Committee/Commission/Task Force that includes Legislative members:** No.

**Effective Date:** Ninety days after adjournment of session in which bill is passed.

**Staff Summary of Public Testimony:** PRO: PAs started out as Navy corpsmen, and the military has led the way in training PAs. Allowing military members and their spouses to transfer their licenses is very important. The Compact will help people get back to work when they move states and to practice at the top of their license. The Compact will expand

access to care and help the workforce generally.

OTHER: The Washington Medical Commission regulates 5000 PAs. The privilege to practice model has already been established successfully in Washington with the physical therapy board. The disciplinary system in the Compact is similar to the Uniform Disciplinary Act. Liberalization of practice rules has not led to any decrease in safety. The Compact ensures that all of Washington's rules for practice remain respected.

**Persons Testifying:** PRO: Tammie Perreault, Department of Defense; Anthony Varela, Veteran Legislative Coalition; Chelsea Hager, Washington Academy of Physician Assistants.

OTHER: Isabel Eliassen, The Council of State Governments; Micah Matthews, Washington Medical Commission.

**Persons Signed In To Testify But Not Testifying:** No one.