

MEMORANDUM

DATE	August 9, 2024
TO	Physician Assistant Board (Board)
FROM	Jasmine Dhillon, Legislative and Regulatory Specialist
SUBJECT	Agenda Item 14. Legislative Update

A. **AB 2194 (Patterson) Physician assistants: supervision: doctors of podiatric medicine.**

Status: This bill is dead as of July 2, 2024.

Summary: Existing law, the Physician Assistant Practice Act, establishes the Physician Assistant Board for the licensure and regulation of physician assistants. Existing law authorizes physician assistants to perform prescribed medical services that are rendered pursuant to a practice agreement and under the supervision of a licensed physician and surgeon. A violation of that supervision provision is a crime. Existing law, the Medical Practice Act, provides for the certification and regulation of doctors of podiatric medicine by the Podiatric Medical Board of California, which is within the Department of Consumer Affairs. Existing law authorizes physicians and surgeons and doctors of podiatric medicine to establish a professional partnership that includes both physicians and surgeons and doctors of podiatric medicine if specified conditions are satisfied. Existing law authorizes a physician assistant performing medical services under the supervision of a physician and surgeon to assist a doctor of podiatric medicine who is a partner, shareholder, or employee in the same medical group as the supervising physician and surgeon. Existing law requires a physician assistant who assists a doctor of podiatric medicine in this manner to do so only according to patient-specific orders from a supervising physician and surgeon and limits the physician assistant to performing those duties included within the scope of practice of a doctor of podiatric medicine. Existing law requires a supervising physician and surgeon to be available to the physician assistant for consultation when assistance is rendered.

This bill would revise those physician assistant supervision provisions to authorize a physician assistant performing medical services under the supervision of a physician and surgeon to assist a doctor of podiatric medicine who is on the staff of the same organized health care system or who is a partner, shareholder, or employee in the same partnership, group, or professional corporation as the supervising physician

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and surgeon, pursuant to a practice agreement. The bill would delete both the restriction requiring that a physician assistant who assists a doctor of podiatric medicine do so only according to patient-specific orders from a supervising physician and surgeon and the requirement that a supervising physician and surgeon be available to the physician assistant for consultation when assistance is rendered to a doctor of podiatric medicine.

Fiscal Impact: The Board would need to provide an update of the supervision requirements on the Board's website for licensees. This is something that can be done by staff and is supported by the Board's current pro rata costs to DCA.

Board Position: At its May 20, 2024 meeting, the Board maintained its oppose position.

B. **[AB 2270 \(Maienschein\) Healing arts: continuing education: menopausal mental or physical health.](#)**

Status: This bill was introduced on February 8, 2024 and is located in the Senate.

Summary: The Medical Practice Act establishes the Medical Board of California and sets forth its powers and duties relating to the licensure and regulation of physicians and surgeons, including osteopathic physicians and surgeons. The Nursing Practice Act establishes the Board of Registered Nursing and sets forth its powers and duties relating to the licensure and regulation of the practice of nursing. The Psychology Licensing Law establishes the Board of Psychology and sets forth its powers and duties relating to the licensure and regulation of psychologists. The Physician Assistant Practice Act establishes the Physician Assistant Board and sets forth its powers and duties relating to the licensure and regulation of physician assistants. The Licensed Marriage and Family Therapist Act, the Clinical Social Worker Practice Act, the Licensed Professional Clinical Counselor Act, and the Educational Psychologist Practice Act provides for the licensure and regulation of the practices of marriage and family therapy, clinical social work, professional clinical counseling, and education psychology, respectively, by the Board of Behavioral Sciences. Current law establishes continuing education requirements for all of these various healing arts practitioners. This bill would require the above-specified boards, in determining their continuing education requirements, to consider including a course in menopausal mental or physical health.

Fiscal Impact: Staff does not anticipate any fiscal impact.

Board Position: At its May 20, 2024 meeting, the Board took an oppose position.

C. **[AB 2442 \(Zbur\) Healing arts: expedited licensure process: gender-affirming health care and gender-affirming mental health care.](#)**

Status: This bill was introduced on February 13, 2024 and is located in the Senate.

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Summary: Current law requires the Medical Board of California, the Osteopathic Medical Board of California, the Board of Registered Nursing, and the Physician Assistant Board to expedite the licensure process for an applicant who demonstrates that they intend to provide abortions within the scope of practice of their license, and specifies the manner in which the applicant is required to demonstrate their intent. This bill would also require those boards to expedite the licensure process for an applicant who demonstrates that they intend to provide gender-affirming health care and gender-affirming mental health care, as defined, within the scope of practice of their license, and would specify the manner in which the applicant would be required to demonstrate their intent. The bill would repeal its provisions on January 1, 2029.

Fiscal Impact: This bill would require staff to update the Board's licensing process to ensure applicants who meet the gender-affirming health care and gender-affirming mental health care criteria can get their license application expedited. This would require the license application form to be updated for applicants to demonstrate their intent. Staff projects there will not be an increase in licensing workload related to the new provisions of this bill.

Board Position: At its May 20, 2024 meeting, the Board took an oppose position.

D. **[AB 2581 \(Maienschein\) Healing arts: continuing education: maternal mental health.](#)**

Status: This bill was introduced on February 14, 2024 and is located in the Senate.

Summary: The Nursing Practice Act establishes the Board of Registered Nursing and sets forth its powers and duties relating to the licensure and regulation of the practice of nursing. The Psychology Licensing Law establishes the Board of Psychology and sets forth its powers and duties relating to the licensure and regulation of psychologists. The Physician Assistant Practice Act establishes the Physician Assistant Board and sets forth its powers and duties relating to the licensure and regulation of physician assistants. The Licensed Marriage and Family Therapist Act, the Clinical Social Worker Practice Act, the Licensed Professional Clinical Counselor Act, and the Educational Psychologist Practice Act, provides for the licensure and regulation of the practices of marriage and family therapy, clinical social work, professional clinical counseling, and education psychology, respectively, by the Board of Behavioral Sciences. This bill would require the above-specified boards, in determining their continuing education requirements, to consider including a course in maternal mental health.

Fiscal Impact: Staff does not anticipate any fiscal impact.

Board Position: At its May 20, 2024 meeting, the Board took an oppose position.

E. **[AB 2862 \(Gibson\) Department of Consumer Affairs: African American applicants.](#)**

Status: This bill is dead as of July 2, 2024.

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Summary: Existing law establishes the Department of Consumer Affairs, which is composed of specified boards that license and regulate various professions.

This bill would require those boards to prioritize African American applicants seeking licenses under these provisions, especially applicants who are descended from a person enslaved in the United States. The bill would repeal those provisions on January 1, 2029.

Fiscal Impact: This bill would require staff to update the Board's licensing process to ensure applicants who meet the expedite criteria can get their license application expedited. This would require the license application form to be updated for applicants to demonstrate they qualify. Staff projects there will not be an increase in licensing workload related to the new provisions of this bill.

Board Position: At its May 20, 2024 meeting, the Board took an oppose position.

F. **[AB-3119](#) (Low) Physicians and surgeons, nurse practitioners, and physician assistants: continuing medical education: infection-associated chronic conditions.**

Status: This bill was introduced on February 16, 2024 and amended on June 10, 2024. This bill is located in the Senate.

Summary: The Physician Assistant Practice Act establishes the Physician Assistant Board to license and regulate physician assistants and authorizes the Physician Assistant Board to require a licensed physician assistant to complete continuing education as a condition of license renewal. This bill would require the Medical Board of California, the Osteopathic Medical Board of California, the Board of Registered Nursing, and the Physician Assistant Board to consider including in their continuing education requirements for the licensees specified above a course in infection-associated chronic conditions, including post-COVID conditions.

Fiscal Impact: Staff does not anticipate any fiscal impact.

G. **[AB 3127](#) (McKinnor) Reporting of crimes: mandated reporters.**

Status: This bill was introduced on February 16, 2024 and is located in the Senate.

Summary: This bill would remove the requirement that a health practitioner make a report to law enforcement when they suspect a patient has suffered physical injury caused by assaultive or abusive conduct. The bill would instead require that a health practitioner make a report when the injury is life threatening or results in death, as specified, or is the result of child abuse or elder or dependent adult abuse. The bill would require the health practitioner to additionally make a report when a person is seeking care for injuries related to domestic, sexual, or any nonaccidental violent injury if the patient requests a report be sent, as specified. This bill contains other related provisions and other existing laws.

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Fiscal Impact: The Board would need to provide an update of mandated reporting information included on the Board's website for licensees. This is something that can be done by staff and is supported by the Board's current pro rata costs to DCA.

Board Position: At its May 20, 2024 meeting, the Board took an oppose position.

H. **[SB-639](#) (Limón) Medical professionals: course requirements.**

Status: This bill was introduced on February 16, 2024 and amended on June 26, 2024. This bill is located in the Assembly Appropriations Committee.

Summary: Existing law, the Physician Assistant Practice Act, establishes the Physician Assistant Board for the licensure and regulation of physician assistants. Existing law authorizes the board to require a licensee to complete specified continuing education coursework as a condition of license renewal.

This bill would require a physician assistant who provides primary care to a patient population of which over 25% are 65 years of age or older to complete at least 20% of all mandatory continuing education hours in a course in the field of geriatric medicine, the special care needs of patients with dementia, or the care of older patients.

Fiscal Impact: Staff does not anticipate any fiscal impact.

I. **[SB 1041](#) (Portantino) Physician assistants: licensure: Armenian medical graduate physician assistants.**

Status: This bill is considered dead as of May 16, 2024.

Summary: This bill would establish the Armenian Medical Graduate Physician Assistant Training Program, to be conducted at an appropriate educational institution or institutions. The bill would require the board to establish a Training Program Advisory Task Force, which the bill would require to develop and recommend curriculum for a training program. The bill would make an Armenian medical graduate who is either a citizen or permanent resident of the United States and who has satisfactorily completed the training program eligible for licensure as a physician assistant if the person has also successfully completed a certain written examination. The bill would require that funding necessary for the implementation of the program to be secured from nonprofit philanthropic entities, as specified.

Fiscal Impact: This bill would require staff to update the Board's licensing process to ensure applicants who meet the training program requirements are licensed. This would require the license application form to be updated for applicants to apply for the training program. This bill would also require the Board to establish a Training Program Advisory Task Force. However, until funding is secured from nonprofit philanthropic entities, the Board will not be able to establish a Training Program Advisory Task Force to implement the program. Therefore, it is difficult to determine

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the fiscal impact, if any, the Board can anticipate.

Board Position: At its May 20, 2024 meeting, the Board maintained its oppose position.

J. **SB 1067 (Smallwood-Cuevas) Healing arts: expedited licensure process: medically underserved area or population.**

Status: This bill was introduced on February 12, 2024 and is located in the Assembly.

Summary: Current law establishes various boards within the Department of Consumer Affairs to license and regulate various health professionals. Current law requires specified boards to expedite the licensure process of an applicant who can demonstrate that they intend to provide abortions within their scope of practice and specifies the documentation an applicant is required to provide to demonstrate their intent. This bill would require each healing arts board, as defined, to develop a process to expedite the licensure process by giving priority review status to the application of an applicant for a license who demonstrates that they intend to practice in a medically underserved area or serve a medically underserved population, as defined.

Fiscal Impact: This bill would require staff to update the Board's licensing process to ensure applicants who meet the medically underserved area or serving a medically underserved population criteria can get their license application expedited. This would require the license application form to be updated for applicants to demonstrate their intent. Staff projects there will not be an increase in licensing workload related to the new provisions of this bill.

Board Position: At its May 20, 2024 meeting, the Board took an oppose position.

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