

HB 2749 -- COLLABORATIVE PRACTICE ARRANGEMENTS

SPONSOR: Davidson

Currently, a physician can enter into a collaborative practice arrangement with a physician assistant. The physician is responsible for providing a written collaborative practice arrangement with specific criteria. Within 30 days of any change to the arrangement and on each renewal of the arrangement, the State Board of Registration for the Healing Arts requires every physician to identify whether the physician is engaged in any collaborative practice arrangement, including collaborative practice arrangements delegating the authority to prescribe controlled substances, and also report to the Board the name of each physician assistant with whom the physician has entered into such arrangement.

This bill allows a licensed hospital to perform the administrative duties associated with any collaborative practice arrangement between a physician or physicians and a physician assistant or physician assistants for services delivered in that hospital as long as the hospital has identified in the collaborative practice arrangement one or more physicians affiliated with the hospital who will serve as the collaborating physician or physicians and established practice parameters for the physician assistant or physician assistants listed in the collaborative practice arrangement. A single collaborative practice arrangement can be between multiple physicians and physician assistants if a hospital has agreed to perform the administrative duties associated with the collaborative practice arrangement.

If a hospital is performing the administrative duties associated with a collaborative practice arrangement, the hospital, rather than the physician, must report to the Board the information required at the time of any change to the arrangement and on each renewal of the arrangement.

This bill is similar to HB 1567 (2025).