

IN THE HOUSE OF REPRESENTATIVES

HOUSE BILL NO. 77

BY HEALTH AND WELFARE COMMITTEE

AN ACT

1 RELATING TO PHYSICIANS AND PHYSICIAN ASSISTANTS; AMENDING SECTION 54-1867,  
2 IDAHO CODE, TO PROVIDE FOR ASSISTANT PHYSICIAN LIMITED LICENSURE AND  
3 TO MAKE A TECHNICAL CORRECTION; AMENDING CHAPTER 18, TITLE 54, IDAHO  
4 CODE, BY THE ADDITION OF A NEW SECTION 54-1868, IDAHO CODE, TO PROVIDE  
5 FOR THE GENERAL PRACTICE LICENSURE OF CERTAIN ASSISTANT PHYSICIANS; AND  
6 DECLARING AN EMERGENCY AND PROVIDING AN EFFECTIVE DATE.  
7

8 Be It Enacted by the Legislature of the State of Idaho:

9 SECTION 1. That Section 54-1867, Idaho Code, be, and the same is hereby  
10 amended to read as follows:

11 54-1867. LIMITED LICENSE FOR ~~BRIDGE YEAR~~ ASSISTANT PHYSICIANS. (1) As  
12 used in this section and section 54-1868, Idaho Code:

13 (a) "Assistant physician" means a person who:

14 (i) Is within the first three (3) years of graduation from a med-  
15 ical school accredited or provisionally accredited by an entity  
16 recognized by the board; and

17 (ii) Is a United States citizen or attended medical school in the  
18 United States.

19 ~~(a) (b) "Board" means the state board of medicine.~~

20 ~~(b) "Bridge year physician" means a person who:~~

21 ~~(i) Is within the first year of graduation from a medical school~~  
22 ~~accredited or provisionally accredited by an entity recognized by~~  
23 ~~the board;~~

24 ~~(ii) Is a United States citizen or attended medical school in the~~  
25 ~~United States; and~~

26 ~~(iii) Applied to, but was not accepted into, an accredited medical~~  
27 ~~residency training program.~~

28 (2) The board shall establish a ~~one (1) three (3) year, nonrenewable~~  
29 renewable limited license under which ~~bridge year~~ assistant physicians may  
30 practice medicine under terms, conditions, and a scope of practice deter-  
31 mined by the board. If there is a limit to the number of limited licenses that  
32 may be issued, priority shall be granted to ~~bridge year~~ assistant physicians  
33 who live in Idaho or who have ~~longstanding~~ long-standing ties to the state of  
34 Idaho, as determined by the board.

35 (3) Persons practicing under a limited license established pursuant to  
36 this section shall:

37 (a) Practice only within the scope of practice determined by the board;

38 (b) Practice under the supervision of a licensed physician or pursuant  
39 to a collaborative practice agreement. The person practicing under a  
40 limited license shall qualify as one (1) of a supervising physician's  
41 permitted advanced practice professionals. The board shall prescribe  
42 supervision requirements for limited licensees, provided that such re-

1        requirements shall be no less stringent than supervision requirements for  
2        physician assistants;

3        (c) Have prescriptive authority as determined by the board; and

4        (d) Be subject to the same professional discipline, civil liability,  
5        and criminal liability as a fully licensed physician.

6        (4) The services provided by a person practicing under a limited li-  
7        cense shall be compensable in accordance with customary medical billing  
8        practices.

9        (5) The board is authorized to:

10       (a) Take such actions as are necessary to implement the provisions of  
11       this section, including the promulgation of any necessary rules;

12       (b) Charge a fee of up to three hundred dollars (\$300) for a limited li-  
13       cense; and

14       (c) Cooperate with the department of health and welfare and other rel-  
15       evant entities, including hospitals and health care clinics, whether  
16       public or private, in establishing a limited license.

17       (6) No later than January 31, 2033, the board shall provide a report to  
18       the senate and house of representatives health and welfare committees on:

19       (a) Requirements for a limited license;

20       (b) The number of limited licenses issued and the number of limited li-  
21       cense holders who were later accepted into a residency program; ~~and~~

22       (c) Whether and how limited licenses have increased the supply of  
23       health care providers in health professional shortage areas-;

24       (d) The number of limited license holders remaining in practice without  
25       attaining full licensure; and

26       (e) The number of assistant physicians who ultimately attained full li-  
27       cence without being accepted into a residency program.

28       SECTION 2. That Chapter 18, Title 54, Idaho Code, be, and the same is  
29       hereby amended by the addition thereto of a NEW SECTION, to be known and des-  
30       ignated as Section 54-1868, Idaho Code, and to read as follows:

31       54-1868. GENERAL PRACTICE LICENSURE FOR ASSISTANT PHYSICIANS. (1)  
32       An assistant physician with a license in good standing shall be eligible to  
33       become a licensed general practitioner if the assistant physician has com-  
34       pleted:

35       (a) Step 3 of the United States medical licensing examination or the  
36       equivalent of such step of any board-approved medical licensing exami-  
37       nation in three (3) or fewer attempts and within a seven (7) year period  
38       after completing steps 1 and 2 of the United States medical licensing  
39       examination;

40       (b) A total of thirty-six (36) months of cumulative, postgraduate,  
41       hands-on, full-time, active collaborative practice. The thirty-six  
42       (36) month period shall begin on the date the assistant physician en-  
43       tered into a collaborative practice arrangement and began practicing.  
44       Any time the assistant physician was not working within a collaborative  
45       practice arrangement with a collaborating physician shall not count  
46       toward this requirement; and

47       (c) At least fifty (50) hours of continuing medical education every  
48       year during the period of active collaborative practice described in  
49       this section.

1           (2) In order to meet the thirty-six (36) month collaborative practice  
2 requirement of subsection (1)(b) of this section, an assistant physician  
3 shall present a didactic training report every one hundred twenty (120) days  
4 to the collaborating physician during the thirty-six (36) month period.

5           (3) Upon an assistant physician's completion of the requirements of  
6 subsection (1) of this section, the board shall issue to the assistant physi-  
7 cian a license to practice as a licensed general practitioner.

8           (4) Any assistant physician obtaining licensure as a physician under  
9 this section shall be fully licensed as a physician and shall be subject to  
10 all statutes and regulations pertaining to physicians.

11           SECTION 3. An emergency existing therefor, which emergency is hereby  
12 declared to exist, this act shall be in full force and effect on and after  
13 July 1, 2025.