

SENATE No.

The Commonwealth of Massachusetts

PRESENTED BY:

Julian Cyr

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act relative to removing barriers to care for physician assistants.

PETITION OF:

NAME:

Julian Cyr

DISTRICT/ADDRESS:

Cape and Islands

SENATE No.

[Pin Slip]

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE SENATE, NO. 1354 OF 2023-2024.]

The Commonwealth of Massachusetts

**In the One Hundred and Ninety-Fourth General Court
(2025-2026)**

An Act relative to removing barriers to care for physician assistants.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 SECTION 1. Section 7 of chapter 94C of the General Laws, as appearing in the 2022
2 Official Edition, is hereby amended by striking out, in lines 152 - 154, the words “pursuant to
3 guidelines mutually developed and agreed upon by the supervising physician and the physician
4 assistant”.

5 SECTION 2. Said section 7 of chapter 94C, as so appearing, is hereby amended by
6 striking out, in line 156, the words “, the board of registration in medicine”.

7 SECTION 3. Section 51J of Chapter 111, as so appearing, is hereby amended by
8 inserting after the word “practitioner”, in line 4, the following words: - or physician assistant.

9 SECTION 4. Section 9E of chapter 112 of the General Laws, as so appearing, is hereby
10 amended by striking out the first and second paragraphs and inserting in place thereof the
11 following paragraphs:-

12 Notwithstanding any other provisions of law, a physician assistant may perform medical
13 services when such services are within the education, training and experience of the physician
14 assistant and which the physician assistant is competent to perform.

15 Physician assistants, depending upon their level of professional training and experience,
16 may perform medical services of a general nature and may order tests and therapeutics.

17 SECTION 5. Said section 9E of said chapter 112, as so appearing, is hereby further
18 amended striking out the fourth and fifth paragraphs and inserting in place thereof the following
19 paragraphs:-

20 The legal responsibility of the physician assistant shall remain that of the individual
21 physician assistant, employing physician, group of physicians, or healthcare facility as part of the
22 health care team responsible for the care and treatment of the patient.

23 Notwithstanding any provision of law or regulation to the contrary, services provided by
24 a physician assistant consistent with their scope of practice shall be covered by insurers and other
25 payers if the same service is covered if provided by a physician. When appropriate, a physician
26 assistant shall be identified as the provider in the bill and claims process when services have
27 been provided directly by the physician assistant. A physician assistant may bill an insurer or
28 other payer directly and receive direct payment for the delivery of medically necessary services.
29 An insurer or other payer shall not impose a practice, education, or collaboration requirement
30 that is inconsistent with or more restrictive than required by statute or regulation.

31 SECTION 6. Section 9F of said chapter 112 of the General Laws, as so appearing, is
32 hereby amended by inserting after the first paragraph the following paragraph:-

33 The board shall require as a condition of granting or renewing a physician assistant's
34 certificate of registration that a physician assistant shall practice for at least 2,000 hours, within
35 the context of a collaborative agreement, within a hospital or integrated clinical setting where
36 physician assistants and physicians work together to provide patient care. The physician assistant
37 shall submit written evidence of such practice to the board with the application, or upon
38 completion of the required collaborative practice experience. A collaborative agreement is a
39 mutually agreed upon plan for the overall working relationship between the physician assistant
40 and one or more physicians that designates the scope of collaboration necessary to manage the
41 care of patients. The physician assistant and collaborating physician or physicians must have
42 experience in providing care to patients with the same or similar medical problems.

43 SECTION 7. Section 9F of said chapter 112, as so appearing, is hereby amended by
44 striking out, in line 20 - 23, the words “, in consultation with the board of registration in
45 medicine, and consistent with the authority of the board of registration in medicine over the
46 supervising physician and the practice of medicine,”.

47 SECTION 8. The third sentence of the third paragraph section 9I of chapter 112, as so
48 appearing, is hereby amended by striking out, in lines 29 - 30, the words “and the name and
49 address of any supervising physician”.

50 SECTION 9. Said section 9I of said chapter 112, as so appearing, is hereby amended by
51 striking out, in lines 35 – 36, the words “, change of supervising physician”.

52 SECTION 10. Section 12B of said chapter 112, as so appearing, is hereby amended by
53 striking out, in line 4, the words “or supervising”.

54 SECTION 11. The board of registration of physician assistants shall amend its
55 regulations at 263 CMR 5.05 to be consistent with this act.