

# HB0171S01 compared with HB0171

~~{Omitted text}~~ shows text that was in HB0171 but was omitted in HB0171S01

inserted text shows text that was not in HB0171 but was inserted into HB0171S01

**DISCLAIMER:** This document is provided to assist you in your comparison of the two bills. Sometimes this automated comparison will NOT be completely accurate. Therefore, you need to read the actual bills. This automatically generated document could contain inaccuracies caused by: limitations of the compare program; bad input data; or other causes.

1

## Physician Assistant Amendments

2026 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Stephen L. Whyte

Senate Sponsor:

2

3

---

---

### LONG TITLE

4

#### General Description:

5

This bill makes changes to provisions related to physician assistants.

6

#### Highlighted Provisions:

7

This bill:

8

- makes technical changes to provisions related to physician assistants to conform to current

code{ } :

10

- amends provisions related to insurance coverage for primary care related to physician assistants; and

12

- makes technical and conforming changes.

13

#### Money Appropriated in this Bill:

14

None

15

#### Other Special Clauses:

16

None

17

#### Utah Code Sections Affected:

18

AMENDS:

HB0171

## HB0171 compared with HB0171S01

26B-4-301 , as last amended by Laws of Utah 2025, Chapters 50, 340 and 470

31A-22-624 , as last amended by Laws of Utah 2025, Chapter 50

---

---

*Be it enacted by the Legislature of the state of Utah:*

Section 1. Section 26B-4-301 is amended to read:

**26B-4-301. Definitions.**

As used in this part:

- (1) "Bureau" means the Bureau of Emergency Medical Services created in Section 53-2d-102.
- (2) "Committee" means the Primary Care Grant Committee described in Section 26B-1-410.
- (3) "Community based organization":
  - (a) means a private entity; and
  - (b) includes for profit and not for profit entities.
- (4) "Cultural competence" means a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or profession and enables that system, agency, or profession to work effectively in cross-cultural situations.
- (5) "Health literacy" means the degree to which an individual has the capacity to obtain, process, and understand health information and services needed to make appropriate health decisions.
- (6) "Institutional capacity" means the ability of a community based organization to implement public and private contracts.
- (7) "Medically underserved population" means the population of an urban or rural area or a population group that the committee determines has a shortage of primary health care.
- (8) "Pregnancy support services" means services that:
  - (a) encourage childbirth instead of voluntary termination of pregnancy; and
  - (b) assist pregnant women, or women who may become pregnant, to choose childbirth whether they intend to parent or select adoption for the child.
- (9) "Primary care grant" means a grant awarded by the department under Subsection 26B-4-310(1).
- (10)
  - (a) "Primary health care" means:
    - (i) basic and general health care services given when a person seeks assistance to screen for or to prevent illness and disease, or for simple and common illnesses and injuries; and
    - (ii) care given for the management of chronic diseases.

## HB0171 compared with HB0171S01

(b) "Primary health care" includes:

- (i) services of physicians, nurses, [physician's] physician assistants, physical therapists, and dentists licensed to practice in this state under Title 58, Occupations and Professions;
- (ii) diagnostic and radiologic services;
- (iii) preventive health services including perinatal services, well-child services, and other services that seek to prevent injury, disease, or the consequences of injury or disease;
- (iv) emergency medical services;
- (v) preventive dental services; and
- (vi) pharmaceutical services.

Section 2. Section **31A-22-624** is amended to read:

### **31A-22-624. Primary care physician, physician assistant, or physical therapist.**

(1) An accident and health insurance policy that requires an insured to select a primary care provider or physician to receive optimum coverage shall permit an insured to select a participating provider who is:

- (a)
  - (i) an obstetrician;
  - (ii) a gynecologist;
  - (iii) a pediatrician; or
  - (iv) a physician assistant{ [ who ] ~~[works with a physician{ }]~~ :] has trained in a primary care physician's office and completed the physician assistant's collaboration requirement described in Section 58-70a-307; and

~~[(A) providing primary care; or]~~

~~[(B) described in Subsection (1)(a)(i), (ii), or (iii); and]~~

(b) qualified and willing to provide primary care services, as defined by the health care plan, as the insured's provider from whom primary care services are received.

(2) Subject to Subsection (5), an accident and health insurance policy that requires an insured to select a primary care provider or physician to receive optimum coverage may permit an insured to select a participating provider who is a physical therapist to provide physical therapy services.

(3) An accident and health insurance policy shall clearly state in literature explaining the policy the options available to insureds under Subsections (1) and (2).

## HB0171 compared with HB0171S01

(4) An accident and health insurance policy may not impose a higher premium, higher copayment requirement, or any other additional expense on an insured because the insured selected a primary care physician in accordance with this section.

83 (5) Notwithstanding Subsection (2), nothing in this section permits a physical therapist to practice physical therapy outside of the physical therapist's scope of practice under Title 58, Chapter 24b, Physical Therapy Practice Act.

91 Section 3. **Effective date.**

Effective Date.

This bill takes effect on May 6, 2026.

1-28-26 5:09 PM