Representative Justin L. Fawson proposes the following substitute bill:

1	SUICIDE PREVENTION TRAINING AMENDMENTS
2	2018 GENERAL SESSION
3	STATE OF UTAH
4	Chief Sponsor: Justin L. Fawson
5	Senate Sponsor: Daniel W. Thatcher
6	
7	LONG TITLE
8	General Description:
9	This bill amends portions of the Utah Medical Practice Act and the Utah Osteopathic
10	Medical Practice Act.
11	Highlighted Provisions:
12	This bill:
13	requires an individual to complete a course in suicide prevention in order to obtain
14	or renew a license under the Utah Medical Practice Act or the Utah Osteopathic
15	Medical Practice Act; and
16	▶ \hat{H} → [allows] requires ← \hat{H} the division to issue a waiver from the requirements created in
16a	this bill for
17	$\hat{H} \rightarrow [any individual who requests a waiver] certain individuals \leftarrow \hat{H}.$
18	Money Appropriated in this Bill:
19	None
20	Other Special Clauses:
21	This bill provides a special effective date.
22	Utah Code Sections Affected:
23	AMENDS:
24	58-67-302, as last amended by Laws of Utah 2012, Chapters 162 and 225
25	58-67-302.5, as last amended by Laws of Utah 2011, Chapter 214



26	58-67-302.8 (Effective 07/01/18), as enacted by Laws of Utah 2017, Chapter 299
27	58-67-304 (Superseded 07/01/18), as last amended by Laws of Utah 2011, Chapters
28	161 and 214
29	58-67-304 (Effective 07/01/18), as last amended by Laws of Utah 2017, Chapter 299
30	58-68-302, as last amended by Laws of Utah 2012, Chapters 162 and 225
31	58-68-302.5 (Effective 07/01/18), as enacted by Laws of Utah 2017, Chapter 299
32	58-68-304 (Superseded 07/01/18), as last amended by Laws of Utah 2011, Chapters
33	161 and 214
34	58-68-304 (Effective 07/01/18), as last amended by Laws of Utah 2017, Chapter 299
35 36	Be it enacted by the Legislature of the state of Utah:
37	Section 1. Section 58-67-302 is amended to read:
38	58-67-302. Qualifications for licensure.
39	(1) [An] Except as provided in Subsection (2), an applicant for licensure as a physician
40	and surgeon[, except as set forth in Subsection (2),] shall:
41	(a) submit an application in a form prescribed by the division, which may include:
42	(i) submissions by the applicant of information maintained by practitioner data banks,
43	as designated by division rule, with respect to the applicant;
44	(ii) a record of professional liability claims made against the applicant and settlements
45	paid by or on behalf of the applicant; and
46	(iii) authorization to use a record coordination and verification service approved by the
47	division in collaboration with the board;
48	(b) pay a fee determined by the department under Section 63J-1-504;
49	(c) be of good moral character;
50	(d) provide satisfactory documentation of having successfully completed a program of
51	professional education preparing an individual as a physician and surgeon, as evidenced by:
52	(i) having received an earned degree of doctor of medicine from an LCME accredited
53	medical school or college; or
54	(ii) if the applicant graduated from a medical school or college located outside the
55	United States or its territories, submitting a current certification by the Educational
56	Commission for Foreign Medical Graduates or any successor organization approved by the

- 57 division in collaboration with the board;
 - (e) satisfy the division and board that the applicant:
 - (i) has successfully completed 24 months of progressive resident training in a program approved by the ACGME, the Royal College of Physicians and Surgeons, the College of Family Physicians of Canada, or any similar body in the United States or Canada approved by the division in collaboration with the board; or
 - (ii) (A) has successfully completed 12 months of resident training in an ACGME approved program after receiving a degree of doctor of medicine as required under Subsection (1)(d);
 - (B) has been accepted in and is successfully participating in progressive resident training in an ACGME approved program within Utah, in the applicant's second or third year of postgraduate training; and
 - (C) has agreed to surrender to the division the applicant's license as a physician and surgeon without any proceedings under Title 63G, Chapter 4, Administrative Procedures Act, and has agreed the applicant's license as a physician and surgeon will be automatically revoked by the division if the applicant fails to continue in good standing in an ACGME approved progressive resident training program within the state;
 - (f) pass the licensing examination sequence required by division rule made in collaboration with the board;
 - (g) be able to read, write, speak, understand, and be understood in the English language and demonstrate proficiency to the satisfaction of the board if requested by the board;
 - (h) meet with the board and representatives of the division, if requested, for the purpose of evaluating the applicant's qualifications for licensure;
 - (i) designate:
 - (i) a contact person for access to medical records in accordance with the federal Health Insurance Portability and Accountability Act; and
 - (ii) an alternate contact person for access to medical records, in the event the original contact person is unable or unwilling to serve as the contact person for access to medical records; [and]
 - (j) establish a method for notifying patients of the identity and location of the contact person and alternate contact person, if the applicant will practice in a location with no other

88 persons licensed under this chapter[-]; and

- (k) complete a minimum of two hours of training in suicide prevention via a course approved by the division.
- (2) An applicant for licensure as a physician and surgeon by endorsement who is currently licensed to practice medicine in any state other than Utah, a district or territory of the United States, or Canada shall:
- (a) be currently licensed with a full unrestricted license in good standing in any state, district, or territory of the United States, or Canada;
- (b) have been actively engaged in the legal practice of medicine in any state, district, or territory of the United States, or Canada for not less than 6,000 hours during the five years immediately preceding the date of application for licensure in Utah;
- (c) comply with the requirements for licensure under Subsections (1)(a) through (d), (1)(e)(i), and (1)(g) through [(j)] (k);
- (d) have passed the licensing examination sequence required in Subsection (1)(f) or another medical licensing examination sequence in another state, district or territory of the United States, or Canada that the division in collaboration with the board by rulemaking determines is equivalent to its own required examination;
- (e) not have any investigation or action pending against any health care license of the applicant, not have a health care license that was suspended or revoked in any state, district or territory of the United States, or Canada, and not have surrendered a health care license in lieu of a disciplinary action, unless:
- (i) the license was subsequently reinstated as a full unrestricted license in good standing; or
- (ii) the division in collaboration with the board determines to its satisfaction, after full disclosure by the applicant, that:
 - (A) the conduct has been corrected, monitored, and resolved; or
- (B) a mitigating circumstance exists that prevents its resolution, and the division in collaboration with the board is satisfied that, but for the mitigating circumstance, the license would be reinstated;
- (f) submit to a records review, a practice history review, and comprehensive assessments, if requested by the division in collaboration with the board; and

119 (g) produce satisfactory evidence that the applicant meets the requirements of this 120 Subsection (2) to the satisfaction of the division in collaboration with the board. 121 (3) An applicant for licensure by endorsement may engage in the practice of medicine 122 under a temporary license while the applicant's application for licensure is being processed by 123 the division, provided: 124 (a) the applicant submits a complete application required for temporary licensure to the 125 division; 126 (b) the applicant submits a written document to the division from: 127 (i) a health care facility licensed under Title 26, Chapter 21, Health Care Facility 128 Licensing and Inspection Act, stating that the applicant is practicing under the: 129 (A) invitation of the health care facility; and 130 (B) the general supervision of a physician practicing at the facility; or 131 (ii) two individuals licensed under this chapter, whose license is in good standing and 132 who practice in the same clinical location, both stating that: 133 (A) the applicant is practicing under the invitation and general supervision of the 134 individual; and 135 (B) the applicant will practice at the same clinical location as the individual; 136 (c) the applicant submits a signed certification to the division that the applicant meets 137 the requirements of Subsection (2); (d) the applicant does not engage in the practice of medicine until the division has 138 139 issued a temporary license; 140 (e) the temporary license is only issued for and may not be extended or renewed 141 beyond the duration of one year from issuance; and 142 (f) the temporary license expires immediately and prior to the expiration of one year 143 from issuance, upon notification from the division that the applicant's application for licensure 144 by endorsement is denied. 145 (4) The division shall issue a temporary license under Subsection (3) within 15 146 business days after the applicant satisfies the requirements of Subsection (3). 147 (5) The division may not require a post-residency board certification as a requirement 148 for licensure. 149 (6) The division $\hat{H} \rightarrow [may]$ shall $\leftarrow \hat{H}$ issue a waiver from the requirement in 149a Subsection (1)(k) to any

150	individual who $\hat{H} \rightarrow [\frac{\text{requests a waiver}}{\text{certifies that the individual has completed suicide}}]$
150a	prevention training that is appropriate to the individual's specialty $\leftarrow \hat{H}$.
151	Section 2. Section 58-67-302.5 is amended to read:
152	58-67-302.5. Licensing of graduates of foreign medical schools.
153	(1) Notwithstanding any other provision of law to the contrary, an individual enrolled
154	in a medical school outside the United States, its territories, the District of Columbia, or
155	Canada is eligible for licensure as a physician and surgeon in this state if the individual has
156	satisfied the following requirements:
157	(a) meets all the requirements of Subsection 58-67-302(1), except for Subsection
158	58-67-302(1)(d);
159	(b) has studied medicine in a medical school located outside the United States which is
160	recognized by an organization approved by the division;
161	(c) has completed all of the formal requirements of the foreign medical school except
162	internship or social service;
163	(d) has attained a passing score on the educational commission for foreign medical
164	graduates examination or other qualifying examinations such as the United States Medical
165	Licensing Exam parts I and II, which are approved by the division or a medical school
166	approved by the division;
167	(e) has satisfactorily completed one calendar year of supervised clinical training under
168	the direction of a United States medical education setting accredited by the liaison committee
169	for graduate medical education and approved by the division;
170	(f) has completed the postgraduate hospital training required by Subsection
171	58-67-302(1)(e)(i); [and]
172	(g) has passed the examination required by the division of all applicants for
173	licensure[-]; and
174	(h) has completed a minimum of two hours of training in suicide prevention via a
175	course approved by the division.
176	(2) Satisfaction of the requirements of Subsection (1) is in lieu of:
177	(a) the completion of any foreign internship or social service requirements; and
178	(b) the certification required by Subsection 58-67-302(1)(d)(ii).
179	(3) Individuals who satisfy the requirements of Subsections (1)(a) through (f) shall be
180	eligible for admission to graduate medical education programs within the state, including

181 internships and residencies, which are accredited by the liaison committee for graduate medical 182 education. 183 (4) A document issued by a medical school located outside the United States shall be 184 considered the equivalent of a degree of doctor of medicine for the purpose of licensure as a 185 physician and surgeon in this state if: 186 (a) the foreign medical school is recognized by an organization approved by the division; 187 188 (b) the document granted by the foreign medical school is issued after the completion 189 of all formal requirements of the medical school except internship or social service; and 190 (c) the foreign medical school certifies that the person to whom the document was 191 issued has satisfactorily completed the requirements of Subsection (1)(c). 192 (5) The provisions for licensure under this section shall be known as the "fifth pathway 193 program." 194 (6) The division $\hat{H} \rightarrow [may]$ shall $\leftarrow \hat{H}$ issue a waiver from the requirement in 194a Subsection (1)(h) to any 195 individual who $\hat{H} \rightarrow [requests \ a \ waiver]$ certifies that the individual has completed suicide prevention training that is appropriate to the individual's specialty $\leftarrow \hat{H}$. 195a 196 Section 3. Section 58-67-302.8 (Effective 07/01/18) is amended to read: 58-67-302.8 (Effective 07/01/18). Restricted licensing of an associate physician. 197 198 (1) An individual may apply for a restricted license as an associate physician if the 199 individual: 200 (a) meets the requirements described in Subsections 58-67-302(1)(a) through (c), 201 (1)(d)(i), and (1)(g) through $[\frac{(i)}{(i)}](k)$; 202 (b) successfully completes Step 1 and Step 2 of the United States Medical Licensing 203 Examination or the equivalent steps of another board-approved medical licensing examination: 204 (i) within three years after the day on which the applicant graduates from a program 205 described in Subsection 58-67-302(1)(d)(i); and 206 (ii) within two years before applying for a restricted license as an associate physician; 207 and 208 (c) is not currently enrolled in and has not completed a residency program. 209 (2) Before a licensed associate physician may engage in the practice of medicine as 210 described in Subsection (3), the licensed associate physician shall: 211 (a) enter into a collaborative practice arrangement described in Section 58-67-807

212	within six months after the associate physician's initial licensure; and
213	(b) receive division approval of the collaborative practice arrangement.
214	(3) An associate physician's scope of practice is limited to primary care services to
215	medically underserved populations or in medically underserved areas within the state.
216	(4) The division $\hat{H} \rightarrow [\underline{may}] \underline{shall} \leftarrow \hat{H} \underline{issue a waiver from the requirement in Subsection}$
217	$58-67-302(1)(k)$ to any individual who \hat{H} → [requests a waiver] certifies that the individual has
217a	completed suicide prevention training that is appropriate to the individual's specialty $\leftarrow \hat{H}$.
218	Section 4. Section 58-67-304 (Superseded 07/01/18) is amended to read:
219	58-67-304 (Superseded 07/01/18). License renewal requirements.
220	(1) As a condition precedent for license renewal, each licensee shall, during each
221	two-year licensure cycle or other cycle defined by division rule:
222	(a) complete qualified continuing professional education requirements in accordance
223	with the number of hours and standards defined by division rule made in collaboration with the
224	board;
225	(b) appoint a contact person for access to medical records and an alternate contact
226	person for access to medical records in accordance with Subsection 58-67-302(1)(i); and
227	(c) if the licensee practices medicine in a location with no other persons licensed under
228	this chapter, provide some method of notice to the licensee's patients of the identity and
229	location of the contact person and alternate contact person for the licensee.
230	(2) If a renewal period is extended or shortened under Section 58-67-303, the
231	continuing education hours required for license renewal under this section are increased or
232	decreased proportionally.
233	(3) An application to renew a license under this chapter shall:
234	(a) require a physician to answer the following question: "Do you perform elective
235	abortions in Utah in a location other than a hospital?"; and
236	(b) immediately following the question, contain the following statement: "For purposes
237	of the immediately preceding question, elective abortion means an abortion other than one of
238	the following: removal of a dead fetus, removal of an ectopic pregnancy, an abortion that is
239	necessary to avert the death of a woman, an abortion that is necessary to avert a serious risk of
240	substantial and irreversible impairment of a major bodily function of a woman, an abortion of a
241	fetus that has a defect that is uniformly diagnosable and uniformly lethal, or an abortion where

the woman is pregnant as a result of rape or incest."

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243	(4) In order to assist the Department of Health in fulfilling its responsibilities relating
244	to the licensing of an abortion clinic, if a physician responds positively to the question
245	described in Subsection (3)(a), the division shall, within 30 days after the day on which it
246	renews the physician's license under this chapter, inform the Department of Health in writing:
247	(a) of the name and business address of the physician; and
248	(b) that the physician responded positively to the question described in Subsection
249	(3)(a).
250	(5) (a) The continuing professional education requirements described in Subsection
251	(1)(a) shall include a minimum of two hours of training in suicide prevention via a course
252	approved by the division.
253	(b) The division $\hat{H} \rightarrow [\underline{may}]$ shall $\leftarrow \hat{H}$ issue a waiver from the requirement in
253a	Subsection (5)(a) to any
254	individual who $\hat{H} \rightarrow [requests a waiver]$ certifies that the individual has completed suicide
254a	prevention training that is appropriate to the individual's specialty $\leftarrow \hat{H}$.
255	Section 5. Section 58-67-304 (Effective 07/01/18) is amended to read:
256	58-67-304 (Effective 07/01/18). License renewal requirements.
257	(1) As a condition precedent for license renewal, each licensee shall, during each
258	two-year licensure cycle or other cycle defined by division rule:
259	(a) complete qualified continuing professional education requirements in accordance
260	with the number of hours and standards defined by division rule made in collaboration with the
261	board;
262	(b) appoint a contact person for access to medical records and an alternate contact
263	person for access to medical records in accordance with Subsection 58-67-302(1)(i);
264	(c) if the licensee practices medicine in a location with no other persons licensed under
265	this chapter, provide some method of notice to the licensee's patients of the identity and
266	location of the contact person and alternate contact person for the licensee; and
267	(d) if the licensee is an associate physician licensed under Section 58-67-302.8,
268	successfully complete the educational methods and programs described in Subsection
269	58-67-807(4).
270	(2) If a renewal period is extended or shortened under Section 58-67-303, the
271	continuing education hours required for license renewal under this section are increased or
272	decreased proportionally.
273	(3) An application to renew a license under this chapter shall:

274	(a) require a physician to answer the following question: "Do you perform elective
275	abortions in Utah in a location other than a hospital?"; and
276	(b) immediately following the question, contain the following statement: "For purposes
277	of the immediately preceding question, elective abortion means an abortion other than one of
278	the following: removal of a dead fetus, removal of an ectopic pregnancy, an abortion that is
279	necessary to avert the death of a woman, an abortion that is necessary to avert a serious risk of
280	substantial and irreversible impairment of a major bodily function of a woman, an abortion of a
281	fetus that has a defect that is uniformly diagnosable and uniformly lethal, or an abortion where
282	the woman is pregnant as a result of rape or incest."
283	(4) In order to assist the Department of Health in fulfilling its responsibilities relating
284	to the licensing of an abortion clinic, if a physician responds positively to the question
285	described in Subsection (3)(a), the division shall, within 30 days after the day on which it
286	renews the physician's license under this chapter, inform the Department of Health in writing:
287	(a) of the name and business address of the physician; and
288	(b) that the physician responded positively to the question described in Subsection
289	(3)(a).
290	(5) (a) The continuing professional education requirements described in Subsection
291	(1)(a) shall include a minimum of two hours of training in suicide prevention via a course
292	approved by the division.
293	(b) The division $\hat{H} \rightarrow [\underline{may}]$ shall $\leftarrow \hat{H}$ issue a waiver from the requirement in
293a	Subsection (5)(a) to any
294	individual who $\hat{H} \rightarrow [\frac{\text{requests a waiver}}{\text{requests a waiver}}]$ certifies that the individual has completed suicide
294a	prevention training that is appropriate to the individual's specialty $\leftarrow \hat{H}$.
295	Section 6. Section 58-68-302 is amended to read:
296	58-68-302. Qualifications for licensure.
297	(1) [An] Except as provided in Subsection (2), an applicant for licensure as an
298	osteopathic physician and surgeon[, except as set forth in Subsection (2),] shall:
299	(a) submit an application in a form prescribed by the division, which may include:
300	(i) submissions by the applicant of information maintained by practitioner data banks,
301	as designated by division rule, with respect to the applicant;
302	(ii) a record of professional liability claims made against the applicant and settlements
303	paid by or on behalf of the applicant; and
304	(iii) authorization to use a record coordination and verification service approved by the

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division in collaboration with the board;

- (b) pay a fee determined by the department under Section 63J-1-504;
- (c) be of good moral character;
- (d) provide satisfactory documentation of having successfully completed a program of professional education preparing an individual as an osteopathic physician and surgeon, as evidenced by:
- (i) having received an earned degree of doctor of osteopathic medicine from an AOA approved medical school or college; or
- (ii) submitting a current certification by the Educational Commission for Foreign Medical Graduates or any successor organization approved by the division in collaboration with the board, if the applicant is graduated from an osteopathic medical school or college located outside of the United States or its territories which at the time of the applicant's graduation, met criteria for accreditation by the AOA;
 - (e) satisfy the division and board that the applicant:
- (i) has successfully completed 24 months of progressive resident training in an ACGME or AOA approved program after receiving a degree of doctor of osteopathic medicine required under Subsection (1)(d); or
- (ii) (A) has successfully completed 12 months of resident training in an ACGME or AOA approved program after receiving a degree of doctor of osteopathic medicine as required under Subsection (1)(d);
- (B) has been accepted in and is successfully participating in progressive resident training in an ACGME or AOA approved program within Utah, in the applicant's second or third year of postgraduate training; and
- (C) has agreed to surrender to the division the applicant's license as an osteopathic physician and surgeon without any proceedings under Title 63G, Chapter 4, Administrative Procedures Act, and has agreed the applicant's license as an osteopathic physician and surgeon will be automatically revoked by the division if the applicant fails to continue in good standing in an ACGME or AOA approved progressive resident training program within the state;
- (f) pass the licensing examination sequence required by division rule, as made in collaboration with the board;
 - (g) be able to read, write, speak, understand, and be understood in the English language

and demonstrate proficiency to the satisfaction of the board, if requested by the board;

- (h) meet with the board and representatives of the division, if requested for the purpose of evaluating the applicant's qualifications for licensure;
 - (i) designate:

- (i) a contact person for access to medical records in accordance with the federal Health Insurance Portability and Accountability Act; and
- (ii) an alternate contact person for access to medical records, in the event the original contact person is unable or unwilling to serve as the contact person for access to medical records; [and]
- (j) establish a method for notifying patients of the identity and location of the contact person and alternate contact person, if the applicant will practice in a location with no other persons licensed under this chapter[:]; and
- (k) complete a minimum of two hours of training in suicide prevention via a course approved by the division.
- (2) An applicant for licensure as an osteopathic physician and surgeon by endorsement who is currently licensed to practice osteopathic medicine in any state other than Utah, a district or territory of the United States, or Canada shall:
- (a) be currently licensed with a full unrestricted license in good standing in any state, district or territory of the United States, or Canada;
- (b) have been actively engaged in the legal practice of osteopathic medicine in any state, district or territory of the United States, or Canada for not less than 6,000 hours during the five years immediately preceding the day on which the applicant applied for licensure in Utah;
- (c) comply with the requirements for licensure under Subsections (1)(a) through (d), (1)(e)(i), and (1)(g) through $[\frac{(i)}{2}]$ (k);
- (d) have passed the licensing examination sequence required in Subsection (1)(f) or another medical licensing examination sequence in another state, district or territory of the United States, or Canada that the division in collaboration with the board by rulemaking determines is equivalent to its own required examination;
- (e) not have any investigation or action pending against any health care license of the applicant, not have a health care license that was suspended or revoked in any state, district or

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the requirements of Subsection (2);

367	territory of the United States, or Canada, and not have surrendered a health care license in lieu
368	of a disciplinary action, unless:
369	(i) the license was subsequently reinstated as a full unrestricted license in good
370	standing; or
371	(ii) the division in collaboration with the board determines, after full disclosure by the
372	applicant, that:
373	(A) the conduct has been corrected, monitored, and resolved; or
374	(B) a mitigating circumstance exists that prevents its resolution, and the division in
375	collaboration with the board is satisfied that, but for the mitigating circumstance, the license
376	would be reinstated;
377	(f) submit to a records review, a practice review history, and physical and
378	psychological assessments, if requested by the division in collaboration with the board; and
379	(g) produce evidence that the applicant meets the requirements of this Subsection (2) to
380	the satisfaction of the division in collaboration with the board.
381	(3) An applicant for licensure by endorsement may engage in the practice of medicine
382	under a temporary license while the applicant's application for licensure is being processed by
383	the division, provided:
384	(a) the applicant submits a complete application required for temporary licensure to the
385	division;
386	(b) the applicant submits a written document to the division from:
387	(i) a health care facility licensed under Title 26, Chapter 21, Health Care Facility
388	Licensing and Inspection Act, stating that the applicant is practicing under the:
389	(A) invitation of the health care facility; and
390	(B) the general supervision of a physician practicing at the health care facility; or
391	(ii) two individuals licensed under this chapter, whose license is in good standing and
392	who practice in the same clinical location, both stating that:
393	(A) the applicant is practicing under the invitation and general supervision of the
394	individual; and
395	(B) the applicant will practice at the same clinical location as the individual;

(c) the applicant submits a signed certification to the division that the applicant meets

398	(d) the applicant does not engage in the practice of medicine until the division has
399	issued a temporary license;
400	(e) the temporary license is only issued for and may not be extended or renewed
401	beyond the duration of one year from issuance; and
402	(f) the temporary license expires immediately and prior to the expiration of one year
403	from issuance, upon notification from the division that the applicant's application for licensure
404	by endorsement is denied.
405	(4) The division shall issue a temporary license under Subsection (3) within 15
406	business days after the applicant satisfies the requirements of Subsection (3).
407	(5) The division may not require a post-residency board certification as a requirement
408	for licensure.
409	(6) The division $\hat{H} \rightarrow [\underline{may}]$ shall $\leftarrow \hat{H}$ issue a waiver from the requirement in
109a	Subsection (1)(k) to any
410	individual who $\hat{H} \rightarrow [\frac{\text{requests a waiver}}{\text{certifies that the individual has completed suicide}}]$
10a	prevention training that is appropriate to the individual's specialty $\leftarrow \hat{H}$.
411	Section 7. Section 58-68-302.5 (Effective 07/01/18) is amended to read:
412	58-68-302.5 (Effective 07/01/18). Restricted licensing of an associate physician.
413	(1) An individual may apply for a restricted license as an associate physician if the
414	individual:
415	(a) meets the requirements described in Subsections 58-68-302(1)(a) through (c),
416	$(1)(d)(i)$, and $(1)(g)$ through $[\frac{(i)}{2}]$ $\underline{(k)}$;
417	(b) successfully completes Step 1 and Step 2 of the United States Medical Licensing
418	Examination or the equivalent steps of another board-approved medical licensing examination:
419	(i) within three years after the day on which the applicant graduates from a program
420	described in Subsection 58-68-302(1)(d)(i); and
421	(ii) within two years before applying for a restricted license as an associate physician;
422	and
423	(c) is not currently enrolled in and has not completed a residency program.
424	(2) Before a licensed associate physician may engage in the practice of medicine as
425	described in Subsection (3), the licensed associate physician shall:
426	(a) enter into a collaborative practice arrangement described in Section 58-68-807
427	within six months after the associate physician's initial licensure; and
428	(b) receive division approval of the collaborative practice arrangement

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429	(3) An associate physician's scope of practice is limited to primary care services to
430	medically underserved populations or in medically underserved areas within the state.
431	Section 8. Section 58-68-304 (Superseded 07/01/18) is amended to read:
432	58-68-304 (Superseded 07/01/18). License renewal requirements.
433	(1) As a condition precedent for license renewal, each licensee shall, during each
434	two-year licensure cycle or other cycle defined by division rule:
435	(a) complete qualified continuing professional education requirements in accordance
436	with the number of hours and standards defined by division rule in collaboration with the
437	board;
438	(b) appoint a contact person for access to medical records and an alternate contact
439	person for access to medical records in accordance with Subsection 58-68-302(1)(i); and
440	(c) if the licensee practices osteopathic medicine in a location with no other persons
441	licensed under this chapter, provide some method of notice to the licensee's patients of the
442	identity and location of the contact person and alternate contact person for access to medical
443	records for the licensee in accordance with Subsection 58-68-302(1)(j).
444	(2) If a renewal period is extended or shortened under Section 58-68-303, the
445	continuing education hours required for license renewal under this section are increased or
446	decreased proportionally.
447	(3) An application to renew a license under this chapter shall:
448	(a) require a physician to answer the following question: "Do you perform elective
449	abortions in Utah in a location other than a hospital?"; and
450	(b) immediately following the question, contain the following statement: "For purposes
451	of the immediately preceding question, elective abortion means an abortion other than one of
452	the following: removal of a dead fetus, removal of an ectopic pregnancy, an abortion that is
453	necessary to avert the death of a woman, an abortion that is necessary to avert a serious risk of

described in Subsection (3)(a), the division shall, within 30 days after the day on which it

to the licensing of an abortion clinic, if a physician responds positively to the question

the woman is pregnant as a result of rape or incest."

substantial and irreversible impairment of a major bodily function of a woman, an abortion of a

fetus that has a defect that is uniformly diagnosable and uniformly lethal, or an abortion where

(4) In order to assist the Department of Health in fulfilling its responsibilities relating

460	renews the physician's license under this chapter, inform the Department of Health in writing:
461	(a) of the name and business address of the physician; and
462	(b) that the physician responded positively to the question described in Subsection
463	(3)(a).
464	(5) (a) The continuing professional education requirements described in Subsection
465	(1)(a) shall include a minimum of two hours of training in suicide prevention via a course
466	approved by the division.
467	(b) The division $\hat{H} \rightarrow [\underline{may}]$ shall $\leftarrow \hat{H}$ issue a waiver from the requirement in
67a	Subsection (5)(a) to any
468	individual who $\hat{H} \rightarrow [requests \ a \ waiver]$ certifies that the individual has completed suicide
68a	prevention training that is appropriate to the individual's specialty $\leftarrow \hat{H}$.
469	Section 9. Section 58-68-304 (Effective 07/01/18) is amended to read:
470	58-68-304 (Effective 07/01/18). License renewal requirements.
471	(1) As a condition precedent for license renewal, each licensee shall, during each
472	two-year licensure cycle or other cycle defined by division rule:
473	(a) complete qualified continuing professional education requirements in accordance
474	with the number of hours and standards defined by division rule in collaboration with the
475	board;
476	(b) appoint a contact person for access to medical records and an alternate contact
477	person for access to medical records in accordance with Subsection 58-68-302(1)(i);
478	(c) if the licensee practices osteopathic medicine in a location with no other persons
479	licensed under this chapter, provide some method of notice to the licensee's patients of the
480	identity and location of the contact person and alternate contact person for access to medical
481	records for the licensee in accordance with Subsection 58-68-302(1)(j); and
482	(d) if the licensee is an associate physician licensed under Section 58-68-302.5,
483	successfully complete the educational methods and programs described in Subsection
484	58-68-807(4).
485	(2) If a renewal period is extended or shortened under Section 58-68-303, the
486	continuing education hours required for license renewal under this section are increased or
487	decreased proportionally.
488	(3) An application to renew a license under this chapter shall:
489	(a) require a physician to answer the following question: "Do you perform elective
490	abortions in Utah in a location other than a hospital?": and

491	(b) immediately following the question, contain the following statement: "For purposes
492	of the immediately preceding question, elective abortion means an abortion other than one of
493	the following: removal of a dead fetus, removal of an ectopic pregnancy, an abortion that is
494	necessary to avert the death of a woman, an abortion that is necessary to avert a serious risk of
495	substantial and irreversible impairment of a major bodily function of a woman, an abortion of a
496	fetus that has a defect that is uniformly diagnosable and uniformly lethal, or an abortion where
497	the woman is pregnant as a result of rape or incest."
498	(4) In order to assist the Department of Health in fulfilling its responsibilities relating
499	to the licensing of an abortion clinic, if a physician responds positively to the question
500	described in Subsection (3)(a), the division shall, within 30 days after the day on which it
501	renews the physician's license under this chapter, inform the Department of Health in writing:
502	(a) of the name and business address of the physician; and
503	(b) that the physician responded positively to the question described in Subsection
504	(3)(a).
505	(5) (a) The continuing professional education requirements described in Subsection
506	(1)(a) shall include a minimum of two hours of training in suicide prevention via a course
507	approved by the division.
508	(b) The division $\hat{H} \rightarrow [\underline{may}]$ shall $\leftarrow \hat{H}$ issue a waiver from the requirement in
508a	Subsection (5)(a) to any
509	individual who Ĥ→ [requests a waiver] certifies that the individual has completed suicide
509a	prevention training that is appropriate to the individual's specialty $\leftarrow \hat{H}$.
510	Section 10. Effective date.
511	(1) Except as provided in Subsection (2), this bill takes effect on May 8, 2018.
512	(2) The actions affecting the following sections take effect on July 1, 2018:
513	(a) Section 58-67-302.8 (Effective 07/01/18);
514	(b) Section 58-67-304 (Effective 07/01/18);
515	(c) Section 58-68-302.5 (Effective 07/01/18); and
516	(d) Section 58-68-304 (Effective 07/01/18).