

Representative Justin L. Fawson proposes the following substitute bill:

SUICIDE PREVENTION TRAINING AMENDMENTS

2018 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Justin L. Fawson

Senate Sponsor: Curtis S. Bramble

LONG TITLE

General Description:

This bill amends portions of the Utah Medical Practice Act and the Utah Osteopathic Medical Practice Act.

Highlighted Provisions:

This bill:

- requires an individual to complete a course in suicide prevention in order to obtain or renew a license under the Utah Medical Practice Act or the Utah Osteopathic Medical Practice Act; and

- allows the division to issue a waiver from the requirements created in this bill for certain individuals whose scope of practice does not include prescribing psychotropic drugs.

Money Appropriated in this Bill:

None

Other Special Clauses:

None

Utah Code Sections Affected:

AMENDS:

58-67-302, as last amended by Laws of Utah 2012, Chapters 162 and 225



26 **58-67-302.5**, as last amended by Laws of Utah 2011, Chapter 214
 27 **58-67-302.8 (Effective 07/01/18)**, as enacted by Laws of Utah 2017, Chapter 299
 28 **58-67-304 (Superseded 07/01/18)**, as last amended by Laws of Utah 2011, Chapters
 29 161 and 214
 30 **58-67-304 (Effective 07/01/18)**, as last amended by Laws of Utah 2017, Chapter 299
 31 **58-68-302**, as last amended by Laws of Utah 2012, Chapters 162 and 225
 32 **58-68-302.5 (Effective 07/01/18)**, as enacted by Laws of Utah 2017, Chapter 299
 33 **58-68-304 (Superseded 07/01/18)**, as last amended by Laws of Utah 2011, Chapters
 34 161 and 214
 35 **58-68-304 (Effective 07/01/18)**, as last amended by Laws of Utah 2017, Chapter 299

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

38 Section 1. Section **58-67-302** is amended to read:

39 **58-67-302. Qualifications for licensure.**

40 (1) ~~[An]~~ Except as provided in Subsection (2), an applicant for licensure as a physician
 41 and surgeon~~[-, except as set forth in Subsection (2),]~~ shall:

42 (a) submit an application in a form prescribed by the division, which may include:

43 (i) submissions by the applicant of information maintained by practitioner data banks,
 44 as designated by division rule, with respect to the applicant;

45 (ii) a record of professional liability claims made against the applicant and settlements
 46 paid by or on behalf of the applicant; and

47 (iii) authorization to use a record coordination and verification service approved by the
 48 division in collaboration with the board;

49 (b) pay a fee determined by the department under Section **63J-1-504**;

50 (c) be of good moral character;

51 (d) provide satisfactory documentation of having successfully completed a program of
 52 professional education preparing an individual as a physician and surgeon, as evidenced by:

53 (i) having received an earned degree of doctor of medicine from an LCME accredited
 54 medical school or college; or

55 (ii) if the applicant graduated from a medical school or college located outside the
 56 United States or its territories, submitting a current certification by the Educational

57 Commission for Foreign Medical Graduates or any successor organization approved by the
58 division in collaboration with the board;

59 (e) satisfy the division and board that the applicant:

60 (i) has successfully completed 24 months of progressive resident training in a program
61 approved by the ACGME, the Royal College of Physicians and Surgeons, the College of
62 Family Physicians of Canada, or any similar body in the United States or Canada approved by
63 the division in collaboration with the board; or

64 (ii) (A) has successfully completed 12 months of resident training in an ACGME
65 approved program after receiving a degree of doctor of medicine as required under Subsection
66 (1)(d);

67 (B) has been accepted in and is successfully participating in progressive resident
68 training in an ACGME approved program within Utah, in the applicant's second or third year
69 of postgraduate training; and

70 (C) has agreed to surrender to the division the applicant's license as a physician and
71 surgeon without any proceedings under Title 63G, Chapter 4, Administrative Procedures Act,
72 and has agreed the applicant's license as a physician and surgeon will be automatically revoked
73 by the division if the applicant fails to continue in good standing in an ACGME approved
74 progressive resident training program within the state;

75 (f) pass the licensing examination sequence required by division rule made in
76 collaboration with the board;

77 (g) be able to read, write, speak, understand, and be understood in the English language
78 and demonstrate proficiency to the satisfaction of the board if requested by the board;

79 (h) meet with the board and representatives of the division, if requested, for the
80 purpose of evaluating the applicant's qualifications for licensure;

81 (i) designate:

82 (i) a contact person for access to medical records in accordance with the federal Health
83 Insurance Portability and Accountability Act; and

84 (ii) an alternate contact person for access to medical records, in the event the original
85 contact person is unable or unwilling to serve as the contact person for access to medical
86 records; ~~and~~

87 (j) establish a method for notifying patients of the identity and location of the contact

88 person and alternate contact person, if the applicant will practice in a location with no other
89 persons licensed under this chapter[-]; and

90 (k) complete a minimum of two hours of training in suicide prevention via a course
91 approved by the division.

92 (2) An applicant for licensure as a physician and surgeon by endorsement who is
93 currently licensed to practice medicine in any state other than Utah, a district or territory of the
94 United States, or Canada shall:

95 (a) be currently licensed with a full unrestricted license in good standing in any state,
96 district, or territory of the United States, or Canada;

97 (b) have been actively engaged in the legal practice of medicine in any state, district, or
98 territory of the United States, or Canada for not less than 6,000 hours during the five years
99 immediately preceding the date of application for licensure in Utah;

100 (c) comply with the requirements for licensure under Subsections (1)(a) through (d),
101 (1)(e)(i), and (1)(g) through [(f)] (k);

102 (d) have passed the licensing examination sequence required in Subsection (1)(f) or
103 another medical licensing examination sequence in another state, district or territory of the
104 United States, or Canada that the division in collaboration with the board by rulemaking
105 determines is equivalent to its own required examination;

106 (e) not have any investigation or action pending against any health care license of the
107 applicant, not have a health care license that was suspended or revoked in any state, district or
108 territory of the United States, or Canada, and not have surrendered a health care license in lieu
109 of a disciplinary action, unless:

110 (i) the license was subsequently reinstated as a full unrestricted license in good
111 standing; or

112 (ii) the division in collaboration with the board determines to its satisfaction, after full
113 disclosure by the applicant, that:

114 (A) the conduct has been corrected, monitored, and resolved; or

115 (B) a mitigating circumstance exists that prevents its resolution, and the division in
116 collaboration with the board is satisfied that, but for the mitigating circumstance, the license
117 would be reinstated;

118 (f) submit to a records review, a practice history review, and comprehensive

119 assessments, if requested by the division in collaboration with the board; and

120 (g) produce satisfactory evidence that the applicant meets the requirements of this
121 Subsection (2) to the satisfaction of the division in collaboration with the board.

122 (3) An applicant for licensure by endorsement may engage in the practice of medicine
123 under a temporary license while the applicant's application for licensure is being processed by
124 the division, provided:

125 (a) the applicant submits a complete application required for temporary licensure to the
126 division;

127 (b) the applicant submits a written document to the division from:

128 (i) a health care facility licensed under Title 26, Chapter 21, Health Care Facility
129 Licensing and Inspection Act, stating that the applicant is practicing under the:

130 (A) invitation of the health care facility; and

131 (B) the general supervision of a physician practicing at the facility; or

132 (ii) two individuals licensed under this chapter, whose license is in good standing and
133 who practice in the same clinical location, both stating that:

134 (A) the applicant is practicing under the invitation and general supervision of the
135 individual; and

136 (B) the applicant will practice at the same clinical location as the individual;

137 (c) the applicant submits a signed certification to the division that the applicant meets
138 the requirements of Subsection (2);

139 (d) the applicant does not engage in the practice of medicine until the division has
140 issued a temporary license;

141 (e) the temporary license is only issued for and may not be extended or renewed
142 beyond the duration of one year from issuance; and

143 (f) the temporary license expires immediately and prior to the expiration of one year
144 from issuance, upon notification from the division that the applicant's application for licensure
145 by endorsement is denied.

146 (4) The division shall issue a temporary license under Subsection (3) within 15
147 business days after the applicant satisfies the requirements of Subsection (3).

148 (5) The division may not require a post-residency board certification as a requirement
149 for licensure.

150 (6) The division may issue a waiver from the requirement in Subsection (1)(k) to an
151 applicant if the individual can demonstrate that the scope of practice of the individual does not
152 include prescribing psychotropic drugs, as defined in Subsection 26-18-2.4(3).

153 Section 2. Section **58-67-302.5** is amended to read:

154 **58-67-302.5. Licensing of graduates of foreign medical schools.**

155 (1) Notwithstanding any other provision of law to the contrary, an individual enrolled
156 in a medical school outside the United States, its territories, the District of Columbia, or
157 Canada is eligible for licensure as a physician and surgeon in this state if the individual has
158 satisfied the following requirements:

159 (a) meets all the requirements of Subsection 58-67-302(1), except for Subsection
160 58-67-302(1)(d);

161 (b) has studied medicine in a medical school located outside the United States which is
162 recognized by an organization approved by the division;

163 (c) has completed all of the formal requirements of the foreign medical school except
164 internship or social service;

165 (d) has attained a passing score on the educational commission for foreign medical
166 graduates examination or other qualifying examinations such as the United States Medical
167 Licensing Exam parts I and II, which are approved by the division or a medical school
168 approved by the division;

169 (e) has satisfactorily completed one calendar year of supervised clinical training under
170 the direction of a United States medical education setting accredited by the liaison committee
171 for graduate medical education and approved by the division;

172 (f) has completed the postgraduate hospital training required by Subsection
173 58-67-302(1)(e)(i); ~~and~~

174 (g) has passed the examination required by the division of all applicants for
175 licensure[-]; and

176 (h) has completed a minimum of two hours of training in suicide prevention via a
177 course approved by the division.

178 (2) Satisfaction of the requirements of Subsection (1) is in lieu of:

179 (a) the completion of any foreign internship or social service requirements; and

180 (b) the certification required by Subsection 58-67-302(1)(d)(ii).

181 (3) Individuals who satisfy the requirements of Subsections (1)(a) through (f) shall be
182 eligible for admission to graduate medical education programs within the state, including
183 internships and residencies, which are accredited by the liaison committee for graduate medical
184 education.

185 (4) A document issued by a medical school located outside the United States shall be
186 considered the equivalent of a degree of doctor of medicine for the purpose of licensure as a
187 physician and surgeon in this state if:

188 (a) the foreign medical school is recognized by an organization approved by the
189 division;

190 (b) the document granted by the foreign medical school is issued after the completion
191 of all formal requirements of the medical school except internship or social service; and

192 (c) the foreign medical school certifies that the person to whom the document was
193 issued has satisfactorily completed the requirements of Subsection (1)(c).

194 (5) The provisions for licensure under this section shall be known as the "fifth pathway
195 program."

196 (6) The division may issue a waiver from the requirement in Subsection (1)(h) to an
197 applicant if the individual can demonstrate that the scope of practice of the individual does not
198 include prescribing psychotropic drugs, as defined in Subsection 26-18-2.4(3).

199 Section 3. Section **58-67-302.8 (Effective 07/01/18)** is amended to read:

200 **58-67-302.8 (Effective 07/01/18). Restricted licensing of an associate physician.**

201 (1) An individual may apply for a restricted license as an associate physician if the
202 individual:

203 (a) meets the requirements described in Subsections **58-67-302(1)(a)** through (c),
204 (1)(d)(i), and (1)(g) through ~~(j)~~ (k);

205 (b) successfully completes Step 1 and Step 2 of the United States Medical Licensing
206 Examination or the equivalent steps of another board-approved medical licensing examination:

207 (i) within three years after the day on which the applicant graduates from a program
208 described in Subsection **58-67-302(1)(d)(i)**; and

209 (ii) within two years before applying for a restricted license as an associate physician;
210 and

211 (c) is not currently enrolled in and has not completed a residency program.

212 (2) Before a licensed associate physician may engage in the practice of medicine as
213 described in Subsection (3), the licensed associate physician shall:

214 (a) enter into a collaborative practice arrangement described in Section [58-67-807](#)
215 within six months after the associate physician's initial licensure; and

216 (b) receive division approval of the collaborative practice arrangement.

217 (3) An associate physician's scope of practice is limited to primary care services to
218 medically underserved populations or in medically underserved areas within the state.

219 (4) The division may issue a waiver from the requirement in Subsection
220 [58-67-302\(1\)\(k\)](#) to an applicant if the individual can demonstrate that the scope of practice of
221 the individual does not include prescribing psychotropic drugs, as defined in Subsection
222 [26-18-2.4\(3\)](#).

223 Section 4. Section **58-67-304 (Superseded 07/01/18)** is amended to read:

224 **58-67-304 (Superseded 07/01/18). License renewal requirements.**

225 (1) As a condition precedent for license renewal, each licensee shall, during each
226 two-year licensure cycle or other cycle defined by division rule:

227 (a) complete qualified continuing professional education requirements in accordance
228 with the number of hours and standards defined by division rule made in collaboration with the
229 board;

230 (b) appoint a contact person for access to medical records and an alternate contact
231 person for access to medical records in accordance with Subsection [58-67-302\(1\)\(i\)](#); and

232 (c) if the licensee practices medicine in a location with no other persons licensed under
233 this chapter, provide some method of notice to the licensee's patients of the identity and
234 location of the contact person and alternate contact person for the licensee.

235 (2) If a renewal period is extended or shortened under Section [58-67-303](#), the
236 continuing education hours required for license renewal under this section are increased or
237 decreased proportionally.

238 (3) An application to renew a license under this chapter shall:

239 (a) require a physician to answer the following question: "Do you perform elective
240 abortions in Utah in a location other than a hospital?"; and

241 (b) immediately following the question, contain the following statement: "For purposes
242 of the immediately preceding question, elective abortion means an abortion other than one of

243 the following: removal of a dead fetus, removal of an ectopic pregnancy, an abortion that is
244 necessary to avert the death of a woman, an abortion that is necessary to avert a serious risk of
245 substantial and irreversible impairment of a major bodily function of a woman, an abortion of a
246 fetus that has a defect that is uniformly diagnosable and uniformly lethal, or an abortion where
247 the woman is pregnant as a result of rape or incest."

248 (4) In order to assist the Department of Health in fulfilling its responsibilities relating
249 to the licensing of an abortion clinic, if a physician responds positively to the question
250 described in Subsection (3)(a), the division shall, within 30 days after the day on which it
251 renews the physician's license under this chapter, inform the Department of Health in writing:

252 (a) of the name and business address of the physician; and

253 (b) that the physician responded positively to the question described in Subsection
254 (3)(a).

255 (5) (a) The continuing professional education requirements described in Subsection
256 (1)(a) shall include a minimum of two hours of training in suicide prevention via a course
257 approved by the division.

258 (b) The division may issue a waiver from the requirement in Subsection (5)(a) to an
259 individual if the individual can demonstrate that the scope of practice of the individual does not
260 include prescribing psychotropic drugs, as defined in Subsection 26-18-2.4(3).

261 Section 5. Section **58-67-304 (Effective 07/01/18)** is amended to read:

262 **58-67-304 (Effective 07/01/18). License renewal requirements.**

263 (1) As a condition precedent for license renewal, each licensee shall, during each
264 two-year licensure cycle or other cycle defined by division rule:

265 (a) complete qualified continuing professional education requirements in accordance
266 with the number of hours and standards defined by division rule made in collaboration with the
267 board;

268 (b) appoint a contact person for access to medical records and an alternate contact
269 person for access to medical records in accordance with Subsection 58-67-302(1)(i);

270 (c) if the licensee practices medicine in a location with no other persons licensed under
271 this chapter, provide some method of notice to the licensee's patients of the identity and
272 location of the contact person and alternate contact person for the licensee; and

273 (d) if the licensee is an associate physician licensed under Section 58-67-302.8,

274 successfully complete the educational methods and programs described in Subsection
275 [58-67-807\(4\)](#).

276 (2) If a renewal period is extended or shortened under Section [58-67-303](#), the
277 continuing education hours required for license renewal under this section are increased or
278 decreased proportionally.

279 (3) An application to renew a license under this chapter shall:

280 (a) require a physician to answer the following question: "Do you perform elective
281 abortions in Utah in a location other than a hospital?"; and

282 (b) immediately following the question, contain the following statement: "For purposes
283 of the immediately preceding question, elective abortion means an abortion other than one of
284 the following: removal of a dead fetus, removal of an ectopic pregnancy, an abortion that is
285 necessary to avert the death of a woman, an abortion that is necessary to avert a serious risk of
286 substantial and irreversible impairment of a major bodily function of a woman, an abortion of a
287 fetus that has a defect that is uniformly diagnosable and uniformly lethal, or an abortion where
288 the woman is pregnant as a result of rape or incest."

289 (4) In order to assist the Department of Health in fulfilling its responsibilities relating
290 to the licensing of an abortion clinic, if a physician responds positively to the question
291 described in Subsection (3)(a), the division shall, within 30 days after the day on which it
292 renews the physician's license under this chapter, inform the Department of Health in writing:

293 (a) of the name and business address of the physician; and

294 (b) that the physician responded positively to the question described in Subsection
295 (3)(a).

296 (5) (a) The continuing professional education requirements described in Subsection
297 (1)(a) shall include a minimum of two hours of training in suicide prevention via a course
298 approved by the division.

299 (b) The division may issue a waiver from the requirement in Subsection (5)(a) to an
300 individual if the individual can demonstrate that the scope of practice of the individual does not
301 include prescribing psychotropic drugs, as defined in Subsection [26-18-2.4\(3\)](#).

302 Section 6. Section **58-68-302** is amended to read:

303 **58-68-302. Qualifications for licensure.**

304 (1) ~~Art~~ Except as provided in Subsection (2), an applicant for licensure as an

305 osteopathic physician and surgeon[, except as set forth in Subsection (2),] shall:

306 (a) submit an application in a form prescribed by the division, which may include:

307 (i) submissions by the applicant of information maintained by practitioner data banks,
308 as designated by division rule, with respect to the applicant;

309 (ii) a record of professional liability claims made against the applicant and settlements
310 paid by or on behalf of the applicant; and

311 (iii) authorization to use a record coordination and verification service approved by the
312 division in collaboration with the board;

313 (b) pay a fee determined by the department under Section [63J-1-504](#);

314 (c) be of good moral character;

315 (d) provide satisfactory documentation of having successfully completed a program of
316 professional education preparing an individual as an osteopathic physician and surgeon, as
317 evidenced by:

318 (i) having received an earned degree of doctor of osteopathic medicine from an AOA
319 approved medical school or college; or

320 (ii) submitting a current certification by the Educational Commission for Foreign
321 Medical Graduates or any successor organization approved by the division in collaboration
322 with the board, if the applicant is graduated from an osteopathic medical school or college
323 located outside of the United States or its territories which at the time of the applicant's
324 graduation, met criteria for accreditation by the AOA;

325 (e) satisfy the division and board that the applicant:

326 (i) has successfully completed 24 months of progressive resident training in an
327 ACGME or AOA approved program after receiving a degree of doctor of osteopathic medicine
328 required under Subsection (1)(d); or

329 (ii) (A) has successfully completed 12 months of resident training in an ACGME or
330 AOA approved program after receiving a degree of doctor of osteopathic medicine as required
331 under Subsection (1)(d);

332 (B) has been accepted in and is successfully participating in progressive resident
333 training in an ACGME or AOA approved program within Utah, in the applicant's second or
334 third year of postgraduate training; and

335 (C) has agreed to surrender to the division the applicant's license as an osteopathic

336 physician and surgeon without any proceedings under Title 63G, Chapter 4, Administrative
337 Procedures Act, and has agreed the applicant's license as an osteopathic physician and surgeon
338 will be automatically revoked by the division if the applicant fails to continue in good standing
339 in an ACGME or AOA approved progressive resident training program within the state;

340 (f) pass the licensing examination sequence required by division rule, as made in
341 collaboration with the board;

342 (g) be able to read, write, speak, understand, and be understood in the English language
343 and demonstrate proficiency to the satisfaction of the board, if requested by the board;

344 (h) meet with the board and representatives of the division, if requested for the purpose
345 of evaluating the applicant's qualifications for licensure;

346 (i) designate:

347 (i) a contact person for access to medical records in accordance with the federal Health
348 Insurance Portability and Accountability Act; and

349 (ii) an alternate contact person for access to medical records, in the event the original
350 contact person is unable or unwilling to serve as the contact person for access to medical
351 records; ~~and~~

352 (j) establish a method for notifying patients of the identity and location of the contact
353 person and alternate contact person, if the applicant will practice in a location with no other
354 persons licensed under this chapter[-]; and

355 (k) complete a minimum of two hours of training in suicide prevention via a course
356 approved by the division.

357 (2) An applicant for licensure as an osteopathic physician and surgeon by endorsement
358 who is currently licensed to practice osteopathic medicine in any state other than Utah, a
359 district or territory of the United States, or Canada shall:

360 (a) be currently licensed with a full unrestricted license in good standing in any state,
361 district or territory of the United States, or Canada;

362 (b) have been actively engaged in the legal practice of osteopathic medicine in any
363 state, district or territory of the United States, or Canada for not less than 6,000 hours during
364 the five years immediately preceding the day on which the applicant applied for licensure in
365 Utah;

366 (c) comply with the requirements for licensure under Subsections (1)(a) through (d),

367 (1)(e)(i), and (1)(g) through [(f)] (k);

368 (d) have passed the licensing examination sequence required in Subsection (1)(f) or
369 another medical licensing examination sequence in another state, district or territory of the
370 United States, or Canada that the division in collaboration with the board by rulemaking
371 determines is equivalent to its own required examination;

372 (e) not have any investigation or action pending against any health care license of the
373 applicant, not have a health care license that was suspended or revoked in any state, district or
374 territory of the United States, or Canada, and not have surrendered a health care license in lieu
375 of a disciplinary action, unless:

376 (i) the license was subsequently reinstated as a full unrestricted license in good
377 standing; or

378 (ii) the division in collaboration with the board determines, after full disclosure by the
379 applicant, that:

380 (A) the conduct has been corrected, monitored, and resolved; or

381 (B) a mitigating circumstance exists that prevents its resolution, and the division in
382 collaboration with the board is satisfied that, but for the mitigating circumstance, the license
383 would be reinstated;

384 (f) submit to a records review, a practice review history, and physical and
385 psychological assessments, if requested by the division in collaboration with the board; and

386 (g) produce evidence that the applicant meets the requirements of this Subsection (2) to
387 the satisfaction of the division in collaboration with the board.

388 (3) An applicant for licensure by endorsement may engage in the practice of medicine
389 under a temporary license while the applicant's application for licensure is being processed by
390 the division, provided:

391 (a) the applicant submits a complete application required for temporary licensure to the
392 division;

393 (b) the applicant submits a written document to the division from:

394 (i) a health care facility licensed under Title 26, Chapter 21, Health Care Facility
395 Licensing and Inspection Act, stating that the applicant is practicing under the:

396 (A) invitation of the health care facility; and

397 (B) the general supervision of a physician practicing at the health care facility; or

398 (ii) two individuals licensed under this chapter, whose license is in good standing and
399 who practice in the same clinical location, both stating that:

400 (A) the applicant is practicing under the invitation and general supervision of the
401 individual; and

402 (B) the applicant will practice at the same clinical location as the individual;

403 (c) the applicant submits a signed certification to the division that the applicant meets
404 the requirements of Subsection (2);

405 (d) the applicant does not engage in the practice of medicine until the division has
406 issued a temporary license;

407 (e) the temporary license is only issued for and may not be extended or renewed
408 beyond the duration of one year from issuance; and

409 (f) the temporary license expires immediately and prior to the expiration of one year
410 from issuance, upon notification from the division that the applicant's application for licensure
411 by endorsement is denied.

412 (4) The division shall issue a temporary license under Subsection (3) within 15
413 business days after the applicant satisfies the requirements of Subsection (3).

414 (5) The division may not require a post-residency board certification as a requirement
415 for licensure.

416 (6) The division may issue a waiver from the requirement in Subsection (1)(k) to an
417 applicant if the individual can demonstrate that the scope of practice of the individual does not
418 include prescribing psychotropic drugs, as defined in Subsection [26-18-2.4\(3\)](#).

419 Section 7. Section **58-68-302.5 (Effective 07/01/18)** is amended to read:

420 **58-68-302.5 (Effective 07/01/18). Restricted licensing of an associate physician.**

421 (1) An individual may apply for a restricted license as an associate physician if the
422 individual:

423 (a) meets the requirements described in Subsections [58-68-302\(1\)\(a\)](#) through (c),
424 (1)(d)(i), and (1)(g) through ~~(f)~~ (k);

425 (b) successfully completes Step 1 and Step 2 of the United States Medical Licensing
426 Examination or the equivalent steps of another board-approved medical licensing examination:

427 (i) within three years after the day on which the applicant graduates from a program
428 described in Subsection [58-68-302\(1\)\(d\)\(i\)](#); and

429 (ii) within two years before applying for a restricted license as an associate physician;
430 and

431 (c) is not currently enrolled in and has not completed a residency program.

432 (2) Before a licensed associate physician may engage in the practice of medicine as
433 described in Subsection (3), the licensed associate physician shall:

434 (a) enter into a collaborative practice arrangement described in Section 58-68-807
435 within six months after the associate physician's initial licensure; and

436 (b) receive division approval of the collaborative practice arrangement.

437 (3) An associate physician's scope of practice is limited to primary care services to
438 medically underserved populations or in medically underserved areas within the state.

439 Section 8. Section 58-68-304 (Superseded 07/01/18) is amended to read:

440 **58-68-304 (Superseded 07/01/18). License renewal requirements.**

441 (1) As a condition precedent for license renewal, each licensee shall, during each
442 two-year licensure cycle or other cycle defined by division rule:

443 (a) complete qualified continuing professional education requirements in accordance
444 with the number of hours and standards defined by division rule in collaboration with the
445 board;

446 (b) appoint a contact person for access to medical records and an alternate contact
447 person for access to medical records in accordance with Subsection 58-68-302(1)(i); and

448 (c) if the licensee practices osteopathic medicine in a location with no other persons
449 licensed under this chapter, provide some method of notice to the licensee's patients of the
450 identity and location of the contact person and alternate contact person for access to medical
451 records for the licensee in accordance with Subsection 58-68-302(1)(j).

452 (2) If a renewal period is extended or shortened under Section 58-68-303, the
453 continuing education hours required for license renewal under this section are increased or
454 decreased proportionally.

455 (3) An application to renew a license under this chapter shall:

456 (a) require a physician to answer the following question: "Do you perform elective
457 abortions in Utah in a location other than a hospital?"; and

458 (b) immediately following the question, contain the following statement: "For purposes
459 of the immediately preceding question, elective abortion means an abortion other than one of

460 the following: removal of a dead fetus, removal of an ectopic pregnancy, an abortion that is
461 necessary to avert the death of a woman, an abortion that is necessary to avert a serious risk of
462 substantial and irreversible impairment of a major bodily function of a woman, an abortion of a
463 fetus that has a defect that is uniformly diagnosable and uniformly lethal, or an abortion where
464 the woman is pregnant as a result of rape or incest."

465 (4) In order to assist the Department of Health in fulfilling its responsibilities relating
466 to the licensing of an abortion clinic, if a physician responds positively to the question
467 described in Subsection (3)(a), the division shall, within 30 days after the day on which it
468 renews the physician's license under this chapter, inform the Department of Health in writing:

469 (a) of the name and business address of the physician; and

470 (b) that the physician responded positively to the question described in Subsection
471 (3)(a).

472 (5) (a) The continuing professional education requirements described in Subsection
473 (1)(a) shall include a minimum of two hours of training in suicide prevention via a course
474 approved by the division.

475 (b) The division may issue a waiver from the requirement in Subsection (5)(a) to an
476 individual if the individual can demonstrate that the scope of practice of the individual does not
477 include prescribing psychotropic drugs, as defined in Subsection 26-18-2.4(3).

478 Section 9. Section **58-68-304 (Effective 07/01/18)** is amended to read:

479 **58-68-304 (Effective 07/01/18). License renewal requirements.**

480 (1) As a condition precedent for license renewal, each licensee shall, during each
481 two-year licensure cycle or other cycle defined by division rule:

482 (a) complete qualified continuing professional education requirements in accordance
483 with the number of hours and standards defined by division rule in collaboration with the
484 board;

485 (b) appoint a contact person for access to medical records and an alternate contact
486 person for access to medical records in accordance with Subsection 58-68-302(1)(i);

487 (c) if the licensee practices osteopathic medicine in a location with no other persons
488 licensed under this chapter, provide some method of notice to the licensee's patients of the
489 identity and location of the contact person and alternate contact person for access to medical
490 records for the licensee in accordance with Subsection 58-68-302(1)(j); and

491 (d) if the licensee is an associate physician licensed under Section 58-68-302.5,
492 successfully complete the educational methods and programs described in Subsection
493 58-68-807(4).

494 (2) If a renewal period is extended or shortened under Section 58-68-303, the
495 continuing education hours required for license renewal under this section are increased or
496 decreased proportionally.

497 (3) An application to renew a license under this chapter shall:

498 (a) require a physician to answer the following question: "Do you perform elective
499 abortions in Utah in a location other than a hospital?"; and

500 (b) immediately following the question, contain the following statement: "For purposes
501 of the immediately preceding question, elective abortion means an abortion other than one of
502 the following: removal of a dead fetus, removal of an ectopic pregnancy, an abortion that is
503 necessary to avert the death of a woman, an abortion that is necessary to avert a serious risk of
504 substantial and irreversible impairment of a major bodily function of a woman, an abortion of a
505 fetus that has a defect that is uniformly diagnosable and uniformly lethal, or an abortion where
506 the woman is pregnant as a result of rape or incest."

507 (4) In order to assist the Department of Health in fulfilling its responsibilities relating
508 to the licensing of an abortion clinic, if a physician responds positively to the question
509 described in Subsection (3)(a), the division shall, within 30 days after the day on which it
510 renews the physician's license under this chapter, inform the Department of Health in writing:

511 (a) of the name and business address of the physician; and

512 (b) that the physician responded positively to the question described in Subsection
513 (3)(a).

514 (5) (a) The continuing professional education requirements described in Subsection
515 (1)(a) shall include a minimum of two hours of training in suicide prevention via a course
516 approved by the division.

517 (b) The division may issue a waiver from the requirement in Subsection (5)(a) to an
518 individual if the individual can demonstrate that the scope of practice of the individual does not
519 include prescribing psychotropic drugs, as defined in Subsection 26-18-2.4(3).