

STATE OF MAINE

—
IN THE YEAR OF OUR LORD
TWO THOUSAND TWENTY-SIX

—
H.P. 1403 - L.D. 2088

An Act to Increase Access to Primary Care Provided by Physician Associates

Emergency preamble. Whereas, acts and resolves of the Legislature do not become effective until 90 days after adjournment unless enacted as emergencies; and

Whereas, there is a shortage of medical providers in the State, particularly in rural areas, and this legislation will increase the number of physician associates who are able to practice in primary care, which will provide more health care opportunities throughout the State and has the potential to make the State eligible for funds from federal rural health care grants; and

Whereas, this legislation needs to take effect immediately in order to remedy the shortage of medical providers and funding as soon as possible; and

Whereas, in the judgment of the Legislature, these facts create an emergency within the meaning of the Constitution of Maine and require the following legislation as immediately necessary for the preservation of the public peace, health and safety; now, therefore,

Be it enacted by the People of the State of Maine as follows:

Sec. 1. 32 MRSA §2594-E, sub-§5, ¶E, as amended by PL 2019, c. 627, Pt. B, §12, is further amended to read:

E. Requirements for collaborative agreements ~~and practice agreements~~ under section 2594-F, including uniform standards and forms;

Sec. 2. 32 MRSA §2594-F, sub-§1, ¶F, as enacted by PL 2019, c. 627, Pt. B, §13 and amended by PL 2025, c. 316, §3, is repealed.

Sec. 3. 32 MRSA §2594-F, sub-§4, as enacted by PL 2019, c. 627, Pt. B, §13 and amended by PL 2025, c. 316, §3, is further amended to read:

4. Consultation. A physician associate ~~shall~~ may, as indicated by a patient's condition, the education, competencies and experience of the physician associate and the standards of care, consult with, collaborate with or refer the patient to an appropriate physician or other health care professional. The level of consultation ~~required~~ under this subsection is determined by the practice setting, including a physician employer, physician group

practice or private practice, or by the system of credentialing and granting of privileges of a health care facility. ~~A physician must be accessible to the physician associate at all times for consultation.~~ Consultation may occur electronically or through telecommunication and includes communication, task sharing and education among all members of a health care team.

Sec. 4. 32 MRSA §2594-F, sub-§6, as enacted by PL 2019, c. 627, Pt. B, §13 and amended by PL 2025, c. 316, §3, is repealed.

Sec. 5. 32 MRSA §3270-E, sub-§5, ¶E, as amended by PL 2019, c. 627, Pt. B, §16, is further amended to read:

E. Requirements for collaborative agreements ~~and practice agreements~~ under section 3270-G, including uniform standards and forms;

Sec. 6. 32 MRSA §3270-G, sub-§1, ¶F, as enacted by PL 2019, c. 627, Pt. B, §17 and amended by PL 2025, c. 316, §3, is repealed.

Sec. 7. 32 MRSA §3270-G, sub-§4, as enacted by PL 2019, c. 627, Pt. B, §17 and amended by PL 2025, c. 316, §3, is further amended to read:

4. Consultation. A physician associate ~~shall~~ may, as indicated by a patient's condition, the education, competencies and experience of the physician associate and the standards of care, consult with, collaborate with or refer the patient to an appropriate physician or other health care professional. The level of consultation ~~required~~ under this subsection is determined by the practice setting, including a physician employer, physician group practice, or private practice, or by the system of credentialing and granting of privileges of a health care facility. ~~A physician must be accessible to the physician associate at all times for consultation.~~ Consultation may occur electronically or through telecommunication and includes communication, task sharing and education among all members of a health care team.

Sec. 8. 32 MRSA §3270-G, sub-§6, as enacted by PL 2019, c. 627, Pt. B, §17 and amended by PL 2025, c. 316, §3, is repealed.

Emergency clause. In view of the emergency cited in the preamble, this legislation takes effect when approved.