
OLR Bill Analysis

sHB 6835

AN ACT ADOPTING THE PHYSICIAN ASSISTANT LICENSURE COMPACT.

SUMMARY

This bill enters Connecticut into the Physician Assistant (PA) Licensure Compact. The compact creates a process authorizing PAs who are licensed in one participating state to practice across state boundaries (including by telehealth) without requiring licensure in each state. Participating states must grant the “compact privilege” (i.e., the authority to practice in the state) to PAs who meet the compact’s eligibility requirements. The compact is administered by the PA Licensure Compact Commission, which Connecticut joins under the bill.

Among various other provisions, the compact:

1. sets eligibility criteria for states to enter the compact and for PAs to practice under it;
2. addresses several matters related to disciplinary actions for PAs practicing under the compact, such as information sharing among states and automatic deactivation of a PA’s compact privilege in some circumstances;
3. allows the commission to levy an annual assessment on participating states and fees on participating PAs to cover the cost of its operations; and
4. provides that amendments to the compact only take effect if all participating states adopt them into law.

In practice, the compact is still in the process of being implemented. The commission first met in September 2024, and compact privileges to

practice are projected to be available in early 2026. A broad overview of the compact appears below.

Additionally, under the bill, the public health commissioner must require anyone applying for PA licensure to submit to a state and national fingerprint-based criminal history records check by the Department of Emergency Services and Public Protection (§ 2). This corresponds to a compact requirement (see *State Participation in the Compact*, below).

EFFECTIVE DATE: July 1, 2025

PA LICENSURE COMPACT

Compact Overview

The PA Licensure Compact provides a process authorizing PAs to work in multiple states (including by telehealth) if they are licensed in one participating state. (The compact applies regardless of whether states use the term “physician assistant” or another title for this profession.)

Under the compact, a “state” is a U.S. state, commonwealth, district, or territory. A “participating state” is a state that has enacted the compact. A “remote state” is a participating state where a licensee who is not licensed as a PA is exercising, or seeking to exercise, the compact privilege to practice.

The “compact privilege” is the authorization granted by a remote state allowing a licensee from another participating state to practice as a PA in a remote state, by providing services to a patient in a remote state under that state’s laws and regulations.

State Participation in the Compact (§ 1(3))

To participate in the compact, a state must do the following:

1. license PAs;
2. participate in the compact commission’s data system (see below);
3. have a mechanism to receive and investigate complaints against

- PA licensees and license applicants;
4. notify the commission, in compliance with the compact's terms and commission rules, about any adverse action (e.g., license denial or suspension) and the existence of significant investigative information regarding a licensee or license applicant (generally, information that a licensing board, after following certain procedures, believes is not groundless and if proven true, would indicate more than a minor infraction);
 5. fully implement a criminal background check requirement, within a time frame set by rule, by receiving criminal background check results and reporting to the commission whether the applicant has been granted a license;
 6. comply with the commission's rules;
 7. require passage of a recognized national examination for PA licensure (such as the PA National Certifying Examination administered by the National Commission on Certification of PAs (NCCPA)); and
 8. grant the compact privilege to a holder of a qualifying license (i.e., an unrestricted PA license) in a participating state.

Participating states may charge a fee for granting the compact privilege.

Compact Privilege (§ 1(4))

To exercise the compact privilege, a licensee must meet the following requirements:

1. have graduated from a PA program accredited by the Accreditation Review Commission on Education for the Physician Assistant, Inc., or any other program authorized by commission rule;
2. hold current NCCPA certification;

3. have no felony or misdemeanor convictions;
4. have never had a controlled substance license, permit, or registration suspended or revoked by a state or the U.S. Drug Enforcement Administration;
5. have a unique identifier as determined by commission rule;
6. hold a qualifying license;
7. notify the commission that the licensee is seeking the compact privilege in a remote state;
8. meet the remote state's jurisprudence requirements (i.e., assessment of knowledge of PA practice laws and rules for that state), if any, and pay any applicable fees; and
9. report to the commission within 30 days after being subject to adverse action by any nonparticipating state.

In addition, a licensee cannot have had a license revocation due to an adverse action. If a licensee has had a limitation or restriction on a license or compact privilege due to an adverse action, two years must have passed since the limitation or restriction ended. However, a participating state has the discretion to not consider something as an adverse action on a compact privilege if it was based on conduct that would not be the basis for disciplinary action in that state.

The compact privilege is valid until the license expires or is revoked, unless it ends earlier due to an adverse action. Licensees must comply with the above requirements to maintain the privilege in a remote state.

If a participating state takes adverse action against a license, the licensee loses the compact privilege in any remote state until two years after the license is no longer limited or restricted. To regain the privilege after that two-year period, the licensee must also meet the above eligibility requirements.

PAs who are seeking authority to prescribe controlled substances in

remote states must meet the applicable requirements in each state in which they seek to do so.

Designation of the State From Which Licensee is Applying (§ 1(5))

The compact requires PAs applying for a compact privilege to identify to the commission the state from where they are applying, under rules set by the commission. In addition, when applying for the privilege, PAs must:

1. give the commission the address of their primary residence (and report any change immediately) and
2. consent to accept service of process by mail at that address for any action (such as a subpoena) that the commission or a participating state brings against the licensee.

Adverse Actions (§ 1(6))

The compact addresses several matters related to states' authority to investigate and discipline PAs practicing under its procedures. The following are examples of the regulatory structure under the compact:

1. a participating state in which a PA is licensed has exclusive authority to take adverse action against that license, and if it takes such an action, the PA's compact privilege in all remote states is deactivated until two years after the restrictions are removed from the license;
2. a remote state may take adverse action against a PA's compact privilege in that state to remove the privilege, issue subpoenas under certain conditions, and take other necessary action to protect the health and safety of its citizens;
3. the compact does not authorize participating states to impose discipline against a PA's compact privilege, or deny an application for such a privilege, for the PA's otherwise lawful practice in another state;
4. for taking adverse action, a PA's state of licensure must give the

- same priority and effect to reported conduct from other participating states as it would to conduct within the state, and must apply its own state law to determine appropriate action;
5. if allowed by that state's law, a participating state may recover from the affected PA the investigation and disposition costs for cases resulting from adverse actions;
 6. participating states may take adverse actions based on a remote state's factual findings, and must follow its own procedures in doing so; and
 7. if any participating state takes adverse action, it must promptly notify the data system's administrator (see below).

PA Licensure Compact Commission (§ 1(7), (9) & (10))

The compact is administered by the PA Licensure Compact Commission, which consists of one voting delegate per participating state (selected by each state's licensing board). The compact sets several powers, duties, and procedures for the commission. For example, the commission must:

1. promulgate rules to facilitate and coordinate the compact's implementation and administration (a rule has no further effect if a majority of the participating states' legislatures reject it within four years after the rule's adoption),
2. enforce the compact's provisions and the commission's rules, and
3. prepare an annual report (including on its financial review) to be provided to participating states.

The commission (1) can levy an annual assessment on participating states and impose fees on participating PAs to cover the costs of its operations, and (2) is subject to a yearly financial review.

The compact addresses several other matters regarding the commission and its operations, such as setting conditions under which its members, officers, and employees are immune from civil liability.

Data System (§ 1(8))

Under the compact, participating states must submit specified information on PAs and denied applicants for inclusion in a database the commission creates. The compact addresses several matters related to this data system, such as establishing the following:

1. significant investigative information about a licensee in any participating state is only available to other participating states;
2. the commission must promptly notify all participating states about adverse actions reported to it against licensees or applicants, and this information is available to any other participating state; and
3. participating states that contribute information to the data system may designate information that may not be shared publicly without the state's express permission.

Compact Oversight, Dispute Resolution, Participating State Withdrawal, and Related Matters (§ 1(10)-(13))

Among several other related provisions, the compact provides the following:

1. each participating state's executive and judicial branches must enforce the compact and take all necessary and appropriate steps to implement it;
2. the commission must take specified steps if a participating state is in default and, after all other means of securing compliance have been exhausted, a defaulting state is terminated from the compact upon a majority vote of the delegates (the commission may also bring a legal action against a defaulting state in these circumstances);
3. upon a participating state's request, the commission must attempt to resolve a compact-related dispute among participating states and between participating and nonparticipating states;

4. a participating state may withdraw from the compact by repealing that state's compact legislation, but withdrawal does not take effect until 180 days after the repealing statute's enactment;
5. the participating states may amend the compact, but no amendment takes effect until it is enacted materially in the same way into the laws of all participating states;
6. the compact's provisions are severable and its provisions must be liberally construed to carry out its purposes; and
7. all participating state laws in conflict with the compact are superseded to the extent of the conflict.

COMMITTEE ACTION

Public Health Committee

Joint Favorable

Yea 32 Nay 0 (02/10/2025)