



State of Wisconsin  
2025 - 2026 LEGISLATURE

LRB-4577/1  
JPC:amn&cjs

## 2025 ASSEMBLY BILL 438

September 19, 2025 - Introduced by Representatives VANDERMEER, FRANKLIN, DONOVAN, GOEBEN, GREEN, GUNDRUM, KNODL, MAXEY, STEFFEN and TITTL, cosponsored by Senators CABRAL-GUEVARA and TESTIN. Referred to Committee on Health, Aging and Long-Term Care.

1     **AN ACT *to amend*** 14.835, 15.085 (1m) (b), 15.406 (7) (intro.), 50.39 (3), 111.335  
2           (4) (jm), 440.035 (2m) (b), 440.035 (2m) (c) 1. (intro.), subchapter IX (title) of  
3           chapter 448 [precedes 448.971], 448.971 (1), 448.971 (2), 448.972 (1), 448.972  
4           (3), 448.9725 (2), 448.9725 (3), 448.9725 (4) (a), 448.9725 (4) (b), 448.9727 (2)  
5           (a) (intro.), 448.9727 (2) (b), 448.9727 (3), 448.973 (1) (b), 448.973 (1) (c) 1.,  
6           448.974 (1) (a) (intro.), 448.975 (1) (a) (intro.), 448.975 (1) (b), 448.975 (1) (c),  
7           448.975 (2) (a), 448.975 (2) (b), 448.975 (2) (c) (intro.), 448.975 (2) (c) 5.,  
8           448.975 (3) (a) (intro.), 448.975 (3) (a) 1., 448.975 (3) (a) 2., 448.975 (3) (a) 4.,  
9           448.975 (3) (b), 448.975 (4), 448.975 (5) (a) 1. b., 448.975 (5) (a) 2., 448.975 (5)  
10          (b), 448.975 (6), 448.976, 448.977 (1) (intro.), 448.977 (1) (b), 448.977 (2),  
11          448.977 (3), 448.977 (4), 448.978 (1g) (a), 448.978 (2) (intro.), 448.978 (2) (b),  
12          448.978 (2) (f), 448.978 (2) (m), 448.9785 (intro.), 448.9785 (6), 448.9795 (1),  
13          448.9795 (2), 448.9885 (1) (a), 450.11 (8) (f), 655.002 (1) (a), 655.002 (1) (b),

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1           655.002 (1) (c), 655.002 (1) (d), 655.002 (1) (e), 655.002 (1) (em), 655.002 (2) (a),  
2           655.002 (2) (b), 655.003 (1), 655.003 (3), 655.005 (2) (a), 655.005 (2) (b), 655.23  
3           (5m), 655.27 (3) (a) 4., 655.27 (3) (b) 2m., 655.275 (2) and 990.01 (27s); **to**  
4           **create** 180.1901 (1m) (bd), 448.9723, 448.975 (2) (ag) and (ar), 448.978 (3),  
5           655.001 (10r) and 655.275 (5) (b) 3. of the statutes; **relating to:** adopting the  
6           title of physician associate for physician assistants, independent practice of  
7           certain physician associates, extending the time limit for emergency rule  
8           procedures, and providing an exemption from emergency rule procedures.

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***Analysis by the Legislative Reference Bureau***

This bill adopts the term “physician associate” for “physician assistant” in the statutes, changes the title of the credentialing board that licenses physician associates to “Physician Associate Affiliated Credentialing Board,” allows physician associates to assume the title “physician associate” in addition to other titles allowed under current law, and allows a physician associate to practice independently from physicians if the physician associate satisfies certain criteria.

Under current law, a physician assistant who provides care to patients may provide the services of a physician assistant only if there is a physician who is primarily responsible for the overall direction and management of the physician assistant’s professional activities and for assuring that the services provided by the physician assistant are medically appropriate or if the physician assistant has entered into a written collaborative agreement with a physician that describes the physician assistant’s individual scope of practice and includes a protocol for identifying an alternative collaborating physician for situations in which the collaborating physician or the physician’s designee is not available for consultation.

To qualify to practice independently under the bill, a physician associate must satisfy certain criteria, including that the physician associate has completed 7,680 hours of clinical practice as a physician associate while practicing with a physician who is primarily responsible for the overall direction and management of the physician associate’s professional activities and for assuring that the services provided by the physician associate are medically appropriate or while practicing under a written collaborative agreement that satisfies the requirements under current law. In order to qualify to practice independently, the physician associate must maintain certain evidence that, during the 7,680 hours of clinical practice, the physician associate maintained a mutual, professional relationship with at least one physician; maintained documentation indicating the relationships the

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physician associate had with one or more physicians to deal with issues outside of the physician associate's knowledge, training, or experience; and maintained evidence that he or she was subject to a quality assurance program, peer review process, or other similar program or process that was implemented for and designed to ensure the provision of competent and quality patient care and that also included participation by a physician. The 7,680 hours of clinical practice may include the lawful practice of the physician associate outside this state or the lawful practice of the physician associate in this state prior to the effective date of this bill, the lawful practice of the physician associate as an employee of the federal government as a civilian or as a member of a uniformed service while performing duties incident to that employment or service, including hours of independent practice outside of a supervisory or collaborative relationship with a physician, and any clinical hours completed pursuant to an educational program that qualifies an individual for licensure as a physician assistant under current law.

The bill provides that, regardless of whether a physician associate has qualified to practice independently, a physician associate may provide treatment of pain syndromes through the use of invasive techniques only while practicing with a physician who, through training, education, and experience, specializes in pain management and who either is primarily responsible for the overall direction and management of the physician associate's professional activities and for assuring that the services provided by the physician associate are medically appropriate or is under a written collaborative agreement with the physician associate. However, the bill provides that a physician associate may provide treatment of pain syndromes through the use of invasive techniques if the physician associate has qualified to practice independently under the bill and provides treatment of pain syndromes through the use of invasive techniques in a hospital or a clinic associated with a hospital. Further, the bill provides that a physician associate may provide treatment of pain syndromes through the use of invasive techniques if the physician associate has qualified to practice independently under the bill and has privileges in a hospital to provide treatment of pain syndromes through the use of invasive techniques without a collaborative relationship with a physician.

Finally, the bill adds physician associates who have qualified to practice independently as mandatory participants in the Injured Patients and Families Compensation Fund. The Injured Patients and Families Compensation Fund provides excess medical malpractice coverage for health care providers who participate in the fund and meet all other participation requirements, which includes maintaining malpractice liability insurance in coverage amounts specified under current law. Under current law, no physician assistant may practice as a physician assistant unless they maintain such medical liability insurance.

For further information see the state fiscal estimate, which will be printed as an appendix to this bill.

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## SECTION 1

*The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:*

1       **SECTION 1.** 14.835 of the statutes is amended to read:

2       **14.835 PA licensure compact.** There is created a PA licensure compact  
3       commission as specified in s. 448.988. The delegate on the commission  
4       representing this state shall be appointed by the physician ~~assistant~~ associate  
5       affiliated credentialing board as provided in s. 448.988 (7) (b) 1. and shall be an  
6       individual described in s. 448.988 (7) (b) 2. a. or b. The commission has the powers  
7       and duties granted and imposed under s. 448.988.

8       **SECTION 2.** 15.085 (1m) (b) of the statutes is amended to read:

9       **15.085 (1m) (b)** The public members of the podiatry affiliated credentialing  
10      board, the occupational therapists affiliated credentialing board, the physician  
11      ~~assistant~~ associate affiliated credentialing board, and the genetic counselors  
12      affiliated credentialing board shall not be engaged in any profession or occupation  
13      concerned with the delivery of physical or mental health care.

14      **SECTION 3.** 15.406 (7) (intro.) of the statutes is amended to read:

15      **15.406 (7) PHYSICIAN ~~ASSISTANT~~ ASSOCIATE AFFILIATED CREDENTIALING**  
16      **BOARD.** (intro.) There is created in the department of safety and professional  
17      services, attached to the medical examining board, a physician ~~assistant~~ associate  
18      affiliated credentialing board consisting of the following members appointed for  
19      staggered 4-year terms:

20      **SECTION 4.** 50.39 (3) of the statutes is amended to read:

21      **50.39 (3)** Facilities governed by ss. 45.50, 48.62, 49.70, 49.72, 50.02, 51.09,  
22      and 252.10, juvenile correctional facilities as defined in s. 938.02 (10p), correctional

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1 institutions governed by the department of corrections under s. 301.02, and the  
2 offices and clinics of persons licensed to treat the sick under chs. 446, 447, and 448  
3 are exempt from ss. 50.32 to 50.39. Sections 50.32 to 50.39 do not abridge the rights  
4 of the medical examining board, physician ~~assistant~~ associate affiliated  
5 credentialing board, physical therapy examining board, podiatry affiliated  
6 credentialing board, dentistry examining board, pharmacy examining board,  
7 chiropractic examining board, and board of nursing in carrying out their statutory  
8 duties and responsibilities.

9 **SECTION 5.** 111.335 (4) (jm) of the statutes is amended to read:

10 111.335 (4) (jm) Notwithstanding s. 111.322, it is not employment  
11 discrimination because of conviction record for the physician ~~assistant~~ associate  
12 affiliated credentialing board to refuse to grant to an individual a compact  
13 privilege, as defined in s. 448.988 (2) (b), in accordance with s. 448.988 (4) (a) 3.

14 **SECTION 6.** 180.1901 (1m) (bd) of the statutes is created to read:

15 180.1901 (1m) (bd) Physician associate affiliated credentialing board under  
16 subch. IX of ch. 448.

17 **SECTION 7.** 440.035 (2m) (b) of the statutes is amended to read:

18 440.035 (2m) (b) The medical examining board, the physician ~~assistant~~  
19 associate affiliated credentialing board, the podiatry affiliated credentialing board,  
20 the board of nursing, the dentistry examining board, or the optometry examining  
21 board may issue guidelines regarding best practices in prescribing controlled  
22 substances for persons credentialed by that board who are authorized to prescribe  
23 controlled substances.

24 **SECTION 8.** 440.035 (2m) (c) 1. (intro.) of the statutes is amended to read:

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1           440.035 **(2m)** (c) 1. (intro.) The medical examining board, the physician  
2 ~~assistant~~ associate affiliated credentialing board, the podiatry affiliated  
3 credentialing board, the board of nursing, the dentistry examining board, and the  
4 optometry examining board shall, by November 1 of each year, submit a report to  
5 the persons specified in subd. 2. that does all of the following:

6           **SECTION 9.** Subchapter IX (title) of chapter 448 [precedes 448.971] of the  
7 statutes is amended to read:

**CHAPTER 448****SUBCHAPTER IX****PHYSICIAN ~~ASSISTANT~~ ASSOCIATE****AFFILIATED CREDENTIALING BOARD**

12           **SECTION 10.** 448.971 (1) of the statutes is amended to read:

13           448.971 **(1)** “Board” means the physician ~~assistant~~ associate affiliated  
14 credentialing board.

15           **SECTION 11.** 448.971 (2) of the statutes is amended to read:

16           448.971 **(2)** “Physician ~~assistant~~ associate” means a person who is licensed  
17 under this subchapter or who holds a compact privilege.

18           **SECTION 12.** 448.972 (1) of the statutes is amended to read:

19           448.972 **(1)** Except as provided in subs. (2) and (3), no person may represent  
20 himself or herself as a “PA”~~or,~~ “physician assistant,” or “physician associate,” use  
21 or assume the title “PA”~~or,~~ “physician assistant,” or “physician associate,” or  
22 append to the person’s name the words or letters “physician assistant,” “physician  
23 associate,” “PA,” “PA-C,” or any other titles, letters, or designation that represents

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1 or may tend to represent the person as a physician ~~assistant~~ associate, unless he or  
2 she is licensed by the board under this subchapter or holds a compact privilege.

3 **SECTION 13.** 448.972 (3) of the statutes is amended to read:

4 448.972 (3) A student who is enrolled in an accredited physician ~~assistant~~  
5 associate educational program may use the title “physician assistant student,”  
6 “physician associate student,” “PA student,” or “PA-S.”

7 **SECTION 14.** 448.9723 of the statutes is created to read:

8 **448.9723 Use of titles.** (1) Except as provided in sub. (2), no person licensed  
9 or granted a compact privilege under this subchapter may use, assume, or append  
10 to his or her name any title that is not granted under this subchapter unless the  
11 person holds another credential, as defined in s. 440.01 (2) (a), that entitles the  
12 person to use, assume, or append to his or her name the title or the person is  
13 permitted to use, assume, or append to his or her name the title under any law of  
14 this state.

15 (2) (a) Subsection (1) does not prohibit a person who holds a doctorate degree  
16 from using, assuming, or appending to his or her name the title “doctor” or any  
17 other words, letters, or abbreviations that represent that the person holds that  
18 degree or the field in which the degree was received. If a person to whom this  
19 paragraph applies uses, assumes, or appends to his or her name the title “doctor,”  
20 the person shall also use, assume, or append to his or her name words, letters, or  
21 abbreviations that represent the field in which the person received the doctorate  
22 degree.

23 (b) Subsection (1) does not prohibit a person who holds a bachelor’s degree or  
24 master’s degree from using, assuming, or appending to his or her name any words,

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1 letters, or abbreviations that represent that the person holds the degree or the field  
2 in which the degree was received.

3 **SECTION 15.** 448.9725 (2) of the statutes is amended to read:

4 448.9725 (2) Notwithstanding the requirements of s. 448.9785, a physician  
5 ~~assistant~~ associate may provide expedited partner therapy if a patient is diagnosed  
6 as infected with a chlamydial infection, gonorrhea, or trichomoniasis and the  
7 patient has had sexual contact with a sexual partner during which the chlamydial  
8 infection, gonorrhea, or trichomoniasis may have been transmitted to or from the  
9 sexual partner. The physician ~~assistant~~ associate shall attempt to obtain the name  
10 of the patient's sexual partner. A prescription order for an antimicrobial drug  
11 prepared under this subsection shall include the name and address of the patient's  
12 sexual partner, if known. If the physician ~~assistant~~ associate is unable to obtain the  
13 name of the patient's sexual partner, the prescription order shall include, in  
14 ordinary, bold-faced capital letters, the words, "expedited partner therapy" or the  
15 letters "EPT."

16 **SECTION 16.** 448.9725 (3) of the statutes is amended to read:

17 448.9725 (3) The physician ~~assistant~~ associate shall provide the patient with  
18 a copy of the information sheet prepared by the department of health services under  
19 s. 46.03 (44) and shall request that the patient give the information sheet to the  
20 person with whom the patient had sexual contact.

21 **SECTION 17.** 448.9725 (4) (a) of the statutes is amended to read:

22 448.9725 (4) (a) Except as provided in par. (b), a physician ~~assistant~~ associate  
23 is immune from civil liability for injury to or the death of a person who takes any  
24 antimicrobial drug if the antimicrobial drug is prescribed, dispensed, or furnished



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1 under this section and if expedited partner therapy is provided as specified under  
2 this section.

3 **SECTION 18.** 448.9725 (4) (b) of the statutes is amended to read:

4 448.9725 (4) (b) The immunity under par. (a) does not extend to the donation,  
5 distribution, furnishing, or dispensing of an antimicrobial drug by a physician  
6 ~~assistant~~ associate whose act or omission involves reckless, wanton, or intentional  
7 misconduct.

8 **SECTION 19.** 448.9727 (2) (a) (intro.) of the statutes is amended to read:

9 448.9727 (2) (a) (intro.) A physician ~~assistant~~ associate may do any of the  
10 following:

11 **SECTION 20.** 448.9727 (2) (b) of the statutes is amended to read:

12 448.9727 (2) (b) A physician ~~assistant~~ associate who prescribes or delivers an  
13 opioid antagonist under par. (a) 1. shall ensure that the person to whom the opioid  
14 antagonist is prescribed has or has the capacity to provide the knowledge and  
15 training necessary to safely administer the opioid antagonist to an individual  
16 undergoing an opioid-related overdose and that the person demonstrates the  
17 capacity to ensure that any individual to whom the person further delivers the  
18 opioid antagonist has or receives that knowledge and training.

19 **SECTION 21.** 448.9727 (3) of the statutes is amended to read:

20 448.9727 (3) A physician ~~assistant~~ associate who, acting in good faith,  
21 prescribes or delivers an opioid antagonist in accordance with sub. (2) or who,  
22 acting in good faith, otherwise lawfully prescribes or dispenses an opioid antagonist  
23 shall be immune from criminal or civil liability and may not be subject to

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1 professional discipline under s. 448.978 for any outcomes resulting from  
2 prescribing, delivering, or dispensing the opioid antagonist.

3 **SECTION 22.** 448.973 (1) (b) of the statutes is amended to read:

4 448.973 (1) (b) The board shall promulgate rules establishing continuing  
5 education requirements for physician ~~assistants~~ associates.

6 **SECTION 23.** 448.973 (1) (c) 1. of the statutes is amended to read:

7 448.973 (1) (c) 1. Rules defining what constitutes unprofessional conduct for  
8 physician ~~assistants~~ associates for purposes of s. 448.978 (2) (d).

9 **SECTION 24.** 448.974 (1) (a) (intro.) of the statutes is amended to read:

10 448.974 (1) (a) (intro.) Except as provided in par. (b), the board shall grant an  
11 initial license to practice as a physician ~~assistant~~ associate to any applicant who is  
12 found qualified by three-fourths of the members of the board and satisfies all of the  
13 following requirements, as determined by the board:

14 **SECTION 25.** 448.975 (1) (a) (intro.) of the statutes is amended to read:

15 448.975 (1) (a) (intro.) Subject to the limitations and requirements under sub.  
16 (2); the physician ~~assistant's~~ associate's experience, education, and training; and  
17 any rules promulgated under sub. (5), a physician ~~assistant~~ associate may do any of  
18 the following:

19 **SECTION 26.** 448.975 (1) (b) of the statutes is amended to read:

20 448.975 (1) (b) 1. Subject to subd. 2. and any rules promulgated by the board  
21 and consistent with his or her experience, education, and training, a physician  
22 ~~assistant~~ associate may order, prescribe, procure, dispense, and administer  
23 prescription drugs, medical devices, services, and supplies.

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1           2. A physician ~~assistant~~ associate practicing under the supervision and  
2 direction of a podiatrist under sub. (2) (a) 2m. may issue a prescription order for a  
3 drug or device in accordance with guidelines established by the supervising  
4 podiatrist and the physician ~~assistant~~ associate and with rules promulgated by the  
5 board. If any conflict exists between the guidelines and the rules, the rules shall  
6 control.

7           **SECTION 27.** 448.975 (1) (c) of the statutes is amended to read:

8           448.975 (1) (c) A physician ~~assistant~~ associate may practice in ambulatory  
9 care, acute care, long-term care, home care, or other settings as a primary,  
10 specialty, or surgical care provider who may serve as a patient's primary care  
11 provider or specialty care provider.

12           **SECTION 28.** 448.975 (2) (a) of the statutes is amended to read:

13           448.975 (2) (a) 1. Except as provided in subds. 2m. and 3., pars. (ag) and (ar),  
14 and sub. (5) (a) 1. a. or b., a physician ~~assistant~~ associate who provides care to  
15 patients shall maintain and provide to the board upon request one of the following:

16           a. Evidence that, pursuant to the physician ~~assistant's~~ associate's  
17 employment, there is a physician who is primarily responsible for the overall  
18 direction and management of the physician ~~assistant's~~ associate's professional  
19 activities and for assuring that the services provided by the physician ~~assistant~~  
20 associate are medically appropriate. In this subd. 1. a., "employment" includes an  
21 arrangement between the physician ~~assistant~~ associate and a 3rd party in which  
22 the 3rd party receives payment for services provided by the physician ~~assistant~~  
23 associate.

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1           b. A written collaborative agreement with a physician that, subject to subd.  
2     1m., describes the physician ~~assistant's~~ associate's individual scope of practice, that  
3     includes a protocol for identifying an alternative collaborating physician for  
4     situations in which the collaborating physician or the physician's designee is not  
5     available for consultation, and that includes other information as required by the  
6     board.

7           1m. All of the following apply to a written collaborative agreement between a  
8     physician and physician ~~assistant~~ associate under subd. 1. b.:

9           a. The agreement may be terminated by either party by providing written  
10    notice at least 30 days prior to the date of termination, or as otherwise agreed to by  
11    the physician and physician ~~assistant~~ associate.

12          b. The agreement shall specify that the collaborating physician shall remain  
13    reasonably available to the physician ~~assistant~~ associate through the use of  
14    telecommunications or other electronic means within a medically appropriate time  
15    frame and that the collaborating physician may designate an alternate collaborator  
16    during periods of unavailability.

17          c. The agreement shall specify an arrangement for physician consultation  
18    with the patient within a medically appropriate time frame for consultation, if  
19    requested by the patient or the physician ~~assistant~~ associate.

20          d. The agreement shall be signed by the physician ~~assistant~~ associate and the  
21    collaborating physician.

22          2. Subdivision 1. does not require the physical presence of a physician at the  
23    time and place a physician ~~assistant~~ associate renders a service.

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1           2m. A physician ~~assistant~~ associate may practice under the supervision and  
2           direction of a podiatrist. A physician ~~assistant~~ associate who is practicing under  
3           the supervision and direction of a podiatrist shall be limited to providing  
4           nonsurgical patient services. Subdivision 1. does not apply to a physician ~~assistant~~  
5           associate who is practicing under the supervision and direction of a podiatrist.

6           3. Subdivision 1. does not apply with respect to a physician ~~assistant~~ associate  
7           who is employed by the federal government as a civilian or member of the  
8           uniformed services while performing duties incident to that employment or service.

9           **SECTION 29.** 448.975 (2) (ag) and (ar) of the statutes are created to read:

10          448.975 (2) (ag) 1. A physician associate may, except as provided in par. (ar),  
11          practice independently, without a physician who is primarily responsible for the  
12          overall direction and management of the physician associate's professional  
13          activities and for assuring that the services provided by the physician associate are  
14          medically appropriate under par. (a) 1. a. and without a written collaborative  
15          agreement under par. (a) 1. b., if the board verifies, upon application of the  
16          physician associate, that the physician associate has completed 7,680 hours of  
17          clinical practice as a physician associate while practicing with a physician who is  
18          primarily responsible for the overall direction and management of the physician  
19          associate's professional activities and for assuring that the services provided by the  
20          physician associate are medically appropriate under par. (a) 1. a. or while practicing  
21          under a written collaborative agreement under par. (a) 1. b. For purposes of this  
22          subdivision, the physician associate must have continuously satisfied all of the  
23          following requirements:

24          a. Maintained a mutual, professional relationship with at least one physician.

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1           b. Maintained, and provided to the board upon request, documentation  
2     indicating the relationships the physician associate had with one or more  
3     physicians to deal with issues outside of the physician associate's knowledge,  
4     training, or experience.

5           c. Maintained evidence that he or she was subject to a quality assurance  
6     program, peer review process, or other similar program or process that was  
7     implemented for and designed to ensure the provision of competent and quality  
8     patient care and that also included participation by a physician. Such a program or  
9     process may include a program or process administered through the physician  
10    associate's employer, hospital, ambulatory surgery center, clinic, or other outpatient  
11    facility.

12          2. For purposes of subd. 1., hours of clinical practice may include any of the  
13    following:

14          a. The lawful practice of the physician associate outside this state or the  
15    lawful practice of the physician associate in this state prior to the effective date of  
16    this subdivision .... [LRB inserts date].

17          b. The lawful practice of the physician associate as an employee of the federal  
18    government as a civilian or as a member of a uniformed service while performing  
19    duties incident to that employment or service, including hours of independent  
20    practice outside of a supervisory or collaborative relationship with a physician.

21          c. Clinical hours completed pursuant to an educational program described  
22    under s. 448.974 (1) (a) 3. a.

23          (ar) 1. A physician associate may provide treatment of pain syndromes, as  
24    defined in s. 50.60 (5), through the use of invasive techniques only while practicing

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1 with a physician who, through training, education, and experience, specializes in  
2 pain management and who is primarily responsible for the overall direction and  
3 management of the physician associate's professional activities and for assuring  
4 that the services provided by the physician associate are medically appropriate as  
5 provided under par. (a) 1. a. or under a written collaborative agreement with a  
6 physician as provided under par. (a) 1. b. who, through training, education, and  
7 experience, specializes in pain management. Except as provided in subds. 2. and 3.,  
8 this subdivision applies regardless of whether the physician associate has qualified  
9 to practice independently under par. (ag).

10 2. Except as provided in sub. (6), subd. 1. does not apply to a physician  
11 associate who is providing treatment of pain syndromes, as defined in s. 50.60 (5),  
12 through the use of invasive techniques in a hospital, as defined in s. 50.33 (2), or in  
13 a clinic associated with a hospital, and who has qualified to practice independently  
14 under par. (ag).

15 3. Except as provided in sub. (6), subd. 1. does not apply to a physician  
16 associate who has qualified to practice independently under par. (ag) and has  
17 privileges in a hospital, as defined in s. 50.33 (2), to provide treatment of pain  
18 syndromes, as defined in s. 50.60 (5), through the use of invasive techniques  
19 without a physician who is primarily responsible for the overall direction and  
20 management of the physician associate's professional activities and for assuring  
21 that the services provided by the physician associate are medically appropriate and  
22 without a written collaborative agreement.

23 **SECTION 30.** 448.975 (2) (b) of the statutes is amended to read:

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1           448.975 (2) (b) A physician ~~assistant~~ associate shall limit his or her practice to  
2           the scope of his or her experience, education, and training.

3           **SECTION 31.** 448.975 (2) (c) (intro.) of the statutes is amended to read:

4           448.975 (2) (c) (intro.) No physician ~~assistant~~ associate may provide medical  
5           care, except routine screening and emergency care, in any of the following:

6           **SECTION 32.** 448.975 (2) (c) 5. of the statutes is amended to read:

7           448.975 (2) (c) 5. The practice of podiatry, except when the physician ~~assistant~~  
8           associate is acting under the supervision and direction of a podiatrist, subject to  
9           par. (a) 2m. and the rules promulgated under s. 448.695 (4).

10          **SECTION 33.** 448.975 (3) (a) (intro.) of the statutes is amended to read:

11          448.975 (3) (a) (intro.) It shall be the obligation of a physician ~~assistant~~  
12          associate to ensure all of the following:

13          **SECTION 34.** 448.975 (3) (a) 1. of the statutes is amended to read:

14          448.975 (3) (a) 1. That the scope of the practice of the physician ~~assistant~~  
15          associate is identified and is appropriate with respect to his or her experience,  
16          education, and training.

17          **SECTION 35.** 448.975 (3) (a) 2. of the statutes is amended to read:

18          448.975 (3) (a) 2. For purposes of sub. (2) (a) 1. b., that the relationship with  
19          and access to a collaborating physician by the physician ~~assistant~~ associate is  
20          defined.

21          **SECTION 36.** 448.975 (3) (a) 4. of the statutes is amended to read:

22          448.975 (3) (a) 4. That consultation with or referral to other licensed health  
23          care providers with a scope of practice appropriate for a patient's care needs occurs  
24          when the patient's care needs exceed the physician ~~assistant's~~ associate's



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1 experience, education, or training. A physician ~~assistant~~ associate shall ensure  
2 that he or she has awareness of options for the management of situations that are  
3 beyond the physician ~~assistant's~~ associate's expertise.

4 **SECTION 37.** 448.975 (3) (b) of the statutes is amended to read:

5 448.975 (3) (b) A physician ~~assistant~~ associate is individually and  
6 independently responsible for the quality of the care he or she renders.

7 **SECTION 38.** 448.975 (4) of the statutes is amended to read:

8 448.975 (4) A physician ~~assistant~~ associate may delegate a care task or order  
9 to another clinically trained health care worker if the physician ~~assistant~~ associate  
10 is competent to perform the delegated task or order and has reasonable evidence  
11 that the clinically trained health care worker is minimally competent to perform the  
12 task or issue the order under the circumstances.

13 **SECTION 39.** 448.975 (5) (a) 1. b. of the statutes is amended to read:

14 448.975 (5) (a) 1. b. Allow a physician ~~assistant~~ associate, in the absence of an  
15 employment or collaborative relationship under sub. (2) (a) 1., to provide medical  
16 care at the scene of an emergency, during a declared state of emergency or other  
17 disaster, or when volunteering at sporting events or at camps.

18 **SECTION 40.** 448.975 (5) (a) 2. of the statutes is amended to read:

19 448.975 (5) (a) 2. Rules promulgated by the board may not permit a broader  
20 scope of practice than that which may be exercised in accordance with subs. (1) and  
21 (2). Notwithstanding s. 15.085 (5) (b) 2., if the Medical Examining Board  
22 reasonably determines that a rule submitted to it by the Physician ~~Assistant~~  
23 Associate Affiliated Credentialing Board under s. 15.085 (5) (b) 1. permits a  
24 broader scope of practice than that which may be exercised in accordance with subs.

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1 (1) and (2), then the Physician ~~Assistant-Examining~~ Associate Affiliated  
2 Credentialing Board shall, prior to submitting the proposed rule to the legislative  
3 council staff under s. 227.15 (1), revise the proposed rule so that it does not exceed  
4 or permit a broader scope of practice than that which may be exercised in  
5 accordance with subs. (1) and (2).

6 **SECTION 41.** 448.975 (5) (b) of the statutes is amended to read:

7 448.975 (5) (b) The board shall develop and recommend to the podiatry  
8 affiliated credentialing board practice standards for physician ~~assistants~~ associates  
9 practicing under podiatrists under sub. (2) (a) 2m.

10 **SECTION 42.** 448.975 (6) of the statutes is amended to read:

11 448.975 (6) The practice permissions provided in this section are permissions  
12 granted by the state authorizing the licensed practice of physician ~~assistants~~  
13 associates. Nothing in this section prohibits an employer, hospital, health plan, or  
14 other similar entity employing or with a relationship with a physician ~~assistant~~  
15 associate from establishing ~~additional~~ requirements for a physician ~~assistant~~  
16 associate as a condition of employment or relationship that are in addition to those  
17 specified in this section.

18 **SECTION 43.** 448.976 of the statutes is amended to read:

19 **448.976 Civil liability.** No physician ~~assistant~~ associate shall be liable for  
20 any civil damages for either of the following:

21 (1) Reporting in good faith to the department of transportation under s.  
22 146.82 (3) a patient's name and other information relevant to a physical or mental  
23 condition of the patient that in the physician ~~assistant's~~ associate's judgment

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1 impairs the patient's ability to exercise reasonable and ordinary control over a  
2 motor vehicle.

3 (2) In good faith, not reporting to the department of transportation under s.  
4 146.82 (3) a patient's name and other information relevant to a physical or mental  
5 condition of the patient that in the physician ~~assistant's~~ associate's judgment does  
6 not impair the patient's ability to exercise reasonable and ordinary control over a  
7 motor vehicle.

8 **SECTION 44.** 448.977 (1) (intro.) of the statutes is amended to read:

9 448.977 (1) (intro.) Except as provided in subs. (2) and (3), no physician  
10 ~~assistant~~ associate may practice as authorized under s. 448.975 unless he or she  
11 has in effect malpractice liability insurance coverage evidenced by one of the  
12 following:

13 **SECTION 45.** 448.977 (1) (b) of the statutes is amended to read:

14 448.977 (1) (b) Coverage under a group liability policy providing individual  
15 coverage for the physician ~~assistant~~ associate in the amounts under s. 655.23 (4).

16 **SECTION 46.** 448.977 (2) of the statutes is amended to read:

17 448.977 (2) The board may promulgate rules requiring a practicing physician  
18 ~~assistant~~ associate to have in effect malpractice liability insurance coverage in  
19 amounts greater than those specified in sub. (1) (a) or (b) or (4). If the board  
20 promulgates rules under this subsection, no physician ~~assistant~~ associate may  
21 practice as authorized under s. 448.975 unless he or she has in effect malpractice  
22 liability insurance coverage as required under those rules, except as provided in  
23 sub. (3).

24 **SECTION 47.** 448.977 (3) of the statutes is amended to read:

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1           448.977 (3) A physician ~~assistant~~ associate who is a state, county, or  
2           municipal employee, or federal employee or contractor covered under the federal  
3           tort claims act, as amended, and who is acting within the scope of his or her  
4           employment or contractual duties is not required to maintain in effect malpractice  
5           insurance coverage.

6           **SECTION 48.** 448.977 (4) of the statutes is amended to read:

7           448.977 (4) Except as provided in subs. (2) and (3), a physician ~~assistant~~  
8           associate may comply with sub. (1) if the physician ~~assistant's~~ associate's employer  
9           has in effect malpractice liability insurance that is at least the minimum amount  
10          specified under s. 655.23 (4) and that provides coverage for claims against the  
11          physician ~~assistant~~ associate.

12          **SECTION 49.** 448.978 (1g) (a) of the statutes is amended to read:

13          448.978 (1g) (a) "Unprofessional conduct" includes a determination made by a  
14          physician ~~assistant~~ associate under ch. 154 or 155 if the physician ~~assistant~~  
15          associate does not have sufficient education, training, and experience to make the  
16          determination.

17          **SECTION 50.** 448.978 (2) (intro.) of the statutes is amended to read:

18          448.978 (2) (intro.) Subject to the rules promulgated under s. 440.03 (1) and  
19          except as provided in sub. (3), if a person who applies for or holds a license or  
20          compact privilege issued under s. 448.974 does any of the following, the board may  
21          reprimand the person or deny, limit, suspend, or revoke the person's license or  
22          compact privilege:

23          **SECTION 51.** 448.978 (2) (b) of the statutes is amended to read:

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1           448.978 (2) (b) Violates any law of this state or federal law that substantially  
2       relates to the practice of a physician ~~assistant~~ associate, violates this subchapter, or  
3       violates a rule promulgated under this subchapter.

4           **SECTION 52.** 448.978 (2) (f) of the statutes is amended to read:

5           448.978 (2) (f) Subject to ss. 111.321, 111.322, and 111.34, practices as a  
6       physician ~~assistant~~ associate while his or her ability is impaired by alcohol or other  
7       drugs.

8           **SECTION 53.** 448.978 (2) (m) of the statutes is amended to read:

9           448.978 (2) (m) Demonstrates a lack of physical or mental ability to safely  
10      practice as a physician ~~assistant~~ associate.

11          **SECTION 54.** 448.978 (3) of the statutes is created to read:

12          448.978 (3) Subject to the rules promulgated under s. 440.03 (1), if a person  
13      who holds a license or compact privilege issued under s. 448.974 violates s.  
14      448.9723, the board shall discipline the person as follows:

15           (a) For a 1st violation, issue a written warning.

16           (b) For a 2nd violation, suspend the license or compact privilege of the person.

17           (c) For a 3rd violation, revoke the license or compact privilege of the person.

18          **SECTION 55.** 448.9785 (intro.) of the statutes is amended to read:

19          **448.9785 Informed consent.** (intro.) Any physician ~~assistant~~ associate who  
20      treats a patient shall inform the patient about the availability of reasonable  
21      alternate medical modes of treatment and about the benefits and risks of these  
22      treatments. The reasonable physician ~~assistant~~ associate standard is the standard  
23      for informing a patient under this section. The reasonable physician ~~assistant~~  
24      associate standard requires disclosure only of information that a reasonable

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1 physician ~~assistant~~ associate in the same or a similar medical specialty would know  
2 and disclose under the circumstances. The physician ~~assistant's~~ associate's duty to  
3 inform the patient under this section does not require disclosure of any of the  
4 following:

5 **SECTION 56.** 448.9785 (6) of the statutes is amended to read:

6 448.9785 (6) Information about alternate medical modes of treatment for any  
7 condition the physician ~~assistant~~ associate has not included in his or her diagnosis  
8 at the time the physician informs the patient.

9 **SECTION 57.** 448.9795 (1) of the statutes is amended to read:

10 448.9795 (1) A physician ~~assistant~~ associate who has reason to believe any of  
11 the following about another physician ~~assistant~~ associate shall promptly submit a  
12 written report to the board that includes facts relating to the conduct of the other  
13 physician ~~assistant~~ associate:

14 (a) The other physician ~~assistant~~ associate is engaging or has engaged in acts  
15 that constitute a pattern of unprofessional conduct.

16 (b) The other physician ~~assistant~~ associate is engaging or has engaged in an  
17 act that creates an immediate or continuing danger to one or more patients or to the  
18 public.

19 (c) The other physician ~~assistant~~ associate is or may be medically  
20 incompetent.

21 (d) The other physician ~~assistant~~ associate is or may be mentally or physically  
22 unable safely to engage in the practice of a physician ~~assistant~~ associate.

23 **SECTION 58.** 448.9795 (2) of the statutes is amended to read:

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1           448.9795 (2) No physician ~~assistant~~ associate who reports to the board under  
2           sub. (1) may be held civilly or criminally liable or be found guilty of unprofessional  
3           conduct for reporting in good faith.

4           **SECTION 59.** 448.9885 (1) (a) of the statutes is amended to read:

5           448.9885 (1) (a) “Board” means the physician ~~assistant~~ associate affiliated  
6           credentialing board.

7           **SECTION 60.** 450.11 (8) (f) of the statutes is amended to read:

8           450.11 (8) (f) The physician ~~assistant~~ associate affiliated credentialing board,  
9           insofar as this section applies to physician ~~assistants~~ associates.

10          **SECTION 61.** 655.001 (10r) of the statutes is created to read:

11          655.001 (10r) “Physician associate” means a person who is licensed under  
12          subch. IX of ch. 448 or who holds a compact privilege, as defined in s. 448.971 (1m),  
13          and who has qualified to practice independently under s. 448.975 (2) (ag).

14          **SECTION 62.** 655.002 (1) (a) of the statutes is amended to read:

15          655.002 (1) (a) A physician, physician associate, or a nurse anesthetist for  
16          whom this state is a principal place of practice and who practices his or her  
17          profession in this state more than 240 hours in a fiscal year.

18          **SECTION 63.** 655.002 (1) (b) of the statutes is amended to read:

19          655.002 (1) (b) A physician, physician associate, or a nurse anesthetist for  
20          whom Michigan is a principal place of practice, if all of the following apply:

21           1. The physician, physician associate, or nurse anesthetist is a resident of this  
22          state.

23           2. The physician, physician associate, or nurse anesthetist practices his or her

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1 profession in this state or in Michigan or a combination of both more than 240 hours  
2 in a fiscal year.

3 3. The physician, physician associate, or nurse anesthetist performs more  
4 procedures in a Michigan hospital than in any other hospital. In this subdivision,  
5 “Michigan hospital” means a hospital located in Michigan that is an affiliate of a  
6 corporation organized under the laws of this state that maintains its principal office  
7 and a hospital in this state.

8 **SECTION 64.** 655.002 (1) (c) of the statutes is amended to read:

9 655.002 (1) (c) A physician, physician associate, or nurse anesthetist who is  
10 exempt under s. 655.003 (1) or (3), but who practices his or her profession outside  
11 the scope of the exemption and who fulfills the requirements under par. (a) in  
12 relation to that practice outside the scope of the exemption. For a physician, a  
13 physician associate, or a nurse anesthetist who is subject to this chapter under this  
14 paragraph, this chapter applies only to claims arising out of practice that is outside  
15 the scope of the exemption under s. 655.003 (1) or (3).

16 **SECTION 65.** 655.002 (1) (d) of the statutes is amended to read:

17 655.002 (1) (d) A partnership comprised of physicians, physician associates,  
18 or nurse anesthetists and organized and operated in this state for the primary  
19 purpose of providing the medical services of physicians, physician associates, or  
20 nurse anesthetists.

21 **SECTION 66.** 655.002 (1) (e) of the statutes is amended to read:

22 655.002 (1) (e) A corporation organized and operated in this state for the



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1 primary purpose of providing the medical services of physicians, physician  
2 associates, or nurse anesthetists.

3 **SECTION 67.** 655.002 (1) (em) of the statutes is amended to read:

4 655.002 (1) (em) Any organization or enterprise not specified under par. (d) or  
5 (e) that is organized and operated in this state for the primary purpose of providing  
6 the medical services of physicians, physician associates, or nurse anesthetists.

7 **SECTION 68.** 655.002 (2) (a) of the statutes is amended to read:

8 655.002 (2) (a) A physician, physician associate, or nurse anesthetist for  
9 whom this state is a principal place of practice but who practices his or her  
10 profession fewer than 241 hours in a fiscal year, for a fiscal year, or a portion of a  
11 fiscal year, during which he or she practices his or her profession.

12 **SECTION 69.** 655.002 (2) (b) of the statutes is amended to read:

13 655.002 (2) (b) Except as provided in sub. (1) (b), a physician, physician  
14 associate, or nurse anesthetist for whom this state is not a principal place of  
15 practice, for a fiscal year, or a portion of a fiscal year, during which he or she  
16 practices his or her profession in this state. For a health care provider who elects to  
17 be subject to this chapter under this paragraph, this chapter applies only to claims  
18 arising out of practice that is in this state and that is outside the scope of an  
19 exemption under s. 655.003 (1) or (3).

20 **SECTION 70.** 655.003 (1) of the statutes is amended to read:

21 655.003 (1) A physician, a physician associate, or a nurse anesthetist who is a  
22 state, county or municipal employee, or federal employee or contractor covered

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1 under the federal tort claims act, as amended, and who is acting within the scope of  
2 his or her employment or contractual duties.

3 **SECTION 71.** 655.003 (3) of the statutes is amended to read:

4 655.003 (3) Except for a physician, physician associate, or nurse anesthetist  
5 who meets the criteria under s. 146.89 (5) (a), a physician, a physician associate, or  
6 a nurse anesthetist who provides professional services under the conditions  
7 described in s. 146.89, with respect to those professional services provided by the  
8 physician, physician associate, or nurse anesthetist for which he or she is covered by  
9 s. 165.25 and considered an agent of the department, as provided in s. 165.25 (6) (b).

10 **SECTION 72.** 655.005 (2) (a) of the statutes is amended to read:

11 655.005 (2) (a) An employee of a health care provider if the employee is a  
12 physician, a physician associate, or a nurse anesthetist or is a health care  
13 practitioner who is providing health care services that are not in collaboration with  
14 a physician under s. 441.15 (2) (b) or under the direction and supervision of a  
15 physician, physician associate, or nurse anesthetist.

16 **SECTION 73.** 655.005 (2) (b) of the statutes is amended to read:

17 655.005 (2) (b) A service corporation organized under s. 180.1903 by health  
18 care professionals, as defined under s. 180.1901 (1m), if the board of governors  
19 determines that it is not the primary purpose of the service corporation to provide  
20 the medical services of physicians, physician associates, or nurse anesthetists. The  
21 board of governors may not determine under this paragraph that it is not the  
22 primary purpose of a service corporation to provide the medical services of  
23 physicians, physician associates, or nurse anesthetists unless more than 50 percent

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1 of the shareholders of the service corporation are neither physicians, physician  
2 associates, nor nurse anesthetists.

3 **SECTION 74.** 655.23 (5m) of the statutes is amended to read:

4 655.23 **(5m)** The limits set forth in sub. (4) shall apply to any joint liability of  
5 a physician, physician associate, or nurse anesthetist and his or her corporation,  
6 partnership, or other organization or enterprise under s. 655.002 (1) (d), (e), or (em).

7 **SECTION 75.** 655.27 (3) (a) 4. of the statutes is amended to read:

8 655.27 **(3)** (a) 4. For a health care provider described in s. 655.002 (1) (d), (e),  
9 (em), or (f), risk factors and past and prospective loss and expense experience  
10 attributable to employees of that health care provider other than employees  
11 licensed as a physician, physician associate, or nurse anesthetist.

12 **SECTION 76.** 655.27 (3) (b) 2m. of the statutes is amended to read:

13 655.27 **(3)** (b) 2m. In addition to the fees and payment classifications  
14 described under subds. 1. and 2., the commissioner, after approval by the board of  
15 governors, may establish a separate payment classification for physicians satisfying  
16 s. 655.002 (1) (b), a separate fee for physician associates satisfying s. 655.002 (1) (b),  
17 and a separate fee for nurse anesthetists satisfying s. 655.002 (1) (b) which take into  
18 account the loss experience of health care providers for whom Michigan is a  
19 principal place of practice.

20 **SECTION 77.** 655.275 (2) of the statutes is amended to read:

21 655.275 **(2)** APPOINTMENT. The board of governors shall appoint the members  
22 of the council. Section 15.09, except s. 15.09 (4) and (8), does not apply to the  
23 council. The board of governors shall designate the chairperson, who shall be a

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1 physician, the vice chairperson, and the secretary of the council and the terms to be  
2 served by council members. The council shall consist of 5 or 7 persons, not more  
3 than 3 of whom are physicians who are licensed and in good standing to practice  
4 medicine in this state and one of whom is either a physician associate who is  
5 licensed and in good standing to practice as a physician associate in this state or a  
6 nurse anesthetist who is licensed and in good standing to practice nursing in this  
7 state. The chairperson or another peer review council member designated by the  
8 chairperson shall serve as an ex officio nonvoting member of the medical examining  
9 board and may attend meetings of the medical examining board, as appropriate.

10 **SECTION 78.** 655.275 (5) (b) 3. of the statutes is created to read:

11 655.275 (5) (b) 3. If a claim was paid for damages arising out of the rendering  
12 of care by a physician associate, with at least one physician associate.

13 **SECTION 79.** 990.01 (27s) of the statutes is amended to read:

14 990.01 (27s) PHYSICIAN ASSISTANT OR PHYSICIAN ASSOCIATE. “Physician  
15 assistant” or “physician associate” means a person who is licensed as a physician  
16 ~~assistant~~ associate under subch. IX of ch. 448 or who holds a compact privilege  
17 under subch. XIII of ch. 448.

18 **SECTION 80. Terminology changes.**

19 (1) Wherever “physician assistant” or “physician assistant’s” appears in the  
20 following, as affected by the acts of 2025, “physician associate” or “physician  
21 associate’s,” as applicable, is substituted: ss. 16.417 (1) (e) 3m., 23.33 (4p) (b) 4.,  
22 23.335 (12) (g) 8., 29.193 (1m) (a) 2. (intro.), (2) (b) 2., (c) 3., (cd) 2. b. and c., and (e),  
23 and (3) (a), 30.684 (2) (d), 36.61 (1) (b), 46.03 (44), 48.981 (2m) (b) 1., 49.45 (9r) (a) 7.  
24 e., 50.08 (2), 50.09 (1) (a) (intro.), (f) 1., (h), and (k), 50.49 (1) (b), 50.65 (5) (a), 51.01

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(8m) (d), 60.23 (9), 69.01 (6g), 69.18 (1) (ck), 70.47 (8), 97.59, 97.67 (5m) (a) 3., 102.13 (1) (a), (b) (intro.), 1., 3., and 4., and (d) 1. to 4. and (2) (a) and (b), 102.17 (1) (d) 1. and 2., 102.29 (3), 102.42 (2) (a), 118.15 (3) (a), 118.25 (1) (a), 118.29 (1) (e), 118.2915 (1) (f), (2) (a), (3) (a), (4) (c), and (6) (a) (intro.), 2., and 3., 118.2925 (1) (f), (3), (4) (c), and (5), 118.294 (1) (bm) and (d), (2), and (4) (a), 146.615 (1) (a), 146.81 (1) (eu), 146.82 (3) (a), 146.89 (1) (r) 1., 146.997 (1) (d) 4., 154.01 (3) (b), 154.03 (2) (form), 155.01 (1g) (c) and (7), 155.30 (3) (form), 165.765 (2) (a) 1., 251.03 (1), 252.07 (8) (a) 2. and (9) (c), 252.11 (2) to (5), (7), and (10), 252.14 (1) (ar) 4rm., 252.15 (1) (am), (3m) (d) 11. b. and 13., (e), and (f) 3., (5g) (c) and (g) 2., (5m) (d) 2. and (e) 2. and 3., and (7m) (intro.) and (b), 252.16 (3) (c) (intro.), 252.17 (3) (c) (intro.), 253.10 (2) (f), 255.07 (1) (d), 256.15 (4) (b), 256.30 (3) (c), 257.01 (5) (a) and (b), 341.14 (1a), (1e) (a), (1m), and (1q), 343.16 (5) (a), 343.305 (5) (b), 343.51 (1), 343.62 (4) (a) 4., 350.104 (2) (d), 440.03 (13) (b) 52. and (c) 1. k., 440.077 (1) (e) and (2) (c), 440.08 (2) (a) 59., 440.094 (1) (c) 9m., 448.03 (2) (a), (b), and (c), 448.038 (2), 448.56 (1) and (1m) (b), 448.62 (7), 448.67 (2), 448.695 (4) (a) and (b), 450.01 (16) (h) 3., (hm) 3., and (hr) 3., 450.10 (3) (a) 5., 450.11 (1i) (a) 1. and (b) 2. cm. and (7) (b), 450.13 (5) (c), 450.135 (7) (c), 454.02 (2) (a), 454.21 (1), 462.02 (2) (e), 462.04, 895.478 (3m), 895.48 (1m) (a) (intro.) and 2., 895.535 (1), 961.01 (19) (a), 968.255 (3), and 971.14 (4) (a).

(2) Wherever “physician assistants” appears in the following, as affected by the acts of 2025, “physician associates” is substituted: ss. 15.406 (7) (a), 29.193 (2) (c) 3., 51.036 (2) (c) 8., 51.442 (1), 51.448 (1), 102.13 (1) (a), 102.17 (1) (d) 1., 253.07 (4) (d), and 256.15 (4) (a) 1.

**SECTION 81. Nonstatutory provisions.**

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1           (1) Using the procedure under s. 227.24, the physician associate affiliated  
2           credentialing board may promulgate rules under subch. IX of ch. 448 that are  
3           necessary to implement the changes in this act. Notwithstanding s. 227.24 (1) (a)  
4           and (3), the physician associate affiliated credentialing board is not required to  
5           provide evidence that promulgating a rule under this subsection as an emergency  
6           rule is necessary for the preservation of the public peace, health, safety, or welfare  
7           and is not required to provide a finding of emergency for a rule promulgated under  
8           this subsection. A rule under this subsection may take effect no later than the date  
9           specified in SECTION 82 (intro.) of this act. Notwithstanding s. 227.24 (1) (c) and (2),  
10          a rule promulgated under this subsection is effective for 2 years after its  
11          promulgation, or until permanent rules take effect, whichever is sooner, and the  
12          effective period of a rule promulgated under this subsection may not be further  
13          extended under s. 227.24 (2).

14          **SECTION 82. Effective date.** This act takes effect on the first day of the 10th  
15          month beginning after publication, except as follows:

16               (1) SECTION 81 (1) of this act takes effect on the day after publication.

17                               **(END)**