

LFC Requester:

Emily Hilla

AGENCY BILL ANALYSIS - 2026 REGULAR SESSION

WITHIN 24 HOURS OF BILL POSTING, UPLOAD ANALYSIS TO
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(Analysis must be uploaded as a PDF)

SECTION I: GENERAL INFORMATION

{Indicate if analysis is on an original bill, amendment, substitute or a correction of a previous bill}

Date Prepared: 2/3/26 **Bill Number:** HB277 **Original** **Amendment** **Substitute**

Short Title: SCOPE OF PRACTICE ACT

Sponsor: Rep. Nicole Chavez

Name and Code Number: HCA 630

Person Writing: Kresta Opperman

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SECTION II: FISCAL IMPACT**APPROPRIATION (dollars in thousands)**

Appropriation		Recurring or Nonrecurring	Fund Affected
FY26	FY27		
\$0.0	\$200.0	Nonrecurring	General Fund

(Parenthesis () indicate expenditure decreases)

REVENUE (dollars in thousands)

Estimated Revenue			Recurring or Nonrecurring	Fund Affected
FY26	FY27	FY28		
\$0.0	\$200.0	\$0.0	NA	NA

(Parenthesis () indicate revenue decreases)

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY26	FY27	FY28	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
Total	\$0.0	\$0.0	\$0.0	NA	NA	N/A

(Parenthesis () Indicate Expenditure Decreases)

SECTION III: NARRATIVE

BILL SUMMARY

Synopsis:

HB277 creates a Scope of Practice Advisory Committee to evaluate proposed changes to health care profession scopes of practice. This act may be cited as the "Scope of Practice Act". Under the bill, the Committee is to review written requests from licensing boards and legislators proposing changes to the scope of practice for given health care professions.

The evaluation shall consider patient safety and quality of health care, including the potential harm or benefit to the health, safety or welfare of consumers; education, training and competency of the health care workforce, including whether the education and clinical training required for the proposed scope of practice is sufficient for safe and effective health care services; required supervision and accountability, including whether physician-led or physician-supervised care is necessary to ensure safe practice; access to health care, including the expected impact on access to health care services in rural or underserved areas; the cost of health care; health care workforce development, including alignment with the state's health care workforce training, recruitment and retention needs; regulatory consistency, including whether the proposed scope of practice would create conflicts with existing statutes or rules; and the standards and recommendations of national health care accrediting bodies and professional associations.

Within ten days of receipt of a request, the committee or its staff shall review the request to verify that the request satisfies the requirements. If so, the committee will post a copy to the committee's website, hold a public hearing, and accept written input from the public. The committee should invite pertinent licensing boards, professional associations and patient advocates to the public hearing.

Within thirty days of the committee's vote, the committee shall develop and make available a report detailing the Committee's decision, documents reviewed and opinions expressed by Committee members during deliberations, and each member's vote on the proposal.

The bill appropriates two hundred thousand dollars (\$200,000) from the general fund to the Department of Health for expenditure in fiscal year 2027 to carry out the purposes of the Scope of Practice Act. Any unexpended balance remaining at the end of fiscal year 2027 shall revert to the general fund.

FISCAL IMPLICATIONS

None

SIGNIFICANT ISSUES

None

PERFORMANCE IMPLICATIONS

None

ADMINISTRATIVE IMPLICATIONS

None for the HCA. HB277 designates the Department of Health to be accountable to conduct and

carry out the purposes of the Scope of Practice Act. Scope of practice for many healthcare professions in the state are set by the licensing boards. This often, but not always, falls under the purview of the Regulatory and Licensing Division (RLD). While RLD can request a scope of practice review, this legislation also allows a legislator to request a review without RLD or other pertinent boards consent. It is unclear who may retain regulatory in this case, especially if the DOH board and RLD are not in alignment.

Since the unexpended balance remaining at the end of fiscal year 2027 shall revert to the general fund, it is anticipated that “The Scope of Practice Advisory Committee” would complete its work by the end of the fiscal year 2027 or pursue additional recurring funding in the future.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

NA

TECHNICAL ISSUES

None

OTHER SUBSTANTIVE ISSUES

The proposed changes to health care profession scopes of practice may impact on HCA Medicaid providers. It is possible for scopes of practices to be expanded within the state but are not covered services for Medicaid. These instances would need to be evaluated on an individualized basis. HCA anticipates impacts on patient safety, health care access and health care costs, if changes are made to the scope of practice for providers. Any evaluations of proposed changes in scopes of practice would need to include consideration of the resulting relationship with interstate compacts.

ALTERNATIVES

None

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

None

AMENDMENTS

None.