AMA defends medicine from scope creep anytime, anywhere

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State legislation to inappropriately expand scope of practice for nonphysicians are like bad pennies—the same bills keep coming back year after year.

There’s a lot of legislative fatigue with these bills, but that doesn’t stop bills from being introduced year after year, observes Kimberly Horvath, senior attorney with AMA Advocacy Resource Center. This underscores the need to educate lawmakers on the differences in education and training between physicians and nonphysician providers, she said.

It’s also a call for organized medicine to work together.

The South Dakota State Medical Association had defeated scope-of-practice expansion bills for physician assistants in 2021 and again in 2022. However, it was able to knock down the same bill for a third year in a row by the widest margin yet. The strategy—an effective grassroots campaign that drew inspiration from other state campaigns, leveraging AMA resources and financial help from the AMA Scope of Practice Partnership.

In an episode of “AMA Update,” Horvath discussed the latest trends she’s seen in scope-of-practice bills, and how AMA efforts have helped thwart efforts for inappropriate scope expansions.

Fighting scope creep is a critical component of the AMA Recovery Plan for America’s Physicians.

Patients deserve care led by physicians—the most highly educated, trained and skilled health professionals. The AMA vigorously defends the practice of medicine against scope-of-practice expansions that threaten patient safety.

Who’s seeking expanded scope
Tracking hundreds of bills over the last legislative session, Horvath has seen an uptick in bills aiming to inappropriately expand scope of practice for pharmacists and physician assistants.

Some of these bills would allow pharmacists to diagnose and treat a patient based on tests waived under the Clinical Laboratory Improvement Amendments (CLIA) of 1988. This carries over from the pandemic, when pharmacists were allowed to test-to-treat for COVID-19, explained Horvath.

In this space, the AMA has seen pharmacists use CLIA-waived tests to diagnose for other conditions such as strep throat, respiratory syncytial virus, influenza and urinary tract infections.

“This is really problematic and concerning to us,” said Horvath.

Pharmacists are experts in medications and medication management, but they don’t have the training and expertise to diagnose or physically examine a patient, she said. They should not be diagnosing a patient simply from a test result.

Meanwhile, about 10 states had bills to expand scope of practice for physician assistants in 2022. This year, the number doubled to 20, said Horvath.

How the AMA helps

While some losses have occurred, the AMA—working alongside state medical associations and national specialty societies—have largely succeeded in stopping most of the inappropriate scope-of-practice expansions.

Medical associations in states such as South Dakota, Mississippi and Indiana have defeated all the scope-of-practice bills pending in their statehouses. Texas was able to defeat 132 bills in 2023 alone. The AMA continues to work with medical associations in states that are still in session, tracking bills in Michigan, North Carolina and Pennsylvania among others.

“We continuously update and provide new resources,” said Horvath.

The AMA Geographic Mapping Initiative (geomaps), which compares where physicians practice versus nonphysicians in all 50 states and the District of Columbia, has refuted the notion that scope-of-practice expansions improve access to care in rural areas, noted Horvath.

These maps show that nurse practitioners and other nonphysicians tend to practice in the same areas of the states as physicians—even in states where scope expansion is permitted.

Find out in detail why education matters to scope of practice, with information on:


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