



Montana Board of Medical Examiners

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Licensing Requirements and Application Checklist Physician Assistant

License Requirements for Physician Assistant

1. Graduation from an accredited PA training program – [MCA [37-20-402](#)]
2. Passage of an examination administered by the NCCPA (PANCE exam) – [MCA [37-20-402](#)]

Checklist of Required Documents to Submit for Application for Physician Assistant

The following documents and additional forms are required in addition to the basic application:

- ☐ License verification. Board staff will verify all U.S. Physician Assistant licenses via the Physician Data Center. Applicants must request license verification be sent directly to the Montana board in the following circumstances: licenses held that are not physician assistant licenses, licenses held in Canada, any license that has ever been disciplined. Verifications submitted via VeriDoc will also be accepted.
- ☐ If applying to practice without a collaborative agreement, have documentation you will use to attest to you having completed 8,000 or more hours of postgraduate clinical experience. [MCA, [37-20-203](#)] [[ARM 24.156.403](#) (j)]
- ☐ If you answered yes to any personal history questions, include a detailed explanation on the event(s) and documentation from the source (licensing board, federal agencies/programs, or civil/criminal court proceedings such as initiating/charging documents, final disposition/judgement documents, etc.)

Application Fee(s) for Physician Assistant

The following fee must be submitted with your application. Online applicants can pay using a credit card or e-check. If you submit a paper application you must submit a check. Do not mail cash.

- ☐ \$375 application fee

Other Application Information

- The Board of Medical Examiners will verify your examination through NCCPA online services.
- The Board of Medical Examiners will request a report from the National Practitioner DataBank (NPDB). Do not submit “self-query” to the NPDB.
- [37-20-203, MCA](#) and [ARM 24.156.405](#) (k) and (o) address collaborative agreement requirements.

Apply for a license online at <https://ebiz.mt.gov/POL/> or download an application from the website. Online application is recommended.

E-mail is the department's primary form of communication. Include a valid e-mail address with your application.

NOTE: For further information regarding Physician Assistant Montana Regulations and to read the FAQs about Physician Assistants, please visit our website at: www.medicalboard.mt.gov

If you have questions about the application process or the licensing requirements please contact the Department of Labor and Industry Professional Licensing Bureau using the contact information at the top of this checklist.

GENERAL INFORMATION ON COLLABORATIVE AGREEMENTS AND INDEPENDENT PRACTICE

COLLABORATIVE PRACTICE

- A physician assistant with fewer than 8,000 hours of postgraduate clinical experience shall practice medicine with a collaborative agreement between the physician assistant and one or more collaborating providers, who may be:
 - a licensed physician; or
 - a licensed physician assistant with 8,000 or more hours of postgraduate clinical experience. [MCA, [37-20-203](#)] [[ARM 24.156.403](#) (j)]
- "Collaborative agreement" means the interaction and relationship that a physician assistant has with a collaborating provider as described, in which:
 - the physician assistant and collaborating provider are cognizant of the physician assistant's qualifications and limitations in caring for patients;
 - the physician assistant consults with the collaborating provider while remaining responsible for care provided by the physician assistant; and
 - the collaborating provider gives direction and guidance to the physician assistant. [MCA, [37-20-203](#)]
- A physician assistant with a collaborative agreement shall:
 - practice under written policies and procedures established at a practice level that:
 - describe how collaboration will occur;
 - and describe methods for evaluating the physician assistant's competency, knowledge, and skills; and
 - provide a copy of the written policies and procedures and documentation of compliance to the board upon the board's request. [MCA, [37-20-203](#), [ARM 24.156.405](#) (k) and (o)]

PRACTICE WITHOUT A COLLABORATIVE AGREEMENT

- If you qualify to practice without a collaborative agreement [[37-20-203](#)] [[ARM 24.156.403](#) (j)] and you wish to have this status reflected on your license, retain documentation on having completed 8,000 or more hours of postgraduate clinical experience. [MCA, [37-20-203](#)] [[ARM 24.156.403](#) (j)]
- [37-20-203](#), MCA and [ARM 24.156.405](#) (k) and (o) address collaborative agreement requirements.