# MAINE STATE LEGISLATURE

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## 118th MAINE LEGISLATURE

### FIRST REGULAR SESSION-1997

Legislative Document

No. 539

H.P. 394

House of Representatives, January 28, 1997

An Act to Clarify the Laws Regarding the Board of Licensure in Medicine and Ensure That Physician Discipline Is Reported to the Appropriate Licensing Board.

Submitted by the Department of Professional and Financial Regulation pursuant to Joint Rule 204.

Reference to the Committee on Business and Economic Development suggested and ordered printed.

OSEPH W. MAYO, Clerk

Presented by Representative VIGUE of Winslow. Cosponsored by Senator LONGLEY of Waldo and Representatives: AHEARNE of Madawaska, BARTH of Bethel, MERES of Norridgewock, USHER of Westbrook.

### Be it enacted by the People of the State of Maine as follows:

Sec. 1. 24 MRSA §2502, sub-§2-A is enacted to read:

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2-A. Health maintenance organization. "Health maintenance organization" means an organization defined by and subject to Title 24-A, chapter 56.

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Sec. 2. 24 MRSA §2502, sub-§3-A is enacted to read:

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- 3-A. Preferred provider organization. "Preferred provider organization" means an arrangement between an insurer or administrator and preferred providers that is defined by and subject to Title 24-A, chapter 32.
- Sec. 3. 24 MRSA §2506, as amended by PL 1989, c. 462, §1, is further amended to read:

§2506. Provider reports

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A health care provider shall, within 60 days, report in writing to the disciplined practitioner's board or authority the name of any licensed, certified or registered employee or person privileged by the provider whose employment or privileges have been revoked, suspended, limited er, terminated, or who resigned while under investigation or to avoid investigation, together with pertinent-information all information and records relating to that action. The report shall must include situations in which employment or privileges have been revoked, suspended, limited or otherwise adversely affected by action of the health care practitioner while the health care practitioner was the subject of disciplinary proceedings, and it also shall must include situations where employment or privileges have been revoked, suspended, limited or otherwise adversely affected by act of the health care practitioner in return for the health care provider terminating such proceeding. Any reversal, modification or change of action reported pursuant to this section shall must be reported immediately to the practitioner's board or authority, together with a brief statement of the reasons for that reversal, modification or change. The failure of any such health care provider to report as required is a civil violation for which a fine of not more than \$1,000 may be adjudged.

Health maintenance organizations, preferred provider organizations and similar organizations are subject to the reporting requirements of this section when they take adverse action against a physician's privileges, credentials or employment for reasons related to clinical competence or unprofessional conduct.

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Sec. 4. 32 MRSA §3270-B, as amended by PL 1993, c. 600, Pt. A, §206, is further amended by repealing the headnote and replacing it with the following:

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§3270-B. License and regulation

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Sec. 5. 32 MRSA  $\S3270$ -B, first  $\P$ , as amended by PL 1993, c. 600, Pt. A,  $\S206$ , is further amended to read:

A physician assistant is not permitted to practice until the physician assistant has applied for and obtained a certificate-of qualification license issued by the Board of Licensure in Medicine, which must be renewed biennially, and a certificate of registration, which must be renewed biennially. All applications for certificate of qualification registration must be accompanied by an application by the proposed supervisory physician, which application by the proposed supervisory physician is responsible for all medical activities of the physician assistant. The Board of Licensure in Medicine is authorized to adopt rules regarding the training and certification licensure of physician assistants and the agency relationship between the physician assistant and the supervising physician. Those rules may pertain, but are not limited, to the following matters:

Sec. 6. 32 MRSA §3270-B, sub-§11, as amended by PL 1993, c. 600, Pt. A, §206, is further amended to read:

**11. Fees for biennial license renewal.** Fees for the biennial registration license renewal of physician assistants in an amount not to exceed \$100.

Sec. 7. 32 MRSA §3286, 2nd ¶, as amended by PL 1993, c. 600,
Pt. A, §219, is further amended to read:

For the purpose of this seetien chapter, by practicing or by making and filing a biennial license to practice medicine in this State, every physician licensed under this chapter who accepts the privilege to practice medicine in this State is deemed to have given consent to a mental or physical examination when directed in writing by the board and to have waived all objections to the admissibility of the examining physicians' testimony or examination reports on the grounds that the testimony or reports constitute a privileged communication.

Sec. 8. 32 MRSA §3296, as amended by PL 1993, c. 600, Pt. A, §223, is further amended by adding at the end a new paragraph to read:

The exemptions from discovery under this section do not apply to the identification of an affected practitioner or the

primary source materials utilized in the proceedings, which must be reported to the board pursuant to Title 24, section 2506.

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#### **SUMMARY**

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This bill amends the Maine Revised Statutes, Title 24, chapter 21, the Maine Health Security Act, to include health maintenance organizations, preferred provider arrangements and similar organizations as entities that must report practitioner discipline related to clinical competence or unprofessional conduct.

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The bill also amends Title 32, chapter 48, the laws regarding the Board of Licensure in Medicine, to clarify that physician assistants are licensed to practice and are registered with the board, under a supervisory physician. The bill also clarifies the board's authority to require licensees to submit to mental or physical examination.

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