



122nd MAINE LEGISLATURE

FIRST REGULAR SESSION-2005

Legislative Document	No.	398

H.P. 301

House of Representatives, January 25, 2005

An Act To Make Technical Changes to the Medical Licensure Laws

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

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

Millicent M. Mac Jarland

MILLICENT M. MacFARLAND Clerk

Presented by Representative SMITH of Monmouth. Cosponsored by Representatives: DUDLEY of Portland, MARRACHÉ of Waterville, RECTOR of Thomaston, Senators: MARTIN of Aroostook, PERRY of Penobscot, SULLIVAN of York.

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

2 Sec. 1. 32 MRSA §3270-C, sub-§1, as amended by PL 2003, c. 4 601, $\S3$, is further amended to read: 6 Grounds. The sanctions of section 3282-A apply to a 1. physician assistant whe-has+. 8 A-1--- Claimed to be legally -licensed or allowed another to 10 represent--that--physician--assistant--as--holding--a--valid license; 12 B.--Performed-otherwise-than-at-the-direction-and-under-the 14 supervision-of-a-physician-licensed-by-this-board; 16 C---Been-delegated-and-performed-a-task-or-tasks-beyond-the physician-assistant's-competence;-and 18 D----Administered, -- dispensed -- or -- prescribed -- a -- controlled 20 substance-otherwise-than-as-authorized-by-law-22 Sec. 2. 32 MRSA §3271, sub-§2, as amended by PL 2003. c. 601, §4, is further amended to read: 24 2. Postgraduate training. Each applicant who has graduated from an accredited medical school on or after January 1, 1970 but 26 before July 1, 2004 must have satisfactorily completed at least 28 24 months in a graduate educational program accredited by the Accreditation Council on Graduate Medical Education, the Canadian 30 Medical Association or the Royal College of Physicians and Notwithstanding other requirements of Surgeons of Canada. postgraduate training, an applicant is eligible for licensure 32 when the candidate has satisfactorily graduated from a combined 34 postgraduate training program in which each of the contributing programs is accredited by the Accreditation Council on Graduate Medical Education and the applicant is eligible for accreditation 36

Board American of Medical Specialties in both by the 38 specialties. Each applicant who has graduated from an accredited medical school prior to January 1, 1970 must have satisfactorily 40 completed at least 12 months in a graduate educational program accredited by the Accreditation Council on Graduate Medical Education, the Canadian Medical Association or the Royal College 42 of Physicians and Surgeons of Canada. Each applicant who has 44 graduated from an accredited medical school on or after July 1, 2004 or an unaccredited medical school must have satisfactorily completed at least 36 months in a graduate educational program 46 accredited by the Accreditation Council on Graduate Medical 48 Education, the Canadian Medical Association, the Royal College of Physicians and Surgeons of Canada or the Royal Colleges of England, Ireland or Scotland. Notwithstanding this subsection, 50

an applicant who is board certified by the American Board of 2 Medical Specialties is deemed to meet the postgraduate training requirements of this subsection.

Sec. 3. 32 MRSA §3272, as amended by PL 1993, c. 600, Pt. A, §209, is repealed.

8 Sec. 4. 32 MRSA §3273, as amended by PL 1991, c. 425, §15, is repealed.

Sec. 5. 32 MRSA §3277, as amended by PL 1993, c. 600, Pt. A, 12 §213, is further amended to read:

14 §3277. Camp physicians

A physician who is qualified under section 3275 may, at the 16 discretion of the board, be temporarily licensed as a camp 18 physician so that the physician may care for the campers in that particular camp for which the physician was hired and retained as a camp physician. That physician is entitled to practice only on 20 patients in the camp. The temporary license must be obtained each year. Application for this temporary license must be made in the 2.2 same form and manner as for regular licensure. An examination may 24 not be exacted from applicants for these temporary licenses. The fee for temporary licensure may not be more than \$100 \$400 26 annually.

28 Sec. 6. 32 MRSA §3278, as amended by PL 2003, c. 601, §6, is further amended to read:

§3278. Emergency 100-day license

becomes-due.

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A physician who presents a current active unconditioned license from another United States licensing jurisdiction and who can provide reasonable proof of meeting qualifications for licensure in this State must be issued a license to serve as locum-tenens temporarily for declared emergencies in the State or for other appropriate reasons as determined by the board. The locum-tenens license is effective for not more than 100 days. The fee for this locum-tenens license may be not more than \$400.

- 42 Sec. 7. 32 MRSA §3280-A, sub-§3, ¶A, as amended by PL 1999, c. 685, §11, is further amended to read:
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A. The board may charge a license renewal application fee of not more than \$500 to all applicants for license renewal

who-have-not-attained--70-years-of-age-on-the-date-renewal

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SUMMARY

2	SOMMARI
4	This bill makes a number of technical changes to the law concerning the Board of Licensure in Medicine.
6	1. It clarifies and provides specific grounds for
8	disciplining physician assistants.
10	2. It changes the postgraduate training requirements for licensure to require the completion of a postgraduate residency training program by persons graduating from an accredited or
12	nonaccredited medical school on or after July 1, 2004.
14	3. It repeals sections of law referring to a state examination and reexamination of physician licensure applicants
16	since the board now uses the national standardized examination set.
18	4. It changes the nomenclature of the "locum tenens"
20	license.
22	5. It requires physicians 70 years of age or older who continue active practice to pay license registration fees.

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