MAINE STATE LEGISLATURE

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122nd MAINE LEGISLATURE

FIRST REGULAR SESSION-2005

Legislative Document

No. 697

S.P. 234

In Senate, February 10, 2005

An Act To Clarify Reporting Responsibilities to Licensing Boards

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.

JOY J. O'BRIEN Secretary of the Senate

Presented by Senator HOBBINS of York.

Cosponsored by Representative SMITH of Monmouth and

Senator: SULLIVAN of York, Representative: MARRACHÉ of Waterville.

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

Sec. 1. 24 MRSA §2506, as amended by PL 1997, c. 697, §5, is further amended to read:

§2506. Provider, entity and carrier reports

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8 A health care provider or health care entity shall, within 60 days, report in writing to the disciplined practitioner's 10 board or authority the name of any licensed, certified or registered employee or person privileged by the provider or 12 entity whose employment or privileges have been revoked, suspended, limited or terminated or who resigned while under 14 investigation or to avoid investigation for reasons related to clinical competence or unprofessional conduct, together with 16 pertinent information relating to that action. Pertinent information includes a description of the adverse action, the 18 name of the practitioner involved, the date, the location and a description of the event or events giving rise to the adverse 20 action, identification of the complainant and the medical records involved. Upon request, the following information must be 22 released to the board or authority: medical records relating to the event or events; written statements signed or prepared by any 24 witness or complainant to the event; and related correspondence between the practitioner and the provider or entity. The report must include situations in which employment or privileges have 26 been revoked, suspended, limited or otherwise adversely affected 28 by action of the health care practitioner while the health care practitioner was the subject of disciplinary proceedings, and it 30 also must include situations where employment or privileges have been revoked, suspended, limited or otherwise adversely affected 32 by act of the health care practitioner in return for the health care provider or health care entity terminating such proceeding. Any reversal, modification or change of action reported pursuant 34 this section reported immediately to must be to 36 practitioner's board or authority, together with statement of the reasons for that reversal, modification or change. The failure of any health care provider or health care 38 entity to report as required is a civil violation for which a fine of not more than \$1,000 may be adjudged. 40

Carriers providing managed care plans are subject to the reporting requirements of this section when they take adverse actions against a practitioner's credentials or employment for reasons related to clinical competence or unprofessional conduct that may adversely affect the health or welfare of the patient.

	Sec.	2.	24 MRSA §2510, sub-§1, ¶B, as enacted by PL 1977, of	c.
2			amended to read:	

B. To governmental licensing or disciplinary authorities of any jurisdiction or to any health care providers or health care entities located within or outside this State which that are concerned with granting, limiting or denying a physician's hespital privileges, previded-that but only if the board shall-include includes along with the transfer an indication as to whether or not the information has been substantiated by the board;

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SUMMARY

This bill specifies the information to be reported by providers of health care to licensing boards regarding health-care-related discipline of licensed professionals by the providers. It clarifies that all health care entities are covered by this reporting requirement and it confirms the ability of the practitioner's board of licensure to share otherwise confidential investigative information with health care providers who credential licensees.