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_{Date:} 6/10/13

3	LABOR, COMMERCE, RESEARCH AND ECONOMIC DEVELOPMENT
4	Reproduced and distributed under the direction of the Clerk of the House.
5	STATE OF MAINE
6	HOUSE OF REPRESENTATIVES
7	126TH LEGISLATURE
8	FIRST REGULAR SESSION
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9 10	COMMITTEE AMENDMENT " \mathcal{A} " to H.P. 1026, L.D. 1437, Bill, "An Act To Amend the Laws Regarding Licensure of Physicians and Physician Assistants"
11	Amend the bill by striking out all of sections 1 and 2 and inserting the following:
12 13	'Sec. 1. 24 MRSA §2505, first ¶, as amended by PL 2013, c. 105, §2, is further amended to read:
14 15 16 17 18 19 20 21 22 23 24 25	Any professional competence committee within this State and any physician <u>or</u> <u>physician assistant</u> licensed to practice or otherwise lawfully practicing within this State shall, and any other person may, report the relevant facts to the appropriate board relating to the acts of any physician <u>or physician assistant</u> in this State if, in the opinion of the committee, physician, <u>physician assistant</u> or other person, the committee or individual has reasonable knowledge of acts of the physician <u>or physician assistant</u> amounting to gross or repeated medical malpractice, misuse of alcohol, drugs or other substances that may result in the physician's <u>or the physician assistant's</u> performing services in a manner that endangers the health or safety of patients, professional incompetence, unprofessional competence committee or any such physician <u>or physician assistant</u> to report as required is a civil violation for which a fine of not more than \$1,000 may be adjudged.
26 27	Sec. 2. 24 MRSA §2505, 2nd \P , as amended by PL 2013, c. 105, §3, is further amended to read:
28 29 30 31 32 33 34 35 36 37	Except for specific protocols developed by a board pursuant to Title 32, section 1073, 2596-A or 3298, a physician or physician assistant, dentist or committee is not responsible for reporting misuse of alcohol, drugs or other substances or professional incompetence or malpractice as a result of physical or mental infirmity or by the misuse of alcohol, drugs or other substances discovered by the physician, physician assistant, dentist or committee as a result of participation or membership in a professional review committee or with respect to any information acquired concerning misuse of alcohol, drugs or other substances or professional incompetence or malpractice as a result of physical or mental infirmity or by the misuse of alcohol, drugs or other substances or professional incompetence or malpractice as a result of physical or mental infirmity or by the misuse of alcohol, drugs or other substances or professional incompetence or malpractice as a result of physical or mental infirmity or by the misuse of alcohol, drugs or other substances, as long as that information is reported to the professional review committee. Nothing in this

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COMMITTEE AMENDMENT

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COMMITTEE AMENDMENT " H" to H.P. 1026, L.D. 1437

<u>This</u> section may <u>does not</u> prohibit an impaired physician, <u>physician assistant</u> or dentist from seeking alternative forms of treatment.'

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Amend the bill by inserting after section 5 the following:

'Sec. 6. 32 MRSA §3271, sub-§2, as amended by PL 2005, c. 162, §2, is further amended to read:

6 2. Postgraduate training. Each applicant who has graduated from an accredited 7 medical school on or after January 1, 1970 but before July 1, 2004 must have satisfactorily completed at least 24 months in a graduate educational program accredited 8 by the Accreditation Council on Graduate Medical Education, the Canadian Medical 9 Association or the Royal College of Physicians and Surgeons of Canada. 10 Notwithstanding other requirements of postgraduate training, an applicant is eligible for 11 licensure when the candidate has satisfactorily graduated from a combined postgraduate 12 13 training program in which each of the contributing programs is accredited by the 14 Accreditation Council on Graduate Medical Education and the applicant is eligible for accreditation by the American Board of Medical Specialties in both specialties. Each 15 16 applicant who has graduated from an accredited medical school prior to January 1, 1970 17 must have satisfactorily completed at least 12 months in a graduate educational program accredited by the Accreditation Council on Graduate Medical Education, the Canadian 18 19 Medical Association or the Royal College of Physicians and Surgeons of Canada. Each 20 applicant who has 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 21 22 in a graduate educational program accredited by the Accreditation Council on Graduate 23 Medical Education, the Canadian Medical Association, the Royal College of Physicians 24 and Surgeons of Canada or the Royal Colleges of England, Ireland or Scotland. An 25 applicant who has completed 24 months of postgraduate training and has received an 26 unrestricted endorsement from the director of an accredited graduate education program 27 in the State is considered to have satisfied the postgraduate training requirements of this 28 subsection if the applicant continues in that program and completes 36 months of 29 postgraduate training. Notwithstanding this subsection, an applicant who is board 30 certified by the American Board of Medical Specialties is deemed to meet the 31 postgraduate training requirements of this subsection. Notwithstanding this subsection, in 32 the case of subspecialty or clinical fellowship programs, the board may accept in 33 fulfillment of the requirements of this subsection postgraduate training at a hospital in 34 which the subspecialty clinical program, such as a training program accredited by the 35 American Dental Association Commission on Dental Accreditation or its successor organization, is not accredited but the parent specialty program is accredited by the 36 37 Accreditation Council on Graduate Medical Education.'

- Amend the bill in section 11 in paragraph Q in the last line (page 4, line 20 in L.D.)
 by inserting after the following: "board" the following: ', unless otherwise prohibited by
 state or federal law'
- 41 Amend the bill by relettering or renumbering any nonconsecutive Part letter or 42 section number to read consecutively.

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COMMITTEE AMENDMENT



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SUMMARY

This amendment strikes the provision in the bill that proposes to keep the identity of any reporting physician or physician assistant confidential unless it is necessary to the investigation or adjudication of the report by the Board of Licensure in Medicine. It allows for dual trained dentists and oral surgeons to satisfy the Board of Licensure in Medicine's requirements for postgraduate training in a manner that applies to the specific training received by these licensees. It also adds language to ensure the statutory provisions governing Board of Licensure in Medicine sanctions are in compliance with federal and state laws regarding confidentiality of patient information that is the subject of a disciplinary complaint.

 11
 FISCAL NOTE REQUIRED

 12
 (See attached)

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COMMITTEE AMENDMENT



126th MAINE LEGISLATURE

LD 1437

LR 532(02)

An Act To Amend the Laws Regarding Licensure of Physicians and Physician Assistants

Fiscal Note for Bill as Amended by Committee Amendment 'A (H-424) Committee: Labor, Commerce, Research and Economic Development Fiscal Note Required: Yes

Fiscal Note

Minor cost increase - Other Special Revenue Funds

Fiscal Detail and Notes

Additional costs to the Board of Licensure in Medicine, affiliated with the Department of Professional and Financial Regulation, associated with implementing the requirements of this legislation can be absorbed within existing budgeted resources.