

# HOUSE BILL REPORT

## SSB 6545

---

---

**As Reported By House Committee On:**  
Health Care

**Title:** An act relating to treatment programs for impaired physicians.

**Brief Description:** Providing full funding for the impaired physician program.

**Sponsors:** Senate Committee on Health & Long-Term Care (originally sponsored by Senators Wood, Wojahn, Rasmussen, Benton, Fairley, Strannigan and Hale).

**Brief History:**

**Committee Activity:**

Health Care: 2/20/98 [DP].

---

### HOUSE COMMITTEE ON HEALTH CARE

**Majority Report:** Do pass. Signed by 8 members: Representatives Dyer, Chairman; Backlund, Vice Chairman; Cody, Ranking Minority Member; Anderson; Conway; Parlette; Wood and Zellinsky.

**Minority Report:** Do not pass. Signed by 1 member: Representative Sherstad.

**Staff:** John Welsh (786-7133).

**Background:** By law the Department of Health (DOH) collects a \$25 surcharge on the physician's annual licensing fee to fund impaired physician's programs. The funds are deposited into a health professions account. Current law requires that the surcharge must be used solely for the implementation of the impaired physician's program.

Physician assistants are not covered by the impaired physician program.

**Summary of Bill:** The surcharge must be deposited into a new account designated as the impaired physician account. As a special nonappropriated account, all of the funds in the account could be spent without appropriation from the Legislature. The surcharge amount is set at \$25. The charge is collected from physician assistants as well as physicians, and any other providers whose licensing authority contracts with the impaired physician's program.

The impaired physician's program includes extension of immunity to the entity that administers the impaired physician's program.

The Medical Quality Assurance Commission is authorized to contract for up to six years with an entity to provide impaired physician programs.

The term "impaired" is augmented to require that a condition results in an inability to practice medicine with reasonable skill and safety to patients.

The scope of the impaired physician's program is broadened to include treatment and assessment of reports of suspected impairment.

Impaired practitioner programs and voluntary substance abuse monitoring programs must report suspected or verified impairment to the commission, as well as accept complaints of suspected or verified impairment.

The impaired physician program is given authority to select treatment programs for its patients.

There is a provision encouraging courts to sanction persons alleging impairment without good faith and reasonable grounds.

**Appropriation:** None.

**Fiscal Note:** Not requested.

**Effective Date:** Ninety days after adjournment of session in which bill is passed.

**Testimony For:** The Impaired Physician Program is strengthened in several ways. Its funding is assured with a discrete account in the state treasury. Immunity from liability is provided for the program. The program is able to reach physicians who are suspected of impairment. Current terminology is updated.

**Testimony Against:** None.

**Testified:** Carl Nelson, Washington State Medical Association; and Jeff Larsen, Washington Academy of Physician Assistants and Washington Osteopathic Medicine Association.