## FINAL BILL REPORT 2SHB 1618

## C 132 L 98

Synopsis as Enacted

**Brief Description:** Modifying certain aspects of programs that treat impaired physicians.

**Sponsors:** By House Committee on Health Care (originally sponsored by Representatives Skinner, Dyer, Conway, Zellinsky, Cody, Backlund, Parlette and Clements).

House Committee on Health Care House Committee on Appropriations Senate Committee on Health & Long-Term Care

**Background:** The Impaired Physician Program is a program under contract with the Medical Quality Assurance Commission to provide for the treatment of physicians impaired as a result of alcoholism, drug abuse, mental illness, or other debilitating conditions. This program also includes by contract the participation of osteopathic physicians, podiatrists, and veterinarians.

The program involves physicians and other impaired health practitioners who volunteer, or have been required, to participate in treatment by their respective disciplinary authorities as a condition for deferring sanctions imposed under the Uniform Disciplinary Act. A committee of physicians contracting with the program provides intervention, monitoring of the treatment and rehabilitation, prevention, and education services for impaired physicians.

A physician must be verified as impaired prior to intervention by the commission. The program's authorizing statutes include a declaration that impairment by itself does not give rise to a presumption of unskilled or unsafe practice.

The Impaired Physician Program is funded by a \$25 annual surcharge on physician licenses that is deposited in the Health Professions Account for use solely for the program. There is no surcharge on the licenses of physician assistants or osteopathic physician assistants.

There is no immunity from civil liability provided for the Impaired Physician Program or similar programs serving other practitioners.

**Summary:** The Legislature finds that funds generated by surcharges on physician license fees are not being fully spent on the Impaired Physician Program.

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The Impaired Physician Program is changed in several respects.

The entity established to administer the Impaired Physician Program is immune from civil liability. Similar voluntary substance abuse monitoring programs or impaired practitioner programs established by the other professional disciplinary authorities are also immune from civil liability.

The entity is defined as a nonprofit corporation formed by physicians with expertise in alcohol and drug abuse who contract with the Medical Quality Assurance Commission to evaluate, treat and monitor impaired physicians unable to practice medicine with reasonable skill and safety. The commission may intervene in cases of verified impairment, or when there is reasonable cause to suspect impairment.

Other regulated health professions may contract with the Medical Quality Assurance Commission for providing services to other impaired health practitioners.

There is an Impaired Physician Account created in the custody of the State Treasurer. Funds deposited in the account may only be used for the Impaired Physician Program. Only the Secretary of Health may authorize expenditures from this account. The \$25 surcharge on physician license fees for funding the program is extended to physician assistant licenses, as well as osteopathic physician assistant licenses.

The declaration that impairment does not give rise to a presumption of unskilled or unsafe practice is repealed.

The disciplining authorities of the other regulated professions may adopt rules requiring impaired practitioner programs or voluntary substance abuse monitoring programs to report impaired practitioners. The cost of treatment is borne by the practitioner when treated by approved treatment programs or other providers approved by the entity or the commission.

A declaration is added encouraging the courts to impose sanctions on clients and attorneys making allegations in bad faith and without reasonably objective and substantive grounds.

Changes in terminology of a technical nature are made.

## **Votes on Final Passage:**

House 94 2

Senate 43 0 (Senate amended)

House 96 0 (House concurred)

Effective: June 11, 1998