

SENATE BILL REPORT

SHB 1618

As Reported By Senate Committee On:
Health & Long-Term Care, March 27, 1997

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

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

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

Brief History:

Committee Activity: Health & Long-Term Care: 3/25/97, 3/27/97 [DPA].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: Do pass as amended.

Signed by Senators Deccio, Chair; Wood, Vice Chair; Benton, Fairley, Franklin, Strannigan and Wojahn.

Staff: Rhoda Jones (786-7198)

Background: The impaired physician program currently in statute provides for the prevention, intervention, and monitoring of a physician 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.

These programs involve 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 any action under the Uniform Disciplinary Act (UDA). 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 have been verified as impaired prior to intervention by the commission.

The impaired physician program is funded by a \$25 annual surcharge on physician licenses which is deposited in the medical disciplinary account for use solely for the impaired physician program. But there is no such surcharge on the licenses of physician assistants.

There is no immunity from civil or criminal liability provided for program committee members and staff in programs expressly for the impaired physician.

Summary of Amended Bill: The impaired physician program is changed in several respects. Regulated health professions may contract with the Medical Quality Assurance Commission to provide services to impaired health care practitioners.

The requirement that a physician be verified as impaired before the commission can intervene is expanded to provide the commission with the ability to intervene when a noncompliant or noncooperative physician is suspected of impairment.

Immunity from civil and criminal liability is provided for commission members and staff under the impaired physician program and extended to program staff for information submitted to the disciplinary authorities.

The \$25 surcharge for funding the program is extended to physician assistants.

Current language declaring that an impaired physician is not presumed to be unable to practice with reasonable skill and safety is repealed.

Changes in terminology of technical nature are made.

Protection from criminal liability is not extended to contractors and other entities responsible for the impaired physician program.

Amended Bill Compared to Original Bill: The amendment removes protection from criminal liability for entities involved in impaired physician programs.

Appropriation: None.

Fiscal Note: Available.

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

Testimony For: Protection from civil action should be extended to those individuals who report impaired practitioners. However, criminal protection should not be extended to those involved in these programs.

Testimony Against: None.

Testified: PRO: Ron Weaver, DOH; Lynn Hankes, MA, WA Physicians Health Program; Carol Nelson, WSMA.