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**Health Care & Wellness  
Committee**

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**HB 1103**

**Brief Description:** Concerning health professions.

**Sponsors:** Representatives Campbell, Green, Kenney, Hudgins, Appleton, Schual-Berke and Cody.

**Brief Summary of Bill**

- Transfers primary responsibilities of the health profession boards and commissions for investigations, summary suspensions, and charging decisions to the Secretary of Health.
- Establishes additional reporting requirements for entities that have knowledge that a credentialed health care provider or applicant has engaged in unprofessional conduct.

**Hearing Date:** 1/22/07

**Staff:** Chris Blake (786-7392).

**Background:**

The Uniform Disciplinary Act (UDA) governs disciplinary actions for all 57 categories of credentialed health care providers. The UDA defines acts of unprofessional conduct, establishes sanctions for such acts, and provides general procedures for addressing complaints and taking disciplinary actions against a credentialed health care provider. Responsibilities in the disciplinary process are divided between the Secretary of Health (Secretary) and the 14 health profession boards and commissions (collectively known as "disciplining authorities") according to the profession that the health care provider is a member of and the relevant step in the disciplinary process.

Health care providers are subject to several complaint and reporting requirements. Any person or organization may submit a complaint to a disciplining authority which charges a credentialed health care provider or applicant with unprofessional conduct. Complaints may also provide information related to the health care provider's or applicant's inability to practice safely as a

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result of a physical or mental condition. Credentialed health care providers must report any conviction, determination, or other finding that another credentialed health care provider has committed an act of unprofessional conduct or information about his or her inability to practice safely as a result of a physical or mental condition.

Other entities have specific obligations to report information related to acts of unprofessional conduct by a credentialed health care provider. Hospitals must report any restriction, suspension, limitation, or termination of certain health care providers that are based on a conviction, determination, or finding by the hospital that the health care provider engaged in unprofessional conduct. Professional liability insurance institutions must report any final malpractice claims against a physician that resulted in the payment of more than \$20,000 or three or more final claims resulting in payments of any amount within a five year period.

**Summary of Bill:**

The authority of health profession boards and commissions to investigate allegations of unprofessional conduct, appoint members to direct investigations, and conduct practice reviews is reduced to a consultative and assisting role. The Secretary of Health (Secretary) is authorized to conduct investigations and practice reviews for all health professions. The Secretary must assure the active involvement of the appropriate boards and commissions when an investigation involves standards of practice or where clinical expertise are necessary. Complaints and reports of unprofessional conduct are to be sent to the Secretary rather than the boards and commissions. After the completion of an investigation, the Secretary is authorized to determine the appropriate disposition of the case. The authority of the boards and commissions to order a summary suspension of a health care provider's credential is transferred to the Secretary.

Credential holders, corporations, organizations, health care facilities, impaired practitioner programs, and government agencies are required to report when they have knowledge that a credential holder or an applicant for a credential has engaged in unprofessional conduct or have information that they cannot practice with reasonable skill and safety due to a physical or mental condition. Failure to report is punishable by a maximum fine of \$1,000. The maximum fine of \$250 that hospitals may be charged for not submitting a mandatory report is raised to a maximum fine of \$1,000.

The Secretary must initiate an investigation in cases in which complaints, arrests, adverse actions by employers, or other actions not resulting in a formal adjudication against a health care provider demonstrate a pattern of behavior that may present a risk to his or her patients.

When performing a gynecological examination or procedure, a credentialed health care provider must ensure that a second individual is present unless the patient signs a written waiver.

**Appropriation:** None.

**Fiscal Note:** Requested on January 17, 2007.

**Effective Date:** The bill takes effect 90 days after adjournment of session in which bill is passed.