## SENATE SUBSTITUTE FOR HOUSE BILL NO. 5789

A bill to amend 1978 PA 368, entitled "Public health code,"

by amending section 16221 (MCL 333.16221), as amended by 2017 PA 249.

## THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 Sec. 16221. Subject to section 16221b, the department shall
- 2 investigate any allegation that 1 or more of the grounds for
- 3 disciplinary subcommittee action under this section exist, and may
- 4 investigate activities related to the practice of a health
- 5 profession by a licensee, a registrant, or an applicant for
- 6 licensure or registration. The department may hold hearings,
- 7 administer oaths, and order the taking of relevant testimony. After
- 8 its investigation, the department shall provide a copy of the

- 1 administrative complaint to the appropriate disciplinary
- 2 subcommittee. The disciplinary subcommittee shall proceed under
- 3 section 16226 if it finds that 1 or more of the following grounds
- 4 exist:
- 5 (a) Except as otherwise specifically provided in this section,
- 6 a violation of general duty, consisting of negligence or failure to
- 7 exercise due care, including negligent delegation to or supervision
- 8 of employees or other individuals, whether or not injury results,
- 9 or any conduct, practice, or condition that impairs, or may impair,
- 10 the ability to safely and skillfully engage in the practice of the
- 11 health profession.
- 12 (b) Personal disqualifications, consisting of 1 or more of the
- 13 following:
- 14 (i) Incompetence.
- 15 (ii) Subject to sections 16165 to 16170a, substance use
- 16 disorder as defined in section 100d of the mental health code, 1974
- 17 PA 258, MCL 330.1100d.
- 18 (iii) Mental or physical inability reasonably related to and
- 19 adversely affecting the licensee's or registrant's ability to
- 20 practice in a safe and competent manner.
- 21 (iv) Declaration of mental incompetence by a court of
- 22 competent jurisdiction.
- (v) Conviction of a misdemeanor punishable by imprisonment for
- 24 a maximum term of 2 years; conviction of a misdemeanor involving
- 25 the illegal delivery, possession, or use of a controlled substance;
- 26 or conviction of any felony other than a felony listed or described
- 27 in another subparagraph of this subdivision. A certified copy of

- 1 the court record is conclusive evidence of the conviction.
- 2 (vi) Lack of good moral character.
- 3 (vii) Conviction of a criminal offense under section 520e or
- 4 520g of the Michigan penal code, 1931 PA 328, MCL 750.520e and
- 5 750.520q. A certified copy of the court record is conclusive
- 6 evidence of the conviction.
- 7 (viii) Conviction of a violation of section 492a of the
- 8 Michigan penal code, 1931 PA 328, MCL 750.492a. A certified copy of
- 9 the court record is conclusive evidence of the conviction.
- 10 (ix) Conviction of a misdemeanor or felony involving fraud in
- 11 obtaining or attempting to obtain fees related to the practice of a
- 12 health profession. A certified copy of the court record is
- 13 conclusive evidence of the conviction.
- 14 (x) Final adverse administrative action by a licensure,
- 15 registration, disciplinary, or certification board involving the
- 16 holder of, or an applicant for, a license or registration regulated
- 17 by another state or a territory of the United States, by the United
- 18 States military, by the federal government, or by another country.
- 19 A certified copy of the record of the board is conclusive evidence
- 20 of the final action.
- 21 (xi) Conviction of a misdemeanor that is reasonably related to
- 22 or that adversely affects the licensee's or registrant's ability to
- 23 practice in a safe and competent manner. A certified copy of the
- 24 court record is conclusive evidence of the conviction.
- 25 (xii) Conviction of a violation of section 430 of the Michigan
- 26 penal code, 1931 PA 328, MCL 750.430. A certified copy of the court
- 27 record is conclusive evidence of the conviction.

- 1 (xiii) Conviction of a criminal offense under section 83, 84,
- 2 316, 317, 321, 520b, 520c, 520d, or 520f of the Michigan penal
- 3 code, 1931 PA 328, MCL 750.83, 750.84, 750.316, 750.317, 750.321,
- 4 750.520b, 750.520c, 750.520d, and 750.520f. A certified copy of the
- 5 court record is conclusive evidence of the conviction.
- 6 (xiv) Conviction of a violation of section 136 or 136a of the
- 7 Michigan penal code, 1931 PA 328, MCL 750.136 and 750.136a. A
- 8 certified copy of the court record is conclusive evidence of the
- 9 conviction.
- 10 (xv) CONVICTION OF A VIOLATION OF SECTION 90 OF THE MICHIGAN
- 11 PENAL CODE, 1931 PA 328, MCL 750.90, OR OF A VIOLATION OF ANY OTHER
- 12 STATE OR FEDERAL LAW THAT IS SUBSTANTIALLY SIMILAR TO SECTION 90 OF
- 13 THE MICHIGAN PENAL CODE, 1931 PA 328, MCL 750.90. A CERTIFIED COPY
- 14 OF THE COURT RECORD IS CONCLUSIVE EVIDENCE OF THE CONVICTION.
- 15 (c) Prohibited acts, consisting of 1 or more of the following:
- 16 (i) Fraud or deceit in obtaining or renewing a license or
- 17 registration.
- 18 (ii) Permitting a license or registration to be used by an
- 19 unauthorized person.
- 20 (iii) Practice outside the scope of a license.
- 21 (iv) Obtaining, possessing, or attempting to obtain or possess
- 22 a controlled substance as defined in section 7104 or a drug as
- 23 defined in section 7105 without lawful authority; or selling,
- 24 prescribing, giving away, or administering drugs for other than
- 25 lawful diagnostic or therapeutic purposes.
- 26 (d) Except as otherwise specifically provided in this section,
- 27 unethical business practices, consisting of 1 or more of the

- 1 following:
- 2 (i) False or misleading advertising.
- 3 (ii) Dividing fees for referral of patients or accepting
- 4 kickbacks on medical or surgical services, appliances, or
- 5 medications purchased by or in behalf of patients.
- 6 (iii) Fraud or deceit in obtaining or attempting to obtain
- 7 third party reimbursement.
- 8 (e) Except as otherwise specifically provided in this section,
- 9 unprofessional conduct, consisting of 1 or more of the following:
- 10 (i) Misrepresentation to a consumer or patient or in obtaining
- 11 or attempting to obtain third party reimbursement in the course of
- 12 professional practice.
- 13 (ii) Betrayal of a professional confidence.
- 14 (iii) Promotion for personal gain of an unnecessary drug,
- 15 device, treatment, procedure, or service.
- 16 (iv) Either of the following:
- 17 (A) A requirement by a licensee other than a physician or a
- 18 registrant that an individual purchase or secure a drug, device,
- 19 treatment, procedure, or service from another person, place,
- 20 facility, or business in which the licensee or registrant has a
- 21 financial interest.
- 22 (B) A referral by a physician for a designated health service
- 23 that violates 42 USC 1395nn or a regulation promulgated under that
- 24 section. For purposes of this subdivision, 42 USC 1395nn and the
- 25 regulations promulgated under that section as they exist on June 3,
- 26 2002 are incorporated by reference. A disciplinary subcommittee
- 27 shall apply 42 USC 1395nn and the regulations promulgated under

- 1 that section regardless of the source of payment for the designated
- 2 health service referred and rendered. If 42 USC 1395nn or a
- 3 regulation promulgated under that section is revised after June 3,
- 4 2002, the department shall officially take notice of the revision.
- 5 Within 30 days after taking notice of the revision, the department
- 6 shall decide whether or not the revision pertains to referral by
- 7 physicians for designated health services and continues to protect
- 8 the public from inappropriate referrals by physicians. If the
- 9 department decides that the revision does both of those things, the
- 10 department may promulgate rules to incorporate the revision by
- 11 reference. If the department does promulgate rules to incorporate
- 12 the revision by reference, the department shall not make any
- 13 changes to the revision. As used in this sub-subparagraph,
- 14 "designated health service" means that term as defined in 42 USC
- 15 1395nn and the regulations promulgated under that section and
- 16 "physician" means that term as defined in sections 17001 and 17501.
- (v) For a physician who makes referrals under 42 USC 1395nn or
- 18 a regulation promulgated under that section, refusing to accept a
- 19 reasonable proportion of patients eligible for Medicaid and
- 20 refusing to accept payment from Medicaid or Medicare as payment in
- 21 full for a treatment, procedure, or service for which the physician
- 22 refers the individual and in which the physician has a financial
- 23 interest. A physician who owns all or part of a facility in which
- 24 he or she provides surgical services is not subject to this
- 25 subparagraph if a referred surgical procedure he or she performs in
- 26 the facility is not reimbursed at a minimum of the appropriate
- 27 Medicaid or Medicare outpatient fee schedule, including the

- 1 combined technical and professional components.
- 2 (vi) Any conduct by a health professional with a patient while
- 3 he or she is acting within the health profession for which he or
- 4 she is licensed or registered, including conduct initiated by a
- 5 patient or to which the patient consents, that is sexual or may
- 6 reasonably be interpreted as sexual, including, but not limited to,
- 7 sexual intercourse, kissing in a sexual manner, or touching of a
- 8 body part for any purpose other than appropriate examination,
- 9 treatment, or comfort.
- 10 (vii) Offering to provide practice-related services, such as
- 11 drugs, in exchange for sexual favors.
- 12 (f) Failure to notify under section 16222(3) or (4).
- 13 (g) Failure to report a change of name or mailing address as
- 14 required in section 16192.
- 15 (h) A violation, or aiding or abetting in a violation, of this
- 16 article or of a rule promulgated under this article.
- 17 (i) Failure to comply with a subpoena issued pursuant to this
- 18 part, failure to respond to a complaint issued under this article,
- 19 article 7, or article 8, failure to appear at a compliance
- 20 conference or an administrative hearing, or failure to report under
- 21 section 16222(1) or 16223.
- 22 (j) Failure to pay an installment of an assessment levied
- 23 under the insurance code of 1956, 1956 PA 218, MCL 500.100 to
- 24 500.8302, within 60 days after notice by the appropriate board.
- 25 (k) A violation of section 17013 or 17513.
- 26 (1) Failure to meet 1 or more of the requirements for
- 27 licensure or registration under section 16174.

- 1 (m) A violation of section 17015, 17015a, 17017, 17515, or
- **2** 17517.
- 3 (n) A violation of section 17016 or 17516.
- 4 (o) Failure to comply with section 9206(3).
- 5 (p) A violation of section 5654 or 5655.
- 6 (q) A violation of section 16274.
- 7 (r) A violation of section 17020 or 17520.
- 8 (s) A violation of the medical records access act, 2004 PA 47,
- **9** MCL 333.26261 to 333.26271.
- 10 (t) A violation of section 17764(2).
- (u) Failure to comply with the terms of a practice agreement
- 12 described in section 17047(2)(a) or (b), 17547(2)(a) or (b), or
- 13 18047(2)(a) or (b).
- 14 (v) A violation of section 7303a(2).
- 15 (w) A violation of section 7303a(4) or (5).
- 16 (x) A violation of section 7303b.
- 17 Enacting section 1. This amendatory act takes effect 90 days
- 18 after the date it is enacted into law.
- 19 Enacting section 2. This amendatory act does not take effect
- 20 unless all of the following bills of the 99th Legislature are
- 21 enacted into law:
- 22 (a) House Bill No. 5787.
- 23 (b) House Bill No. 5790.