

HOUSE BILL No. 4491

March 11, 1993, Introduced by Reps. Bennane, Rivers, Baade, Wallace, Dobronski, Points, Kilpatrick, Pitoniak, Scott, Schroer, Murphy, Stallworth, DeMars, Gubow, Jondahl, Gire and Richard A. Young and referred to the Committee on Public Health.

A bill to amend sections 16221 and 16226 of Act No. 368 of the Public Acts of 1978, entitled as amended "Public health code,"

as amended by Act No. 15 of the Public Acts of 1989, being sections 333.16221 and 333.16226 of the Michigan Compiled Laws; and to add sections 16441, 16612, 17017, 17517, 18013, and 20176a.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- Section 1. Sections 16221 and 16226 of Act No. 368 of the
- 2 Public Acts of 1978, as amended by Act No. 15 of the Public Acts
- 3 of 1989, being sections 333.16221 and 333.16226 of the Michigan
- 4 Compiled Laws, are amended and sections 16441, 16612, 17017,
- 5 17517, 18013, and 20176a are added to read as follows:

03434'93 CPD

- 1 Sec. 16221. The department may investigate activities
- 2 related to the practice of a health profession by a licensee, a
- 3 registrant, or an applicant for licensure or registration. The
- 4 department may hold hearings, administer oaths, and order rele-
- 5 vant testimony to be taken and shall report its findings to the
- 6 appropriate board or appropriate task force. The A board shall
- 7 proceed under section 16226 if the board finds that any of the
- 8 following grounds exist:
- 9 (a) A violation of general duty, consisting of negligence or
- 10 failure to exercise due care, including negligent delegation to
- 11 or supervision of employees or other individuals, whether or not
- 12 injury results, or any conduct, practice, or condition -which-
- 13 THAT impairs, or may impair, the ability to safely and skillfully
- 14 practice the health profession.
- (b) Personal disqualifications, consisting of any of the
- 16 following:
- 17 (i) Incompetence.
- (ii) Substance abuse as defined in section 6107.
- 19 (iii) Mental or physical inability reasonably related to and
- 20 adversely affecting the licensee's ability to practice in a safe
- 21 and competent manner.
- 22 (iv) Declaration of mental incompetence by a court of compe-
- 23 tent jurisdiction.
- 24 (ν) Conviction of a misdemeanor or felony reasonably related
- 25 to and adversely affecting the licensee's ability to practice in
- 26 a safe and competent manner. A certified copy of the court
- 27 record -shall be IS conclusive evidence of the conviction.

- (vi) Lack of good moral character.
- (vii) Conviction of a criminal offense under sections 520a

 3 to 520t 520B TO 520G of the Michigan penal code, Act No. 328 of

 4 the Public Acts of 1931, being sections 750.520a to 750.520t

 5 750.520B TO 750.520G of the Michigan Compiled Laws. A certified

 6 CODY of the court record shall be— IS conclusive evidence of the
- 8 (viii) Conviction of a violation of section 492a of the 9 Michigan penal code, Act No. 328 of the Public Acts of 1931, 10 being section 750.492a of the Michigan Compiled Laws. A certilised copy of the court record shall be IS conclusive evidence 12 of the conviction.
- (ix) Conviction of a misdemeanor or felony involving fraud
 14 in obtaining or attempting to obtain fees related to the practice
 15 of a health profession. A certified copy of the court record
 16 -shall be IS conclusive evidence of the conviction.
- (c) Prohibited acts, consisting of any of the following:
- (i) Fraud or deceit in obtaining or renewing a license.
- 19 (ii) Permitting the license to be used by an unauthorized 20 person.
- 21 (iii) Practice outside the scope of a license.
- (iv) Obtaining, possessing, or attempting to obtain or pos23 sess a controlled substance as defined in section 7:04 or a drug
 24 as defined in section 7:05 without lawful authority; or selling,
 25 prescribing, giving away, or administering drugs for other than
 26 lawful diagnostic or therapeutic purposes.

7 conviction.

- 1 (d) Unethical business practices, consisting of any of the 2 following:
- 3 (i) False or misleading advertising.
- 4 (ii) Dividing fees for referral of patients or accepting
- 5 kickbacks on medical or surgical services, appliances, or medica-
- 6 tions purchased by or -in- ON behalf of patients.
- 7 (iii) Fraud or deceit in obtaining or attempting to obtain
- 8 third party reimbursement.
- 9 (e) Unprofessional conduct, consisting of any of the
- 10 following:
- (i) Misrepresentation to a consumer or patient or in obtain-
- 12 ing or attempting to obtain third party reimbursement in the
- 13 course of professional practice.
- 14 (ii) Betrayal of a professional confidence.
- 15 (iii) Promotion for personal gain of an unnecessary drug,
- 16 device, treatment, procedure, or service.
- (iv) Directing or requiring an individual to purchase or
- 18 secure a drug, device, treatment, procedure, or service from
- 19 another person, place, facility, or business in which the
- 20 licensee has a financial interest.
- 21 (f) Failure to report a change of name or address within 30
- 22 days after the change occurs.
- 23 (g) A violation, or aiding or abetting in a violation, of
- 24 this article or of rules promulgated under this article.
- 25 (h) Failure to comply with a subpoena issued pursuant to
- 26 this part.

- (i) Failure to pay an installment of an assessment levied pursuant to section 2504 of the insurance code of 1956, Act No. 218 of the Public Acts of 1956, as amended, being section 4 500.2504 of the Michigan Compiled Laws, within 60 days after 5 notice by the appropriate board.
- (j) A violation of section 17013 or 17513.
- 7 (K) A VIOLATION OF SECTION 16441, 16612, 17017, 17517, OR 8 18013.
- Sec. 16226. (1) After finding the existence of 1 or more of 10 the grounds for board action listed in section 16221, a board 11 shall impose 1 or more of the following sanctions for each 12 violation:

13 Violations of Section 16221 Sanctions Probation, limitation, denial, 14 Subdivision (a), suspension, revocation, (b)(ii), 15 restitution, or fine. (b)(iv), 16 (b)(vi), or 17 (b)(vii) 18 19 Subdivision (b)(viii) Revocation. Limitation, suspension, 20 Subdivision (b)(i), revocation, denial, 21 (b)(iii), probation, restitution, or 22 (b)(v), or (b)(ix)fine. 23 Denial, revocation, suspension, 24 Subdivision (c)(i) probation, limitation, or 25

fine.

26

```
Denial, suspension, revocation.
 1 Subdivision (c)(ii)
                                      restitution, or fine.
2
                                    Probation, denial, suspension,
3 Subdivision (c)(iii)
                                      revocation, restitution, or
4
                                      fine.
 5
6 Subdivision (c)(iv)
                                    Fine, probation, denial,
                                      suspension, revocation,
      or (d)(iii)
7
                                      or restitution.
8
                                    Reprimand, fine, probation,
 9 Subdivision (d)(i)
                                      or restitution.
10
      or (d)(ii)
11 Subdivision (e)(i)
                                    Reprimand, fine, probation,
                                      limitation, suspension, or
12
                                      restitution.
13
14 Subdivision (e)(ii)
                                    Reprimand, probation,
                                      suspension, restitution, or
15
      or (h)
16
                                      fine.
                                    Reprimand, fine, probation,
17 Subdivision (e)(iii)
18
      or (e)(iv)
                                      suspension, revocation, limita-
19
                                      tion, or restitution.
20 Subdivision (f)
                                    Reprimand or fine.
21 Subdivision (g) OR (K)
                                    Reprimand, probation, denial,
22
                                      suspension, revocation, limita-
23
                                      tion, restitution, or fine.
24 Subdivision (i)
                                    Suspension or fine.
                                    Reprimand or fine.
25 Subdivision (j)
        (2) Determination of sanctions for violations under THIS
26
```

27 section -16226 shall be made by a board. If, during judicial

- review, a court holds that a sanction is unlawful under section
- 2 106 of the administrative procedures act of 1969, Act No. 306 of
- 3 the Public Acts of 1969, being section 24.306 of the Michigan
- A Compiled Laws, the court shall state on the record the reasons
- 5 for the holding and may remand the case to the board for further
- 6 consideration.
- (3) A board created under part 170 or 175 may impose a fine
- g of up to, but not exceeding, \$250,000.00 for a violation of
- g section 16221(a) or (b).
- SEC. 16441. (1) WITHIN 180 DAYS AFTER THE EFFECTIVE DATE OF
- 11 THIS SECTION, EACH LICENSEE LICENSED ON OR BEFORE THE EFFECTIVE
- 12 DATE OF THIS SECTION SHALL OBTAIN PROFESSIONAL LIABILITY INSUR-
- 13 ANCE COVERAGE WITH LIMITS OF NOT LESS THAN \$200,000.00 PER CLAIM
- 14 AND NOT LESS THAN \$600,000.00 IN THE AGGREGATE AND FILE WITH THE
- 15 BOARD EVIDENCE OF THAT COVERAGE THAT IS ACCEPTABLE TO THE BOARD.
- 16 WITHIN 180 DAYS AFTER THE ISSUANCE OF HIS OR HER LICENSE, A
- 17 LICENSEE LICENSED AFTER THE EFFECTIVE DATE OF THIS SECTION SHALL
- 18 OBTAIN PROFESSIONAL LIABILITY INSURANCE COVERAGE WITH LIMITS OF
- 19 NOT LESS THAN \$200,000.00 PER CLAIM AND NOT LESS THAN \$600,000.00
- 20 IN THE AGGREGATE AND FILE WITH THE BOARD EVIDENCE OF THAT COVER-
- 21 AGE THAT IS ACCEPTABLE TO THE BOARD. AFTER THE INITIAL FILING.
- 22 EACH LICENSEE ANNUALLY SHALL FILE WITH THE BOARD THE EVIDENCE OF
- 23 PROFESSIONAL LIABILITY INSURANCE COVERAGE REQUIRED UNDER THIS
- 24 SUBSECTION.
- 25 (2) A LICENSEE SHALL MAINTAIN THE PROFESSIONAL LIABILITY
- 26 INSURANCE COVERAGE REQUIRED UNDER SUBSECTION (1) IN EFFECT AT ALL
- 27 TIMES. IF THERE IS A PAYOUT UNDER THE PROFESSIONAL LIABILITY

- 1 INSURANCE COVERAGE REQUIRED UNDER SUBSECTION (1), THE LICENSEE
- 2 IMMEDIATELY SHALL REPLACE OR RENEW THE PROFESSIONAL LIABILITY
- 3 INSURANCE COVERAGE AND NOTIFY THE BOARD IN WRITING OF THE
- 4 REPLACEMENT OR RENEWAL.
- 5 SEC. 16612. (1) WITHIN 180 DAYS AFTER THE EFFECTIVE DATE OF
- 6 THIS SECTION, EACH DENTIST LICENSED ON OR BEFORE THE EFFECTIVE
- 7 DATE OF THIS SECTION SHALL OBTAIN PROFESSIONAL LIABILITY INSUR-
- 8 ANCE COVERAGE WITH LIMITS OF NOT LESS THAN \$200,000.00 PER CLAIM
- 9 AND NOT LESS THAN \$600,000.00 IN THE AGGREGATE AND FILE WITH THE
- 10 BOARD EVIDENCE OF THAT COVERAGE THAT IS ACCEPTABLE TO THE BOARD.
- 11 WITHIN 180 DAYS AFTER THE ISSUANCE OF HIS OR HER LICENSE, A DEN-
- 12 TIST LICENSED AFTER THE EFFECTIVE DATE OF THIS SECTION SHALL
- 13 OBTAIN PROFESSIONAL LIABILITY INSURANCE COVERAGE WITH LIMITS OF
- 14 NOT LESS THAN \$200,000.00 PER CLAIM AND NOT LESS THAN \$600,000.00
- 15 IN THE AGGREGATE AND FILE WITH THE BOARD EVIDENCE OF THAT COVER-
- 16 AGE THAT IS ACCEPTABLE TO THE BOARD. AFTER THE INITIAL FILING,
- 17 EACH DENTIST ANNUALLY SHALL FILE WITH THE BOARD THE EVIDENCE OF
- 18 PROFESSIONAL LIABILITY INSURANCE COVERAGE REQUIRED UNDER THIS
- 19 SUBSECTION.
- 20 (2) A DENTIST SHALL MAINTAIN THE PROFESSIONAL LIABILITY
- 21 INSURANCE COVERAGE REQUIRED UNDER SUBSECTION (1) IN EFFECT AT ALL
- 22 TIMES. IF THERE IS A PAYOUT UNDER THE PROFESSIONAL LIABILITY
- 23 INSURANCE COVERAGE REQUIRED UNDER SUBSECTION (1), THE DENTIST
- 24 IMMEDIATELY SHALL REPLACE OR RENEW THE PROFESSIONAL LIABILITY
- 25 INSURANCE COVERAGE AND NOTIFY THE BOARD IN WRITING OF THE
- 26 REPLACEMENT OR RENEWAL.

- SEC. 17017. -(1) WITHIN 180 DAYS AFTER THE EFFECTIVE DATE OF
- 2 THIS SECTION, EACH PHYSICIAN LICENSED ON OR BEFORE THE EFFECTIVE
- 3 DATE OF THIS SECTION SHALL OBTAIN PROFESSIONAL LIABILITY INSUR-
- 4 ANCE COVERAGE WITH LIMITS OF NOT LESS THAN \$200,000.00 PER CLAIM
- 5 AND NOT LESS THAN \$600,000.00 IN THE AGGREGATE AND FILE WITH THE
- 6 BOARD EVIDENCE OF THAT COVERAGE THAT IS ACCEPTABLE TO THE BOARD.
- 7 WITHIN 180 DAYS AFTER THE ISSUANCE OF HIS OR HER LICENSE, A PHY-
- 8 SICIAN LICENSED AFTER THE EFFECTIVE DATE OF THIS SECTION SHALL
- 9 OBTAIN PROFESSIONAL LIABILITY INSURANCE COVERAGE WITH LIMITS OF
- 10 NOT LESS THAN \$200,000.00 PER CLAIM AND NOT LESS THAN \$600,000.00
- 11 IN THE AGGREGATE AND FILE WITH THE BOARD EVIDENCE OF THAT COVER-
- 12 AGE THAT IS ACCEPTABLE TO THE BOARD. AFTER THE INITIAL FILING,
- 13 EACH PHYSICIAN ANNUALLY SHALL FILE WITH THE BOARD THE EVIDENCE OF
- 14 PROFESSIONAL LIABILITY INSURANCE COVERAGE REQUIRED UNDER THIS
- 15 SUBSECTION.
- 16 (2) A PHYSICIAN SHALL MAINTAIN THE PROFESSIONAL LIABILITY
- 17 INSURANCE COVERAGE REQUIRED UNDER SUBSECTION (1) IN EFFECT AT ALL
- 18 TIMES. IF THERE IS A PAYOUT UNDER THE PROFESSIONAL LIABILITY
- 19 INSURANCE COVERAGE REQUIRED UNDER SUBSECTION (1), THE PHYSICIAN
- 20 IMMEDIATELY SHALL REPLACE OR RENEW THE PROFESSIONAL LIABILITY
- 21 INSURANCE COVERAGE AND NOTIFY THE BOARD IN WRITING OF THE
- 22 REPLACEMENT OR RENEWAL.
- 23 SEC. 17517. (1) WITHIN 180 DAYS AFTER THE EFFECTIVE DATE OF
- 24 THIS SECTION, EACH PHYSICIAN LICENSED ON OR BEFORE THE EFFECTIVE
- 25 DATE OF THIS SECTION SHALL OBTAIN PROFESSIONAL LIABILITY INSUR-
- 26 ANCE COVERAGE WITH LIMITS OF NOT LESS THAN \$200,000.00 PER CLAIM
- 27 AND NOT LESS THAN \$600,000.00 IN THE AGGREGATE AND FILE WITH THE

- 1 SUBJECT TO AN ADMINISTRATIVE FINE OF NOT MORE THAN \$10,000.00 FOR
- 2 EACH VIOLATION.