Legislative Analysis



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VOLUNTEER LICENSE FOR RETIRED DENTISTS

House Bill 6392 (Substitute H-1) Sponsor: Rep. Rick Shaffer Committee: Health Policy

Complete to 11-29-06

A SUMMARY OF HOUSE BILL 6392 AS REPORTED FROM COMMITTEE

Public Act 24 of 2006 amended the Public Health Code to create a special volunteer license for retired physicians and podiatrists who provide medical care for the needy. A companion act, Public Act 25 of 2006, provided civil immunity in certain circumstances to the physicians. (For more information on Public Act 24 and 25, see the enrolled analysis on House Bills 4670 and 5375 dated 9-8-06.)

<u>House Bill 6392</u> would amend the Public Health Code (MCL 333.16184 and 333.16185) to expand the provisions of Public Act 24 to include retired dentists. The bill would also expand the provisions of Public 25, which provides limited civil immunity from lawsuits, to dentists and to podiatrists.

FISCAL IMPACT:

House Bill 6392 may increase state costs to administer a recently established volunteer licensing program. House Bill 6392 will add qualified retired dentists to the group of health professions that may be eligible for the volunteer license. The costs are dependent upon the number of persons who seek this licensure. Annual licensing fees are not charged for the volunteer license, so the costs for the licensing process will have to be supported by existing revenue of the Department of Community Health or a new appropriation if demand is significant. Public Act 24 of 2006, effective in February of 2006, established a volunteer license system for physicians which DCH is in the process of implementing.

Persons will be subject to discipline under Part 161 of the Public Health Code for licensure violations or unlawful practice, which may include fines. Because volunteer licensees would provide medical care at no cost for indigent persons or in medically underserved areas of the state, there may be some modest consequent cost savings for state and local governments from possible reductions in medical care costs for these populations. The civil immunity provision would have no fiscal impact for the state or local units of government.

BACKGROUND INFORMATION:

Public Act 24 of 2006 allowed a restricted license for retired physicians and podiatrists so that they could volunteer, without compensation, at health clinics that provide free or

low-cost medical services to indigent or uninsured individuals and families. Some clinics also offer free or reduced dental services, and retired dentists have expressed an interest in being able to obtain a similar restricted license that would enable them to provide dental care to individuals who would not be able to access care elsewhere.

In addition, Public Act 25 of 2006 provides civil immunity for retired physicians who provide care under the special volunteer license. Due to an oversight, the immunity bill was not amended to include podiatrists at the time that podiatrists were added to the licensure bill. It is unlikely that retired podiatrists, or dentists, would be willing to provide podiatric services without an umbrella of protection. Since podiatrists and dentists provide necessary medical and dental care for conditions that can impact an individual's overall health, it is prudent to extend civil immunity for both professions.

Some people would like to see the special volunteer licenses and immunity provisions extended also to dental hygienists and mental health professionals. Regular dental hygiene treatments are an important part of preventing gum disease, checking for mouth cancers, and identifying other dental problems; including them in the legislation would encourage retired hygienists to volunteer at dental clinics that serve the poor. Retired psychiatrists, as medical or osteopathic physicians, would already be covered under the initial legislation.

Adding mental health professionals, however, would involve retired social workers, psychologists, counselors, and marriage and family therapists. It could be argued, though, that those in the counseling professions do not face the same financial obstacles as physicians, podiatrists, and dentists do in maintaining expensive medical malpractice insurance in order to practice; mental health professionals may be able to maintain their current licensure into retirement and volunteer their services without needing inclusion in the special volunteer license program.

FISCAL IMPACT:

The Department of Community Health indicated support for the bill. (11-28-06)

A representative of the Michigan Association of Commercial Dental Laboratories testified in support of the bill. (11-28-06)

The Michigan Dental Association indicated support for the bill. (11-28-06)

The Michigan Trial Lawyers Association indicated support for the bill. (11-28-06)

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[■] This analysis was prepared by nonpartisan House staff for use by House members in their deliberations, and does not constitute an official statement of legislative intent.