

Legislative Analysis

IMMUNITY FOR SPECIAL VOLUNTEER PHYSICIANS

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House Bill 4829

Sponsor: Rep. Tom Pearce
Committee: Health Policy

Complete to 11-9-09

A SUMMARY OF HOUSE BILL 4829 AS INTRODUCED 4-23-09

The bill would revise the criteria under which a retired physician who provides medical care under a special volunteer license has immunity from liability in a civil action for negligence or malpractice.

Under provisions of the Public Health Code, retired physicians may obtain a special volunteer license allowing them to engage in the practice of medicine, and if certain conditions are met, be protected from a lawsuit for a medical error arising from services performed under the license. The immunity relieves them of the need to maintain medical liability insurance, which can amount to tens of thousands of dollars per year, for services rendered for which they receive no compensation, and thus encourages more retired doctors to volunteer a few hours a week at clinics that serve low-income persons.

(Note: A retired podiatrist or retired dentist can also apply for and receive a special volunteer license to render services to medically indigent individuals, but the immunity from civil actions does not extend to either of these professions.)

House Bill 4829 would amend the Public Health Code (MCL 333.16185) to revise the conditions under which immunity from civil liability is extended to retired physicians when rendering medical care under a special volunteer license.

Currently, a physician who provides medical care under a special volunteer license is not liable in a civil action for personal injury or death proximately caused by the professional negligence or malpractice of the physician in providing the care if both of the following apply:

- 1) The care is provided at a health facility or agency that provides at least 75 percent of its care annually to medically indigent individuals; and,
- 2) The physician does not receive and does not intend to receive compensation for providing the care.

The changes proposed by House Bill 4829 would affect the first condition. A retired physician would retain immunity from civil actions when volunteering at a health facility or agency that provided at least 60 percent of its annual care to medically indigent individuals.

The bill would also revise a part of the definition of "medically indigent individual." Currently, "medically indigent individual" means the term as defined in Section 106 of the Social Welfare Act [generally speaking, Medicaid recipients and those receiving aid from the Michigan Department of Human Services or federal Supplemental Security Income (SSI).]

The bill would add a new exception to the current definition. The new provision would specify that an individual is a medically indigent individual if, instead of meeting the conditions of Section 106(1)(b)(iii) of the Social Welfare Act, the individual has an annual household income that is below 150 percent of the federal poverty guidelines published annually in the Federal Register by the U.S. Department of Health and Human Services.

[Section 106(1)(b)(iii) defines the protected basic maintenance level below which a person may be considered a medically indigent individual.]

FISCAL IMPACT:

If the enhanced conditions for immunity in House Bill 4829 have the effect of increasing the number of volunteer licensees and/or hours served by volunteer licensees, there may be some modest consequent cost savings for state and local governments from possible reductions in medical care costs for low-income populations and reductions in public health facility uncompensated care. An increase in volunteer license applicants may also increase the state costs to administer the volunteer licensing program. There are no fees charged for the license and any increase in costs will have to be supported by the existing revenue of the Department of Community Health unless an appropriation is made.

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