## 74th OREGON LEGISLATIVE ASSEMBLY - 2007 Regular Session STAFF MEASURE SUMMARY House Committee on Health Care

MEASURE: CARRIER:

KE VER UN revenue impact		
FISCAL: Minimal fiscal impact, no statement issued		
Action:		Do Pass as Amended and Be Printed Engrossed
Vote:		7 - 0 - 2
Y	eas:	Bruun, Cannon, Flores, Kotek, Maurer, Richardson, Greenlick
Ν	lays:	0
E	xc.:	Bonamici, Gelser
Prepared By:		Sandy Thiele-Cirka, Administrator
Meeting Dates:		5/21, 5/22, 5/29, 5/31

WHAT THE MEASURE DOES: Modifies provisions and requirements relating to notice of professional negligence claims to health professional regulatory boards and to subsequent actions of the boards. Specifies that reporting requirements continue to apply to public body if public body is substituted in place of insured as defendant in claim of alleged professional negligence. Specifies that when the Board of Medical Examiners (BME) receives a report of a claim that the report be posted on the BME's website if the claim results in judicial finding or admission of liability or a money judgment, award or settlement that involves a payment to the claimed. Specifies that claims not meeting the specified conditions will not be posted on the BME's website; however the information will be available to the public upon request. Adds consistent language relating to conditions of when claim information is posted. Modifies provisions relating to reports of medical incompetence to BME. Increases civil penalty of not more than \$5,000 to \$10,000 on health care facilities that fail to report official action regarding medical staff incompetence, unprofessional or dishonorable conduct, or impairment. Resolves conflict between SB 83 and the term licensee with an impairment. Declares emergency; takes effect upon passage.

## **ISSUES DISCUSSED:**

**REVENUE:** No revenue impact

- Section by section review of measure
- Concerns with information not available on the BME web site versus information available via a phone call
- Type of information that will be available to the general public
- Participants of the SB 337 workgroup
- Peer review versus public right to know
- Fragility of the measure's compromise
- Importance of increasing transparency to consumers
- Issues relating to impact on physicians
- Suggested amendment language

**EFFECT OF COMMITTEE AMENDMENT:** Specifies that when the BME receives a report of a claim that the report be posted on the BME's website if the claim results in judicial finding or admission of liability or a money judgment, award or settlement that involves a payment to the claimed. Specifies that claims not meeting the above conditions will not be posted on the BME's website; however the information will be available to the public upon request. Adds consistent language relating to conditions of when claim information is posted. Resolves conflict between SB 83 and the term licensee with an impairment.

**BACKGROUND:** The Board of Medical Examiners receives approximately 500-600 written complaints annually. Approximately 300-400 of those complaints result in a complete and detailed investigation. Some complaints are referred to other appropriate state or professional organizations for review. The complaints come from a variety of sources, including other health professionals, hospitals, and patients and their families.

The Board's Investigations Department reviews all complaints to determine whether state law (The Medical Practice

Act) may have been violated. There are 27 separate grounds for discipline or denial of a license in the Medical Practice Act. Most are very specific and include chemical substance abuse, gross or repeated acts of negligence, and conviction of a criminal offense. "Unprofessional conduct" is also a violation and includes sexual misconduct with a patient. These specific violations are set forth at ORS 677.190. When the Board conducts an investigation, it is handled in a confidential and discrete manner as required by state law. Information gathered during an investigation, including the identity of the complainant, is not considered a public record.

A variety of actions can be taken against a licensee when the Board finds a violation of the Medical Practice Act has occurred or other issues requiring Board intervention. If the offense is serious, the Board may revoke a license. If the licensee is an immediate danger to the public, the Board may issue an emergency suspension. Less serious actions may limit, restrict, or place conditions on the license that both protect the public and rehabilitate the licensee. The Board can also issue fines, reprimands or letters of concern. In 1991, the law was changed which required only malpractice insurance companies to report lawsuits to the Board.