HOUSE BILL REPORT

ESHB 2071

As Passed House March 19, 1991

Title: An act relating to the medical disciplinary board.

Brief Description: Giving the governor the authority to appoint the medical disciplinary board.

Sponsor(s): By House Committee on Health Care (originally sponsored by Representatives Moyer, Prentice, Day and Braddock).

Brief History:

Reported by House Committee on: Health Care, March 6, 1991, DPS; Passed House, March 19, 1991, 97-0.

HOUSE COMMITTEE ON HEALTH CARE

Majority Report: That Substitute House Bill No. 2071 be substituted therefor, and the substitute bill do pass. Signed by 11 members: Representatives Braddock, Chair; Day, Vice Chair; Moyer, Ranking Minority Member; Casada, Assistant Ranking Minority Member; Cantwell; Edmondson; Franklin; Morris; Paris; Prentice; and Sprenkle.

Staff: John Welsh (786-7133).

Background: Currently the state Medical Disciplinary Board consists of three non-physician members representing the public, who are appointed by the governor, and eight physician members, elected by physicians from the eight state congressional districts, respectively. The physician members from odd-numbered districts are elected in odd-numbered years and the physician members in even-numbered districts are elected in even-numbered years.

The public members of the board serve four-year terms, and the physician members serve two-year terms.

There is presently no member on the board representing physician assistants who are licensed and regulated by the board.

The board has authority to identify physicians and physician assistants who are impaired by alcohol or drugs. Under the program, the board receives and evaluates reports of suspected impairment, intervenes in verified cases, and refers impaired physicians and physician assistants to treatment. Presently, however, the board cannot obtain access to the driving records of a physician or physician assistant to assist in the identification of impaired practitioners because these records are confidential.

The Uniform Disciplinary Act provides standardized procedures and sanctions for specified acts of unprofessional conduct for the health practitioners regulated by the state. Current law, however, does not specify as unprofessional conduct the acceptance by physicians and other health professionals of gratuities offered by representatives of manufacturers of medical products and services, such as pharmaceuticals, where a conflict of interest is presented.

Summary of Bill: The governor is to appoint the members of the state Medical Disciplinary Board. The physician members are to be appointed from the state congressional districts. Current terms of the board are not affected however. The governor is required to consider recommendations for board appointments from professional medical associations in the state, and appoint members to fill vacancies promptly.

All members serve four-year terms, although the governor is to stagger the initial terms of appointment to achieve staggered terms.

The membership of the board is increased to include an additional member representing the public, and a nonvoting member who is a physician assistant.

The board is authorized to obtain a copy of a driving record of a physician or physician assistant from the state Department of Licensing for assisting in the identification of practitioners who are impaired by alcohol and drug abuse.

The acceptance of more than a nominal gratuity, hospitality or subsidy by a physician or other health practitioner offered by a representative or vendor of a manufacturer of medical products or services, that presents a conflict of interest, constitutes unprofessional conduct. The health professional disciplinary authorities, in consultation with the Department of Health, are directed to define by rule conflicts of interest, based on recognized professional ethical standards.

Fiscal Note: Not requested.

ESHB 2071

Effective Date: Ninety days after adjournment of session in which bill passed.

Testimony For: The appointment by the governor of members of the board, including an additional public member and a physician-assistant, can provide highly qualified practitioners, with a balance of perspectives, to protect the interests of the public safety. The board's authority to access driving records will assist it in identifying impaired practitioners. The practice of accepting expensive gifts and hospitality by physicians and other health practitioners that present conflicts of interest with good prescribing practices and the provision of cost-effective health services should be unprofessional conduct.

Testimony Against: None.

Witnesses: William Robertson, Washington State Medical Association (pro); and Jan Polek, Medical Disciplinary Board (pro).