

**2003-04 SESSION
COMMITTEE HEARING
RECORDS**

Committee Name:

Senate Committee on
Health, Children,
Families, Aging and
Long Term Care
(SC-HCFALTC)

Sample:

Record of Comm. Proceedings ... RCP

- 03hrAC-EdR_RCP_pt01a
- 03hrAC-EdR_RCP_pt01b
- 03hrAC-EdR_RCP_pt02

➤ Appointments ... Appt

➤ **

➤ Clearinghouse Rules ... CRule

➤ **

➤ Committee Hearings ... CH

➤ **

➤ Committee Reports ... CR

➤ **

➤ Executive Sessions ... ES

➤ **

➤ Hearing Records ... HR

➤ 03hr_sb0227_pt06

➤ Miscellaneous ... Misc

➤ **

➤ Record of Comm. Proceedings ... RCP

➤ **

NO DATE

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APPENDIX 2

**DISCIPLINE OF HEALTH CARE PROFESSIONALS,
SPECIAL COMMITTEE ON**

OFFICERS

Chairperson

JOANNE HUELSMAN
Senator
235 West Broadway, Ste. 210
Waukesha 53186-4832

Secretary

FRED A. RISSER
Senator
5008 Risser Road
Madison 53705-1365

Vice Chairperson

GREGG UNDERHEIM
Representative
1652 Beech Street
Oshkosh 54901-2808

REPRESENTATIVES

DAVID CULLEN
2845 North 68th Street
Milwaukee 53210-1206

LORRAINE SERATTI
HC-2, Box 558
Florence 54121-9620

FRANK URBAN
3645 Emberwood Drive
Brookfield 53005-2388
SHELDON WASSERMAN
3487 North Lake Drive
Milwaukee 53211-2919

PUBLIC MEMBERS

KEITH R. CLIFFORD
Attorney
Clifford & Reuter, S.C.
44 East Mifflin St., Ste. 800
Madison 53703-2800

CANDICE FREIL
Vice President-Health Services
PrimeCare Health Plan
N8 W33847 Forest Ridge Dr.
Delafield 53018

KERMIT NEWCOMER, M.D.
Retired Physician
Gunderson Clinic, Ltd.
N2028 Wedgewood Drive East
LaCrosse 54601-7175

JERRY NOACK
Director, Physician Assistant Program
UW-Madison Medical School
1300 University Avenue, Rm. 1050
Madison 53706-1532

RICHARD G. ROBERTS, M.D.
Professor, Dept. of Family Medicine
UW-Madison Medical School
777 South Mills Street
Madison 53715-1896

SUSAN ROSENBERG
Attorney, Domnitz, Mawicke, Goisman
& Rosenberg, S.C.
1509 North Prospect Avenue
Milwaukee 53202-2323

BARBARA SCHULTZ
Owner
Appearances at Alma's
609 Crestview Drive
Menomonie 54751-4103

JANET SCHULZ
Vice President
Medical Staff Services
Waukesha Memorial Hospital
N8W29323 Windrift Lane
Waukesha 53188-9409

MARY K. WOLVERTON
Attorney, Peterson, Johnson &
Murray, S.C.
733 N. Van Buren St., 6th Fl.
Milwaukee 53202-4705

STUDY ASSIGNMENT: The Committee is directed to study procedures for imposition of discipline for alleged cases of patient neglect or unprofessional conduct by health care-related examining boards and affiliated credentialing boards identified by the Special Committee, for the purpose of ensuring that such procedures are effective, fair and consistent. The Special Committee shall report its recommendations to the Joint Legislative Council by May 1, 1999. [Based on Assembly Amendment 3 to Assembly Substitute Amendment 1 to 1997 Assembly Bill 549.]

Established and Chairperson appointed by a June 24, 1998 mail ballot; members appointed by a September 4, 1998 mail ballot.

16 MEMBERS: 2 Senators; 5 Representatives; and 9 Public Members.

LEGISLATIVE COUNCIL STAFF: Don Dyke, Senior Staff Attorney; Laura Rose, Senior Staff Attorney; and Kathy Follett, Administrative Staff.

5. Requires that a patient or client who has been adversely affected by a health care professional's conduct that is the subject of a state disciplinary proceeding be given opportunity to confer with the DRL's prosecuting attorney concerning the disposition of the case and the economic, physical and psychological effect of the unprofessional conduct on the patient or client.

6. Requires the DRL to establish guidelines for the timely completion of each stage of the health care professional disciplinary process.

7. Requires, if the DRL establishes panels of health care experts to review complaints against health care professionals, that DRL attempt to include on the panels health care professionals who practice alternative forms of health care to assist in evaluating cases involving alternative health care.

8. Requires, by May 1, 2001, the DRL to submit to the Legislature a report on the disciplinary process time lines which were implemented by the department as guidelines in February 1999.

9. Adds two public members to the Medical Examining Board (MEB), resulting in a 15-member MEB with five public members, nine medical doctor members and one member who is a doctor of osteopathy.

10. Authorizes the MEB to summarily limit any credential issued by the MEB pending a disciplinary hearing.

11. Authorizes the MEB to assess a forfeiture of not more than \$1,000 for each violation against a credential holder found guilty of unprofessional conduct (not including negligence in treatment).

12. Creates a state requirement that reports on medical malpractice payments and on professional review actions by health care entities, which currently must be submitted to the National Practitioner Data Bank (NPDB), must also be submitted to the MEB in accordance with the time limits set forth in federal law. A person or entity who violates the state requirement is subject to a forfeiture of not more than \$10,000 for each violation.

13. Provides that when a coroner or medical examiner receives a report of a death under s. 979.01, Stats., and subsequently determines that the death was therapeutic-related, as defined, the coroner or medical examiner must indicate that determination on the death certificate and forward the information to the DRL.

• Votes

Senate Bill 317 consists of several proposals that were acted on separately by the Special Committee on Discipline of Health Care Professionals. The separate proposals that were combined into Senate Bill 317 and the votes on those proposals by the Special Committee on

↑
2003 SB 227

Discipline of Health Care Professionals for recommendation to the Joint Legislative Council for introduction in the 1999-2000 Session of the Legislature are set forth below.

WLCS: 0014/1, relating to directing the DRL to establish priority discipline cases for health care professionals, factors to identify health care professionals in possible need of investigation and time lines for the health care professional disciplinary process and requiring notice to health care professionals and their places of employment and to complainants, patients and clients in connection with the disciplinary process (as amended): Ayes, 11 (Sens. Huelsman; Reps. Underheim, Urban and Wasserman; and Public Members Clifford, Freil, Newcomer, Noack, Roberts, Schultz and Schulz); Noes, 0; and Absent, 5 (Sen. Risser; Reps. Cullen and Seratti; and Public Members Rosenberg and Wolverton).

WLCS: 0060/2 relating to changing the composition of the MEB: Ayes, 9 (Sen. Huelsman; Reps. Cullen, Underheim and Urban; and Public Members Clifford, Freil, Noack, Schultz and Schulz); Noes, 3 (Rep. Wasserman; and Public Members Newcomer and Roberts); and Absent, 4 (Sen. Risser; Rep. Seratti; and Public Members Rosenberg and Wolverton).

WLCS: 0067/1, relating to authorizing the MEB to summarily limit a credential granted by the board: Ayes, 9 (Sens. Huelsman and Risser; Rep. Wasserman; and Public Members Newcomer, Noack, Rosenberg, Schultz, Schulz and Wolverton); Noes, 0; and Absent, 7 (Reps. Underheim, Cullen, Seratti and Urban; and Public Members Clifford, Freil and Roberts).

WLCS: 0068/1, relating to authorizing the MEB to impose a civil forfeiture in certain cases of unprofessional conduct: Ayes, 13 (Sen. Huelsman; Reps. Underheim, Cullen, Seratti, Urban and Wasserman; and Public Members Clifford, Freil, Newcomer, Noack, Roberts, Schultz and Schulz); Noes, 0; and Absent, 3 (Sen. Risser; and Public Members Rosenberg and Wolverton).

WLCS: 0101/1, relating to requiring reports which must be submitted to the NPDB to be submitted to the MEB and providing a penalty (as amended): Ayes, 13 (Sen. Huelsman; Reps. Underheim, Cullen, Seratti, Urban and Wasserman; and Public Members Clifford, Freil, Newcomer, Noack, Roberts, Schultz and Schulz); Noes, 0; and Absent, 3 (Sen. Risser; and Public Members Rosenberg and Wolverton).

WLCS: 0104/P1, relating to including health care professionals who practice alternative forms of health care in panels of health care experts established by the DRL: Ayes, 10 (Sen. Huelsman; Reps. Underheim, Cullen and Seratti; and Public Members Clifford, Freil, Noack, Roberts, Schultz and Schulz); Noes, 2 (Reps. Urban and Wasserman); and Absent, 4 (Sen. Risser; and Public Members Newcomer, Rosenberg and Wolverton).

WLCS: 0021/2, relating to requiring coroners and medical examiners to indicate on certificates of death when a death is therapeutic-related and to provide this information to the DRL: Ayes, 13 (Sen. Huelsman, Reps. Underheim, Cullen, Seratti, Urban and Wasserman; and Public Members Clifford, Freil, Newcomer, Noack, Roberts, Schultz and Schulz); Noes, 0; and Absent, 3 (Sen. Risser; and Public Members Rosenberg and Wolverton).

At its September 23, 1999 meeting, the Joint Legislative Council voted to introduce 1999 Senate Bill 317 (WLCS: 0147/1) by a vote of Ayes, 15 (Reps. Kelso, Bock, Foti, Freese, Huber, Jensen, Schneider, Seratti and Stone; and Sens. Risser, Burke, Cowles, Erpenbach, Grobschmidt and Robson); Noes, 0; and Absent, 7 (Reps. Gard and Krug; and Sens. Chvala, Ellis, George, Rosenzweig and Zien).

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58226

B. SENATE BILL 318, RELATING TO MAKING AVAILABLE TO THE PUBLIC INFORMATION ON THE EDUCATION, PRACTICE AND DISCIPLINARY HISTORY OF PHYSICIANS, REQUIRING RULES OF THE DEPARTMENT OF HEALTH AND FAMILY SERVICES TO INCLUDE PROCEDURES AFFORDING HEALTH CARE PROVIDERS OPPORTUNITY TO CORRECT HEALTH CARE INFORMATION AND GRANTING RULE-MAKING AUTHORITY

• **Key Provisions**

1. Directs the MEB to make available for dissemination to the public, in a format established by the board, specified information concerning a physician's education, practice, malpractice history, criminal history and disciplinary history. The costs incurred by the DRL in connection with making physician information available to the public is funded by a surcharge on the license renewal fee paid biennially by physicians licensed in this state.

2. Requires administrative rules of the Department of Health and Family Services (DHFS) to include procedures affording health care providers the opportunity to correct health care information collected under ch. 153, Stats.

• **Votes**

Senate Bill 318 combines two drafts separately considered by the Special Committee on Discipline of Health Care Professionals. One of the drafts, WLCS: 0015/1, was voted on by the Special Committee at its April 20, 1999 meeting; subsequent to that meeting, two remaining issues related to the draft were resolved by the adoption of two amendments by mail ballot. The other draft included in WLCS: 0015/2 is WLCS: 0034/P1. The votes by the Special Committee on Discipline of Health Care Professionals to recommend the two drafts that were combined to create WLCS: 0015/2 to the Joint Legislative Council for introduction in the 1999-2000 Legislature are set forth below.

WLCS: 0034/P1, relating to procedures to provide an opportunity to correct certain health care information and providing rule-making authority: Ayes, 10 (Sens. Huelsman and Risser; Reps. Urban and Wasserman; and Public Members Newcomer, Noack, Rosenberg, Schultz, Schulz and Wolverton); Noes, 0; and Absent, 6 (Reps. Underheim, Cullen and Seratti; and Public Members Clifford, Freil and Roberts).

WLCS: 0015/1, relating to making available to the public certain information on the education, practice and disciplinary history of physicians and granting rule-making authority (as amended): Ayes, 13 (Sen. Huelsman; Reps. Underheim, Cullen, Seratti, Urban and Wasserman;

and Public Members Clifford, Freil, Newcomer, Noack, Roberts, Schultz and Schulz); Noes, 0; and Absent, 3 (Sen. Risser; and Public Members Rosenberg and Wolverton).

At its September 23, 1999 meeting, the Joint Legislative Council voted to introduce 1999 Senate Bill 318 (WLCS: 0015/2) by a vote of Ayes, 17 (Reps. Kelso, Bock, Foti, Freese, Gard, Huber, Jensen, Seratti and Stone; and Sens. Risser, Burke, Chvala, Cowles, Grobschmidt, Robson, Rosenzweig and Zien); Noes, 2 (Rep. Schneider and Sen. Erpenbach); and Absent, 3 (Rep. Krug; and Sens. Ellis and George).

Halbur, Jennifer

To: Kunkel, Mark
Subject: SB 227 Amendment

Hi Mark,

I left you a voice mail about this also. Sen. Roessler needs another amendment drafted for SB 227. I know you have done two others so I am wondering if we shouldn't combine them into one big amendment. Would that be okay to do? Let me know and I will send the others ones back to you. In the meantime, I will send you the newest changes that we need made. I don't have an electronic copy so I will send these via inter-D.

Thank you for your help.

Jennifer

Halbur, Jennifer

To: Kunkel, Mark
Subject: Hold on amendment to SB 227

Hey Mark,

You can hold on the subpoena language that I sent you. I want to run it past someone before moving forward.

Thanks!
Jennifer

Halbur, Jennifer

To: markg@wismed.org
Subject: Amendment to SB 227...Doctor Discipline Bill

Hey Mark,

I will soon have a draft amendment to share with you that was prepared by the Department of Regulation and Licensing. It relates to subpoena authority for the Department. Carol is supportive of this but I would like to know if WI Med. Society has any problems with it.

I have a hard copy but should have an electronic version soon.

Thanks!
Jennifer

53 227

Senate Committee on Health, Children, Families, Aging and Long Term Care

Attendance of Members

The following members will be at the hearing: Senators Brown, Carpenter, Chwala (?) Jauch, Welch (may be late), Schultz and Robson.

X

EXCUSED
Kanavas will not be attending. Chwala - not attending

Roll ^{opening} _{end of Day}

Voting

Executive Session

The hearing notice states, "An Executive Session will be held on SB 71, SB 72, and SB 192. An Executive Session may be held on any of the other items before the Committee."

Public Hearing was held on 7-22-03

Senate Bill 71:

- Treatment of prescription drug costs, diagnostic testing, and payments under mandated insurance coverage of treatment for nervous and mental disorders and alcoholism and other drug abuse problems.
- Mental Health Parity Legislative Council Study Committee: 14 ayes, 0 noes; Joint Legislative Council: voice vote with Welch recorded as no.
- Welch will be voting against on Sept. 4th. Kanavas will likely vote yes.

Senate Bill 72:

- Increasing the limits for insurance coverage of nervous or mental health disorders or alcoholism or other drug abuse problems.
- Mental Health Parity Legislative Council Study Committee-8 ayes, 6 noes; Joint Legislative Council-13 ayes, 4 noes, 1 absent-Gard would have voted aye.
- Welch, Kanavas and Brown will be voting against on Sept. 4th.

Case given Back ground check
{ Conducted on a person convicted of a serious crime, has abused or neglected a client or child etc. . . }

Senate Bill 192

- Tribal administration of rehabilitation reviews for persons who otherwise may not operate, be employed at, contract with, or reside at an entity that provides care for children or adults.
- State Tribal Relations Legislative Council Study Committee-12 ayes, 1 no, 4 not voting; Joint Legislative Council-15 ayes, 2 noes, 4 not voting-Foti would have voted no.

Rehab.
tribe
substantive
or not
OK.
substantive
no

Agenda

Senate Bill 230- You are the main author

- HIV testing bill.
- Authorizes an employee of a school district, cooperative educational service agency, charter school, private school, the WI Educational Services Program for the Deaf and Heard of Hearing, the WI Center for the Blind and Visually Impaired, or a social

worker to subject an individual's blood to a test for the presence of the virus that causes acquired immunodeficiency syndrome (AIDS).

- Mike Johnson will be at the hearing to testify.
- Bob Schwoch told you that he may or may not be at the hearing. He will be testifying against if he is able to attend.
- Cheryl Hartman of Oshkosh will be at the hearing. She will be accompanied by John Sprangers, Director of Human Resources Oshkosh Area School District, Patti Yana, teacher defense for the OEA, and Linda Stoikes, a school nurse.

Appointments

- There are 9 appointments.
- The Economic Impact Statement for each person has been received.
- Sen. Panzer's office asked that you pose the following question to Patricia Finder-Stone: "I understand that you were a party to suit against the Republican Senate relating to redistricting. How did you get involved in this?"

W/Hartman
cause
appointments
Hartman
Panzer

Senate Bill 225-You are the main author

- Provides continuing education requirements for dental hygienists.
- Peter Theo provided you with an amendment to this bill 8-15-03. You were not interested at that time in having it drafted. You said that he could provide testimony about the proposed amendment and the need for it at the hearing.
- WDA supports the bill, however, Mara will not be available to provide testimony.
- Peter Theo knows of two Dental Hygienists that will be at the hearing.
- The Dept. of Reg. and Lic. will testify in support with the assumption that the Dept. will be doing random audits (rather than complaint audits). Also, some objection to Section 2 (4) of the bill: "*A person may substitute uncompensated hours of voluntary activities related to the practice of dental hygiene for no more than 5 of the credit hours required under sub. (1).*"

Senate Bill 226-You are the main author

- Doctor Discipline Bill.
- Makes available to the public information on education, practice, and disciplinary history of physicians. Also requires DHFS to include procedures affording health care providers an opportunity to correct health care information.
- I called Dr. Darold Treffert: He was not sure if he could make it. If he can't make it, he will submit testimony to members.
- The Dept. of Reg. and Lic. does not understand the language relating to the, "Link to Sate Medical Society Web Site." The language reads, "*The Board (MEB) shall include on any Web site that it develops to disseminate information under this section, in place of providing the information through the board's own Web page, a link to the physician directory located on the Web site of the State Medical Society.*"
- Alice O'Connor mentioned that this link was a result of an agreement between DRL and the State Medical Society as an effort to save the state money.

- DRL also concerned about cost, even though the bill allows for a surcharge on the renewal fee, they will need more staff.
- WI Medical Society will testify in support of the bill, however they are not happy with DRL needing more money (Fiscal note expected to be \$600,000). Alice suggests that you ask DRL what progress they have made in the last two years to make information on doctors more assessable? Why aren't they following the Massachusetts model?

Senate Bill 227- You are the main author

- Doctor Discipline Bill.
- Priorities, completion guidelines, and notices required for health care professional disciplinary cases; identification of health care professionals in possible need of investigation; additional public members for the Medical Examining Board; Authority of the Medical Examining Board to limit credentials and impose forfeitures...
- Alice O'Connor (Medical Society) does not like that the bill develops a system for identifying health care professionals who may warrant further evaluation and possible investigation.
- Dr. Darold Treffert will either testify on this bill or submit testimony (if he is unable to attend the hearing).
- The Dept. of Reg. and Lic. is concerned about cost, even though the bill allows the Dept. to impose a surcharge on license renewal fees paid biennially by physicians licensed in the state.

Dianna Greenly
WI. Coalition for Advocacy
Madison.

Supports SB 227

Halbur, Jennifer

To: Tormey, Jessica; Ottman, Tad; Hogan, Rebecca
Subject: Senate Bill 227

Hi,

Senate Bill 227 is a priority bill for Senator Roessler and she would like to get it on the calendar for next week.

Tad...do you think there is a possibility of moving the bill next week? I have two amendments that Sen. Roessler would like the JFC to adopt. The amendments are in response to concerns heard at the Senate Health Committee public hearing.

- The first amendment removes language relating to "therapeutic-related death." Therefore, Page 12 lines 5 to 16 are deleted.

The WI Medical Society had the following concern with keeping the "therapeutic-related death" language in the bill:
Requiring a Medical Examiner or Coroner to put in essence a "red flag" on a death due to "complications" from surgery, prescription drug use or the like is in our opinion extremely vague. For example, if a patient has an unexpected reaction to cardiac drugs, does tha warrant a DRL notification? Or if post-surgery a patient gets an infection that does not respond to normal, within-the-practice treatment? The existing language of SB 227 could be interpreted to say that any death not clearly "natural" could qualify as a complication."

Dean Health Systems is also opposed to the "therapeutic-related death" language staying in the bill.

- The second amendment would only require an employer to be notified if a physician loses privileges or judgment is made against the physician. The bill currently requires an employer to be notified within 30 days after a formal complaint alleging unprofessional conduct by a health care professional is filed.

Dean Health Systems (Michael Heifetz) is planning to provide me with amendment language relating to this ASAP.

Let me know what you think.

Thank you!

Jennifer

Halbur, Jennifer

To: Klein, Christopher
Subject: Senate Bill 227 relating to doctor discipline

Chris,

Senator Roessler read over the subpoena amendment the Department sent to her. She has reviewed it and decided not to move forward with that amendment. Feel free to call with any questions.

Have a good night,
Jennifer

Recommended Statutory Changes

Amend s. 440.03(4) as follows:

440.03(4) The department may issue subpoenas for the attendance of credential holders and witnesses and the production of documents or other materials prior or subsequent to the commencement of disciplinary proceedings. The department may seek enforcement of the subpoena in circuit court.

Create s. 440.03(4m) to read as follows:

440.03(4m) Investigative orders. The department may require any of the following from any person subject to regulation under chs. 440 to 480.

(a) Statements, reports, answers to questions and production of documents and other materials.

(b) Forfeiture. Whoever fails to comply with a request for information pursuant to (a) shall forfeit to the state not more than \$1,000 for each offense.

(c) Procedure. The department may order any person to pay the forfeiture imposed under this subsection. If the order is issued without a hearing, the affected person may demand a hearing within 20 days. If the person fails to request a hearing, the order is conclusive as to the person's liability.

(d) In addition to any grounds for discipline specified in chs. 440 to 480, the department or appropriate examining board, affiliated credentialing board or board in the department may assess a forfeiture of up to \$1,000 and may reprimand the holder of a credential or deny, limit, suspend or revoke the credential of any person who refuses to comply with an order issued under this subsection.

(e) Whenever the department, appropriate examining board, affiliated credentialing board or board in the department assesses a forfeiture pursuant to this section, the department, appropriate examining board, affiliated credentialing board or board in the department shall also impose an enforcement assessment in an amount equal to 50% of the forfeiture. The enforcement assessment is payable to the department.

Create s. 440.20(5) to read as follows:

440.20(5) In addition to any grounds for discipline specified in chs. 440 to 480, the department or appropriate examining board, affiliated credentialing board or board in the department may assess a forfeiture of up to \$1,000 and may reprimand the holder of a credential or deny, limit, suspend or revoke the credential of any person who refuses to comply with a subpoena issued under s. 440.03(4). Whenever the department, appropriate examining board, affiliated credentialing board or board in the department assesses a forfeiture pursuant to this section, the department, appropriate examining board, affiliated credentialing board or board in the department shall also impose an enforcement assessment in an amount equal to 50% of the forfeiture. The enforcement assessment is payable to the department.

Halbur, Jennifer

Full Name: Judi Ficks
Last Name: Ficks
First Name: Judi
Mobile: 262-424-3562
E-mail: jaef@milwpc.com

Halbur, Jennifer

To: Foster, Marianne
Subject: SB 227 fiscal note

Hi Marianne,

I called LRB Drafting regarding a revised fiscal note for SB 227 (to reflect the amendment). I was told that fiscal notes are not typically done after an amendment. The process that needs to occur is as follows:

1. Contact Sen. Panzer's office
2. If Sen. Panzer agrees, she has to send a letter to DOA requesting a new fiscal note.

I called Tad and he said he would talk it over with Sen. Panzer and let us know.

Thanks,
Jennifer

AMENDMENTS TO SB 227

- **LRB 1005/1 (CR AMENDMENT)** DELETES LINES 4 TO 15 ON PAGE 6. THIS IS THE LANGUAGE RELATING TO "IDENTIFICATION OF HEALTH CARE PROFESSIONALS WHO MAY WARRANT EVALUATION."
- **LRB 1006/1 (CR AMENDMENT)** DELETES LINES 5 TO 16 ON PAGE 12 AND LINES 18 TO 21 ON PAGE 13. THIS IS THE RELATING TO "THERAPEUTIC RELATED DEATH."
- **LRB 0955/1 (SCHULTZ AMENDMENT)** ADDS LANGUAGE TO REQUIRE THE DHFS TO STUDY AND REPORT ON THE FEASIBILITY OF ESTABLISHING A PROCEDURE FOR HOSPITAL PATIENTS TO FILE COMPLAINTS WITH THE DEPARTMENT REGARDING CHARGES IMPOSED BY HOSPITALS.

*most
groups
already
concerned*

an area where it's difficult to report to

*a lot of concern
didn't feel able to
make this determination in
therapeutic death.
Misadventure*

*Chances
me don't
have reg
to forward
Society*

Rego

State has toughened plan for bad doctors

Associated Press

EAU CLAIRE — Gov. Jim Doyle said he has started toughening the state's approach to disciplining questionable doctors since he took office.



DOYLE

While the state Medical Examining Board makes final decisions on doctor discipline, Department of Regulation and Licensing's Division of Enforcement has stepped up efforts to call for stricter penalties against doctors found to have violated professional standards, said department spokesman Christopher

Klein.

"More than has ever been done in the past, we're taking an aggressive prosecution stand," Klein said.

The shift came as a result of a hard look by DRL Secretary Donsia Strong Hill at the state's discipline of professional license holders, Doyle told the Leader-Telegram in Eau Claire.

State Medical Society spokesman Steve Busalacchi said he wasn't aware of the state's new approach.

One of the most effective ways for the administration to bring about tougher sanctions is through Doyle's appointments to the medical board, Klein said, noting Doyle already has appointed four new members.

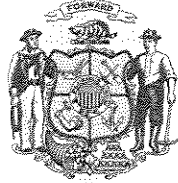
Tennifer ↓

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updrawn
CR wants to
take
further

- coroner's don't
have a way to
report therapeutic
related deaths (medical
mistakes).
* coroners / med examiners
don't know always
if a death is
therapeutic
related.



Carol Roessler
STATE SENATOR

**ASSEMBLY COMMITTEE ON HEALTH
SENATE BILL 227**

5 YEARS AGO, THE JOINT LEGISLATIVE COUNCIL'S
SPECIAL COMMITTEE ON DISCIPLINE OF HEALTH CARE
PROFESSIONALS WAS DIRECTED TO STUDY
PROCEDURES FOR IMPOSITION OF DISCIPLINE FOR
ALLEGED CASES OF PATIENT NEGLECT OR
UNPROFESSIONAL CONDUCT BY HEALTH CARE-
RELATED EXAMINING BOARDS AND AFFILIATED
CREDENTIALING BOARDS IDENTIFIED BY THE SPECIAL
COMMITTEE.

AS A RESULT OF THEIR FINDINGS, THE COMMITTEE
MADE RECOMMENDATIONS FOR A LEGISLATIVE
PROPOSAL. IN THE PREVIOUS TWO SESSIONS,

LEGISLATION WAS INTRODUCED AND PUBLIC HEARINGS WERE HELD. HOWEVER, THEY WERE NEVER VOTED ON IN THE STATE SENATE.

NOW IS THE TIME TO MOVE FORWARD WITH THE COUNCIL'S RECOMMENDED CHANGES IN DISCIPLINARY PROCEDURES.

THERE HAVE BEEN REPORTS THAT WISCONSIN LAGS IN THE DISCIPLINE OF HEALTH CARE PROFESSIONALS. I FEEL SENATE BILL 227, IS IMPORTANT TO PATIENTS AND TO THE INTEGRITY OF THE MEDICAL PROFESSION.

SENATE BILL 227 CONTAINS PROVISIONS THAT APPLY TO DISCIPLINARY PROCEDURES FOR HEALTH CARE PROFESSIONALS GENERALLY, AND PROVISIONS THAT ARE SPECIFIC TO PHYSICIAN DISCIPLINE.

PROVISIONS THAT APPLY TO HEALTH CARE

PROFESSIONALS IN GENERAL INCLUDE:

- **REQUIRING THE DEPARTMENT OF REGULATION AND LICENSING TO:**
 - **DEVELOP A SYSTEM TO ESTABLISH THE RELATIVE PRIORITY OF CASES INVOLVING UNPROFESSIONAL CONDUCT;**
 - **ESTABLISH GUIDELINES FOR THE TIMELY COMPLETION OF DISCIPLINE CASES;**
 - **GIVE NOTICE TO COMPLAINANTS, PATIENTS AND HEALTH CARE PROFESSIONALS AND THEIR PLACES OF PRACTICE, WHEN SPECIFIED STAGES OF THE DISCIPLINARY PROCESS ARE OPENED OR CLOSED;**

- REQUIRE THAT A PATIENT OR CLIENT WHO HAS BEEN ADVERSELY AFFECTED BY A HEALTH CARE PROFESSIONAL'S CONDUCT BE GIVEN AN OPPORTUNITY TO CONFER WITH THE DEPARTMENT'S PROSECUTING ATTORNEY.

**PROVISIONS OF THE BILL SPECIFIC TO THE
PHYSICIAN DISCIPLINARY PROCESS INCLUDE:**

- ADDING 2 PUBLIC MEMBERS TO THE MEDICAL EXAMINING BOARD, RESULTING IN A 15 MEMBER BOARD WITH 5 PUBLIC MEMBERS, 9 MEDICAL DOCTORS AND 1 DOCTOR OF OSTEOPATHY;
- AUTHORIZING THE MEDICAL EXAMINING BOARD TO SUMMARILY LIMIT, ANY CREDENTIAL ISSUED BY THE BOARD, PENDING A DISCIPLINARY HEARING;

- AUTHORIZING THE MEDICAL EXAMINING BOARD TO ASSESS A FORFEITURE OF NOT MORE THAN \$1,000 AGAINST A CREDENTIAL HOLDER FOUND GUILTY OF UNPROFESSIONAL CONDUCT; AND
- REQUIRING THAT REPORTS ON MEDICAL MALPRACTICE PAYMENTS AND ON PROFESSIONAL REVIEW ACTIONS BY HEALTH CARE ENTITIES, ~~WHICH CURRENTLY MUST BE SUBMITTED TO THE NATIONAL PRACTITIONER DATA BANK, MUST~~ **ALSO** BE SUBMITTED TO THE MEDICAL EXAMINING BOARD. THE BILL CREATES A PENALTY FOR FAILURE TO SUBMIT SUCH REPORTS.
- LASTLY, SB 227, AS AMENDED, REQUIRES DRL TO NOTIFY A HEALTH CARE PROFESSIONAL'S PLACE OF EMPLOYMENT **AFTER DISCIPLINARY ACTION HAS BEEN DETERMINED.**

THE SENATE COMMITTEE ON HEALTH PASSED SENATE AMENDMENT 1: 9-0. THIS AMENDMENT DELETED THE LANGUAGE IN THE BILL THAT WOULD HAVE REQUIRED THE DEPARTMENT OF REGULATION AND LICENSING TO DEVELOP A SYSTEM OF "MARKERS" FOR IDENTIFYING HEALTH CARE PROFESSIONALS WHO MAY WARRANT FURTHER EVALUATION BEFORE AN INCIDENT OF UNPROFESSIONAL CONDUCT OCCURS.

THE FULL SENATE ADOPTED 2 AMENDMENTS.

- ONE **DELETED** LANGUAGE RELATING TO THE CREATION OF THE TERM, "THERAPEUTIC-RELATED DEATH," AND THE REQUIREMENT THAT A CORONER REPORT THAT A DEATH WAS A THERAPEUTIC-RELATED DEATH TO THE DEPARTMENT OF REGULATION AND LICENSING.

THIS LANGUAGE WAS TOO VAGUE IN TERMS OF WHEN A DRL NOTIFICATION WOULD BE NEEDED. FOR EXAMPLE, IT WAS NOT CLEAR HOW AN UNEXPECTED REACTION TO A DRUG THAT RESULTED IN DEATH WOULD BE TREATED. ANOTHER SCENARIO WOULD BE A PATIENT WHO GETS AN INFECTION THAT DOES NOT RESPOND TO NORMAL, WITHIN THE PRACTICE TREATMENT.

- ~~THE 2ND AMENDMENT~~ ^{THE bill} REQUIRED THE DEPARTMENT OF REGULATION AND LICENSING TO NOTIFY A HEALTH CARE PROFESSIONAL'S PLACE OF EMPLOYMENT AFTER A COMPLAINT HAS BEEN FILED ALLEGING UNPROFESSIONAL CONDUCT BY THE HEALTH CARE PROFESSIONAL. ^{THE} AMENDMENT ADOPTED, INSTEAD, REQUIRES DRL TO NOTIFY A HEALTH CARE PROFESSIONAL'S PLACE OF EMPLOYMENT AFTER DISCIPLINARY ACTION HAS BEEN DETERMINED.

THIS BILL IS THE RIGHT THING TO DO. OUR
DISCIPLINARY SYSTEM FOR HEALTHCARE
PROFESSIONALS NEEDS TO BE IMPROVED AND SB 227 IS
A STRONG STEP FORWARD IN THIS DIRECTION.

I AM INTRODUCING LRB 1006 WHICH DELETES

LANGUAGE RELATING TO THE CREATION OF THE TERM,

“THERAPEUTIC-RELATED DEATH,” AND THE

REQUIREMENT THAT A CORONER REPORT THAT A

DEATH WAS A THERAPEUTIC-RELATED DEATH TO THE

DEPARTMENT OF REGULATION AND LICENSING.

THIS LANGUAGE IS TOO VAGUE IN TERMS OF WHEN A

DRL NOTIFICATION IS NEEDED. FOR EXAMPLE, IT IS

NOT CLEAR HOW AN UNEXPECTED REACTION TO A

DRUG THAT RESULTED IN DEATH WOULD BE TREATED.

ANOTHER EXAMPLE IS A PATIENT WHO GETS AN

INFECTION THAT DOES NOT RESPOND TO NORMAL,

WITHIN THE PRACTICE TREATMENT. DUE TO THE

AMBIGUITY OF THE LANGUAGE, I AM ASKING YOU TO

SUPPORT REMOVING IT FROM THE BILL.

I AM ALSO INTRODUCING LRB 1843. THIS AMENDMENT
AMENDS LANGUAGE THAT WOULD REQUIRE THE
DEPARTMENT OF REGULATION AND LICENSING TO
NOTIFY A HEALTH CARE PROFESSIONAL'S PLACE OF
EMPLOYMENT AFTER A COMPLAINT HAS BEEN FILED
ALLEGING UNPROFESSIONAL CONDUCT BY THE
HEALTH CARE PROFESSIONAL. THIS AMENDMENT
WOULD INSTEAD REQUIRE DRL TO NOTIFY A HEALTH
CARE PROFESSIONAL'S PLACE OF EMPLOYMENT AFTER
DISCIPLINARY ACTION HAS BEEN DETERMINED.