1	SENATE BILL NO. 83
2	INTRODUCED BY R. WEBB
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4	A BILL FOR AN ACT ENTITLED: "AN ACT ESTABLISHING THE VOLUNTEER HEALTH SERVICES PROGRAM
5	TO PROVIDE FREE QUALITY HEALTHCARE SERVICES TO UNINSURED AND UNDERINSURED
6	INDIVIDUALS; PROVIDING IMMUNITY TO CERTAIN HEALTH CARE FACILITIES AND PROVIDERS THAT
7	PARTICIPATE IN THE PROGRAM; ALLOWING PROVIDERS TO RECEIVE CONTINUING EDUCATION
8	CREDIT FOR PARTICIPATING IN THE PROGRAM; ESTABLISHING A STATE REGISTRY FOR
9	PARTICIPATING FACILITIES AND PROVIDERS; PROVIDING DEFINITIONS; AND AMENDING SECTIONS
10	27-1-736 AND 37-1-306, MCA."
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12	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:
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14	NEW SECTION. Section 1. Definitions. As used in [sections 1 through 4], the following definitions
15	apply:
16	(1) "Department" means the department of public health and human services provided for in 2-15-2201
17	(2) "Health care facility" means any of the following facilities as defined in 50-5-101:
18	(a) a hospital;
19	(b) a critical access hospital;
20	(c) an outpatient center for primary care;
21	(d) an outpatient center for surgical services; or
22	(e) any other facility licensed pursuant to Title 50, chapter 5, part 2, that:
23	(i) provides medical services or treatment;
24	(ii) has an office maintained by a health care provider; and
25	(iii) is approved by the department to participate in the program.
26	(3) "Health care provider" or "provider" means:
27	(a) a physician, physician assistant, nurse, chiropractor, podiatrist, dentist, or dental hygienist licensed
28	pursuant to Title 37; or
29	(b) a student enrolled in an accredited program that prepares the student for licensure as any of the
30	providers listed in subsection (3)(a)(i).

- 1 (4) "Low-income" means:
- 2 (a) a person eligible for the medical assistance program provided for in Title 53, chapter 6; or

3 (b) an uninsured individual whose annual household income does not exceed 200% of the federal 4 poverty level as defined by the U.S. department of health and human services.

(5) "Program" means the volunteer health services program provided for in [sections 1 through 4].

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<u>NEW SECTION.</u> Section 2. Volunteer health services program -- immunity -- exceptions -- continuing education. (1) (a) There is a volunteer health services program for health care facilities and providers registered with the department to provide free health care services to low-income people in accordance with [sections 1 through 4].

- (b) A physician assistant may participate in the program only to the extent allowed under the duties and delegation agreement the physician assistant has signed with a supervising physician.
- (2) Except as provided in subsection (3), a health care facility or provider that participates in the program is immune from liability in any action arising out of the medical care or treatment provided in accordance with [sections 1 through 4] to:
  - (a) a low-income person; or
- (b) a person who received treatment based on preliminary income information provided to the facility or provider but who was found to be ineligible after treatment was provided because the person's income exceeded 200% of the federal poverty level.
  - (3) The immunity provided by subsection (2) does not apply to:
- (a) damages that were the result of gross negligence or willful or wanton acts or omissions by a health care facility or provider; or
- (b) health care facilities operated by the state or its political subdivisions or to health care providers employed by the state or its political subdivisions.
- (4) A health care provider who participates in the program is eligible for 1 continuing education credit for each hour of free medical care provided, up to a maximum of 8 continuing education credits per licensure period.

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NEW SECTION. Section 3. Volunteer health services registry. (1) The department shall establish



and maintain an online registry of health care facilities and providers participating in the volunteer health services
 program.

- 3 (2) The registry must:
- 4 (a) outline the income requirements for a patient's participation in the program;
  - (b) provide the days and hours that participating health care facilities and providers are available to provide volunteer health services; and
  - (c) clearly state that the participating health care facilities and providers are immune from suit for the medical services they provide pursuant to [sections 1 through 4].

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## <u>NEW SECTION.</u> **Section 4. Department requirements.** The department shall:

- (1) maintain the volunteer health services registry established pursuant to [section 3];
- (2) refer reports of adverse incidents or adverse treatment outcomes to the appropriate licensing board for review; and
  - (3) report on the program by August 30 of each year to the children, families, health, and human services interim committee. The report must include:
    - (a) the number and types of volunteer health services provided;
- 17 (b) the number of health care facilities and providers participating in the program and the amount of 18 volunteer health services provided;
  - (c) the number of patients served by the program;
  - (d) the value of the health care goods and services provided; and
  - (e) the number of claims filed in court and complaints filed with professional licensing boards involving the goods and services provided.

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## **Section 5.** Section 27-1-736, MCA, is amended to read:

"27-1-736. Limits on liability of medical practitioner or dental hygienist who provides services without compensation. (1) (a) A medical practitioner, as defined in 37-2-101, or a dental hygienist licensed under Title 37, chapter 4, who renders, at any site, any health care within the scope of the provider's license, voluntarily and without compensation, to a patient of a clinic, to a patient referred by a clinic, or in a community-based program to provide access to health care services for uninsured persons is not liable to a person for civil damages resulting from the rendering of the care unless the damages were the result of gross

negligence or willful or wanton acts or omissions by the medical practitioner or dental hygienist. Each patient must
 be given notice that under state law the medical practitioner or dental hygienist cannot be held legally liable for
 ordinary negligence if the medical practitioner or dental hygienist does not have malpractice insurance.

- (b) A health care facility or health care provider, as those terms are defined in [section 1], is immune from liability as provided in [section 2] when delivering volunteer health care services in accordance with [sections 1] through 4].
  - (2) For purposes of this section subsection (1)(a):
- (a) "clinic" means a place for the provision of health care to patients that is organized for the delivery of health care without compensation or that is operated as a health center under 42 U.S.C. 254b;
- (b) "community-based program to provide access to health care services for uninsured persons" means a local program in which care is provided without compensation to individuals who have been referred through that community-based program and in which the medical practitioner or dental hygienist has entered into a written agreement to provide the service:
  - (c) "health care" has the meaning provided in 50-16-504;
- (d) "without compensation" means that the medical practitioner or dental hygienist voluntarily rendered health care without receiving any reimbursement or compensation, except for reimbursement for supplies.
  - (3) Subsection (1)(a) applies only to a medical practitioner or dental hygienist who:
- (a) does not have malpractice insurance coverage because the medical practitioner or dental hygienist is retired or is otherwise not engaged in active practice; or
- (b) has malpractice insurance coverage that has a rider or exclusion that excludes coverage for services provided under this section."

**Section 6.** Section 37-1-306, MCA, is amended to read:

- "37-1-306. Continuing education -- certification -- other qualifications for continued licensure -- audit. (1) A board may require licensees to participate in flexible, cost-efficient, effective, and geographically accessible continuing education or continued state, regional, or national certification for licensure.
- (2) A board that requires continuing education or state, regional, or national certification may not audit or require proof of continuing education or certification as a precondition for license renewal. However, a licensee who reactivates a license after the license has expired, as provided in 37-1-141, is subject to a mandatory continuing education audit.



(3) After the lapsed date provided for in 37-1-141, the board or department may conduct a random audit of up to 50% of all licensees who have renewed their licenses to determine compliance with board or program continuing education requirements.

- (4) The board or department may audit licensees for compliance with state, regional, or national certification or other board or department requirements.
- (5) A board that licenses health care providers eligible to participate in the volunteer health services program established in [sections 1 through 4] shall credit a participating provider with 1 hour of continuing education credit for each hour of volunteer health services provided, up to a maximum of 8 hours per licensure period.
- (5)(6) The board or department shall provide a licensee not in compliance with continuing education or certification requirements with an opportunity to cure the noncompliance as provided in 37-1-321."

NEW SECTION. Section 7. Codification instruction. [Sections 1 through 4] are intended to be codified
as an integral part of Title 50, chapter 4, and the provisions of Title 50, chapter 4, apply to [sections 1 through 4].

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