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1	SENATE BILL NO. 564
2	INTRODUCED BY T. MCGILLVRAY
3	
4	A BILL FOR AN ACT ENTITLED: "AN ACT REVISING THE MONTANA HEALTH CORPS ACT; EXPANDING
5	ELIGIBILITY FOR SERVICES PROVIDED BY HEALTH CORPS PHYSICIANS; REVISING LEGAL LIABILITY
6	PROVISIONS FOR SERVICES PROVIDED BY HEALTH CORP PHYSICIANS; REVISING THE APPLICATION
7	FEE FOR INITIAL ENROLLMENT IN THE HEALTH CORPS PROGRAM; PROVIDING A DEFINITION;
8	PROVIDING RULEMAKING AUTHORITY; AMENDING SECTIONS 27-1-736, 37-3-203, 37-3-802, 37-3-803,
9	37-3-804, 37-3-805, AND 37-3-806, MCA; AND PROVIDING AN EFFECTIVE DATE, AND AN APPLICABILITY
10	DATE , AND A TERMINATION DATE ."
11	
12	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:
13	
14	Section 1. Section 27-1-736, MCA, is amended to read:
15	"27-1-736. Limits on liability of medical practitioner or dental hygienist who provides services
16	without compensation. (1) A medical practitioner, as defined in 37-2-101, or a dental hygienist licensed under
17	Title 37, chapter 4, who renders, at any site, any health care within the scope of the provider's license,
18	voluntarily and without compensation, to a patient of a clinic, to a patient referred by a clinic, or in a community-
19	based program to provide access to health care services for uninsured persons is not liable to a person for civil
20	damages resulting from the rendering of the care unless the damages were the result of gross negligence or
21	willful or wanton acts or omissions by the medical practitioner or dental hygienist. Each patient must be given
22	notice that under state law the medical practitioner or dental hygienist cannot be held legally liable for ordinary
23	negligence if the medical practitioner or dental hygienist does not have malpractice insurance.
24	(2) A physician participating in the Montana health corps act provided for in Title 37, chapter 3,
25	part 8, is immune from liability as provided in 37-3-806.
26	(2)(3) For purposes of this section:
27	(a) "clinic" means a place for the provision of health care to patients that is organized for the



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1	nformation regarding the physicians about whom the board received complaints.	
2	(c) For each physician against whom the board takes disciplinary action related to the physician's	s
3	ractices in providing written certification for the use of marijuana for a debilitating medical condition, the repo	rt
4	nust include:	
5	(i) the name of the physician;	
6	(ii) the general results of the investigation of the physician's practices; and	
7	(iii) the disciplinary action taken against the physician.	
8	(d) The board shall provide the report to the economic affairs interim committee in accordance wi	ith
9	-11-210 and shall make a copy of the report available on the board's website.	
10	(4) The board may enter into agreements with other states for the purposes of mutual recognition	1
11	f licensing standards and licensing of physicians and emergency care providers from other states under the	
12	erms of a mutual recognition agreement."	
13		
14	Section 3. Section 37-3-802, MCA, is amended to read:	
15	"37-3-802. Purpose establishment of program. (1)-The purposes of this part are to:	
16	(a)(1) provide primary outpatient care to low-income individuals and to individuals eligible for	
17	nedicare or medicaid by retired -physicians at affordable prices;	
18	(b)(2) keep the elderly or infirm in their homes longer; and	
19	(e)(3) provide home health care visits for patients who have difficulty in traveling.	
20	(2) The board shall adopt rules to establish the program. The rules must provide procedures for	
21	nrolling retired physicians in the health corps and procedures under which physicians or health care facilities	r
22	nay refer medicare or medicaid patients to members of the health corps."	
23		
24	Section 4. Section 37-3-803, MCA, is amended to read:	
25	"37-3-803. Definitions. As used in this part, unless the context requires otherwise, the following	
26	efinitions apply:	
27	(1) "Health care" has the meaning provided in 50-16-504.	



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1	(2) "Health care facility" has the meaning provided in 50-5-101.
2	(3) "Low income" means a person who is:
3	(a) eligible for the medical assistance program provided for in Title 53, chapter 6; or
4	(b) uninsured and whose family income does not exceed 200% of the federal poverty level."
5	
6	Section 5. Section 37-3-804, MCA, is amended to read:
7	"37-3-804. Eligibility for participation. A retired physician who is properly licensed and in good
8	standing in Montana may participate in the health corps provided for in this part on:
9	(1) payment of a \$30 fee for a new applicant or payment of a renewal fee established by the board
10	by rule; and
11	(2) providing a listing of clinical services offered by the applicant and the location where the
12	services are offered if the services are rendered outside of a person's home. The board shall accept
13	applications for participation in the health corps and provide written guidelines to participants in the health corps
14	concerning the provisions of this part and rules adopted to implement this part."
15	
16	Section 6. Section 37-3-805, MCA, is amended to read:
17	"37-3-805. Referral of patients to program visits Visits charges. (1) The board shall adopt
18	rules under which physicians or health care facilities may refer medicare or medicaid patients to the health
19	corps program.
20	(1) Physicians or health care facilities may refer medicare or medicaid patients to the health corps
21	program.
22	(2)(1)(2)A health corps member shall may make home visitations to eligible patients for the
23	purpose of providing health care to eligible patients.
24	(3)(2)(3) A health corps member may charge \$10 for a patient contact or visit and may submit a
25	charge to medicare or medicaid."
26	
27	Section 7. Section 37-3-806, MCA, is amended to read:



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1	"37-3-806. Limitation on liability. (1) A physician who renders health care within the scope of the
2	physician's license to a patient under this part and submits a payment to medicare or medicaid for the care is
3	not liable to a patient or other person for civil damages resulting from the rendering of the care unless the
4	damages were the result of gross negligence or willful or wanton acts or omissions by the physician.
5	(2) (a) A physician who renders health care within the scope of the physician's license and does
6	not submit a claim to medicare or medicaid is immune from any cause of action associated with services
7	provided in accordance with this part.
8	(b) If a patient who receives health care services from a physician who has not submitted a claim
9	to medicare or medicaid for the care believes the physician committed gross negligence or willful or wanton
10	acts or omissions when providing care, the person may file a complaint of unprofessional conduct with the
11	board as provided in 37-1-308. This subsection (2)(b) does not limit a patient's ability to file a complaint of
12	unprofessional conduct related to other aspects of the physician's services.
13	(c) The board shall maintain a record of any disciplinary action taken pursuant to this subsection
14	<u>(2).</u>
15	(3) Each patient must be given notice that under state law the physician may not be held legally
16	liable for ordinary negligence of the limitations on a physician's legal liability for services provided under the
17	health corps program."
18	
19	NEW SECTION. Section 8. Effective date. [This act] is effective July 1, 2023.
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21	NEW SECTION. Section 9. Applicability. [This act] applies to health care services provided on or
22	after July 1, 2023.
23	
24	NEW SECTION. Section 10. Termination. [Sections 1 through 7] terminate June 30, 2029.
25	- END -

