1-1	By: Nelson S.B. No. 1331
1-2	(In the Senate - Filed March 4, 2009; March 17, 2009, read
1-3	first time and referred to Committee on Health and Human Services;
1-4	April 8, 2009, reported favorably by the following vote: Yeas 9,
1-5	Nays 0; April 8, 2009, sent to printer.)
1-6	A BILL TO BE ENTITLED
1-7	AN ACT
$1-8 \\ 1-9 \\ 1-10 \\ 1-11 \\ 1-12 \\ 1-13 \\ 1-14 \\ 1-15 \\ 1-16 \\ 1-17 \\ 1-18 \\ 1-20 \\ 1-21 \\ 1-22 \\ 1-22 \\ 1-23 \\ 1-24 \\ 1-25 \\ 1-26 \\ 1-27 \\ 1-28 \\ 1-29 \\ 1-30 \\ 1-31 \\ 1-32 \\ 1-34 \\ 1-35 \\ 1-36 \\ 1-37 \\ 1-38 \\ 1-39 \\ 1-40 \\ 1-40 \\ 1-40 \\ 1-10 \\ 1-$	<pre>relating to the creation of the Texas Physician Health Program. BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS: SECTION 1. Subtitle B, Title 3, Occupations Code, is amended by adding Chapter 167 to read as follows: CHAPTER 167. TEXAS PHYSICIAN HEALTH PROGRAM Sec. 167.001. DEFINITIONS. In this chapter: (1) "Committee" means the Physician Health and Rehabilitation Advisory Committee established under this chapter. (2) "Governing board" means the governing board of the program. (3) "Medical director" means a person appointed under Section 167.002 to oversee the program. (4) "Physician assistant board" means the Texas Physician Assistant Board established under Chapter 204. (5) "Program" means the Texas Physician Health Program established under this chapter. (6) "Program participant" means a physician or physician assistant who receives services under the program. Sec. 167.002. MEDICAL DIRECTOR. (a) The board shall appoint a medical director for the program. (b) The medical director must: (1) be a physician licensed by the board; and (2) have expertise in a field of medicine relating to disorders commonly affecting physicians or physician assistants, including substance abuse disorders. (c) The medical director shall provide clinical and policy oversight for the program. Sec. 167.003. GOVERNING BOARD. (a) The president of the board shall appoint persons to serve on the governing board of the program. The appointees shall include physicians, physician assistants, and other related professionals with experience addressing health conditions commonly found in the population of monitored physician or physician assistants.</pre>
1-41	(b) The governing board shall:
1-42	(1) provide advice and counsel to the board; and
1-43	(2) establish policy and procedures for the operation
1-44	and administration of the program.
1-45	(c) The board, with the advice and in consultation with the
1-46	physician assistant board and Texas-based professional
1-47	associations of physicians and physician assistants, shall adopt
1-48	rules relating to the appointment of members to the governing
1-49	board, including length of terms, procedures for filling a vacancy,
1-50	and conflict-of-interest provisions.
1-51	Sec. 167.004. PHYSICIAN HEALTH AND REHABILITATION ADVISORY
1-52	COMMITTEE. (a) The governing board shall appoint physicians to
1-53	the Physician Health and Rehabilitation Advisory Committee who have
1-54	experience in disorders commonly affecting physicians or physician
1-55	assistants.
1-56	(b) The committee shall assist the governing board by making
1-57	recommendations on the request of the governing board of maning
1-58	(c) The board, with the advice and in consultation with the
1-59	physician assistant board and Texas-based professional
1-60	associations of physicians and physician assistants, shall adopt
1-61	rules relating to the appointment of members to the committee,
1-62	including length of terms, procedures for filling a vacancy, and
1-63	conflict-of-interest provisions.
1-64	(d) Chapter 2110, Government Code, does not apply to the

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2-1	committee.
2-2	Sec. 167.005. TEXAS PHYSICIAN HEALTH PROGRAM. (a) The
2-3 2-4	Texas Physician Health Program is established to promote: (1) physician and physician assistant wellness; and
2-5	(2) treatment of all health conditions that have the
2-6	potential to compromise the physician's or physician assistant's
2 - 7 2 - 8	ability to practice with reasonable skill and safety, including mental health issues, substance abuse issues, and addiction issues.
2-9	(b) The program is a confidential, nondisciplinary
2-10 2-11	therapeutic program for physicians and physician assistants. (c) The program is administratively attached to the board.
2-12	Sec. 167.006. RULES. The board, with the advice of and in
2-13	consultation with the governing board, committee, and Texas-based
2 - 14 2 - 15	professional associations of physicians and physician assistants, shall:
2-16	(1) adopt rules and policies as necessary to implement
2-17	the program, including:
2-18 2-19	(A) policies for assessments under the program and quidelines for the validity of a referral to the program;
2-20	(B) policies and guidelines for initial contacts
2-21	used to determine if there is a need for a physician or physician
2-22 2-23	assistant to complete a clinically appropriate evaluation or to enter treatment, including policies and guidelines for
2-24	arrangements for that evaluation or treatment; and
2 - 25 2 - 26	(C) policies and guidelines for interventions conducted under the program; and
2-26	(2) define applicable guidelines for the management of
2-28	substance abuse disorders, psychiatric disorders, and physical
2-29 2-30	<u>illnesses and impairments.</u> Sec. 167.007. OPERATION OF PROGRAM. (a) The program must
2-31	include provisions for:
2-32	(1) continuing care, monitoring, and case management
2 - 33 2 - 34	of potentially impairing health conditions, including provisions for cooperation with the evaluating or treating facility;
2-35	(2) ongoing monitoring for relapse, including random
2-36 2-37	drug testing, consultations with other physician health and rehabilitation committees, work site monitors, and treating health
2-38	professionals, including mental health professionals; and
2-39	(3) other physician and physician assistant health and
2-40 2-41	rehabilitation programs to operate under an agreement with the program, using established guidelines to ensure uniformity and
2-42	credibility of services throughout this state.
2 - 43 2 - 44	(b) The program must ensure appropriate communications with the board, the physician assistant board, other state licensing
2 - 44 2 - 45	boards, and physician health and rehabilitation programs.
2-46	(c) The program shall use physicians or other health care
2 - 47 2 - 48	professional experts or consultants, as appropriate, when necessary to evaluate, recommend solutions for, or resolve a
2-49	medical dispute.
2-50	Sec. 167.008. REFERRALS TO PROGRAM. (a) The program shall
2 - 51 2 - 52	accept a self-referral from a physician or physician assistant and referrals from an individual, a physician health and rehabilitation
2-53	committee, a physician assistant organization, a state physician
2 - 54 2 - 55	health program, a hospital or hospital system licensed in this state, a residency program, the board, or the physician assistant
2-56	board.
2-57	(b) A physician or physician assistant may refer the
2 - 58 2 - 59	physician or physician assistant to the program. (c) The program may not accept a referral, except as
2-60	provided by board rules, for a violation of the standard of care as
2-61	a result of drugs or alcohol or boundary violations with a patient
2-62 2-63	or a patient's family. Sec. 167.009. REFERRAL BY BOARD OR PHYSICIAN ASSISTANT
2-64	BOARD AS PREREQUISITE FOR ISSUING OR MAINTAINING A LICENSE.
2-65 2-66	(a) The board or the physician assistant board, through an agreed order or after a contested proceeding, may make a referral to the
2-66 2-67	program and require participation in the program by a specified
2-68	physician or physician assistant as a prerequisite for issuing or
2-69	maintaining a license under Chapter 155 or 204.

S.B. No. 1331 (b) The board or the physician assistant board discipline a physician or physician assistant required 3-1 may 3-2 required to who does 3-3 participate in the program under Subsection (a) not participate in the program. 3-4 (c) Each program participant is individually responsible for payment of the participant's own medical costs, including any 3-5 3-6 required evaluations, primary treatment, and continuing care. 3-7 Sec. 167.010. referral, 3-8 CONFIDENTIALITY. (a) Each proceeding, report, investigative file, record, 3-9 or other information received, gathered, created, or maintained by the program or its employees, consultants, work site monitors, or agents relating to a physician or physician assistant is privileged 3-10 3-11 3-12 3-13 and confidential and is not subject to disclosure under Chapter 3-14 552, Government Code, or to discovery, subpoena, or other means of 3**-**15 3**-**16 legal compulsion for release to any person except as provided by this chapter. 3-17 (b) Notwithstanding Subsection (a), the program may report 3-18 to the board or the physician assistant board, as appropriate, the 3-19 name and pertinent information relating to impairment of a 3-20 3-21 physician or physician assistant. (c) Notwithstanding Subsection (a), the program shall make 3-22 report to the board or the physician assistant board, as 3-23 appropriate, regarding a physician or physician assistant if the medical director or the governing board determines that the 3-24 physician or physician assistant poses a continuing threat to the public welfare. If requested by the board or the physician 3-25 3-26 3-27 assistant board, a report under this subsection must include all 3-28 information in the possession or control of the program. Sec. 167.011. FUNDING; FEES. (a) The Texas 3-29 physician health program account is a special account in the general revenue fund. Funds in the account may be appropriated only to the board 3-30 3-31 for administration of the program. 3-32 3-33 (b) The board by rule shall set and collect reasonable and 3-34 necessary fees from program participants in amounts sufficient to offset, to the extent reasonably possible, administering this chapter. 3-35 the cost of 3-36 3-37 (c) Each program participant shall pay an annual fee to partially offset the cost of participation and monitoring services. (d) The board shall deposit fees collected under this section to the credit of the account established under Subsection 3-38 3-39 3-40 3-41 (a). 3-42 The board may grant a waiver to the fee imposed under (e) 3-43 Subsection (c). The board shall adopt rules relating to the issuance of a waiver under this subsection. SECTION 2. Subsection (d), Section 3-44 (d), Section 153.051, Occupations 3-45 3-46 Code, is amended to read as follows: 3-47 (d) The board may not set, charge, collect, receive, or 3-48 deposit any of the following fees in excess of: \$900 for a license; 3-49 (1)3-50 (2) \$400 for a first registration permit; 3-51 \$200 for a temporary license; (3) 3-52 (4)\$400 for renewal of a registration permit; 3-53 (5)\$200 for a physician-in-training permit; \$600 for the processing of an application and the 3-54 (6)issuance of a registration for anesthesia in an outpatient setting; (7) \$200 for an endorsement to other state medical 3-55 3-56 3-57 boards; 3-58 (8)\$200 for a duplicate license; [or] 3-59 (9) \$700 for a reinstated license after cancellation 3-60 for cause; or 3-61 (10)\$1,200 for an annual fee under Section 167.011(c) 3-62 for a program participant in the Texas Physician Health Program. 3-63 SECTION 3. Effective January 1, 2010, the following laws 3-64 are repealed: 3-65 (1)Sections 164.202, 164.203, 164.204, and 164.205, 3-66 Occupations Code; and 3-67 (2) Sections 204.305, 204.306, 204.307, and 204.3075, 3-68 Occupations Code. 3-69 SECTION 4. A rehabilitation order under Chapter 167 or 204,

S.B. No. 1331 Occupations Code, entered into on or before January 1, 2010, is governed by the law as it existed immediately before that date, and that law is continued in effect for that purpose. SECTION 5. Except as otherwise provided by this Act, this Act takes effect September 1, 2009. 4-1 4-2 4-3

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