



General Assembly

January Session, 2003

Amendment

LCO No. 7442

SB0049407442SR0

Offered by:

SEN. GUNTHER, 21st Dist.

To: Subst. Senate Bill No. 494

File No. 693

Cal. No. 78

**"AN ACT CONCERNING ELECTRONIC MONITORING OF
CONTROLLED SUBSTANCE PRESCRIPTIONS."**

1 After the last section, add the following and renumber sections and
2 internal references accordingly:

3 "Sec. 501. Section 20-13d of the general statutes is repealed and the
4 following is substituted in lieu thereof (*Effective October 1, 2003*):

5 (a) The state society or any county society or any physician or
6 hospital shall within thirty days, and [the board or] any individual
7 may or the board may, on its own motion, file a petition when such
8 society, physician or hospital or said board or individual has any
9 information which appears to show that a physician is or may be
10 unable to practice medicine with reasonable skill or safety for any of
11 the reasons listed in section 20-13c. Petitions shall be filed with the
12 [Department of Public Health] board on forms supplied by the
13 [department] board, shall be signed and sworn and shall set forth in
14 detail the matters complained of.

15 (b) Any health care facility licensed under section 19a-493 which
16 terminates or restricts the staff membership or privileges of any
17 physician shall, not later than fifteen days after the effective date of
18 such action, notify the [department] board of such action.

19 (c) The [department] board shall notify any health care facility
20 licensed under section 19a-493 if the board suspends, revokes or
21 otherwise restricts the license of any physician. The [commissioner]
22 Commissioner of Public Health, with advice and assistance from the
23 board, shall adopt regulations in accordance with chapter 54 to
24 implement a system of notification in accordance with the provisions
25 of this subsection.

26 (d) A physician shall report to the [department] board any
27 disciplinary action similar to an action specified in subsection (a) of
28 section 19a-17 taken against [him] such physician by a duly authorized
29 professional disciplinary agency of any other state, the District of
30 Columbia, a United States possession or territory, or a foreign
31 jurisdiction, within thirty days of such action. Failure to so report may
32 constitute a ground for disciplinary action under section 20-13c.

33 Sec. 502. Section 20-13e of the general statutes is repealed and the
34 following is substituted in lieu thereof (*Effective October 1, 2003*):

35 (a) The [department] board shall investigate each petition filed
36 pursuant to section 20-13d, [in accordance with the provisions of
37 subdivision (10) of subsection (a) of section 19a-14] as amended by this
38 act, to determine if probable cause exists to issue a statement of
39 charges and to institute proceedings against the physician under
40 subsection (e) of this section. Such investigation shall be concluded not
41 later than eighteen months from the date the petition is filed with the
42 [department] board and, unless otherwise specified by this subsection,
43 the record of such investigation shall be deemed a public record, in
44 accordance with section 1-210, at the conclusion of such eighteen-
45 month period. Any such investigation shall be confidential and no
46 person shall disclose [his] such person's knowledge of such

47 investigation to a third party unless the physician requests that such
48 investigation and disclosure be open. If the [department] board
49 determines that probable cause exists to issue a statement of charges,
50 the entire record of such proceeding shall be public unless the
51 [department] board determines that the physician is an appropriate
52 candidate for participation in a rehabilitation program in accordance
53 with subsection (b) of this section, and the physician agrees to
54 participate in such program in accordance with terms agreed upon by
55 the [department] board and the physician. If at any time subsequent to
56 the filing of a petition and during the eighteen-month period, the
57 [department] board makes a finding of no probable cause, the petition
58 and the entire record of such investigation shall remain confidential
59 unless the physician requests that such petition and record be open.

60 (b) In any investigation pursuant to subsection (a), the [department]
61 board may recommend that the physician participate in an appropriate
62 rehabilitation program, provided the [department] board determines
63 that the physician, during [his] such physician's participation in such a
64 program in accordance with terms agreed upon by the [department]
65 board and the physician, does not pose a threat in [his] such
66 physician's practice of medicine, to the health and safety of any person.
67 Such determination shall become a part of the record of said
68 investigation. The [department] board may seek the advice of
69 established medical organizations in determining the appropriateness
70 of any rehabilitation program. If the physician participates in an
71 approved program, with the consent of the [department] board, the
72 [department] board shall monitor the physician's participation in such
73 program and require the person responsible for the physician's
74 activities in such program to submit signed monthly reports describing
75 the physician's progress therein. The [department] board shall
76 determine if participation in such a program is sufficient cause to end
77 its investigation. Upon commencement of the rehabilitation program
78 by the physician and during [his] such physician's continued
79 participation in such program in accordance with terms agreed upon
80 by the [department] board and the physician all records shall remain

81 confidential.

82 (c) As part of an investigation of a petition filed pursuant to
83 subsection (a) of section 20-13d, the [Department of Public Health]
84 Connecticut Medical Examining Board may order the physician to
85 submit to a physical or mental examination, to be performed by a
86 physician chosen from a list approved by the [department] board. The
87 [department] board may seek the advice of established medical
88 organizations or licensed health professionals in determining the
89 nature and scope of any diagnostic examinations to be used as part of
90 any such physical or mental examination. The examining physician
91 shall make a written statement of his or her findings.

92 (d) If the physician fails to obey a [department] board order to
93 submit to examination or attend a hearing, the [department] board
94 may petition the superior court for the judicial district of Hartford to
95 order such examination or attendance, and said court or any judge
96 assigned to said court shall have jurisdiction to issue such order.

97 (e) Subject to the provisions of section 4-182, no license shall be
98 restricted, suspended or revoked by the board, and no physician's
99 right to practice shall be limited by the board, until the physician has
100 been given notice and opportunity for hearing in accordance with the
101 regulations established by the commissioner."