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BILL ANALYSIS



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House Bill 4670 (Substitute S-1 as reported)
Sponsor: Representative Gary A. Newell
House Committee: Health Policy
Senate Committee: Health Policy

CONTENT

The bill would amend the Public Health Code to allow an individual who was retired from the active practice of medicine, osteopathic medicine and surgery, or podiatric medicine, and who wished to donate his or her expertise for the medical care and treatment of indigent and needy individuals or individuals in medically underserved areas of the State, to obtain a special volunteer license to practice by submitting an application to the applicable board.

An application would have to include each of the following:

- Documentation that the individual previously had been licensed in Michigan and that his or her license was in good standing before its expiration.
- Acknowledgment and documentation that the applicant would not receive any payment or compensation, either direct or indirect, or have the expectation of any compensation, for any medical care services provided under the special volunteer license.
- If the applicant had been out of practice for at least three years, documentation that, during the three years immediately preceding the application, he or she had attended at least two-thirds of the continuing education courses or programs required for license renewal.

If the board determined that the application satisfied the bill's requirements and that the individual met the requirements for a license prescribed in Article 15 (Occupations) and rules promulgated under it, the board would have to grant a special volunteer license.

Proposed MCL 333.16184

Legislative Analyst: Julie Koval

FISCAL IMPACT

The State would incur additional administrative cost creating the special volunteer license mandated in this bill and processing additional license applications. Unlike other medical licensure programs, the bill would prohibit the Department of Community Health from charging an application fee that could offset some of these costs.

Permitting retired medical professionals to donate their services would likely increase the number of health care options available to low income and uninsured individuals. This could lead to a slight decrease in fee-for-service Medicaid cost for the State and reduce the amount of uncompensated care provided by public medical facilities.

Date Completed: 1-30-06

Fiscal Analyst: David Fosdick

[floor/hb4670](#)

Bill Analysis @ www.senate.michigan.gov

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