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HOUSE BILL NO. 1852

House Amendments in [] - February 2, 2009

A BILL to amend and reenact § 54.1-2400.2 of the Code of Virginia, relating to the confidentiality of Department of Health Professions investigations.

Patron Prior to Engrossment—Delegate Morrissey

Referred to Committee on Health, Welfare and Institutions

Be it enacted by the General Assembly of Virginia:

1. That § 54.1-2400.2 of the Code of Virginia is amended and reenacted as follows:

§ 54.1-2400.2. Confidentiality of information obtained during an investigation or disciplinary proceeding; penalty.

A. Any reports, information or records received and maintained by any health regulatory board in connection with possible disciplinary proceedings, including any material received or developed by a board during an investigation or proceeding, shall be strictly confidential. A board may only disclose such confidential information:

1. In a disciplinary proceeding before a board or in any subsequent trial or appeal of an action or order, or to the respondent in entering into a confidential consent agreement under § 54.1-2400;

2. To regulatory authorities concerned with granting, limiting or denying licenses, certificates or registrations to practice a health profession, including the coordinated licensure information system, as defined in § 54.1-3030;

3. To hospital committees concerned with granting, limiting or denying hospital privileges if a final determination regarding a violation has been made;

4. Pursuant to an order of a court of competent jurisdiction for good cause arising from extraordinary circumstances being shown;

5. To qualified personnel for bona fide research or educational purposes, if personally identifiable information relating to any person is first deleted. Such release shall be made pursuant to a written agreement to ensure compliance with this section; or

6. To the Health Practitioners' Intervention Program within the Department of Health Professions in connection with health practitioners who apply to or participate in the Program.

B. In no event shall confidential information received, maintained or developed by any board, or disclosed by the board to others, pursuant to this section, be available for discovery or court subpoena or introduced into evidence in any civil action. This section shall not, however, be construed to inhibit an investigation or prosecution under Article 1 (§ 18.2-247 et seq.) of Chapter 7 of Title 18.2.

C. Any claim of a physician-patient or practitioner-patient privilege shall not prevail in any investigation or proceeding by any health regulatory board acting within the scope of its authority. The disclosure, however, of any information pursuant to this provision shall not be deemed a waiver of such privilege in any other proceeding.

D. This section shall not prohibit the Director of the Department of Health Professions, after consultation with the relevant health regulatory board president or his designee, from disclosing to the Attorney General, or the appropriate attorney for the Commonwealth, investigatory information which indicates a possible violation of any provision of criminal law, including the laws relating to the manufacture, distribution, dispensing, prescribing or administration of drugs, other than drugs classified as Schedule VI drugs and devices, by any individual regulated by any health regulatory board.

E. This section shall not prohibit the Director of the Department of Health Professions from disclosing matters listed in subdivision A 1, A 2, or A 3 of § 54.1-2909; from making the reports of aggregate information and summaries required by § 54.1-2400.3; or from disclosing the information required to be made available to the public pursuant to § 54.1-2910.1.

F. Whenever a complaint or report has been filed about a person licensed, certified, or registered by a health regulatory board, the source and the subject of a complaint or report shall be provided information about the investigative and disciplinary procedures at the Department of Health Professions.

[~~The subject of a complaint or report may also be provided with a copy of the complaint or report and any records or supporting documentation.~~ Prior to interviewing a licensee who is the subject of a complaint or report, or at the time that the licensee is first notified in writing of the complaint or report, whichever shall occur first, the licensee shall be provided with a copy of the complaint or report and any records or supporting documentation, unless such provision would materially obstruct a criminal or regulatory investigation.] If the relevant board concludes that a disciplinary proceeding will not be instituted, the board may send an advisory letter to the person who was the subject of the

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59 complaint or report. The relevant board may also inform the source of the complaint or report (i) that an
60 investigation has been conducted, (ii) that the matter was concluded without a disciplinary proceeding,
61 (iii) of the process the board followed in making its determination, and (iv), if appropriate, that an
62 advisory letter from the board has been communicated to the person who was the subject of the
63 complaint or report. In providing such information, the board shall inform the source of the complaint or
64 report that he is subject to the requirements of this section relating to confidentiality and discovery.

65 G. Orders and notices of the health regulatory boards relating to disciplinary actions shall be
66 disclosed. Information on the date and location of any disciplinary proceeding, allegations against the
67 respondent, and the list of statutes and regulations the respondent is alleged to have violated shall be
68 provided to the source of the complaint or report by the relevant board prior to the proceeding. The
69 source shall be notified of the disposition of a disciplinary case.

70 H. *This section shall not prohibit investigative staff authorized under § 54.1-2506 from interviewing*
71 *fact witnesses, disclosing to fact witnesses the identity of the subject of the complaint or report, or*
72 *reviewing with witnesses any portion of records or other supporting documentation necessary to refresh*
73 *the [fact] witnesses' recollection.*

74 I. Any person found guilty of the unlawful disclosure of confidential information possessed by a
75 health regulatory board shall be guilty of a Class 1 misdemeanor.