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**ARIZONA MEDICAL BOARD
SUBSTANTIVE POLICY STATEMENT #13**

**DUTIES OF HOSPITALS AND PHYSICIANS TO REPORT PEER REVIEW/QUALITY
ASSURANCE INFORMATION**

The Arizona Medical Board issues this Substantive Policy Statement to notify the public of the Board's interpretation of A.R.S. § 32-1451, its interrelationship with A.R.S. § 36-445 (Peer Review) *et seq.*, A.R.S. § 36-2401 (Quality Review) *et seq.* and A.R.S. § 36-2917 and to clarify the reporting requirements to the Arizona Medical Board for physicians and institutions as defined by these statutes.

Statutory Overview:

According to A.R.S. § 32-1451(A):

A doctor of medicine, the Arizona Medical Association, a component county society of that association and any health care institution shall report to the Board "any information that appears to show that a doctor of medicine is or may be medically¹ incompetent, is or may be guilty of unprofessional conduct² or is or may be mentally or physically unable safely to engage in the practice of medicine (collectively 'Reportable Information')."

According to A.R.S. § 32-1451(B):

The chief executive officer ("CEO"), the medical director and the chief of staff of a health care institution shall report to the Board "if the privileges of a doctor to practice in that health care institution are denied, revoked, suspended or limited because of actions by the doctor that appear to show that a doctor of medicine is or may be medically incompetent, is or may be guilty of unprofessional conduct² or is or may be mentally or physically unable safely to engage in the practice of medicine, along with a general statement of the reasons, including patient chart numbers, that led the health care institution to take action."

Duty to Report:

The Board recognizes the importance of interpreting A.R.S. § 32-1451, A.R.S. § 36-445 *et seq.*, A.R.S. § 36-2401 *et seq.* and A.R.S. § 36-2917 consistently to give effect to all of these statutory provisions. The Board further recognizes the importance of Peer Review and Quality Review processes in health care institutions and that prematurely reporting to the Board may have an unintended effect on the Peer Review and Quality Review processes required by law.

¹ See A.R.S. § 32-1401(18)

² See A.R.S. § 32-1401(27)

The Board interprets A.R.S. § 32-1451(B) to provide that the following constitute Reportable Information that doctors of medicine, hospitals, and outpatient surgical centers are required to promptly report to the Arizona Medical Board:

- After the CEO, medical director, chief of staff or other medical staff officer has requested that a member of the medical staff refrain from exercising his/her medical staff privileges in lieu of being suspended or having his/her privileges otherwise restricted during an investigation of possible medical incompetence, unprofessional conduct under A.R.S. §32-1401(27), or mental or physical inability to safely engage in the practice of medicine.
- After a medical staff committee determines that information received by such committee about a doctor of medicine, who is not a member of the medical staff, suggests medical incompetence, unprofessional conduct under A.R.S. 32-1401(27), or that the physician is unable to safely engage in the practice of medicine.
- Whenever a hospital, outpatient surgical center or medical staff committee has, following a brief assessment, information that appears to be credible and shows that a doctor of medicine is or may be unable safely to practice medicine because of substance abuse or other physical or mental impairment.

The Board interprets A.R.S. § 32-1451(A) to require other health care entities and individual allopathic physicians to report Reportable Information promptly:

- A doctor of medicine, the Arizona Medical Association, a component county society of that association and any health care institution shall report to the Board, any information that appears to be credible and shows that a doctor of medicine is or may be medically incompetent, is or may be guilty of unprofessional conduct or is or may be mentally or physically unable safely to engage in the practice of medicine.
- After the chair of the Quality Review Committee, the CEO, medical director, chief of staff or any other medical staff officer has requested that a doctor of medicine refrain from practice pending an investigation for medical incompetence, unprofessional conduct under A.R.S. 32-1401(27), or mental or physical inability to safely engage in the practice of medicine.
- After the health care entity terminates or otherwise limits the ability of a doctor of medicine to practice in or for the health care entity for medical incompetence, unprofessional conduct under A.R.S. 32-1401(27), or mental or physical inability to safely engage in the practice of medicine.
- Whenever a health care entity, medical director or any other officer of such health care entity has, following a brief assessment, information that appears to be credible and shows that a doctor of medicine is or may be unable safely to practice medicine because of substance abuse or other physical or mental impairment.

The Board does not interpret A.R.S. § 32-1451 to require a health care institution or doctor of medicine to report information obtained about a doctor of medicine during and for the purposes of the Peer Review or Quality Review processes, unless action is taken as outlined above. The Board understands that to require such reporting would greatly impair the smooth functioning of

the Peer Review and Quality Assurance processes and, thus, such a requirement would be inconsistent with A.R.S. § 36-445 *et seq.*, A.R.S. § 36-2401 *et seq.* and A.R.S. § 36-2917.

The Board interprets A.R.S. 32-1451(B) to require, at the least, that a health care institution's Medical Director or designee report to the Arizona Medical Board promptly after a medical staff committee recommends to the governing board of the institution that a doctor of medicine have his or her membership or privileges revoked, suspended or limited even if the doctor of medicine has the right to request a fair hearing to challenge the recommendation.

Nothing in this Substantive Policy statement precludes a person or entity from submitting information to the Board before a peer review process begins, or earlier in a peer review process than circumstances described herein occur. A.R.S. §32-1451(A) states "[a]ny person or entity that reports or provides information to the board in good faith is not subject to an action for civil damages. If requested, the board shall not disclose the name of a person who supplies information regarding a licensee's drug or alcohol impairment."

The Board does not interpret A.R.S. §32-1451 to require duplicative reports to be filed describing the same information by different persons or entities. If one person or entity with a duty to report information to the Board makes a report describing such information, the Board will not require a second person or entity with a duty to report to file a duplicative report describing the same information. However, the health care institution's Medical Director is responsible for ensuring a report has been made under A.R.S. §32-1451(B).

Summary:

This Substantive Policy Statement is issued by the Arizona Medical Board to clarify the duty of doctors of medicine as well as any health care institution to promptly report to the Board as required by statute any information that appears to show that a doctor of medicine is or may be medically incompetent, is or may be guilty of unprofessional conduct¹ is or may be unable to safely engage in the practice of medicine because of substance abuse or other physical or mental impairment.

¹ See A.R. S. 32-1401(27)