

THE HOUSE OF REPRESENTATIVES  
Monday, February 23, 2009

Committee Substitute for  
House Bill No. 1897

COMMITTEE SUBSTITUTE FOR HOUSE BILL NO. 1897 - By: COX AND RITZE of the House.

An Act relating to professions and occupations; creating the Allied Professional Peer Assistance Program; stating purpose; providing for powers and duties of the Board; providing for fees; providing for placement of funds; providing for records and management; providing for immunity; providing for suspension of license; requiring certain information to be confidential; defining terms; amending 59 O.S. 2001, Sections 493.2, as last amended by Section 4, Chapter 523, O.S.L. 2004, 493.3, 506, 509, as amended by Section 9, Chapter 523, O.S.L. 2004, 509.1, as last amended by Section 10, Chapter 523, O.S.L. 2004 and 3006 (59 O.S. Supp. 2008, Sections 493.2, 509 and 509.1), which relate to the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act and the Orthotics and Prosthetics Practice Act; modifying the requirements of licensure for certain persons; modifying requirements for issuance of certain license; modifying authority for suspension of license; modifying definition of unprofessional conduct; modifying disciplinary actions; authorizing Board to issue temporary license; providing for codification; providing an effective date; and declaring an emergency.

BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

- 1           SECTION 1.   NEW LAW    A new section of law to be codified in the Oklahoma  
2 Statutes as Section 518.1 of Title 59, unless there is created a duplication in numbering,  
3 reads as follows:  
4           A. There is hereby established the Allied Professional Peer Assistance Program to  
5 rehabilitate allied medical professionals whose competency may be compromised because

1 of the abuse of drugs or alcohol, so that such allied medical professionals can be treated  
2 and can return to or continue the practice of allied medical practice in a manner which  
3 will benefit the public. The program shall be under the supervision and control of the  
4 Oklahoma Board of Medical Licensure and Supervision.

5 B. The Board shall appoint one or more peer assistance evaluation advisory  
6 committees, hereinafter called the "allied peer assistance committees". Each of these  
7 committees shall be composed of members, the majority of which shall be licensed allied  
8 medical professionals with expertise in chemical dependency. The allied peer assistance  
9 committees shall function under the authority of the Oklahoma Board of Medical  
10 Licensure and Supervision in accordance with the rules of the Board. The program may  
11 be one hundred percent (100%) outsourced to professional groups specialized in this  
12 arena. The committee members shall serve without pay, but may be reimbursed for the  
13 expenses incurred in the discharge of their official duties in accordance with the State  
14 Travel Reimbursement Act.

15 C. The Board shall appoint and employ a qualified person or persons to serve as  
16 program coordinators and shall fix such person's compensation. The Board shall define  
17 the duties of the program coordinators who shall report directly to the Board.

18 D. The Board is authorized to adopt and revise rules, not inconsistent with the  
19 Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act, as may be  
20 necessary to enable it to carry into effect the provisions of this section.

1 E. A portion of licensing fees for each allied profession, not to exceed Ten Dollars  
2 (\$10.00), may be used to implement and maintain the Allied Professional Peer Assistance  
3 Program.

4 F. All monies paid pursuant to subsection E of this section shall be deposited in an  
5 agency special account revolving fund under the Oklahoma Board of Medical Licensure  
6 and Supervision, and shall be used for the general operating expenses of the Allied  
7 Professional Peer Assistance Program, including payment of personal services.

8 G. Records and management information system of the professionals enrolled in  
9 the Allied Professional Peer Assistance Program and reports shall be maintained in the  
10 program office in a place separate and apart from the records of the Board. The records  
11 shall be made public only by subpoena and court order; provided however, confidential  
12 treatment shall be cancelled upon default by the professional in complying with the  
13 requirements of the program.

14 H. Any person making a report to the Board or to an allied peer assistance  
15 committee regarding a professional suspected of practicing allied medical practice while  
16 habitually intemperate or addicted to the use of habit-forming drugs, or a professional's  
17 progress or lack of progress in rehabilitation, shall be immune from any civil or criminal  
18 action resulting from such reports, provided such reports are made in good faith.

19 I. A professional's participation in the Allied Professional Peer Assistance Program  
20 in no way precludes additional proceedings by the Board for acts or omissions of acts not  
21 specifically related to the circumstances resulting in the professional's entry into the  
22 program. However, in the event the professional defaults from the program, the Board

1 may discipline the professional for those acts which led to the professional entering the  
2 program.

3 J. The Executive Director of the Board shall suspend the license immediately upon  
4 notification that the licensee has defaulted from the Allied Professional Peer Assistance  
5 Program, and shall assign a hearing date for the matter to be presented to the Board.

6 K. All treatment information, whether or not recorded, and all communications  
7 between a professional and therapist are both privileged and confidential. In addition,  
8 the identity of all persons who have received or are receiving treatment services shall be  
9 considered confidential and privileged.

10 L. As used in this section, unless the context otherwise requires:

11 1. "Board" means the Oklahoma Board of Medical Licensure and Supervision; and

12 2. "Allied peer assistance committee" means the peer assistance evaluation  
13 advisory committee created in this section, which is appointed by the Oklahoma Board of  
14 Medical Licensure and Supervision to carry out specified duties.

15 SECTION 2. AMENDATORY 59 O.S. 2001, Section 493.2, as last amended by  
16 Section 4, Chapter 523, O.S.L. 2004 (59 O.S. Supp. 2008, Section 493.2), is amended to  
17 read as follows:

18 Section 493.2 A. Foreign applicants shall meet all requirements for licensure as  
19 provided in Sections 492.1 and 493.1 of this title.

20 B. 1. A foreign applicant shall possess the degree of Doctor of Medicine or a Board-  
21 approved equivalent based on satisfactory completion of educational programs from a  
22 recognized foreign medical school ~~with education and training substantially equivalent to~~

1 ~~that offered by the University of Oklahoma College of Medicine~~ as evidenced by national  
2 and international resources available to the Board.

3 2. In the event the foreign medical school utilized clerkships in the United States,  
4 its territories or possessions, such clerkships shall have been performed in hospitals and  
5 schools that have programs accredited by the Accreditation Council for Graduate Medical  
6 Education (ACGME).

7 C. A foreign applicant shall have a command of the English language that is  
8 satisfactory to the State Board of Medical Licensure and Supervision, demonstrated by  
9 the passage of an oral English competency examination.

10 D. The Board may promulgate rules requiring all foreign applicants to  
11 satisfactorily complete at least twelve (12) months and up to twenty-four (24) months of  
12 Board-approved progressive graduate medical training as determined necessary by the  
13 Board for the protection of the public health, safety and welfare.

14 E. All credentials, diplomas and other required documentation in a foreign  
15 language submitted to the Board by such applicants shall be accompanied by notarized  
16 English translations.

17 F. Foreign applicants shall provide satisfactory evidence of having met the  
18 requirements for permanent residence or temporary nonimmigrant status as set forth by  
19 the United States Immigration and Naturalization Service.

20 G. Foreign applicants shall provide a certified copy of the Educational Commission  
21 for Foreign Medical Graduates (ECFMG) Certificate to the Board at such time and in  
22 such manner as required by the Board. The Board may waive the requirement for an

1 Educational Commission for Foreign Medical Graduates Certificate by rule for good  
2 cause shown.

3 SECTION 3. AMENDATORY 59 O.S. 2001, Section 493.3, is amended to read  
4 as follows:

5 Section 493.3 A. Endorsement of licensed applicants: The State Board of Medical  
6 Licensure and Supervision may issue a license by endorsement to an applicant who:

7 1. Has complied with all current medical licensure requirements except those for  
8 examination; and

9 2. Has passed a medical licensure examination given in English in another state,  
10 the District of Columbia, a territory or possession of the United States, or Canada, or has  
11 passed the National Boards Examination administered by the National Board of Medical  
12 Examiners, provided the Board determines that such examination was equivalent to the  
13 Board's examination used at the time of application.

14 B. Notwithstanding any other provision of the Oklahoma Allopathic Medical and  
15 Surgical Licensure and Supervision Act, the Board may require applicants for full and  
16 unrestricted medical licensure by endorsement, who have not been formally tested by  
17 another state or territory of the United States or any Canadian medical licensure  
18 jurisdiction, a Board-approved medical certification agency, or a Board-approved medical  
19 specialty board within a specific period of time before application to pass a written and/or  
20 oral medical examination approved by the Board.

21 C. The Board may authorize the secretary to issue a temporary medical license for  
22 the intervals between Board meetings. A temporary license shall be granted only when

1 the secretary is satisfied as to the qualifications of the applicant to be licensed under the  
2 Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act but where  
3 such qualifications have not been verified to the Board. A temporary license shall:

4 1. Be granted only to an applicant demonstrably qualified for a full and  
5 unrestricted medical license under the requirements set by the Oklahoma Allopathic  
6 Medical and Surgical Licensure and Supervision Act and the rules of the Board; and

7 2. Automatically terminate on the date of the next Board meeting at which the  
8 applicant may be considered for a full and unrestricted medical license.

9 D. The Board may establish rules authorizing the issuance of conditional,  
10 restricted, or otherwise circumscribed licenses, or issuance of licenses under terms of  
11 agreement, for all licenses under its legislative jurisdiction as are necessary for the  
12 public health, safety, and welfare.

13 SECTION 4. AMENDATORY 59 O.S. 2001, Section 506, is amended to read as  
14 follows:

15 Section 506. A. If it is the decision of the State Board of Medical Licensure and  
16 Supervision, after considering all the testimony presented, that the defendant is guilty as  
17 charged, the Board shall revoke the license of the defendant, and the defendant's rights  
18 to practice medicine and surgery. The Board, however, may suspend a license, during  
19 which suspension the holder of such suspended license shall not be entitled to practice  
20 medicine and surgery thereunder. If during suspension, the defendant practiced  
21 medicine or surgery or has been guilty of any act of unprofessional conduct, as defined by  
22 the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act, the Board

1 may revoke the license of such licensee or place the licensee upon probation for any  
2 period of time not less than one (1) year, nor more than five (5) years, or on second  
3 offense place the licensee on probation for an indefinite period of time, during which time  
4 the licensee's conduct will be kept under observation. The Board, furthermore, may  
5 impose on the defendant, as a condition of any suspension or probation, a requirement  
6 that the defendant attend and produce evidence of successful completion of a specific  
7 term of education, residency, or training in enumerated fields and/or institutions as  
8 ordered by the Board based on the facts of the case. The education, residency, or training  
9 shall be at the expense of the defendant. The Board may also impose other disciplinary  
10 actions as provided for in Section 509.1 of this title. At the end of any term of suspension  
11 imposed by the Board, the applicant for reinstatement shall show to the Board successful  
12 completion of all conditions and requirements imposed by the Board and demonstrate  
13 eligibility for reinstatement.

14 B. Immediately upon learning that a licensee has been convicted of a felonious  
15 violation of a state or federal narcotics law, the Executive Director of the Board shall  
16 summarily suspend the license and assign a hearing date for the matter to be presented  
17 to the Board. Immediately upon learning that a licensee is in violation of a Board-  
18 ordered probation, the Executive Director of the Board may summarily suspend the  
19 license based on imminent harm to the public and assign a hearing date for the matter to  
20 be presented at the next scheduled Board meeting.

1 SECTION 5. AMENDATORY 59 O.S. 2001, Section 509, as amended by  
2 Section 9, Chapter 523, O.S.L. 2004 (59 O.S. Supp. 2008, Section 509), is amended to  
3 read as follows:

4 Section 509. The words “unprofessional conduct” as used in Sections 481 through  
5 514 of this title are hereby declared to include, but shall not be limited to, the following:

- 6 1. Procuring, aiding or abetting a criminal operation;
- 7 2. The obtaining of any fee or offering to accept any fee, present or other form of  
8 remuneration whatsoever, on the assurance or promise that a manifestly incurable  
9 disease can or will be cured;
- 10 3. Willfully betraying a professional secret to the detriment of the patient;
- 11 4. Habitual intemperance or the habitual use of habit-forming drugs;
- 12 5. Conviction of a felony or of any offense involving moral turpitude;
- 13 6. All advertising of medical business in which statements are made which are  
14 grossly untrue or improbable and calculated to mislead the public;
- 15 7. Conviction or confession of a crime involving violation of:
  - 16 a. the antinarcotic or prohibition laws and regulations of the federal  
17 government,
  - 18 b. the laws of this state, or
  - 19 c. State Board of Health rules;
- 20 8. Dishonorable or immoral conduct which is likely to deceive, defraud, or harm the  
21 public;

1           9. The commission of any act which is a violation of the criminal laws of any state  
2 when such act is connected with the physician's practice of medicine. A complaint,  
3 indictment or confession of a criminal violation shall not be necessary for the  
4 enforcement of this provision. Proof of the commission of the act while in the practice of  
5 medicine or under the guise of the practice of medicine shall be unprofessional conduct;

6           10. Failure to keep complete and accurate records of purchase and disposal of  
7 controlled drugs or of narcotic drugs;

8           11. The writing of false or fictitious prescriptions for any drugs or narcotics  
9 declared by the laws of this state to be controlled or narcotic drugs;

10          12. Prescribing or administering a drug or treatment without sufficient  
11 examination and the establishment of a valid physician-patient relationship;

12          13. The violation, or attempted violation, direct or indirect, of any of the provisions  
13 of the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act, either  
14 as a principal, accessory or accomplice;

15          14. Aiding or abetting, directly or indirectly, the practice of medicine by any person  
16 not duly authorized under the laws of this state;

17          15. The inability to practice medicine with reasonable skill and safety to patients  
18 by reason of age, illness, drunkenness, excessive use of drugs, narcotics, chemicals, or  
19 any other type of material or as a result of any mental or physical condition. In enforcing  
20 this subsection the State Board of Medical Licensure and Supervision may, upon  
21 probable cause, request a physician to submit to a mental or physical examination by  
22 physicians designated by it. If the physician refuses to submit to the examination, the

1 Board shall issue an order requiring the physician to show cause why the physician will  
2 not submit to the examination and shall schedule a hearing on the order within thirty  
3 (30) days after notice is served on the physician. The physician shall be notified by either  
4 personal service or by certified mail with return receipt requested. At the hearing, the  
5 physician and the physician's attorney are entitled to present any testimony and other  
6 evidence to show why the physician should not be required to submit to the examination.  
7 After a complete hearing, the Board shall issue an order either requiring the physician to  
8 submit to the examination or withdrawing the request for examination. The medical  
9 license of a physician ordered to submit for examination may be suspended until the  
10 results of the examination are received and reviewed by the Board;

11 16. Prescribing, dispensing or administering of controlled substances or narcotic  
12 drugs in excess of the amount considered good medical practice, or prescribing,  
13 dispensing or administering controlled substances or narcotic drugs without medical  
14 need in accordance with published standards;

15 17. Engaging in physical conduct with a patient which is sexual in nature, or in any  
16 verbal behavior which is seductive or sexually demeaning to a patient;

17 18. Failure to maintain an office record for each patient which accurately reflects  
18 the evaluation, treatment, and medical necessity of treatment of the patient; ~~or~~

19 19. Failure to provide necessary ongoing medical treatment when a doctor-patient  
20 relationship has been established, which relationship can be severed by either party  
21 providing a reasonable period of time is granted;

1        20. Failure to provide a proper and safe medical facility setting and qualified  
2 assistive personnel for a recognized medical act, including but not limited to an initial in-  
3 person patient examination, office surgery, diagnostic service or any other medical  
4 procedure or treatment. Adequate medical records to support diagnosis, procedure,  
5 treatment or prescribed medications must be produced and maintained; or

6        21. Personal conduct, whether verbal or physical, that negatively affects or that  
7 potentially may negatively affect patient care. This includes but is not limited to conduct  
8 that interferes with one's ability to work with other members of the health care team.

9        SECTION 6. AMENDATORY 59 O.S. 2001, Section 509.1, as last amended by  
10 Section 10, Chapter 523, O.S.L. 2004 (59 O.S. Supp. 2008, Section 509.1), is amended to  
11 read as follows:

12        Section 509.1 A. RANGE OF ACTIONS: The State Board of Medical Licensure  
13 and Supervision may impose disciplinary actions in accordance with the severity of  
14 violation of the Oklahoma Allopathic Medical and Surgical Licensure and Supervision  
15 Act. Disciplinary actions may include, but are not limited to the following:

- 16        1. Revocation of the medical license with or without the right to reapply;
- 17        2. Suspension of the medical license;
- 18        3. Probation;
- 19        4. Stipulations, limitations, restrictions, and conditions relating to practice;
- 20        5. Censure, including specific redress, if appropriate;
- 21        6. Reprimand;
- 22        7. A period of free public or charity service;

1 8. Satisfactory completion of an educational, training, and/or treatment program or  
2 programs; and

3 9. Administrative fines of up to Five Thousand Dollars (\$5,000.00) per violation.  
4 Provided, as a condition of disciplinary action sanctions, the Board may impose as a  
5 condition of any disciplinary action, the payment of costs expended by the Board for any  
6 legal fees and costs and probation and monitoring fees including, but not limited to, staff  
7 time, salary and travel expense, witness fees and attorney fees. The Board may take  
8 such actions singly or in combination as the nature of the violation requires.

9 B. LETTER OF CONCERN: The Board may authorize the secretary to issue a  
10 confidential letter of concern to a licensee when evidence does not warrant formal  
11 proceedings, but the secretary has noted indications of possible errant conduct that could  
12 lead to serious consequences and formal action. The letter of concern may contain, at the  
13 secretary's discretion, clarifying information from the licensee.

14 C. EXAMINATION/EVALUATION: The Board may, upon reasonable cause,  
15 require professional competency, physical, mental, or chemical dependency examinations  
16 of any licensee, including withdrawal and laboratory examination of body fluids.

17 D. DISCIPLINARY ACTION AGAINST LICENSEES:

18 1. The Board shall promulgate rules describing acts of unprofessional or unethical  
19 conduct by physicians pursuant to the Oklahoma Allopathic Medical and Surgical  
20 Licensure and Supervision Act; and

21 2. Grounds for Action: The Board may take disciplinary action for unprofessional  
22 or unethical conduct as deemed appropriate based upon the merits of each case and as

1 set out by rule. The Board shall not revoke the license of a person otherwise qualified to  
2 practice allopathic medicine within the meaning of the Oklahoma Allopathic Medical and  
3 Surgical Licensure and Supervision Act solely because the person's practice or a therapy  
4 is experimental or nontraditional.

5 Reports of all disciplinary action provided for in this section will be available to the  
6 public upon request.

7 E. ~~1.~~ SURRENDER IN LIEU OF PROSECUTION:

8 1. The Board may accept a surrender of license from a licensee who has engaged in  
9 unprofessional conduct in lieu of Board staff prosecuting a pending disciplinary action or  
10 filing formal disciplinary proceedings only as provided in this section. To effect such a  
11 surrender, the licensee must submit a sworn statement to the Board:

- 12 a. expressing the licensee's desire to surrender the license,
- 13 b. acknowledging that the surrender is freely and voluntarily made, that  
14 the licensee has not been subjected to coercion or duress, and that the  
15 licensee is fully aware of the consequences of the license surrender,
- 16 c. stating that the licensee is the subject of an investigation or proceeding  
17 by the Board or a law enforcement or other regulatory agency involving  
18 allegations which, if proven, would constitute grounds for disciplinary  
19 action by the Board, and
- 20 d. specifically admitting to and describing the misconduct.

21 2. The sworn written statement must be submitted with the licensee's wallet card  
22 and wall certificate. The Secretary or Executive Director of the Board may accept the

1 sworn statement, wallet card and wall certificate from a licensee pending formal  
2 acceptance by the Board. The issuance of a complaint and citation by the Board shall not  
3 be necessary for the Board to accept a surrender under this subsection. A surrender  
4 under this subsection shall be considered disciplinary action by the Board in all cases,  
5 even in cases where surrender occurs prior to the issuance of a formal complaint and  
6 citation, and shall be reported as disciplinary action by the Board to the public and any  
7 other entity to whom the Board regularly reports disciplinary actions.

8 3. As a condition to acceptance of the surrender, the Board may require the licensee  
9 to pay the costs expended by the Board for any legal fees and costs and any investigation,  
10 probation and monitoring fees including, but not limited to, staff time, salary and travel  
11 expense, witness fees and attorney fees.

12 4. The licensee whose surrender in lieu of prosecution is accepted by the Board  
13 shall be ineligible to reapply for reinstatement of his or her license for at least one (1)  
14 year from the date of the accepted surrender.

15 F. ALL LICENSED PROFESSIONALS: All disciplinary actions defined in this  
16 section are applicable to any and all professional licensees under the legislative  
17 jurisdiction of the State Board of Medical Licensure and Supervision.

18 SECTION 7. AMENDATORY 59 O.S. 2001, Section 3006, is amended to read  
19 as follows:

20 Section 3006. A. The State Board of Medical Licensure and Supervision, with the  
21 assistance of the Advisory Committee on Orthotics and Prosthetics, shall establish  
22 qualifications for licensure and registration under the Orthotics and Prosthetics Practice

1 Act. Until November 1, 2004, the Board shall provide, as set forth herein, an alternative  
2 qualification licensure opportunity for current practitioners in this state who are unable  
3 to meet standard qualifications. Persons meeting the qualifications of more than one  
4 discipline may be licensed in more than one discipline.

5 B. To be licensed to practice orthotics or prosthetics according to standard  
6 qualifications, a person shall:

7 1. Possess a baccalaureate degree from an institution of higher education  
8 accredited by a general accrediting agency recognized by the Oklahoma State Regents for  
9 Higher Education;

10 2. Have completed an orthotic or prosthetic education program that meets or  
11 exceeds the requirements, including clinical practice, of the Commission on Accreditation  
12 of Allied Health Education Programs;

13 3. Have completed a clinical residency in the professional area for which the license  
14 is sought that meets or exceeds the standards, guidelines, and procedures for residencies  
15 of the National Commission on Orthotic and Prosthetic Education or of any other such  
16 group that is recognized by the State Board of Medical Licensure and Supervision; and

17 4. Demonstrate attainment of internationally accepted standards of orthotic and  
18 prosthetic care as outlined by the International Society of Prosthetics and Orthotics  
19 professional profile for Category I orthotic and prosthetic personnel.

20 C. To be licensed to practice orthotics or prosthetics under alternative qualification  
21 requirements, a person shall:

1 1. Pass an examination in the area of licensure, which may be an available  
2 examination designated by the State Board of Medical Licensure and Supervision or an  
3 examination developed by the Board; and

4 2. Execute an alternative qualification contract with the State Board of Medical  
5 Licensure and Supervision the conditions of which shall be based on the Board's  
6 evaluation of the applicant's experience and the Board's determination of further  
7 experience needed or other requirements to be met, which contract shall specify a period  
8 of time not to exceed ten (10) years for completion of the further experience or  
9 requirements.

10 D. Upon execution of the alternative qualification contract, the Board shall issue a  
11 license and shall renew the license subject to the licensee's making satisfactory progress  
12 as required by the contract. Persons who satisfactorily complete the alternative  
13 qualification contract shall be thereafter considered as having met the qualifications  
14 necessary for license renewal.

15 E. No person shall be permitted to enter into an alternative qualification contract  
16 after October 31, 2004. A person who has not done so by October 31, 2004, shall not be  
17 issued a license to practice orthotics or prosthetics without meeting standard  
18 qualifications.

19 F. Notwithstanding any other provision of this section, a person who has practiced  
20 full time during the three-year period preceding the effective date of this act in a  
21 prosthetic or orthotic facility as a prosthetist or orthotist and has a high school diploma  
22 or equivalent, or who has practiced as an assistant or technician, may file an application

1 with the Board within ninety (90) days from the effective date of this act for permission  
2 to continue to practice at his or her identified level of practice. The Board, after verifying  
3 the applicant's work history and receiving payment of the application fee as established  
4 pursuant to this act, shall, without examination of the applicant, issue the applicant a  
5 license or certificate of registration. To make the investigations necessary to verify the  
6 applicant's work history, the Board may require that the applicant complete a  
7 questionnaire regarding the work history and scope of practice. The Board shall take no  
8 more than six (6) months to verify the work history. Applicants applying after the  
9 ninety-day application period of this subsection has expired shall meet the qualifications  
10 elsewhere set forth for standard or alternative qualification for licensure or for  
11 registration as determined by the Board.

12 G. The Board may authorize the Board Secretary to issue a temporary license for  
13 up to two (2) years to individuals who have graduated from a program and completed  
14 their residency as outlined in subsection B of this section, but not yet passed the  
15 licensure exam. A temporary license authorizing practice under supervision shall be  
16 granted only when the Board Secretary is satisfied as to the qualifications of the  
17 applicant to be licensed under the Orthotics and Prosthetics Practice Act except for  
18 examination. A temporary license shall be granted only to an applicant demonstrably  
19 qualified for a full and unrestricted license under the requirements set by the Orthotics  
20 and Prosthetics Practice Act and the rules of the Board.

21 SECTION 8. This act shall become effective July 1, 2009.

1           SECTION 9. It being immediately necessary for the preservation of the public  
2 peace, health and safety, an emergency is hereby declared to exist, by reason whereof  
3 this act shall take effect and be in full force from and after its passage and approval.  
4 COMMITTEE REPORT BY: COMMITTEE ON PUBLIC HEALTH, dated 02-19-09 - DO  
5 PASS, As Amended and Coauthored.