

**BILL SUMMARY**  
1<sup>st</sup> Session of the 52<sup>nd</sup> Legislature

<b>Bill No.:</b>	<b>SB 487</b>
<b>Version:</b>	<b>FULLPCS1</b>
<b>Author:</b>	<b>Sen. Paddack/Rep. Cox</b>
<b>Date:</b>	<b>April 6, 2009</b>
<b>Impact:</b>	<b>\$0</b>

**Bill Summary**

Research Analyst: Marcia Goff

The PCS for Engrossed SB 487 defines what constitutes a community health care provider for purposes of the Governmental Tort Claims Act and authorizes the State Health Department to enter into agreements with community health care providers. The bill provides that, in addition to physicians, physician assistants, nurses, dentists, optometrists and pharmacists may be issued a special volunteer license and extends immunity from liability to any organization that arranges for medically-related services provided by a volunteer professional.

**Fiscal Summary**

Fiscal Analyst: Mark Newman

The FULLPCS1 for SB 487 amends the "The Governmental Tort Claims Act," by allowing volunteer health care providers serving at a Federally Qualified Health Center (FQHC) or an FQHC Look-Alike to be under The Governmental Tort Claims Act as a charitable health care provider.

This legislation also allows the Oklahoma State Department of Health (OSDH) to enter into agreements with community health care providers where the provider stipulates that they will provide services without compensation, although the facility may assess a sliding scale co-pay fee. Community health care providers entering into such agreements with OSDH shall be under The Governmental Tort Claims Act.

The FULLPCS1 for SB 487 also amends the Volunteer Professional Services Immunity Act by covering volunteer professionals and any organization that arranges for the care given by the volunteer professionals and adds physician assistants, nurses, dentists, optometrists, or pharmacists.

**Fiscal Analysis**

Based on information provided by the Oklahoma State Department of Health (OSDH), the FULLPCS 1 for ESB 487 will have no impact on appropriated funds. OSDH currently administers the programs for FQHCs and the charitable health care providers and does not anticipate needing additional personnel or funds to implement these changes.

**Long Term Fiscal Considerations**

None

Fiscal Analysis Reviewed By:

*Janice Buchanan*

House Fiscal Director