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S T A T E O F R H O D E I S L A N D

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2024

A N A C T

RELATING TO HEALTH AND SAFETY -- HEALTHCARE PROVIDER SHIELD ACT

Introduced By: Senators Euer, Mack, Pearson, DiMario, Miller, Sosnowski, DiPalma, McKenney, Murray, and F. Lombardi
Date Introduced: February 08, 2024

Referred To: Senate Judiciary

It is enacted by the General Assembly as follows:

SECTION 1. Title 23 of the General Laws entitled "HEALTH AND SAFETY" is hereby amended by adding thereto the following chapter:

CHAPTER 100

HEALTHCARE PROVIDER SHIELD ACT

23-100-1. Short title.

This chapter shall be known and may be cited as the "Healthcare Provider Shield Act".

23-100-2. Declaration of policy.

The general assembly hereby finds and declares the following:

(1) Access to transgender healthcare services and access to reproductive healthcare services as defined by this chapter is a legal right in this state.

(2) Interference with legally protected healthcare activity, or the aiding and assisting of legally protected healthcare activity, as defined by this chapter, whether or not under the color of law, is against the public policy of this state.

(3) Any public act of a foreign jurisdiction that prohibits, criminalizes, sanctions, or authorizes a person to bring a civil action against or otherwise interferes with a person, provider, payer, or other entity in this state that engages in legally protected healthcare activity or aids and assists legally protected healthcare activity shall be an interference with the exercise and enjoyment of the rights secured by this chapter and shall be a violation of the public policy of this state.

23-100-3. Definitions.

As used in this chapter, the followings words shall have the following meanings:

(1) "Aggrieved person" means:

(i) A person against whom hostile litigation is filed or their legal representative;

(ii) A person in the state that receives a subpoena in connection with hostile litigation, as defined in subsection (3) of this section, from any court, state or federal, in the United States or any of its territories, that seeks information concerning legally protected healthcare activity, as defined by subsection (5) of this section, or aiding and assisting with legally protected healthcare activity, as defined in subsection (2) of this section; or

(iii) A person or entity that employs a person against whom hostile litigation has been filed, if the action is based on the employee's legally protected healthcare activity or the aiding or assisting with legally protected healthcare activities performed within the scope of their employment.

(2) "Aid and assist legally protected healthcare activity" means:

(i) The undertaking of any act or omission to aid or effectuate, or attempt to aid or effectuate, any person in the exercise and enjoyment, or attempted exercise and enjoyment, of the right to transgender healthcare services or reproductive healthcare services in this state, regardless of the patient’s location or whether the healthcare provider is licensed in the state where the patient is located at the time the service is rendered; or

(ii) The undertaking of any act or omission to aid or effectuate, or attempt to aid or effectuate, any person in the provision of, or attempted provision of, transgender healthcare services or reproductive healthcare services in this state, regardless of the patient’s location or whether the healthcare provider is licensed in the state where the patient is located at the time the service is rendered.

(iii) For the purposes of this chapter, "aiding and assisting legally protected healthcare activity" shall include, but not be limited to, the provision or administration or attempted provision or administration of insurance coverage for transgender healthcare services or reproductive healthcare services, by any insurer, payor, or employer.

(3) "Hostile litigation" means litigation or other legal action, including, but not limited to, administrative action, to deter, prevent, sanction, or punish any person engaging in legally protected healthcare activity or aiding and assisting legally protected healthcare activity by:

(i) Filing or prosecuting any action in any other state where liability, in whole or part, directly or indirectly, is based on engaging in legally protected healthcare activity or aiding and assisting legally protected healthcare activity that occurred in this state, including any action in which liability is based on any theory of vicarious, joint, or several liability derived therefrom; or

(ii) Attempting to enforce any order or judgment issued in connection with any such action by any party to the action, or any person acting on behalf of a party to the action.

(iii) Any action shall be considered to be based on conduct that occurred in this state if any part of any act or omission involved in the course of conduct that forms the basis for liability in the action occurs or is initiated in this state, whether or not such act or omission is alleged or included in any pleading or other filing in the action.

(iv) Hostile litigation does not include a lawsuit or judgment entered in another state that is based on conduct for which a cause of action would exist under the laws of this state if the course of conduct that forms the basis for liability had occurred entirely in this state, including any contract, tort, common law, or statutory claims.

(4) "Law enforcement agency" means any state, municipal, college or university police department, sheriff's department, correctional facility, prosecutorial office, court, probation office, or a program of more than one of any such entity, or any other non-federal entity in the state charged with the enforcement of laws or the custody of detained persons.

(5) "Legally protected healthcare activity" means:

(i) The exercise and enjoyment, or attempted exercise and enjoyment, by any person of the right to transgender healthcare services or reproductive healthcare services in this state; and

(ii) The provision, or attempted provision, of transgender healthcare services or reproductive healthcare services permitted under the laws and regulations of this state by a person duly licensed under the laws of this state and physically present in this state, regardless of the patient's location or whether the healthcare provider is licensed in the state where the patient is located at the time the service is rendered.

(iii) "Legally protected healthcare activity" shall not include any service rendered below the applicable professional standard of care of this state.

(iv) The protections available for engaging in "legally protected healthcare activity" shall not apply to a lawsuit, judgment, or civil, criminal, or administrative action that is based on conduct for which an action would exist under the laws of this state if the course of conduct that forms the basis for liability had occurred entirely in this state.

(6) "Reproductive healthcare services" means all supplies, care, and services of a medical, behavioral health, mental health, surgical, psychiatric, therapeutic, diagnostic, preventative, rehabilitative, or supportive nature, including medication, relating to pregnancy, contraception, assisted reproduction, pregnancy loss management, or the termination of a pregnancy provided in accordance with the accepted standard of care as defined by major medical professional organizations and agencies with expertise in the relevant field.

(7) "Transgender healthcare services" means all supplies, care, and services of a medical, behavioral health, mental health, surgical, psychiatric, therapeutic, diagnostic, preventative, rehabilitative, or supportive nature, including medication, relating to the treatment of gender dysphoria and gender incongruence as provided in accordance with the accepted standard of care as defined by major medical professional organizations and agencies with expertise in the relevant field including the World Professional Association for Transgender Healthcare Standards of Care for the Health of Transgender and Gender Diverse People, 8th edition, or its successor in function. "Transgender healthcare services" does not include conversion therapy as defined by § 23-94-2.

23-100-4. Tortious interference with legally protected healthcare activity.

(a) If a person, whether or not acting under color of law, engages or attempts to engage in hostile litigation, any aggrieved person may initiate a civil action against that person for injunctive, monetary, or other appropriate relief within three (3) years after the cause of action accrues.

(b) If the court finds for the petitioner in an action authorized by this section, recovery may include damages for the amount of any judgment issued in connection with any hostile litigation, and any and all other expenses, costs, and reasonable attorney's fees incurred in connection with the hostile litigation and with the tortious interference action.

(c) A court of this state may exercise jurisdiction over a person in an action authorized by this section if:

(1) Personal jurisdiction is found;

(2) The person has commenced any action in any court in this state and, during the pendency of that action or any appeal therefrom, a summons and complaint is served on the person, authorized representative, or the attorney appearing on the person's behalf in that action or as otherwise permitted by law; or

(3) The exercise of jurisdiction is permitted under the Constitution of the United States.

23-100-5. Foreign judgments.

(a) In any action filed to enforce a foreign judgment issued in connection with hostile litigation, a court of this state shall not give any force or effect to any judgment issued without jurisdiction or due process or to any judgment that is penal in nature.

(b) Foreign judgments issued in connection with hostile litigation shall be brought by filing a new and independent action on the judgment within five (5) years after the rendition of the judgment, and not after.

23-100-6. Testimony, documents, and subpoenas.

(a) Notwithstanding any other provision in this chapter or court rule to the contrary, except as required by federal law, a court shall not order a person who is domiciled or found within this

state to give testimony or a statement or produce documents or other things with any proceeding in a tribunal outside this state concerning hostile litigation.

(b) An aggrieved person may move to modify or quash any subpoena issued to a person in this state in connection with such hostile litigation on any grounds provided by court rule, statute, or on the grounds that the subpoena is inconsistent with the public policy of this state.

(c) No justice or special justice shall issue a summons in a case, except as required by federal law, where prosecution is pending concerning legally protected health care activity, as defined in § 23-100-3, or aiding and assisting legally protected healthcare activity, as defined in § 23-100-3, or where a grand jury investigation concerning legally protected healthcare activity or aiding and assisting legally protected healthcare activity has commenced or is about to commence for a criminal violation of a law of such other state unless the acts forming the basis of the prosecution or investigation would also constitute an offense if occurring entirely in this state.

(d) A judge, clerk, or official shall not issue a subpoena if the subpoena is sought to be issued in connection with hostile litigation.

(e) A business entity that is incorporated, or has its principal place of business, in this state shall not:

(1) Knowingly provide records, information, facilities, or assistance in response to a subpoena, warrant, court order, or other civil or criminal legal process that relates to an investigation into, or the enforcement of, another state’s law that asserts criminal or civil liability for legally protected healthcare activity or aiding and assisting legally protected healthcare; or

(2) Comply with a subpoena, warrant, court order, or other civil or criminal legal process for records, information, facilities, or assistance related to legally protected healthcare activity or aiding and assisting legally protected healthcare unless the subpoena, warrant, court order, or other civil or criminal legal process includes, or is accompanied by, an attestation, made under penalty of perjury, stating that the subpoena, warrant, court order, or other civil or criminal legal process does not seek documents, information, or testimony relating to an investigation into, or the enforcement of, another state's law that asserts criminal or civil liability for legally protected healthcare activity or aiding and assisting legally protected healthcare activity. Any false attestation submitted under this section is subject to a statutory penalty of ten thousand dollars ($10,000) per violation. Submission of such attestation subjects the attester to the jurisdiction of the courts of this state for any suit, penalty, or damages arising out of a false attestation under this section.

(3) Any business entity described in subsection (e)(1) of this section that is served with a subpoena, warrant, court order, or other civil or criminal legal process described in subsection (e)(1) of this section is entitled to rely on the representations made in an attestation described in subsection

(e)(2) of this section in determining whether the subpoena, warrant, court order, or other civil or criminal legal process relates to an investigation into, or the enforcement of, another state's law that asserts criminal or civil liability for legally protected healthcare activity or aiding and assisting legally protected healthcare activity.

23-100-7. Orders authorizing the interception of wire, oral, or electronic communications or search warrants.

(a) A court in this state shall not issue an ex parte order for wiretapping or eavesdropping to obtain any wire, oral, or electronic communication that relates to an investigation into a legally protected healthcare activity or aiding and assisting with legally protected healthcare activity.

(b) A court in this state shall not issue a search warrant or an order for the interception of any communication or conversation for the purpose of investigating or recovering evidence that related to legally protected healthcare activity or aiding and assisting legally protected healthcare activity.

23-100-8. Choice of law.

Notwithstanding any general or special law or common law conflict of law rule to the contrary, the laws of this state shall govern in any case or controversy heard in this state related to legally protected healthcare activity or aiding and assisting legally protected healthcare activity, except as may be required by federal law.

23-100-9. Noncooperation.

(a) No public agency, including a state or local law enforcement agency, or state or local employee, appointee, officer or official, or any other person acting on behalf of a public agency shall knowingly provide any information or expend or use time, money, facilities, property, equipment, personnel, or other resources in furtherance of any interstate investigation or proceeding seeking to impose civil or criminal liability upon a person or entity for:

(1) Legally protected healthcare activity; or

(2) Aiding and assisting legally protected healthcare activity.

(b) Notwithstanding any general or special law to the contrary and except as required by federal law, no officer or employee of a law enforcement agency of this state, while acting under color of law, shall provide information or assistance to a federal law enforcement agency or any other state’s law enforcement agency or any private citizen or quasi-law enforcement agent in relation to an investigation or inquiry into services constituting legally protected healthcare activity, or aiding and assisting legally protected healthcare activity, if such services would be lawful as provided if they occurred entirely in this state.

(c) Notwithstanding any other law or provision of this chapter to the contrary, arrest of a

person is prohibited if the arrest is related to criminal liability that is based on legally protected healthcare activity or aiding and assisting legally protected health care activity.

(d) This section shall not apply to:

(1) Any investigation or proceeding where the conduct subject to potential liability under the investigation or proceeding would be subject to liability under the laws of this state if committed in this state; or

(2) A public agency or employee, appointee, officer or official who, in the course of normal business, is responding to a warrant or extradition demand on the good faith belief that the warrant or demand is valid in this state.

SECTION 2. Chapter 12-9 of the General Laws entitled "Extradition" is hereby amended by adding thereto the following section:

12-9-36. Legally protected healthcare activity exception to extradition.

Notwithstanding any other provision in this chapter to the contrary, except as required by federal law, the governor shall not surrender a person charged in another state as a result of engaging in legally protected healthcare activity as defined in § 23-100-3 or aiding and assisting legally protected healthcare activity as defined in § 23-100-3 unless the executive authority of the demanding state alleges in writing that the accused was physically present in the demanding state at the time of the commission of the alleged offense and that thereafter the accused fled from the demanding state.

SECTION 3. Title 5 of the General Laws entitled "BUSINESSES AND PROFESSIONS" is hereby amended by adding thereto the following chapter:

CHAPTER 37.8

PROTECTIONS FOR PROVIDERS ACT

5-37.8-1. License protections for providers of legally protected healthcare activity.

(a) As used in this section:

(1) Aiding and assisting with legally protected healthcare activity has the same meaning as set forth in § 23-100-3.

(2) Healthcare provider has the same meaning as set forth in § 5-37.3-3 and also includes, but is not limited to, the licensed professionals as forth in chapter 32 of title 5 ("electrolysis and laser hair removal"), chapter 40.1 of title 5 ("occupational therapy"), chapter 37 of title 5 ("osteopathic physicians"), chapter 39.1 of title 5 ("social workers"), chapter 63.2 of title 5 ("mental health counselors and marriage and family therapists"), chapter 54 of title 5 ("physician assistants"), chapter 36.1 of title 5 ("naturopathic healthcare providers"), chapter 48 of title 5 ("speech-language pathologists"), chapter 92 of title 5 ("genetic counselors"), and chapter 30 of title 5 ("chiropractic

physicians").

(3) Legally protected healthcare activity has the same meaning as set forth in § 23-100-3.

(b) No healthcare provider who is certified, registered, or licensed in Rhode Island shall be subject to professional disciplinary action by a board or the director, including the revocation, suspension or cancellation of the certificate, or registration or reprimand, censure or monetary fine nor shall a board or the director refuse to issue, renew, or take adverse action on an application for certification, registration, or licensure of a qualified healthcare practitioner based solely on:

(1) The healthcare provider engaging in legally protected healthcare or aiding and assisting with legally protected healthcare activity;

(2) A criminal, civil, or disciplinary action, including license suspension or revocation, in another state against the healthcare practitioner that is based on the practitioner engaging in legally protected healthcare activity or aiding and assisting with legally protected healthcare activity; or

(3) A criminal, civil, or disciplinary action, including license suspension or revocation, in another state against the healthcare practitioner that is based solely on the practitioner violating another state's law prohibiting legally protected healthcare activity or aiding and assisting with legally protected healthcare activity.

(c) No board or the director shall make available for public dissemination on a healthcare provider's individual profile the record of any criminal conviction or charge for a felony or serious misdemeanor, final disciplinary action by a licensing board in another state or a medical malpractice court judgment, arbitration award or settlement that resulted from legally protected healthcare activity, aiding and assisting legally protected healthcare activity, or for any judgment, discipline or other sanction arising from such healthcare services if the services as provided were consistent with the applicable professional standard of care and did not otherwise violate Rhode Island law.

5-37.8-2. Insurance protections for providers of legally protected healthcare activity.

(a) As used in this section:

(1) Aiding and assisting with legally protected healthcare activity has the same meaning as set forth in § 23-100-3.

(2) Healthcare provider has the same meaning as set forth in § 5-37.3-3 and also includes, but is not limited to, the licensed professionals as forth in chapter 32 of title 5 ("electrolysis and laser hair removal"), chapter 40.1 of title 5 ("occupational therapy"), chapter 37 of title 5 ("osteopathic physicians"), chapter 39.1 of title 5 ("social workers"), chapter 63.2 of title 5 ("mental health counselors and marriage and family therapists"), chapter 54 of title 5 ("physician assistants"), chapter 36.1 of title 5 ("naturopathic healthcare providers"), chapter 48 of title 5 ("speech-language

pathologists"), chapter 92 of title 5 ("genetic counselors"), and chapter 30 of title 5 ("chiropractic physicians").

(3) Legally protected healthcare activity has the same meaning as set for in § 23-100-3.

(4) "Prohibited action" means:

(i) Refusing to issue a malpractice policy;

(ii) Charging higher rates for a malpractice policy, including malpractice policies that include coverage for cross-border care;

(iii) Canceling or terminating a malpractice policy;

(iv) Refusing to renew a malpractice policy; or

(v) Imposing any sanctions, fines, penalties, or rate increases.

(b) An insurer that issues malpractice insurance for a healthcare provider who is certified, registered, or licensed in Rhode Island shall not take a prohibited action against an applicant for or the named insured under a malpractice policy in this state because the applicant or insured has engaged in a legally protected healthcare activity as defined in § 23-100-3 or aiding and assisting with legally protected healthcare activity as defined in § 23-100-3 in this state, as long as the care provided by the applicant or insured was consistent with the applicable professional standard of care and did not violate Rhode Island law.

(c) A carrier shall not refuse to credential an applicant, or terminate a participating healthcare provider's participation, in a provider network based solely on the applicant's or participating healthcare provider's engagement in legally protected healthcare activity, as defined in § 23-100-3, or aiding and assisting with legally protected health care activity, as defined § 23-100-3.

(d) A carrier shall not take adverse action against a healthcare provider or subject the healthcare provider to financial disincentives based solely on the provider engaging in legally protected healthcare activity, as defined in § 23-100-3, or aiding and assisting with legally protected healthcare activity, as defined § 23-100-3 as long as the care provided did not violate the law of this state. Adverse action in this section means refusing or failing to pay a provider for otherwise covered services as defined in the applicable health benefit plan.

SECTION 4. Section 23-17-53 of the General Laws in Chapter 23-17 entitled "Licensing of Healthcare Facilities" is hereby amended to read as follows:

23-17-53. Physician contracts.

(a) A hospital, by contract or otherwise, may not refuse or fail to grant or renew medical staff membership or staff privileges, or condition or otherwise limit or restrict medical staff membership or staff privileges, based in whole or in part on the fact that the physician or a partner,

associate, or employee of the physician is providing medical or healthcare services at a different hospital, hospital system, or on behalf of a health plan. Notwithstanding the previous sentence, a hospital may condition or otherwise limit or restrict staff privileges for reasons related to the availability of limited resources as determined in advance by the hospital's governing body. Nor shall a hospital by contract, or otherwise, limit a physician's participation or staff privileges or the participation or staff privileges of a partner, associate, or employee of the physician at a different hospital, hospital system or health plan.

(b) This section does not prevent a hospital from entering into contracts with physicians to ensure physician availability and coverage at the hospital or to comply with regulatory requirements or quality of care standards established by the governing body of the hospital, if contracts, requirements or standards do not require that a physician join, participate in or contract with a physician-hospital organization or similar organization as a condition of the grant or continuation of medical staff membership or staff privileges at the hospital.

(c) This section does not prevent the governing body of a hospital from limiting the number of physicians granted medical staff membership or privileges at the hospital based on a medical staff development plan that is unrelated to a physician or a partner, associate, or employee of a physician having medical staff membership or privileges at another hospital or hospital system.

(d) A contract provision that violates this section shall be void and of no force and effect.

(e) Hospitals shall allow patients of their medical staff to be evaluated and educated by the various appropriate departments of the hospital upon referral by their treating physician, regardless of the physician affiliation, as long as the physician has unrestricted privileges in their field of practice.

(f) A hospital shall not take any adverse action, including, but not limited to, refusing or failing to grant or renew medical staff membership or staff privileges, or condition or otherwise limit or restrict medical staff membership or staff privileges, based, in whole or in part, as a result of an adverse action against a healthcare provider's license or clinical privileges or other disciplinary action by another state or healthcare institution that resulted from the healthcare provider's engagement in legally protected healthcare activity, as defined in § 23-100-3, or aiding and assisting with legally protected healthcare activity, as defined § 23-100-3, if the adverse action was based solely on a violation of the other state's law prohibiting such legally protected healthcare activity and related services, if that legally protected healthcare activity is consistent with the applicable professional standard of care and did not violate Rhode Island law.

SECTION 5. Section 5-37-9.2 of the General Laws in Chapter 5-37 entitled "Board of Medical Licensure and Discipline" is hereby amended to read as follows:

5-37-9.2. Physician profiles — Public access to data.

(a)(1) The board shall compile the information listed in this section to create individual profiles on licensed physicians, in a format created by the board, consistent with the provisions of this section and any regulations promulgated under this section, that are available for dissemination to the public and that include a conspicuous statement that: "This profile contains certain information that may be used as a starting point in evaluating the physician. This profile should not be your sole basis for selecting a physician."

(2) The following information shall be compiled by the board in accordance with state laws and board regulations and procedures and shall be included in physician profiles, subject to the limitations and requirements set forth below:

(i) Names of medical schools and dates of graduation;

(ii) Graduate medical education;

(iii) A description of any final board disciplinary actions within the most recent ten (10) years;

(iv) A description of any final disciplinary actions by licensing boards in other states within the most recent ten (10) years;

(v) A description of any criminal convictions for felonies within the most recent ten (10) years. For the purposes of this subsection, a person is deemed to be convicted of a crime if he or she pleaded guilty or if he or she was found or adjudged guilty by a court of competent jurisdiction, or was convicted of a felony by the entry of a plea of nolo contendere;

(vi) A description of revocation or restriction of hospital privileges for reasons related to competence taken by the hospital's governing body or any other official of the hospital after procedural due process has been afforded, or the resignation from or nonrenewal of medical staff membership or the restriction of privileges at a hospital. Only cases that have occurred within the most recent ten (10) years, shall be disclosed by the board to the public; and

(vii) All medical malpractice court judgments and all medical malpractice arbitration awards in which a payment is awarded to a complaining party since September 1, 1988, or during the most recent ten (10) years, and all settlements of medical malpractice claims in which a payment is made to a complaining party since September 1, 1988, or within the most recent ten (10) years. Dispositions of paid claims shall be reported in a minimum of three (3) graduated categories indicating the level of significance of the award or settlement. Information concerning paid medical malpractice claims shall be put in context by comparing an individual physician's medical malpractice judgments, awards, and settlements to the experience of other physicians licensed in Rhode Island who perform procedures and treat patients with a similar degree of risk. All judgment,

award, and settlement information reported shall be limited to amounts actually paid by or on behalf of the physician.

(3) Comparisons of malpractice payment data shall be accompanied by:

(i) An explanation of the fact that physicians treating certain patients and performing certain procedures are more likely to be the subject of litigation than others and that the comparison given is for physicians who perform procedures and treat patients with a similar degree of risk;

(ii) A statement that the report reflects data since September 1, 1988, or for the last ten (10) years and the recipient should take into account the number of years the physician has been in practice when considering the data;

(iii) An explanation that an incident, giving rise to a malpractice claim, may have occurred years before any payment was made due to the time lawsuits take to move through the legal system;

(iv) An explanation of the effect of treating high-risk patients on a physician's malpractice history; and

(v) An explanation that malpractice cases may be settled for reasons other than liability and that settlements are sometimes made by the insurer without the physician's consent.

(4) Information concerning all settlements shall be accompanied by the following statement: "Settlement of a claim may occur for a variety of reasons that do not necessarily reflect negatively on the professional competence or conduct of the physician. A payment in settlement of a medical malpractice action or claim should not be construed as creating a presumption that medical malpractice has occurred." Nothing in this section shall be construed to limit or prevent the board from providing further explanatory information regarding the significance of categories in which settlements are reported.

(5) Pending malpractice claims and actual amounts paid by or on behalf of a physician in connection with a malpractice judgment, award, or settlement shall not be disclosed by the board to the public. Nothing in this section shall be construed to prevent the board from investigating and disciplining a licensee on the basis of medical malpractice claims that are pending.

(6) The following information shall be reported to the board by the physician and shall be included in physician profiles, subject to the limitations and requirements specified in this subdivision:

(i) Specialty board certification;

(ii) Number of years in practice;

(iii) Names of the hospitals where the physician has privileges;

(iv) Appointments to medical school faculties and indication as to whether a physician has a responsibility for graduate medical education within the most recent ten (10) years;

(v) Information regarding publications in peer-reviewed medical literature within the most recent ten (10) years;

(vi) Information regarding professional or community service activities and awards;

(vii) The location of the physician's primary practice setting; and

(viii) The identification of any language translating services that may be available at the physician's primary practice location; provided, that a statement is included in the profile indicating that these services may be temporary and that the physician's office should first be contacted to confirm the present availability of language translation.

(b) A physician may elect to have his or her profile omit certain information provided pursuant to subsections (a)(6)(iv) — (a)(6)(vi) of this section, concerning academic appointments and teaching responsibilities, publication in peer-reviewed journals, and professional and community service awards. In collecting information for these profiles and disseminating it, the board shall inform physicians that they may choose not to provide any information required pursuant to subsections (a)(6)(iv) — (a)(6)(vi) of this section.

(c) A physician profile shall not include the personal residence address, telephone number, email address, or other personal contact information of the physician.

(d)(1) The board shall provide individual physicians with a copy of their profiles prior to initial release to the public and each time a physician's profile is modified or amended based on information not personally supplied to the board by the physician or not generated by the board itself.

(2) Prior to initial release to the public and upon each modification or amendment requiring physician review as provided in this subsection, a physician shall be provided not less than twenty-one (21) calendar days to correct factual inaccuracies that appear in his or her profile.

(3) If a dispute arises between a physician and the board regarding the accuracy of factual information in the physician's profile, the physician shall notify the board, in writing, of this dispute.

(4) If a physician does not notify the board of a dispute during the twenty-one-day (21) review period, the profile shall be released to the public and the physician will be deemed to have approved the profile and all information contained in the profile.

(5) If a physician notifies the board of a dispute in accordance with this subsection, the physician's profile shall be released to the public without the disputed information, but with a statement to the effect that information in the identified category is currently the subject of a dispute and is not available at this time.

(6) Within ten (10) calendar days after the board's receipt of notice of a dispute, the

physician and the board or its authorized representative shall in good faith enter into discussions, which may continue for up to thirty (30) days, to resolve the dispute. If the dispute is not resolved within thirty (30) days, the disputed information shall be included in the profile with a statement that this information is disputed by the physician.

~~(d)~~(e) Each profile shall contain a statement specifying the date of its last modification, amendment, or update. If a physician has reviewed and approved or been deemed to have approved his or her profile in accordance with this subsection, the physician is responsible for the accuracy of the information contained in it. If a profile is released to the public without physician review as required by this subsection, then notwithstanding any immunity from liability granted by § 5-37-1.5 or § 23-1-32, the board or any state agency supplying physician information to the board is solely responsible for the accuracy of the information it generates or supplies and that is contained in physician profiles released to the public.

~~(e)~~(f) In order to protect against the unauthorized use or disclosure of provider profiles by department of health employees with access to the data, the department of health shall apply its existing safeguards and procedures for protecting confidential information to physician profile information.

~~(f)~~(g) For each profile provided to the public by the board, the board may charge no more than fifty cents ($.50) per page or three dollars ($3.00) per profile, whichever is greater.

SECTION 6. Chapter 23-1 of the General Laws entitled "Department of Health" is hereby amended by adding thereto the following section:

23-1-42.2. Professions and occupations licenses, certifications, and registration – Confidentiality of personal information.

Notwithstanding the licensure, certification, or registration requirements specified in statutes governing professions and occupations administered by the department of health, the director of health shall not include the personal residence address, telephone number, email address, or other personal contact information of licensed professionals on any and all public provider profiles, registries, and any other lists of professionals and occupations developed and maintained by the department.

SECTION 7. Chapter 5-30 of the General Laws entitled "Chiropractic Physicians" is hereby amended by adding thereto the following section:

5-30-19. Adverse action for legally protected healthcare activity.

An employer, agency, or institution shall not take any adverse action, including, but not limited to, restricting or terminating any chiropractor's employment or ability to practice as a result of an adverse action against a chiropractor's license or other disciplinary action by another state or

institution that resulted from the chiropractor's engagement in legally protected healthcare activity, as defined in § 23-100-3, or aiding and assisting with legally protected healthcare activity, as defined § 23-100-3 if the adverse action was based solely on a violation of the other state's law prohibiting such legally protected healthcare activity and related services, if that legally protected healthcare activity is consistent with the applicable professional standard of care and did not violate Rhode Island law.

SECTION 8. Chapter 5-32 of the General Laws entitled "Electrolysis and Laser Hair Removal" is hereby amended by adding thereto the following section:

5-32-22. Adverse action for legally protected healthcare activity.

An employer, agency, or institution shall not take any adverse action, including, but not limited to, restricting or terminating any electrologist's employment or ability to practice as a result of an adverse action against an electrologist's license or other disciplinary action by another state or institution that resulted from the electrologist's engagement in legally protected healthcare activity, as defined in § 23-100-3, or aiding and assisting with legally protected healthcare activity, as defined § 23-100-3 if the adverse action was based solely on a violation of the other state's law prohibiting such legally protected healthcare activity and related services, if that legally protected healthcare activity is consistent with the applicable professional standard of care and did not violate Rhode Island law.

SECTION 9. Chapter 5-36.1 of the General Laws entitled "License of Naturopathy Act of 2017" is hereby amended by adding thereto the following section:

5-36.1-20. Adverse action for legally protected healthcare activity.

An employer, agency, or institution shall not take any adverse action, including, but not limited to, restricting or terminating any naturopath's employment or ability to practice as a result of an adverse action against a naturopath's license or other disciplinary action by another state or institution that resulted from the naturopath's engagement in legally protected healthcare activity, as defined in § 23-100-3, or aiding and assisting with legally protected healthcare activity, as defined § 23-100-3 if the adverse action was based solely on a violation of the other state's law prohibiting such legally protected healthcare activity and related services, if that legally protected healthcare activity is consistent with the applicable professional standard of care and did not violate Rhode Island law.

SECTION 10. Chapter 5-39.1 of the General Laws entitled "License Procedure for Social Workers" is hereby amended by adding thereto the following section:

5-39.1-15. Adverse action for legally protected healthcare activity.

An employer, agency, or institution shall not take any adverse action, including, but not

limited to, restricting or terminating any social worker's employment or ability to practice as a result of an adverse action against a social worker's license or other disciplinary action by another state or institution that resulted from the social worker's engagement in legally protected healthcare activity, as defined in § 23-100-3, or aiding and assisting with legally protected healthcare activity, as defined § 23-100-3 if the adverse action was based solely on a violation of the other state's law prohibiting such legally protected healthcare activity and related services, if that legally protected healthcare activity is consistent with the applicable professional standard of care and did not violate Rhode Island law.

SECTION 11. Chapter 5-40.1 of the General Laws entitled "Occupational Therapy" is hereby amended by adding thereto the following section:

5-40.1-22. Adverse action for legally protected healthcare activity.

An employer, agency, or institution shall not take any adverse action, including, but not limited to, restricting or terminating any occupational therapist's employment or ability to practice as a result of an adverse action against an occupational therapist's license or other disciplinary action by another state or institution that resulted from the occupational therapist's engagement in legally protected healthcare activity, as defined in § 23-100-3, or aiding and assisting with legally protected healthcare activity, as defined § 23-100-3 if the adverse action was based solely on a violation of the other state's law prohibiting such legally protected healthcare activity and related services, if that legally protected healthcare activity is consistent with the applicable professional standard of care and did not violate Rhode Island law.

SECTION 12. Chapter 5-48 of the General Laws entitled "Speech-Language Pathology and Audiology" is hereby amended by adding thereto the following section:

5-48-16. Adverse action for legally protected healthcare activity.

An employer, agency, or institution shall not take any adverse action, including, but not limited to, restricting or terminating any speech-language pathologist's or audiologist's employment or ability to practice as a result of an adverse action against an speech language pathologist's or audiologist's license or other disciplinary action by another state or institution that resulted from the speech-language pathologist's or audiologist's engagement in legally protected healthcare activity, as defined in § 23-100-3, or aiding and assisting with legally protected healthcare activity, as defined § 23-100-3 if the adverse action was based solely on a violation of the other state's law prohibiting such legally protected healthcare activity and related services, if that legally protected healthcare activity is consistent with the applicable professional standard of care and did not violate Rhode Island law.

SECTION 13. Chapter 5-54 of the General Laws entitled "Physician Assistants" is hereby

amended by adding thereto the following section:

5-54-29. Adverse action for legally protected healthcare activity.

An employer, agency, or institution shall not take any adverse action, including, but not limited to, restricting or terminating any physician assistant's employment or ability to practice as a result of an adverse action against a physician assistant's license or other disciplinary action by another state or institution that resulted from the physician assistant's engagement in legally protected healthcare activity, as defined in § 23-100-3, or aiding and assisting with legally protected healthcare activity, as defined § 23-100-3 if the adverse action was based solely on a violation of the other state's law prohibiting such legally protected healthcare activity and related services, if that legally protected healthcare activity is consistent with the applicable professional standard of care and did not violate Rhode Island law.

SECTION 14. Chapter 5-63.2 of the General Laws entitled "Mental Health Counselors and Marriage and Family Therapists" is hereby amended by adding thereto the following section:

5-63.2-27. Adverse action for legally protected healthcare activity.

An employer, agency, or institution shall not take any adverse action, including, but not limited to, restricting or terminating any counselor's or therapist's employment or ability to practice as a result of an adverse action against a counselor's or therapist's license or other disciplinary action by another state or institution that resulted from the counselor's or therapist's engagement in legally protected healthcare activity, as defined in § 23-100-3, or aiding and assisting with legally protected healthcare activity, as defined § 23-100-3 if the adverse action was based solely on a violation of the other state's law prohibiting such legally protected healthcare activity and related services, if that legally protected healthcare activity is consistent with the applicable professional standard of care and did not violate Rhode Island law.

SECTION 15. Chapter 5-92 of the General Laws entitled "Genetic Counselors Licensing Act" is hereby amended by adding thereto the following section:

5-92-12. Adverse action for legally protected healthcare activity.

An employer, agency, or institution shall not take any adverse action, including, but not limited to, restricting or terminating any genetic counselor's employment or ability to practice as a result of an adverse action against a genetic counselor's license or other disciplinary action by another state or institution that resulted from the genetic counselor's engagement in legally protected healthcare activity, as defined in § 23-100-3, or aiding and assisting with legally protected healthcare activity, as defined § 23-100-3 if the adverse action was based solely on a violation of the other state's law prohibiting such legally protected healthcare activity and related services, if that legally protected healthcare activity is consistent with the applicable professional standard of

care and did not violate Rhode Island law.

SECTION 16. This act shall take effect upon passage.

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EXPLANATION

BY THE LEGISLATIVE COUNCIL

OF

A N A C T

RELATING TO HEALTH AND SAFETY -- HEALTHCARE PROVIDER SHIELD ACT

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This act would create a protective legal shield for healthcare providers, precluding any civil or criminal action by other states or persons against healthcare providers involving persons seeking access to transgender health care services and reproductive healthcare services provided in this state.

This act would take effect upon passage.

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