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In accordance with the Administrative Procedures Act, R.I. Gen. Laws Section 42-35-3(a)(1), the following is a concise statement regarding this rulemaking for Licensure and Discipline of Physicians (216-RICR-40-05-1).

This amendment to the regulations clarifies the citation to authorizing statute, implements Secretary of State definitional requirements, creates a definition for good standing, removes superfluous language, adds continuing medical education requirements for auricular acupuncture, establishes procedures for re-entry from inactive practice, establishes boundary violations, amends medical record fees for consistency with federal law, and establishes requirements for availability of medical records in a completed format.

In response to public comment, § 1.5.12(B)(1) was revised to clarify reimbursements to physicians for responding to a patient request for a copy of their medical record.

In response to public comment, § 1.5.12(B)(2) was revised to clarify the prohibition against physicians charging a patient who requests their own records.

During public comment, it was suggested that the regulations be revised to define “current patient” for the purpose of establishing how much time must pass before a romantic relationship may be initiated between a physician and a patient. RIDOH has determined that this suggested revision will not be implemented because creating such a definition could hamper the Board of Medical Licensure and Discipline’s discretion in ruling on cases involving physician boundary violations.

During public comment, it was suggested that § 1.3.1 be revised to state that the regulations shall not apply to physician assistants licensed under R.I. Gen. Laws Chapter 5-54. RIDOH has determined that this suggested revision will not be implemented because § 24.6 of the regulations for Licensure of Physician Assistants (216-RICR-40-05-24) states that physician assistants practice with physician supervision, and that physician assistants, depending upon their level of professional training and experience, as determined by a supervising physician, may perform health care services consistent with their expertise and that of the supervising physician, and implementing the suggested exemption in the regulations for Licensure and Discipline of Physicians (216-RICR-40-05-1) is unnecessary and could lead to ambiguity between these regulations.

In the development of this rule, consideration was given to: 1) alternative approaches; 2) overlap or duplication with other statutory and regulatory provisions; and 3) significant economic impact on small business. No alternative approach, duplication, or overlap was identified based on available information. RIDOH has determined that the benefits of this rule justify its costs.