## HOUSE SUBSTITUTE FOR SENATE BILL NO. 71

A bill to amend 1978 PA 368, entitled "Public health code,"

by amending sections 16213, 20175, 20175a, and 20199 (MCL 333.16213, 333.20175, 333.20175a, and 333.20199), sections 16213 and 20175a as added and section 20175 as amended by 2006 PA 481, and by adding sections 16213a, 16429, 17029, 17529, 17829, 17909, and 20175b.

## THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 Sec. 16213. (1) An individual licensed under this article A
- 2 licensee shall keep and maintain a record for each patient for whom
- 3 he or she the licensee has provided medical services, including a
- 4 full and complete record of tests and examinations performed,
- 5 observations made, and treatments provided. If a medical service





- 1 provided to a patient on or after the effective date of the
- 2 amendatory act that added this sentence involves the vaginal or
- 3 anal penetration of the patient, a licensee shall expressly state
- 4 in the patient's record that vaginal or anal penetration was
- 5 performed unless the medical service meets any of the circumstances
- 6 described in subsection (2) (b) (i), (ii), (iii), or (iv).
- 7 (2) Unless a longer retention period is otherwise required
- 8 under federal or state laws or regulations or by generally accepted
- 9 standards of medical practice, a licensee shall keep and retain
- 10 each record for required under subsection (1) as follows:
- 11 (a) Except as otherwise provided in subdivision (b), for a
- 12 minimum of 7 years from the date of service to which the record
- 13 pertains.
- 14 (b) If the record is for a medical service performed on or
- 15 after the effective date of the amendatory act that added this
- 16 subdivision that involves the vaginal or anal penetration of a
- 17 patient, for a minimum of 15 years from the date of service to
- 18 which the record pertains. This subdivision does not apply to a
- 19 record for any of the following:
- 20 (i) A medical service that primarily relates to the patient's
- 21 urological, gastrointestinal, reproductive, gynecological, or
- 22 sexual health.
- (ii) A medical service that is necessary and associated with or
- 24 incident to a medical emergency. As used in this subparagraph,
- 25 "medical emergency" means a circumstance that, in the licensee's
- 26 good-faith medical judgment, creates an immediate threat of serious
- 27 risk to the life or physical health of the patient.
- 28 (iii) A medical service performed for the purpose of rectally
- 29 administering a drug or medicine.



- (iv) A medical service performed to measure a patient's temperature.
- (3) The records shall required under subsection (1) must be maintained in such a manner as to protect their integrity, to ensure their confidentiality and proper use, and to ensure their accessibility and availability to each patient or his or her the patient's authorized representative as required by law.
- (4) A—Except as otherwise provided in subsection (7), a licensee may destroy a record required under subsection (1) that is less than 7 years old only if both of the following are satisfied:
- (a) The licensee sends a written notice to the patient at the last known address of that patient informing the patient that the record is about to be destroyed, offering the patient the opportunity to request a copy of that record, and requesting the patient's written authorization to destroy the record.
- (b) The licensee receives written authorization from the patient or his or her the patient's authorized representative agreeing to the destruction of the record.
  - (5) (2)—If a licensee is unable to comply with this section, the licensee shall employ or contract, arrange, or enter into an agreement with another health care provider, a health facility or agency, or a medical records company to protect, maintain, and provide access to those records required under subsection (1).
  - (6) (3)—If a licensee or registrant sells or closes his or her the licensee's or registrant's practice, retires from practice, or otherwise ceases to practice under this article, the licensee or the personal representative of the licensee, if the licensee is deceased, shall not abandon the records required under this section and shall send a written notice to the department that specifies

- $oldsymbol{1}$  who will have custody of the medical records and how a patient may
- 2 request access to or copies of his or her the patient's medical
- 3 records and shall do either of the following:
- 4 (a) Transfer the records required under subsection (1) to any of the following:
- 6 (i) A successor licensee.

- 7 (ii) If requested by the patient or his or her the patient's
  8 authorized representative, to the patient or a specific health
  9 facility or agency or other health care provider licensed under
  10 article 15.
  - (iii) A health care provider, a health facility or agency, or a medical records company with which the licensee had contracted or entered into an agreement to protect, maintain, and provide access to those records required under subsection (1).
  - (b) In Except as otherwise provided in subsection (7), and in accordance with subsection (1), subsections (1) to (4), as long as the licensee or the personal representative of the licensee, if the licensee is deceased, sends a written notice to the last known address of each patient for whom he or she the licensee has provided medical services and receives written authorization from the patient or his or her the patient's authorized representative, destroy the records required under subsection (1). The notice shall must provide the patient with 30 days to request a copy of his or her record the patient's records or to designate where he or she the patient would like his or her the patient's medical records transferred and shall must request from the patient within 30 days written authorization for the destruction of his or her the patient's medical records. If Except as otherwise provided in subsection (7), if the patient fails to request a copy or transfer

- 1 of his or her the patient's medical records or to provide the
- 2 licensee with written authorization for the destruction, then the
- 3 licensee or the personal representative of the licensee shall not
- 4 destroy those records that are less than 7 years old but may
- 5 destroy, in accordance with subsection (4), (8), those that are 7
- 6 years old or older.
- 7 (7) A licensee or the personal representative of a licensee,
- 8 if the licensee is deceased, shall only destroy a record described
- 9 in subsection (2)(b) in accordance with subsection (8).
- 10 (8) (4) Except as otherwise provided under this section or
- 11 federal or state laws and regulations, records required to be
- 12 maintained under subsection (1), other than a record described in
- 13 subsection (2) (b), may be destroyed or otherwise disposed of after
- 14 being maintained for 7 years and records described in subsection
- 15 (2) (b) may be destroyed or otherwise disposed of after being
- 16 maintained for 15 years. If records maintained in accordance with
- 17 this section are subsequently destroyed or otherwise disposed of,
- 18 those records shall must be shredded, incinerated, electronically
- 19 deleted, or otherwise disposed of in a manner that ensures
- 20 continued confidentiality of the patient's health care information
- 21 and any other personal information relating to the patient. If
- 22 records are **not** destroyed or otherwise disposed of as provided
- 23 under this subsection, the department may take action, including,
- 24 but not limited to, contracting for or making other arrangements to
- 25 ensure that those records and any other confidential identifying
- 26 information related to the patient are properly destroyed or
- 27 disposed of to protect the confidentiality of patient's health care
- 28 information and any other personal information relating to the
- 29 patient. Before the department takes action in accordance with this

- 1 subsection, the department, if able to identify the licensee
- 2 responsible for the improper destruction or disposal of the medical
- 3 records at issue, shall send a written notice to that licensee at
- 4 his or her the licensee's last known address or place of business
- 5 on file with the department and provide the licensee with an
- 6 opportunity to properly destroy or dispose of those medical records
- 7 as required under this subsection unless a delay in the proper
- 8 destruction or disposal may compromise the patient's
- 9 confidentiality. The department may assess the licensee with the
- 10 costs incurred by the department to enforce this subsection.
- 11 (9)  $\frac{(5)}{A}$  Except as otherwise provided in section 16213a, a
- 12 person who that fails to comply with this section is subject to an
- 13 administrative fine of not more than \$10,000.00 if the failure was
- 14 the result of gross negligence or willful and wanton misconduct.
- 15 (10) (6) Nothing in this section shall be construed to create
- 16 or change the ownership rights to any medical records.
- 17 (11)  $\frac{7}{3}$  As used in this section:
- 18 (a) "Medical record" or "record" means information, oral or
- 19 recorded in any form or medium, that pertains to a patient's health
- 20 care, medical history, diagnosis, prognosis, or medical condition
- 21 and that is maintained by a licensee in the process of providing
- 22 medical services.
- (b) "Medical records company" means a person who contracts for
- 24 or agrees to protect, maintain, and provide access to medical
- 25 records for a health care provider or health facility or agency in
- 26 accordance with this section.
- (c) "Patient" means an individual who receives or has received
- 28 health care from a health care provider or health facility or
- 29 agency. Patient includes a guardian, if appointed, and a parent,

- 1 quardian, or person acting in loco parentis, if the individual is a
- 2 minor, unless the minor lawfully obtained health care without the
- 3 consent or notification of a parent, guardian, or other person
- 4 acting in loco parentis, in which case the minor has the exclusive
- 5 right to exercise the rights of a patient under this section with
- 6 respect to his or her the minor's medical records relating to that
- 7 care.
- 8 Sec. 16213a. (1) Except as otherwise provided in subsections
- 9 (2) and (3), a person that violates section 16213(1) regarding the
- 10 documentation of a medical service involving vaginal or anal
- 11 penetration in a patient's medical record is subject to an
- 12 administrative fine or guilty of a crime as follows:
- 13 (a) For a first violation, an administrative fine of not more
- 14 than \$1,000.00.
- 15 (b) For a second violation, an administrative fine of not more
- 16 than \$2,500.00.
- 17 (c) For a third or subsequent violation, a misdemeanor
- 18 punishable by imprisonment for not more than 180 days or a fine of
- 19 not more than \$5,000.00, or both.
- 20 (2) A person that violates section 16213(1) regarding the
- 21 documentation of a medical service involving vaginal or anal
- 22 penetration in a patient's medical record is quilty of a
- 23 misdemeanor punishable by imprisonment for not more than 180 days
- 24 or a fine of \$5,000.00, or both, if the violation was the result of
- 25 gross negligence.
- 26 (3) A person that intentionally violates section 16213(1)
- 27 regarding the documentation of a medical service involving vaginal
- 28 or anal penetration in a patient's medical record is guilty of a
- 29 felony punishable by imprisonment for not more than 2 years or a

- 1 fine of not more than \$7,500.00, or both.
- 2 (4) This section does not limit any other sanction or
- 3 additional action a disciplinary subcommittee is authorized to
- 4 impose or take.
- 5 Sec. 16429. (1) The board shall create a document that
- 6 provides guidance to licensees on generally accepted standards of
- 7 practice for services involving vaginal or anal penetration,
- 8 including internal pelvic floor treatments. In creating the
- 9 document described in this subsection, the board shall consult with
- 10 appropriate professional associations and other interested
- 11 stakeholders.
- 12 (2) The board shall make the document required under
- 13 subsection (1) publicly available by 1 year after the effective
- 14 date of the amendatory act that added this section.
- 15 Sec. 17029. (1) The board shall create a document that
- 16 provides guidance to licensees on generally accepted standards of
- 17 medical practice for medical services involving vaginal or anal
- 18 penetration, including internal pelvic floor treatments but
- 19 excluding medical services that primarily relate to a patient's
- 20 urological, gastrointestinal, reproductive, gynecological, or
- 21 sexual health, that are performed to measure a patient's
- 22 temperature, or that are performed for the purpose of rectally
- 23 administering a drug or medicine. In creating the document
- 24 described in this subsection, the board shall consult with
- 25 appropriate professional associations and other interested
- 26 stakeholders.
- 27 (2) The board shall make the document required under
- 28 subsection (1) publicly available by 1 year after the effective
- 29 date of the amendatory act that added this section.

- Sec. 17529. (1) The board shall create a document that 1 2 provides guidance to licensees on generally accepted standards of 3 medical practice for medical services involving vaginal or anal 4 penetration, including internal pelvic floor treatments but 5 excluding medical services that primarily relate to a patient's 6 urological, gastrointestinal, reproductive, gynecological, or 7 sexual health, that are performed to measure a patient's 8 temperature, or that are performed for the purpose of rectally 9 administering a drug or medicine. In creating the document 10 described in this subsection, the board shall consult with
- 13 (2) The board shall make the document required under 14 subsection (1) publicly available by 1 year after the effective 15 date of the amendatory act that added this section.

appropriate professional associations and other interested

- Sec. 17829. (1) The board shall create a document that provides guidance to licensees on generally accepted standards of practice for services involving vaginal or anal penetration, including internal pelvic floor treatments. In creating the document described in this subsection, the board shall consult with appropriate professional associations and other interested stakeholders.
- (2) The board shall make the document required under subsection (1) publicly available by 1 year after the effective date of the amendatory act that added this section.
- Sec. 17909. (1) The board shall create a document that
  provides guidance to licensees on generally accepted standards of
  practice for services involving vaginal or anal penetration,
  including internal pelvic floor treatments. In creating the

11

12

1617

18

19

20

21

22

23

24

25

stakeholders.

- 1 document described in this subsection, the board shall consult with
- 2 appropriate professional associations and other interested
- 3 stakeholders.
- 4 (2) The board shall make the document required under 5 subsection (1) publicly available by 1 year after the effective
- 6 date of the amendatory act that added this section.
- 7 Sec. 20175. (1) A health facility or agency shall keep and
- 8 maintain a record for each patient, including a full and complete
- 9 record of tests and examinations performed, observations made,
- 10 treatments provided, and in the case of a hospital, the purpose of
- 11 hospitalization. If a medical service provided to a patient on or
- 12 after the effective date of the amendatory act that added this
- 13 sentence involves the vaginal or anal penetration of the patient, a
- 14 health facility or agency shall ensure that the patient's medical
- 15 record expressly states that vaginal or anal penetration was
- 16 performed unless the medical service meets any of the circumstances
- 17 described in subsection (2)(b)(i)(A), (B), (C), or (D).
- 18 (2) Unless a longer retention period is otherwise required
- 19 under federal or state laws or regulations or by generally accepted
- 20 standards of medical practice, a health facility or agency shall
- 21 keep and retain each record for required under subsection (1) as
- 22 follows:
- 23 (a) Except as otherwise provided in subdivision (b), for a
- 24 minimum of 7 years from the date of service to which the record
- 25 pertains.
- 26 (b) For a minimum of 15 years from the date of service to
- 27 which the record pertains if the service is performed on or after
- 28 the effective date of the amendatory act that added this
- 29 subdivision and 1 of the following applies:

- 1 (i) The record includes a medical service involving the vaginal 2 or anal penetration of a patient. This subparagraph does not apply 3 to a record for any of the following:
- 4 (A) A medical service that primarily relates to the patient's urological, gastrointestinal, reproductive, gynecological, or sexual health.
  - (B) A medical service that is necessary and associated with or incident to a medical emergency. As used in this sub-subparagraph, "medical emergency" means a circumstance that, in the good-faith medical judgment of a health professional who is licensed under article 15, creates an immediate threat of serious risk to the life or physical health of the patient.
- 13 (C) A medical service performed for the purpose of rectally 14 administering a drug or medicine.
- 15 (D) A medical service performed to measure a patient's 16 temperature.
- 17 (ii) The patient has filed a complaint with the health facility 18 or agency alleging sexual misconduct by an individual who is employed by, under contract to, or granted privileges by the health 19 20 facility or agency. As used in this subparagraph, "sexual 21 misconduct" means the conduct described in section 90, 136, 145a, 22 145b, 145c, 520b, 520c, 520d, 520e, or 520g of the Michigan penal code, 1931 PA 328, MCL 750.90, 750.136, 750.145a, 750.145b, 23 24 750.145c, 750.520b, 750.520c, 750.520d, 750.520e, or 750.520g,
- 25 regardless of whether the conduct resulted in a criminal
- regardless of whether the conduct resulted in a criminal conviction.
- 27 (3) A health facility or agency shall maintain the records
  28 required under subsection (1) in such a manner as to protect their
  29 integrity, to ensure their confidentiality and proper use, and to

9

10

11

- ensure their accessibility and availability to each patient or his
   or her the patient's authorized representative as required by law.
- (4) A Except as otherwise provided in subsection (6), a health
  facility or agency may destroy a record required under subsection
  (1) that is less than 7 years old only if both of the following are
  satisfied:
  - (a) The health facility or agency sends a written notice to the patient at the last known address of that patient informing the patient that the record is about to be destroyed, offering the patient the opportunity to request a copy of that record, and requesting the patient's written authorization to destroy the record.
  - (b) The health facility or agency receives written authorization from the patient or his or her the patient's authorized representative agreeing to the destruction of the record.
    - (5) Except as otherwise provided under federal or state laws and regulations, records required to be maintained under this subsection (1), other than a record described in subsection (2) (b), may be destroyed or otherwise disposed of after being maintained for 7 years, and records described in subsection (2) (b) may be destroyed or otherwise disposed of after being maintained for 15 years. If records maintained in accordance with this section are subsequently destroyed or otherwise disposed of, those records shall must be shredded, incinerated, electronically deleted, or otherwise disposed of in a manner that ensures continued confidentiality of the patient's health care information and any other personal information relating to the patient. If records are not destroyed or otherwise disposed of as provided under this

- 1 subsection or subsection (4), the department may take action,
- 2 including, but not limited to, contracting for or making other
- 3 arrangements to ensure that those records and any other
- 4 confidential identifying information related to the patient are
- 5 properly destroyed or disposed of to protect the confidentiality of
- 6 patient's health care information and any other personal
- 7 information relating to the patient. Before the department takes
- 8 action in accordance with this subsection, the department, if able
- 9 to identify the health facility or agency responsible for the
- 10 improper destruction or disposal of the medical records at issue,
- 11 shall send a written notice to that health facility or agency at
- 12 the last known address on file with the department and provide the
- 13 health facility or agency with an opportunity to properly destroy
- 14 or dispose of those medical records as required under this
- 15 subsection or subsection (4), unless a delay in the proper
- 16 destruction or disposal may compromise the patient's
- 17 confidentiality. The department may assess the health facility or
- 18 agency with the costs incurred by the department to enforce this
- 19 subsection. In addition to the sanctions set forth in section
- 20 20165, a hospital that fails to comply with this subsection or
- 21 subsection (4) is subject to an administrative fine of \$10,000.00.
- 22 (6) A health facility or agency shall only destroy a record
- 23 described in subsection (2)(b) in accordance with subsection (5).
- 24 (7) (2) A hospital shall take precautions to assure ensure
- 25 that the records required by under subsection (1) are not
- 26 wrongfully altered or destroyed. A hospital that fails to comply
- 27 with this subsection is subject to an administrative fine of
- 28 \$10,000.00.
- 29 (8) (3) Unless otherwise provided by law, the licensing and

- 1 certification records required by this article are public records.
- 6 authorized by law.
- 7 (10) (5)—A health facility or agency that employs, contracts
  8 with, or grants privileges to a health professional licensed or
  9 registered under article 15 shall report the following to the
  10 department not more than 30 days after it occurs:
- 11 (a) Disciplinary action taken by the health facility or agency 12 against a health professional licensed or registered under article 15 based on the licensee's or registrant's professional competence, 13 14 disciplinary action that results in a change of employment status, 15 or disciplinary action based on conduct that adversely affects the 16 licensee's or registrant's clinical privileges for a period of more 17 than 15 days. As used in this subdivision, "adversely affects" means the reduction, restriction, suspension, revocation, denial, 18 19 or failure to renew the clinical privileges of a licensee or 20 registrant by a health facility or agency.
- (b) Restriction or acceptance of the surrender of the clinical
  privileges of a licensee or registrant under either of the
  following circumstances:
  - (i) The licensee or registrant is under investigation by the health facility or agency.
- (ii) There is an agreement in which the health facility or
  agency agrees not to conduct an investigation into the licensee's
  or registrant's alleged professional incompetence or improper
  professional conduct.

- (c) A case in which a health professional resigns or
   terminates a contract or whose contract is not renewed instead of
   the health facility or agency taking disciplinary action against
   the health professional.
- 5 (11) (6)—Upon request by another health facility or agency 6 seeking a reference for purposes of changing or granting staff 7 privileges, credentials, or employment, a health facility or agency 8 that employs, contracts with, or grants privileges to health 9 professionals licensed or registered under article 15 shall notify 10 the requesting health facility or agency of any disciplinary or 11 other action reportable under subsection (5) (10) that it has taken against a health professional licensed or registered under article 12 15 and employed by, under contract to, or granted privileges by the 13 14 health facility or agency.
- 15 (12) (7) For the purpose of reporting disciplinary actions
  16 under this section, a health facility or agency shall include only
  17 the following in the information provided:
- (a) The name of the licensee or registrant against whomdisciplinary action has been taken.
  - (b) A description of the disciplinary action taken.
  - (c) The specific grounds for the disciplinary action taken.
  - (d) The date of the incident that is the basis for the disciplinary action.
  - (13) (8)—The records, data, and knowledge collected for or by individuals or committees assigned a professional review function in a health facility or agency, or an institution of higher education in this state that has colleges of osteopathic and human medicine, are confidential, shall—must be used only for the purposes provided in this article, are not public records, and are

21

2223

2425

2627

- 1 not subject to court subpoena.
- 2 (14) This section does not apply to a health facility or 3 agency that is a health maintenance organization.
- Sec. 20175a. (1) If a health facility or agency is unable to comply with section 20175, the health facility or agency shall employ or contract, arrange, or enter into an agreement with another health facility or agency or a medical records company to protect, maintain, and provide access to those records required under section 20175(1).
- 10 (2) If a health facility or agency closes or otherwise ceases
  11 operation, the health facility or agency shall not abandon the
  12 records required to be maintained under section 20175(1) and shall
  13 send a written notice to the department that specifies who will
  14 have custody of the medical records and how a patient may request
  15 access to or copies of his or her the patient's medical records and
  16 shall do either of the following:
- 17 (a) Transfer the records required under section 20175(1) to
  18 any of the following:
- 19 (i) A successor health facility or agency.
- 20 (ii) If designated by the patient or his or her the patient's
  21 authorized representative, to the patient or a specific health
  22 facility or agency or a health care provider licensed or registered
  23 under article 15.
  - (iii) A health facility or agency or a medical records company with which the health facility or agency had contracted or entered into an agreement to protect, maintain, and provide access to those records required under section 20175(1).
- 28 (b) In Except as otherwise provided in section 20175(6) and in accordance with section 20175(1) to (5), as long as the health



25

- 1 facility or agency sends a written notice to the last known address
- 2 of each patient for whom he or she the health facility or agency
- 3 has provided medical services and receives written authorization
- 4 from the patient or his or her the patient's authorized
- 5 representative, destroy the records required under section
- 6 20175(1). The notice shall must provide the patient with 30 days to
- 7 request a copy of his or her record the patient's records or to
- 8 designate where he or she the patient would like his or her the
- 9 patient's medical records transferred and shall must request from
- 10 the patient within 30 days written authorization for the
- 11 destruction of his or her the patient's medical records. If Except
- 12 as otherwise provided in section 20175(6), if the patient fails to
- 13 request a copy or transfer of his or her the patient's medical
- 14 records or to provide the health facility or agency with written
- 15 authorization for the destruction, then the health facility or
- 16 agency shall not destroy those records that are less than 7 years
- 17 old but may destroy, in accordance with section 20175(1) to (5),
- 18 those that are 7 years old or older.
- 19 (3) Nothing in this section shall be conducted to create or
- 20 change the ownership rights to any medical records.
- 21 (4) A person that fails to comply with this section is subject
- 22 to an administrative fine of not more than \$10,000.00 if the
- 23 failure was the result of gross negligence or willful and wanton
- 24 misconduct.
- 25 (5) As used in this section:
- (a) "Medical record" or "record" means information, oral or
- 27 recorded in any form or medium, that pertains to a patient's health
- 28 care, medical history, diagnosis, prognosis, or medical condition
- 29 and that is maintained by a licensee in the process of providing

- 1 medical services.
- 2 (b) "Medical records company" means a person who contracts for
- 3 or agrees to protect, maintain, and provide access to medical
- 4 records for a health facility or agency in accordance with section
- **5** 20175.
- 6 (c) "Patient" means an individual who receives or has received
- 7 health care from a health care provider or health facility or
- 8 agency. Patient includes a guardian, if appointed, and a parent,
- 9 quardian, or person acting in loco parentis, if the individual is a
- 10 minor, unless the minor lawfully obtained health care without the
- 11 consent or notification of a parent, quardian, or other person
- 12 acting in loco parentis, in which case the minor has the exclusive
- 13 right to exercise the rights of a patient under this section with
- 14 respect to his or her the minor's medical records relating to that
- **15** care.
- 16 (6) This section does not apply to a health facility or agency
- 17 that is a health maintenance organization.
- 18 Sec. 20175b. (1) Except as otherwise provided in subsections
- 19 (2) and (3), a person that violates section 20175(1) regarding the
- 20 documentation of a medical service involving vaginal or anal
- 21 penetration in a patient's medical record is subject to an
- 22 administrative fine or guilty of a crime as follows:
- 23 (a) For a first violation, an administrative fine of not more
- 24 than \$2,500.00.
- 25 (b) For a second violation, an administrative fine of not more
- 26 than \$5,000.00.
- 27 (c) For a third or subsequent violation, a misdemeanor
- 28 punishable by imprisonment for not more than 180 days or a fine of
- 29 not more than \$7,500.00, or both.



- 1 (2) A person that violates section 20175(1) regarding the 2 documentation of a medical service involving vaginal or anal 3 penetration in a patient's medical record is guilty of a 4 misdemeanor punishable by imprisonment for not more than 180 days 5 or a fine of \$10,000.00, or both, if the violation was the result 6 of gross negligence.
  - (3) A person that intentionally violates section 20175(1) regarding the documentation of a medical service involving vaginal or anal penetration in a patient's medical record is guilty of a felony punishable by imprisonment for not more than 2 years or a fine of not more than \$10,000.00, or both.
  - (4) This section does not limit any other sanction the department is authorized to impose under section 20165.
  - Sec. 20199. (1) Except as **otherwise** provided in subsection (2) or section 20142, or this article, a person who that violates this article or a rule promulgated or an order issued under this article is guilty of a misdemeanor, punishable by **a** fine of not more than \$1,000.00 for each day the violation continues or, in case of a violation of sections 20551 to 20554, a fine of not more than \$1,000.00 for each occurrence.
- 21 (2) A person who that violates sections 20181 to 20184 is
  22 guilty of a misdemeanor punishable by imprisonment for not more
  23 than 6 months or a fine of not more than \$2,000.00, or both.
- Enacting section 1. This amendatory act takes effect 90 days after the date it is enacted into law.

8

9

10

11

12

13 14

15

16

1718