CHAPTER I GENERAL PROVISIONS

Article 1 (Purpose)
The purpose of this Act is to provide for the matters necessary for medical services to the people in order to ensure that all citizens can enjoy benefits of high-quality medical treatment and thereby to protect and improve public health.

Article 2 (Medical Persons)
(1) The term "medical person" as used in this Act refers to a medical doctor, a dentist, an oriental medical doctor, a midwife or a nurse who holds a license granted by the Minister of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) By type, a medical person has the mission to seek the improvement of public health and contribute to help citizens enjoy healthy lives by performing his/her mission specified in the following subparagraphs, respectively:
1. A medical doctor's mission is to administer medical treatment and to provide guidance for health;
2. A dentist's mission is to administer dental treatment and provide guidance for oral hygiene;
3. An oriental medical doctor's mission is to administer oriental medical treatment and provide guidance for health based on oriental medicine;
4. A midwife's mission is to assist childbirth, to take care of pregnant women, women at childbirth, women in puerperium and newborn babies and to provide guidance for their health;
5. A nurse's mission is to nurse injured or sick people, or postnatal women, to assist in medical treatment and to conduct health activities as prescribed by Presidential Decree.

Article 3 (Medical Institution)
(1) The term "medical institution" as used in this Act means a place where a medical person practices medical service or midwifery service (hereinafter referred to as "medical service") for the general public or multiple specific people.

(2) Medical institutions shall be classified as described in following subparagraphs: <Amended by Act No. 9386, Jan. 30, 2009>
1. A clinic-level medical institution: A medical institution in which a doctor, dentist or oriental medical doctor provides
his/her medical services primarily to outpatients, and the kinds of which are as listed below:

(a) A medical clinic;
(b) A dental clinic;
(c) An oriental medical clinic;

2. A midwifery clinic: A medical institution in which a midwife assists childbirth and provides health activities, education and consultation to pregnant women, women at childbirth, women in puerperium and newborn babies;

3. A hospital-level medical institution: A medical institution in which a doctor, dentist or oriental medical doctor provides his/her medical services primarily to inpatients, and the kinds of which are as listed below:

(a) A hospital;
(b) A dental hospital;
(c) An oriental medical hospital;

(d) Convalesscent hospital (including a special hospital for the aged pursuant to Article 34(1) 3 of the Welfare of the Aged Act, a mental hospital among mental institutions pursuant to subparagraph 3 of Article 3 of the Mental Health Act, and medical rehabilitation facilities pursuant to Article 58(1) 2 of the Welfare of Disabled Persons Act which meets requirements under Article 3-2; hereinafter the same shall apply.);

(e) A general hospital.

(3) The Minister of Health and Welfare may, if deemed necessary for health and medical policies, prescribe and publicly notify the standard services to be rendered by each kind of medical institutions as set for in paragraph (2) 1 through 3. <Amended by Act No. 9386, Jan. 30, 2009; Act No. 9932, Jan. 18, 2010>

(4) through (8) Deleted. <by Act No. 9386, Jan. 30, 2009>

Article 3-2 (Hospitals, etc.)

A hospital, dental hospital, oriental medical hospital, and convalesscent hospital (hereinafter referred to as "hospitals, etc") shall be furnished with not less than 30 patient beds (only applicable to a hospital and oriental medical hospital) or patient beds for convalesscence (only applicable to a convalesscent hospital, and refer to the patient beds furnished for the purpose of providing medical services to long-stay patients.

[This Article Newly Inserted by Act No. 9386, Jan. 30, 2009]

Article 3-3 (General Hospitals)

(1) A general hospital shall satisfy the requirements set forth in the following subparagraphs:

1. Furnished with not less than 100 patient beds;

2. A general hospital with not less than 100, but not more than 300 patient beds shall have seven or more specialized departments including three specialized departments from among internal medicine, general surgery, pediatrics, and obstetrics and gynecology, plus diagnostic radiology, anesthesia and pain medicine, and diagnostic laboratory medicine or pathology, and shall have medical specialists exclusively dedicated to each and every specialized department;

3. A general hospital with more than 300 patient beds shall have nine or more specialized departments including internal medicine, general surgery, pediatrics, obstetrics and gynecology, diagnostic radiology, anesthesia and pain medicine, diagnostic laboratory medicine or pathology, psychiatry, and dental surgery, and shall have medical specialists exclusively dedicated to each and every specialized department.

(2) A general hospital may establish and operate additional specialized departments, if necessary, in addition to the specialized departments under paragraph (1) 2 or 3 (hereinafter referred to as "essential specialized departments" in
this paragraph). In such cases, medical specialists who are not exclusively dedicated to the medical institution in question may be posted to the special departments, other than the essential specialized departments.

[This Article Newly Inserted by Act No. 9386, Jan. 30, 2009]

Article 3-4 (Designation of Superior General Hospitals)

(1) The Minister of Health and Welfare may designate a general hospital specialized in providing medical services requiring high level of expertise for treating serious diseases as a superior general hospital, from among general hospitals satisfying the requirements set for in the following subparagraphs: <Amended by Act No. 9932, Jan. 18, 2010>

1. To have not less than 20 specialized departments prescribed by Ordinance of the Ministry of Health and Welfare, and have medical specialists exclusively dedicated to each and every specialized department;

2. To be an institution which provides training to a person who intends to become a medical specialist under Article 77 (1);

3. To have human resources, facilities, equipment, etc. prescribed by Ordinance of the Ministry of Health and Welfare;

4. The distribution rate of patients by disease group shall satisfy the standards prescribed by Ordinance of the Ministry of Health and Welfare.

(2) The Minister of Health and Welfare shall evaluate matters under each subparagraph of paragraph (1), expertise, and any other relevant factors in making designation under paragraph (1). <Amended by Act No. 9932, Jan. 18, 2010>

(3) In respect of a general hospital designated as the superior general hospital under paragraph (1), the Minister of Health and Welfare may make re-designation or revoke the designation thereof by conducting an evaluation under paragraph (2) every three years. <Amended by Act No. 9932, Jan. 18, 2010>

(4) The Minister of Health and Welfare may entrust a relevant specialized institution or association with the evaluation duties under paragraphs (2) and (3). <Amended by Act No. 9932, Jan. 18, 2010>

(5) Necessary matters concerning the designation of superior general hospitals, standards for and procedures of re-designation thereof, entrusting procedures of evaluation duties, etc. shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 9932, Jan. 18, 2010>

[This Article Newly Inserted by Act No. 9386, Jan. 30, 2009]

Article 3-5 (Designation of Specialized Hospitals)

(1) The Minister of Health and Welfare may designate a hospital providing medical services requiring high level of expertise in practicing a specific specialized department or for treating a specific disease as a specialized hospital, from among the hospital-level medical institutions. <Amended by Act No. 9932, Jan. 18, 2010>

(2) A specialized hospital under paragraph (1) shall satisfy the requirements set for in the following subparagraphs: <Amended by Act No. 9932, Jan. 18, 2010>

1. The distribution rate, etc. of patients by specific disease and specialized department shall amount to the standards prescribed by Ordinance of the Ministry of Health and Welfare;

2. To have specialized departments not less than the number prescribed by Ordinance of the Ministry of Health and Welfare, and have medical specialists exclusively dedicated to each and every specialized department.

(3) The Minister of Health and Welfare shall evaluate matters under each subparagraph of paragraph (2), difficulty of medical treatment, and any other relevant factors in designating any hospital as a specialized hospital under paragraph (1). <Amended by Act No. 9932, Jan. 18, 2010>

(4) In respect of a medical institution designated as a specialized hospital under paragraph (1), the Minister of Health and Welfare may make re-designation or revoke the designation thereof by conducting an evaluation under paragraph (3)
every three years. <Amended by Act No. 9932, Jan. 18, 2010>

(5) The Minister of Health and Welfare may entrust a relevant specialized institution or association with the evaluation duties under paragraphs (3) and (4). <Amended by Act No. 9932, Jan. 18, 2010>

(6) Necessary matters concerning the designation of specialized hospitals, standards for and procedures of re-designation thereof, entrusting procedures of evaluation duties, etc. shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 9932, Jan. 18, 2010>

[This Article Newly Inserted by Act No. 9386, Jan. 30, 2009][<Enforcement Date: Jan. 31, 2011>]

CHAPTER II MEDICAL PERSONS

SECTION 1 Qualification and Licenses

Article 4 (Duties of Medical Persons and Heads of Medical Institutions)

A medical person or the head of each medical institution shall strive to provide patients with the best medical services by improving the quality of medical treatment, preventing hazards of hospital infections and developing medical technology.

Article 5 (Licenses for Medical Doctors, Dentists or Oriental Medical Doctors)

(1) A person who intends to become a medical doctor, dentist or oriental medical doctor shall meet qualifications set forth in any of the following subparagraphs, and be licensed by the Minister of Health and Welfare after passing the relevant national examination under Article 9: <Amended by Act No. 9932, Jan. 18, 2010>

1. A bachelor's degree holder who has graduated from a university or college, with a major in medical science, dentistry or oriental medical science;
2. A master's or a doctor's degree holder who has graduated from a professional graduate school, such as medical school, dental school or oriental medical school;
3. A person who has graduated from a foreign school, which is equivalent to any one set forth in subparagraph 1 or 2 and is recognized by the Minister of Health and Welfare, has been licensed as a medical doctor, dentist or oriental medical doctor by the competent foreign authority and has passed the relevant preliminary exam under Article 9.

(2) A person who is expected to receive the relevant degree within six months from a university, college or professional graduate school with a major in medical science, dentistry or oriental medical science, shall be deemed qualified, as prescribed by paragraph (1)1 and 2: Provided, That a license shall be granted only after graduating and receiving such degree at the expected date of graduation.

[This Article Wholly Amended by Act No. 9135, Oct. 14, 2008]

Article 6 (Licenses for Midwives)

A person who intends to become a midwife shall meet the qualification set forth in any of the following subparagraphs, and shall be licensed by the Minister of Health and Welfare after passing the national examination for midwife under Article 9: <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

1. A holder of nurse license, who has finished one-year midwifery training course at a medical institution recognized by the Minister of Health and Welfare;
2. A person who holds a midwife license issued by the competent foreign authority recognized by the Minister of Health and Welfare.

Article 7 (Licenses for Nurses)
A person who intends to become a nurse shall meet the qualification set forth in any of the following subparagraphs, and shall be licensed by the Minister of Health and Welfare after passing the national examination for nurse under Article 9: <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

1. A person who has graduated from a university, college or junior college (including a former vocational school or nursing school under the old system) majoring in nursing;

2. A person who has graduated from a foreign school, which falls under subparagraph 1 and is recognized by the Minister of Health and Welfare, and has been licensed by the competent foreign authority.

**Article 8 (Grounds for Disqualification)**

A person who falls under any of the following subparagraphs shall not be qualified as a medical person: <Amended by Act No. 8651, Oct. 17, 2007>

1. A mentally ill person under subparagraph 1 of Article 3 of the Mental Health Act: Provided, That in cases of a person who is acknowledged appropriate as a medical person by a medical specialist, this shall not apply.

2. An addict to narcotics, marijuana or any psychotropic drugs;

3. An incompetent or a quasi-incompetent person;

4. A person in whose case, the execution of a sentence is not completed or the decision not to execute such sentence is not yet finalized after being sentenced to imprisonment without prison labor or a heavier punishment due to the violation of this Act, or Articles 233, 234, 269, 270, 317 (1), or 347 (applicable only to cases of deceiving a patient or institution or organization responsible for payment of medical expenses by claiming medical expenses by false) of the *Criminal Act*, the *Act on Special Measures for the Control of Public Health Crimes*, the *Regional Public Health Act*, the *Prevention of Acquired Immunodeficiency Syndrome Act*, the *Emergency Medical Service Act*, the Act on the Special Measures for Public Health and Medical Services in Agricultural and Fishing Villages, etc., the *Anatomy and Preservation of Corpses Act*, the *Blood Management Act*, the *Act on the Control of Narcotics, etc.*, the *Pharmaceutical Affairs Act*, the *Mother and Child Health Act*, or any other Acts and subordinate statutes governing medical affairs specified by Presidential Decree.

**Article 9 (National Examinations, etc.)**

(1) The national examination for medical doctors, dentists, oriental medical doctors, midwives or nurses, and the preliminary examination for medical doctors, dentists or oriental medical doctors (hereinafter referred to as "national examinations, etc") shall be conducted each year by the Minister of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) The Minister of Health and Welfare may entrust the management of the national examinations, etc. to a specialized organization recognized as competent for the management of such examinations, as prescribed by Presidential Decree. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(3) The Minister of Health and Welfare may, when entrusting the management of the national examinations, etc. pursuant to paragraph (2), subsidize the budget necessary for such management. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(4) The matters necessary for the national examinations, etc. shall be prescribed by Presidential Decree.

**Article 10 (Restrictions on Eligibility for Examinations)**

(1) A person who falls under any of the subparagraphs of Article 8 shall not be eligible for taking any national examinations, etc. <Amended by Act No. 9386, Jan. 30, 2009>

(2) A person, who takes any national examinations, etc. by wrongful means, or who commits cheating shall be suspended from taking the examination, or his/her passing the examination shall be declared null and void.
(3) A person, who has been suspended from taking an examination, or whose passing an examination has been declared null and void pursuant to paragraph (2), shall not be eligible for taking the national examination, etc. conducted twice consecutively thereafter.

Article 11 (Conditions and Registration of License)

(1) In granting a license under any of Articles 5 through 7, the Minister of Health and Welfare may, if deemed necessary for policies on public health and medical services, put a condition that requires working in specially designated areas or engaging in specially designated duties for a certain predetermined term, not exceeding three years. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) The Minister of Health and Welfare shall, whenever granting a license under any of Articles 5 through 7, enter the details of the license in a register prior to issuing a license certificate. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(3) A register under paragraph (2) shall be prepared and kept by all types of medical persons.

(4) The matters necessary for the registration of licenses and license certificates shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

Article 12 (Protection of Medical Techniques, etc.)

(1) Except as otherwise provided for in this Act or any other Acts and subordinate statutes, no one may interfere with medical practices, including medical treatment, midwifery and nursing (hereinafter referred to as "medical practice").

(2) No person may destroy or damage, or aid or abet any other person to destroy or damage any medical facility, instrument, medicine or any other equipment in a medical institution, or occupy a medical institution to interfere with its medical services.

Article 13 (Prohibition of Seizure of Medical Instruments or Materials)

Instruments, medicines, and other facilities and materials necessary for medical service provided by a medical person shall not be subject to seizure.

Article 14 (Preferential Supply of Instruments, etc.)

(1) Each medical person shall be entitled to preferential supply of instruments, medicines, and other facilities and materials necessary for medical practice.

(2) Each medical person shall also have the same right as the one under paragraph (1) also to all materials, efforts or means of transportation incidental to rights set forth in paragraph (1).

Article 15 (Prohibition, etc. of Refusal to Give Medical Examination or Treatment)

(1) A medical person may not, upon receiving a request for medical treatment or assistance in childbirth, refuse to render his/her service without any justifiable reason.

(2) Each medical person shall give the best treatment to any emergency patient in compliance with the Emergency Medical Service Act.

Article 16 (Handling of Laundry)

(1) Any person, other than medical persons, medical institutions or persons who have reported their business to the head of a SilGunGu (referring to the head of an autonomous Gu; hereinafter the same shall apply) may not handle laundry from any medical institution.

(2) Each person, who handles laundry under paragraph (1), shall keep, carry and dispose of it in good sanitary conditions
(3) Necessary matters concerning the standards of facilities and equipment for handling laundry under paragraph (1), procedures for reporting business, guidance and supervision and other matters necessary for management and control shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

Article 17 (Medical Certificate, etc.)

(1) No one may prepare and issue or dispatch (limited to an electronic prescription) a medical certificate, a report or certificate of postmortem examination, or a prescription (including a medical doctor's or dentist's prescription electronically prepared with a digital signature therein as defined in the Digital Signature Act (hereinafter referred to as "electronic prescription"); hereinafter the same shall apply) to a patient (where a patient has died, referring to his/her spouse, one of his/her lineal ascendants or descendants or one of his/her spouse's lineal ascendants) or a public prosecutor in a district public prosecutors' office (limited to a postmortem examination report) who conducts a postmortem examination pursuant to Article 222 (1) of the Criminal Procedure Act, unless he/she is the medical doctor, dentist or oriental medical doctor, who engages in medical service and has given the medical treatment or conducted the postmortem examinations by him/herself (hereafter only in cases of a postmortem examination report, including medical doctors who work for any government agency responsible for postmortem examination in this paragraph): Provided, That such certificate or report may be issued for a patient without giving any other medical treatment, if the patient has died within 48 hours after his/her last medical treatment, while if the medical doctor, dentist or oriental medical doctor who has examined a patient or conducted a postmortem examination of the dead patient is unable to issue such certificate or report due to an inevitable cause or event, any other medical doctor, dentist or oriental medical doctor who works for the same medical institution, may issue such certificate or report based on the medical records of the patient. <Amended by Act No. 9386, Jan. 30, 2009>

(2) No one may issue a certificate of birth, death or stillbirth, unless he/she is a medical doctor, oriental medical doctor or midwife who engages in the medical service and has assisted the childbirth in person: Provided, That if a medical doctor, oriental medical doctor, or midwife who has assisted childbirth is unable to issue a certificate due to an inevitable ground or event, any other medical doctor, oriental medical doctor or midwife who works for the same medical institution may issue a certificate based on the medical records, etc.

(3) A medical doctor, dentist or oriental medical doctor may not, upon receiving a request for issuing a medical certificate or a report or certificate of postmortem examination certificate concerning the person whom he/she examined, refuse the request without a justifiable reason.

(4) A medical doctor, oriental medical doctor or midwife may not, upon receiving a request for issuing a certificate of birth, death or stillbirth in relation to his/her assistance in childbirth, refuse the request without a justifiable reason.

(5) The forms of a medical certificate or certificate under paragraphs (1) through (4), matters to be entered thereon, and other necessary matters shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Newly Inserted by Act No. 8559, Jul. 27, 2007; Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

Article 18 (Preparation and Issuance of Medical Prescriptions)

(1) Each medical doctor or dentist shall, if considered necessary to administer medicine to a patient, issue or dispatch (applicable only to an electronic prescription) a prescription to a patient, as prescribed by Ordinance of the Ministry of Health and Welfare, unless he/she is allowed to prepare medicine by himself/herself pursuant to the Pharmaceutical Affairs Act. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) The form of prescription under paragraph (1), the mandatory descriptions therein, the preservation thereof, and other necessary matters shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852,
(3) No person may trace, leak, alter or mutilate personal information stored in an electronic prescription without any justifiable reason.

(4) A medical doctor or dentist who has issued a medical prescription (including an oriental medical doctor who has issued a medical prescription) under paragraph (1) shall promptly respond to pharmacists or oriental pharmacists who have raised a question under Article 26 (2) of the Pharmaceutical Affairs Act: Provided, That where he/she is unable to respond to the questions of the pharmacists or oriental pharmacists due to a circumstance falling under any of the following subparagraphs, he shall immediately respond to them when such cause ceases to exist: <Newly Inserted by Act No. 8559, Jul. 27, 2007>

1. Where he is giving medical treatment to an emergency patient under subparagraph 1 of Article 2 of the Emergency Medical Service Act;
2. Where he is performing a surgery or treating a patient;
3. Where any other justifiable reasons, which prevent him from responding to them, exist.

**Article 19 (Prohibition of Disclosure of Confidential Information)**

Except otherwise as provided by this Act or other Acts and subordinate statutes, a medical person shall not divulge or disclose any person's confidential information he/she becomes aware of in the course of performing medical treatment, assistance in childbirth, or nursing.

**Article 20 (Prohibition of Fetal Gender Prediction, etc.)**

1. Any medical person shall not conduct a diagnosis or examination of a pregnant woman for the purpose of predicting the gender of a baby, or help any other person to commit such act for the same purpose.

2. Any medical person shall not inform any pregnant woman, her family member or any other person of the gender of a fetus he/she becomes aware of in the course of performing a diagnosis or examination of the fetus or pregnant woman before 32 weeks of pregnancy. <Amended by Act No. 9906, Dec. 31, 2009>

**Article 21 (Inspection of Records, etc.)**

1. No medical person or any person working for a medical institution may release the details of a patient's records or make them accessible, such as providing a copy thereof, to any person, other than the patient. <Amended by Act No. 9386, Jan. 30, 2009>

2. Notwithstanding paragraph (1), each medical person or any person working for a medical institution shall release the details of a patient's records or make them accessible, such as providing a copy thereof, in any of the following cases: Provided, That where a medical doctor, dentist or oriental medical doctor deems it necessary to treat the patient, this shall not apply: <Amended by Act No. 9386, Jan. 30, 2009; Act No. 9932, Jan. 18, 2010>

1. Where a spouse, lineal ascendant or descendant of a patient, or a lineal ascendant of the spouse makes a request meeting the requirements prescribed by Ordinance of the Ministry of Health and Welfare, such as accompanying the consent of the patient in question, a certificate proving kinship and any other documents;
2. Where the agent designated by a patient makes a request meeting the requirements prescribed by Ordinance of the Ministry of Health and Welfare, such as accompanying the consent of the patient in question and a certificate proving that the agent has representative power;
3. Where a spouse, lineal ascendant or descendant of a patient, or a lineal ascendant of the spouse makes a request meeting the requirements prescribed by Ordinance of the Ministry of Health and Welfare, such as accompanying a certificate proving that each individual has kinship with the patient as it becomes impossible to obtain the patient's consent due to his/her death, unconsciousness, etc.
4. Where the details of a patient’s record are provided to the National Health Insurance Corporation or the Health Insurance Review and Assessment Service for the purposes of the assessment, payment, confirmation of entitlement to and post-management of benefit costs, the evaluation of the appropriateness of and increased/reduced payment, etc. of medical care benefits, pursuant to Articles 13, 43, 43-2 and 56 of the National Health Insurance Act;

5. Where the details of a patient’s record are provided to an assisting agency (each Si/Gun/Gu), the National Health Insurance Corporation or the Health Insurance Review and Assessment Service for the affairs concerning medical care benefits, such as the confirmation of the beneficiaries of medical care benefits, the assessment, payment, post-management, etc. of benefit costs, pursuant to Articles 5, 11, 11-3 and 33 of the Medical Care Assistance Act;

6. Cases prescribed by Articles 106, 215 or 218 of the Criminal Procedure Act;

7. Where the presentation of a document is ordered, pursuant to Article 347 of the Civil Procedure Act;

8. Where the Korea Workers’ Compensation and Welfare Service requests a medical institution (including a doctor), which is specialized in industrial accidents which has examined and treated a worker to whom insurance benefits are paid, to report on or to submit documents concerning the treatment of the worker, or conducts an investigation thereof, pursuant to Article 118 of the Industrial Accident Compensation Insurance Act;

9. Where an insurance company, etc., which has received a claim for medical fees covered by car insurance pursuant to Articles 12 (2) and (14) of the Guarantee of Automobile Accident Compensation Act, requests for the perusal of relevant medical records to the medical institution;

10. Where the director of a regional military manpower office makes requests for the presentation of the medical records and records on medical treatment of a person subject to the draft physical, to the head of a medical institution, as he/she deems it necessary for confirming illness or a mental or physical disability in respect of the draft physical, pursuant to Article 11-2 of the Military Service Act;

11. Where an mutual-aid association requests for the perusal of relevant medical records or the presentation of necessary data to a medical care institution prescribed by Article 40 of the National Health Insurance Act, as it deems it necessary to decide whether to pay the mutual-aid benefits pursuant to Article 42 of the Act on the Prevention of and Compensation for Accidents at School;

12. Where the head of a medical institution sends medical records and clinical opinion to the head of a veterans hospital, pursuant to Article 7 (3) of the Act on Assistance, etc. to Patients Suffering from Actual or Potential Aftereffects of Defoliants.

(3) When a medical person is requested, by another medical person, to check the details of medical records or send his/her opinion, etc, on the treatment progress of a patient pursuant to Article 22 or 23, he/she shall do so with the consent of the patient in question or the guardian of the patient: Provided, That the medical person may do so without the consent of the patient or guardian of the patient, if the patient in question is unconscious or in urgent condition, or it is impossible for him/her to obtain consent due to the absence of a guardian. <Amended by Act No. 9386, Jan. 30, 2009>

(4) Each medical doctor, dentist or oriental medical doctor working at a medical institution keeping medical records or at a public health clinic to which the medical records are transferred shall verify the fact based on the medical records, when he/she is requested to verify the details of the past medical treatment of a patient not examined or treated by himself/herself. <Newly Inserted by Act No. 9386, Jan. 30, 2009>

(5) When a medical person transfers an emergency patient to any other medical institution, he/she shall transfer, without delay, the copies, etc. of medical records prepared at the time of a hospital visit by the patient. <Newly Inserted by Act No. 9386, Jan. 30, 2009>

SECTION 2 Rights and Duties
Article 22 (Medical Records, etc.)

(1) A medical person shall prepare the records of medical treatment, assistance in childbirth, or nursing or other records concerning medical treatment (hereinafter referred to as "medical records, etc") and keep records in details of and sign the matters and opinions relating to his/her medical practice.

(2) Each medical person and founder of each medical institution shall preserve medical records, etc. (including electronic medical records under Article 23 (1); hereinafter the same shall apply in Article 40 (2)) as prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

Article 23 (Electronic Medical Records)

(1) A medical person and the founder of each medical institution may, notwithstanding Article 22, prepare and keep medical records, etc. in the form of an electronic document with a digital signature therein under the Digital Signature Act (hereinafter referred to as "electronic medical records").

(2) A medical person and the founder of each medical institution shall have facilities and equipment required for managing, controlling and preserving electronic medical records safely in compliance with Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(3) No one may leak, alter or destroy any personal information stated in an electronic medical record without any justifiable reason.

Article 23-2 (Prohibition of Gaining Improper Financial Benefits, etc.)

(1) A medical person, founder of a medical institution (including a representative of a corporation, director or other person who engages therein; hereinafter the same shall apply in this Article), and any person working for a medical institution may not receive money, articles, favor, labor, entertainment and other financial benefits (hereinafter referred to as "financial benefits, etc") provided for the promotion of sale, such as induction to select and prescribe drugs, from a person who has obtained permission for items or has filed a report on items under Article 31 of the Pharmaceutical Affairs Act, importer of drugs under Article 42 of the same Act, and drug wholesaler under Article 45 of the same Act: Provided, That this shall not apply to financial benefits, etc. within the limit prescribed by Ordinance of Ministry of Health and Welfare, including the provision of a sample, support for a conference, support for a clinical trial, product showcase, price discount according to price settlement methods and post market surveillance.

(2) A medical person, founder of a medical institution, and any person working for a medical institution may not receive financial benefits, etc. provided for the promotion of sale such as induction to select and use medical appliances from a manufacturer of medical appliances under Article 14 of the Medical Devices Act, an importer of medical appliances under Article 6 of the same Act, a sales business owner of medical appliances under Article 16 of the same Act: Provided, That this shall not apply to financial benefits, etc. within the limit prescribed by Ordinance of Ministry of Health and Welfare, including the provision of a sample.

[This Article Newly Inserted by Act No. 10325, May 27, 2010]

Article 24 (Guidance for Methods of Convalescence)

A medical person shall provide his/her patients or their family with guidance for the method of convalescence or other matters necessary for staying healthy.

Article 25 (Reports)

A medical person shall report the actual state of the medical person and the current status of his/her employment, etc. to the Minister of Health and Welfare, as prescribed by Presidential Decree. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>
Article 26 (Report on Unnatural Death)
A medical doctor, dentist, oriental medical doctor or midwife, who is suspicious of unnatural death upon a postmortem examination on a dead body, shall report to the chief of police station having jurisdiction over the place where the dead body was found or located.

SECTION 3 Restrictions on Medical Practice

Article 27 (Prohibition of Unlicensed Medical Practice, etc.)
(1) Any non-medical person shall not perform medical practice, and even a medical person shall not perform any medical practice other than those licensed: Provided, That a person falling under any of the following subparagraphs may perform medical practice within the extent set by Ordinance of the Ministry of Health and Welfare: <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9386, Jan. 30, 2009; Act No. 9932, Jan. 18, 2010>
1. A person who holds a foreign medical license and stays in Korea for a certain period of time;
2. A person who performs medical practice at a medical college, dental college, college of oriental medicine, graduate medical school, graduate school for dentistry, graduate school for oriental medicine, general hospital, or foreign medical aid institution for voluntary medical service or a research or pilot project;
3. A student majoring in medical science, dentistry, oriental medical science or nursing.
(2) A non-medical person may not use a title of medical doctor, dentist, oriental medical doctor, midwife, nurse, or any other title similar thereto.
(3) No one may introduce, make a referral of or solicit a patient to a medical institution or a medical person for profit, such as exempting or discounting medical expenses to be levied on a patient under the National Health Insurance Act or the Medical Care Assistance Act, offering money, etc. or such or providing transportation to the general public, or instigate any person to do so: Provided, That it is allowed to conduct an act falling under any of the following subparagraphs: <Amended by Act No. 9386, Jan. 30, 2009: Act No. 9932, Jan. 18, 2010>
1. An act to attract a patient by individually obtaining prior approval from the head of the competent Si/Gun/Gu for reasons of economic conditions, etc. of the patient, such as the economic condition of the patient;
2. An act to attract a foreign patient who is neither a policyholder nor dependent pursuant to Article 93 of the National Health Insurance Act (excluding a foreigner who sojourns in the Republic of Korea, as prescribed by Ordinance of the Ministry of Health and Welfare).
(4) Notwithstanding paragraph (3) 2, an insurance company, mutual company, insurance solicitor, insurance agency or certified insurance broker pursuant to Article 2 of the Insurance Business Act shall not conduct an act to attract foreign patients. <Newly Inserted by Act No. 9386, Jan. 30, 2009>

Article 27-2 (Registration, etc. for Attraction of Foreign Patients)
(1) A medical institution which intends to attract foreign patients pursuant to Article 27 (3) 2 shall file registration with the Minister of Health and Welfare satisfying the requirements, as prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 9932, Jan. 18, 2010>
(2) A person who intends to attract foreign patients pursuant to Article 27 (3) 2, except the medical institutions under paragraph (1), shall file registration with the Minister of Health and Welfare satisfying the requirements under any of the following subparagraphs: <Amended by Act No. 9932, Jan. 18, 2010>
1. To be a policyholder of guarantee insurance prescribed by Ordinance of the Ministry of Health and Welfare;
2. To have capital not less than the scale prescribed by Ordinance of the Ministry of Health and Welfare;
3. Other matters prescribed by Ordinance of the Ministry of Health and Welfare for the attraction of foreign patients.
(3) A medical institution registered under paragraph (1), or person registered under paragraph (2) (hereinafter referred to as "person attracting foreign patients") shall report the business performance of the previous year to the Minister of Health and Welfare by the end of March each year, as prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 9932, Jan. 18, 2010>

(4) The Minister of Health and Welfare may revoke the registration thereof, if a medical institution or person attracting foreign patients falls under any of the following cases: <Amended by Act No. 9932, Jan. 18, 2010>

1. Failure to satisfy the registration requirements under paragraph (1) or (2);
2. Conducting an act to attract persons, other than those prescribed in Article 27 (3) 2;
3. Failure to perform a corrective order issued under Article 63.

(5) A superior general hospital among medical institutions under paragraph (1) shall not attract foreign patients in excess of the number of patient beds prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 9932, Jan. 18, 2010>

(6) Necessary matters concerning registration procedures under paragraphs (1) and (2) shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 9932, Jan. 18, 2010> 

[This Article Newly Inserted by Act No. 9386, Jan. 30, 2009]

SECTION 4 Organizations of Medical Persons

Article 28 (Central Associations and Its Branches)

(1) Medical doctors, dentists, oriental medical doctors, midwives or nurses shall establish the medical doctors' association, dentists' association, oriental medical doctors'association, midwives' association, and nurses' association, respectively (hereinafter referred to as "central associations") that has nationwide organizations, as prescribed by Presidential Decree.

(2) The central associations shall be legal entities.

(3) When there are the central associations established and existing pursuant to paragraph (1), a medical person shall automatically become a member of the corresponding central association, and thus shall comply with the articles of association thereof.

(4) As to the matters concerning the central associations except the matters provided for in this Act, the provisions of the Civil Act governing the incorporated associations shall apply mutatis mutandis.

(5) Each central association shall establish its branches in a Special Metropolitan City and each Metropolitan City, a Do and a Special Self-Governing Province (hereinafter referred to as a "City/Do"), and may have sub-branches in each Si/Gun/Gu (referring only to an autonomous Gu; hereinafter the same shall apply), as prescribed by Presidential Decree: Provided, That the establishment of a branch in addition to those specified above, or a branch of the medical doctors' association in a foreign country shall be subject to the approval of the Minister of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(6) Each central association shall, upon the establishment of a branch or sub-branch, submit a report thereon to a Mayor of a Special Metropolitan City or a Metropolitan City, a Do Governor, or a Governor of a Special Self-Governing Province (hereinafter referred to as a "Mayor/Do governor"), or the head of a Si/Gun/Gu without delay.

Article 29 (Permission, etc. for Establishment)

(1) When planning to establish a central association, a representative of the central association shall submit its articles of association and other necessary documents to the Minister of Health and Welfare, as prescribed by Presidential Decree, to obtain permission for the establishment from the Minister. <Amended by Act No. 8852, Feb. 29, 2008; Act
Article 30 (Duty to Cooperate)

(1) A central association shall, upon request from the Minister of Health and Welfare for cooperation to improve medical services and public health, cooperate with the Minister. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) A central association shall implement supplementary training programs as required for improving the qualities of its members, as prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(3) A medical person shall participate in supplementary training programs under paragraph (2).

Article 31 (Mutual Aid Programs)

(1) A central association shall, when it intends to commence a mutual aid program for compensating damages to its members as a consequence of medical malpractice disputes, report to the Minister of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) Necessary matters for the details and management of mutual aid programs under paragraph (1) shall be prescribed by Presidential Decree.

Article 32 (Supervision)

When a central association or its branch engages in any business, other than those stipulated in its articles of association, or commits any act that impedes the improvement of public health, or if it fails to properly respond to a request for cooperation under Article 30 (1), the Minister of Health and Welfare may issue an order to modify its articles of association or re-elect its officers. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

CHAPTER III MEDICAL INSTITUTIONS

SECTION 1 Establishment of Medical Institutions

Article 33 (Establishment)

(1) A medical person may not engage in medical service, unless and until he/she establishes a medical institution in accordance with this Act, and shall practice his/her medical service within the medical institution, except for any of the following cases: <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

1. When he/she gives medical treatment to an emergency patient under subparagraph 1 of Article 2 of the Emergency Medical Service Act;
2. When he/she gives medical treatment upon request from a patient or the guardian of such patient;
3. When the State or the head of a local government requests to do so, as deemed necessary for public interests;
4. When home nursing service is provided, as prescribed by Ordinance of the Ministry of Health and Welfare;
5. When a case specifically prescribed by this Act or any other Acts and subordinate statutes occurs, or when inevitable circumstances to give medical treatment at the place where a patient is located occurs.

(2) A person, other than those falling under any of the following subparagraphs may not establish a medical institution. In such cases, a medical doctor may establish a general hospital, hospital, convalescent hospital or medical clinic, a dentist may establish a dental hospital or dental clinic, an oriental medical doctor may establish an oriental medical hospital, convalescent hospital or oriental medical clinic, and a midwife may establish a midwifery clinic, respectively: 

Amended by Act No. 9386, Jan. 30, 2009

1. A medical doctor, a dentist, an oriental medical doctor, or a midwife;

2. The State or a local government;

3. A legal entity established for the purpose of rendering medical service (hereinafter referred to as a "medical corporation");

4. A nonprofit corporation established pursuant to the Civil Act or any special Act;

5. A quasi-government agency under the Act on the Management of Public Institutions, a local medical center under the Act on the Establishment and Management of Local Medical Centers, or the Korea Veterans Welfare and Health Care Corporation under the Korea Veterans Welfare and Health Care Corporation Act.

Amended by Act No. 9932, Jan. 18, 2010

The part "each medical person may open only one medical institution" in the proviso to this paragraph was declared inconsistent with the Constitution by the Constitutional Court on December 27, 2007, but remains effective until December 31, 2008 by which the legislature shall amend it

(3) Any person, who intends to establish a medical clinic, dental clinic, oriental medical clinic or midwifery clinic under paragraph (2), shall report to the head of a Sil/Gun/Gu, as prescribed by Ordinance of the Ministry of Health and Welfare. 

Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010

(4) Any person, who intends to establish a general hospital, hospital, dental hospital, oriental medical hospital or convalescent hospital under paragraph (2), shall obtain permission from a relevant Mayor/Do Governor, as prescribed by Ordinance of the Ministry of Health and Welfare. In such cases, the Mayor/Do governor may not grant permission for establishment to a medical institution that fails to meet standards for facilities set forth in Article 36. 

Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010

(5) Paragraphs (3) and (4) shall apply when a medical institution established pursuant to paragraphs (3) or (4) intends to change its place of business or an important matter prescribed by Ordinance of the Ministry of Health and Welfare from among those reported or permitted as to its establishment. 

Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010

(6) A person who intends to establish a midwifery clinic shall appoint a medical doctor as an adviser with no exception.

(7) No medical institution may be established at a place that falls under any of the following subparagraphs:

1. Within the premises of a pharmacy or its facility;

2. Where part of a pharmacy's facility or premises is partitioned, altered or repaired to establish a medical institution;

3. Where there is a passage between a medical institution and a pharmacy, such as an exclusive hallway, stairway, elevator or overpass, or where such facility is built to establish a medical institution.

Amended by Act No. 9386, Jan. 30, 2009

(8) A medical person under paragraph (2) 1 may open only one medical institution: Provided, That where a person having not less than two medical licenses intends to establish a clinic-level medical institution, he/she may open medical institutions together at one location only by type of his/her licenses.

Article 34 (Remote Medical Treatment)

Medical persons (limited only to medical doctors, dentists or oriental medical doctors who engage in medical service) may, notwithstanding Article 33 (1), give remote medical treatment (hereinafter referred to as "remote medical
(2) A person who intends to give or take remote medical treatment shall have the facilities and equipment prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(3) A person who gives remote medical treatment (hereinafter referred to as "remote doctor") shall have the same responsibility as when he/she gives direct medical treatment to a patient.

(4) If a medical person, who has performed medical practice following a remote doctor's remote medical treatment, is a medical doctor, dentist or an oriental medical doctor (hereinafter referred to as "local doctor"), and if there is no obvious ground to believe that the remote doctor is negligent in performing his/her medical practice, the local doctor shall be responsible for a patient, notwithstanding paragraph (3).

Article 35 (Special Exception to Establishment of Medical Institutions)

(1) Any person, other than those set forth in Article 33 (1), (2), and (8) who intends to establish a auxiliary medical institution for providing health care to his/her staffs, employees, constituents (including inmates) or their dependents, shall report to the head of a Si/Gun/Gu having jurisdiction over the place where the institution is to be established: Provided, That the establishment of a hospital-level medical institution as an auxiliary medical institution requires permission from a Mayor/Do Governor having jurisdiction over the place where the institution is to be established. <Amended by Act No. 9386, Jan. 30, 2009>

(2) The procedures for and conditions on a report on and permission for the establishment under paragraph (1), and other necessary matters including the matters necessary for the operation and management of such medical institutions shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

Article 36 (Duty of Compliance)

A person who establishes a medical institution in accordance with Article 33 (2) and (8) owes a duty to comply with the regulations set forth in the following subparagraphs, as prescribed by Ordinance of the Ministry of Health and Welfare: <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9386, Jan. 30, 2009; Act No. 9932, Jan. 18, 2010>

1. Matters concerning standards for facility and specifications by type of medical institutions;
2. Matters concerning standards for safety control facilities in medical institutions;
3. Matters concerning standards for the operation of medical institutions and convalescent hospitals;
4. Matters concerning standards for the installation and operation of expensive medical equipment;
5. Matters concerning standards for the number of medical persons, etc. by type of medical institutions;

Article 37 (Radiation Generator for Diagnosis)

(1) Any medical institution shall, if it intends to install and operate a radiation generator for diagnosis, report to the head of a Si/Gun/Gu in compliance with Ordinance of the Ministry of Health and Welfare, and shall install and operate the generator in conformity with safety control standards prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) The founder or manager of each medical institution, which has a radiation generator for diagnosis installed, shall appoint a person responsible for safety control prescribed by Ordinance of Ministry of Health and Welfare, undergo a periodic inspection and measurement, and control radiation exposure to staff in radiation-related services. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>
(3) Necessary matters concerning the range of a radiation generator for diagnosis under paragraphs (1) and (2), the
matters relating to reporting, inspection, installation, standards for measurement, etc. shall be prescribed by Ordinance
of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

Article 38 (Installation and Operation of Special Medical Equipment)

(1) A medical institution, which intends to install and operate any medical equipment specified and publicly notified by the
Minister of Health and Welfare (hereinafter referred to as "special medical equipment") as necessary for adequate
installation and use in the aspect of the policy on public health and medical services, shall register such equipment with the
Minister of Health and Welfare or a Mayor/Do Governor, as prescribed by Ordinance of the Ministry of Health and
Welfare, and shall install and operate it in conformity with the standards of approval for installation, as prescribed by
Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18,
2010>

(2) The founder or manager of a medical institution, which has any special medical equipment installed in accordance with
paragraph (1), shall receive a periodic inspection for quality control by the Minister of Health and Welfare, as prescribed by
Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18,
2010>

(3) Each founder or manager of a medical institution shall refrain from using any special medical equipment determined as
non-conforming as a result of an inspection for quality control under paragraph (2).

(4) The Minister of Health and Welfare may entrust the relevant specialized institution with affairs relating to inspections for
quality control under paragraph (2), in whole or in part, as prescribed by Ordinance of the Ministry of Health and
Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

Article 39 (Mutual Use of Facilities, etc.)

(1) A medical person may render medical treatment by making use of facilities, equipment, human resources, etc. of any
other medical institution, with the consent of the head of the medical institution.

(2) The head of a medical institution may, if deemed necessary for medical treatment of a patient in the medical institution,
engage any medical person who is not one of its medical staff to give medical treatment for such patient.

(3) In regard of any medical accident occurs in the course of medical treatment by using any facility, equipment, human
resources, or any other instrument of any other medical institution, a medical person who has given medical treatment
shall be responsible for the consequences of such accident if it has resulted from his/her negligence, while the founder
of the medical institution that offered such facility, equipment, human resources, or any other instrument shall be
responsible for the consequences of such accident if it has resulted from a defect in such facility, equipment, human
resources, etc.

Article 40 (Report on Permanent Closedown and Suspension of Medical Service, and Transfer of Medical Records)

(1) The founder of a medical institution, who intends to permanently close down his/her medical service or suspend it for
one month or longer, shall report to the head of a St/Gun/Gu, as prescribed by Ordinance of the Ministry of Health and
Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) The founder of a medical institution shall, when he/she reports closedown or suspension of his/her medical services
under paragraph (1), transfer all medical records, etc. recorded and preserved in accordance with Article 22 or 23
to the director of the competent public health clinic: Provided, That the founder of a medical institution may keep such
records in his/her custody, only if he/she submits a plan for keeping such medical records, etc. as prescribed by
Ordinance of the Ministry of Health and Welfare, and successfully obtains approval of the director of the competent
public clinic therefor. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>
Article 41 (Medical Person on Duty)
All kinds of hospitals shall have medical persons on duty necessary for treatment of emergency patients and inpatients.

Article 42 (Name of Medical Institution)
(1) A medical institution shall not use any name, other than that designated for its type of medical institutions under Article 3 (2): Provided, That the same shall not apply to a case that falls under any of the following subparagraphs: <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9386, Jan. 30, 2009; Act No. 9932, Jan. 18, 2010>
1. When a general hospital names itself a hospital;
2. When a medical institution designated as a superior general hospital pursuant to Article 3-4 (1), or as a specialized hospital pursuant to Article 3-5 (1) uses the name during the period of designation;
3. When a clinic-level medical institution established pursuant to the proviso to Article 33 (8) uses all names by type of licenses;
4. When a medical institution established by the State or a local government uses a name agreed upon with the Minister of Health and Welfare or a Mayor/Do Governor;
5. When any name separately specified by any other Acts and subordinate statutes is used.
(2) Necessary matters concerning the indication of the name of each medical institution shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>
(3) Any institution other than medical institutions shall not use any name indicating a medical institution or any other similar name.

Article 43 (Specialized Department, etc.)
(1) A hospital, dental hospital or general hospital may additionally establish and operate a specialized department for oriental medicine by hiring a oriental medical doctor.
(2) A oriental medical hospital or dental hospital may additionally establish and operate a specialized department for medicine by hiring a medical doctor.
(3) A hospital, oriental medical hospital or convalescent hospital may additionally establish and operate a specialized department for dentistry by hiring a dentist.
(4) Where a specialized department is additionally established and operated pursuant to paragraphs (1) through (3), facilities and equipment necessary for medical treatment shall be furnished, as prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 9932, Jan. 18, 2010>
(5) Specialized departments of a medical institution, including those additionally established pursuant to paragraphs (1) through (3) shall be indicated in compliance with Ordinance of the Ministry of Health and Welfare: Provided, That specialized departments of dentistry may be indicated only by general hospitals and dental hospitals prescribed by Presidential Decree pursuant to Article 77 (3). <<Term of Validity of the Proviso: December 31, 2013>> <Amended by Act No. 9932, Jan. 18, 2010>
[This Article Wholly Amended by Act No. 9386, Jan. 30, 2009]


Article 45 (Notification of Non-Covered Medical Costs)
(1) A founder of a medical institution shall notify, as prescribed by Ordinance of the Ministry of Health and Welfare, the costs (hereinafter referred to as "non-covered medical cost") for items excluded from those eligible for medical care benefits pursuant to Article 39 (3) of the National Health Insurance Act, or for items excluded from those eligible for
medical care benefits pursuant to Article 7 (3) of the Medical Care Assistance Act in order for patients or guardians of patients to easily understand them. <Amended by Act No. 9932, Jan. 18, 2010>

(2) A founder of a medical institution shall post the costs collected by the medical institution in issuing each and every certificate, as prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 9932, Jan. 18, 2010>

(3) A founder of a medical institution may not collect fees and charges in excess of an amount notified or posed under paragraphs (1) and (2). <Amended by Act No. 9932, Jan. 18, 2010>

[This Article Wholly Amended by Act No. 9386, Jan. 30, 2009]

Article 46 (Patients' Choice, etc. of Medical Doctors for Medical Treatment)

(1) A patient and his/her guardian has a right to choose a specific medical doctor, dentist or oriental medical doctor in a general hospital, hospital, dental hospital, oriental medical hospital or convalescent hospital to request a medical person to render medical treatment (hereinafter referred to as "elective treatment"), as prescribed by Ordinance of the Ministry of Health and Welfare. In such cases, the head of each medical institution shall assign the medical doctor, dentist, or oriental medical doctor chosen by the patient or his/her guardian to treat the patient, unless there is any special reason otherwise. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) Any patient who takes elective treatment under paragraph (1) or the guardian of such patient may request to change or terminate elective treatment. In such cases, the head of a medical institution shall respond accordingly to such request without delay.

(3) The head of each medical institution shall furnish patients and their guardians with information on the scope, process and method of elective treatment, as prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(4) The head of each medical institution shall not charge any additional expense on a patient or his/her guardian who takes elective treatment under paragraph (1).

(5) Notwithstanding paragraph (4), the head of each medical institution may charge additional expenses, if he/she satisfies certain requirements to provide elective treatment.

(6) The qualification requirements for and scope of medical doctors, dentists, or oriental medical doctors of medical institutions and medical departments allowed to charge additional expenses pursuant to paragraph (5), and standards for computation of additional expenses and other necessary matters shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

Article 47 (Preventive Measures against Hospital Infection)

(1) The head of each general hospital with facilities equivalent to or larger than the size prescribed by Ordinance of the Ministry of Health and Welfare, shall take necessary measures for preventing hospital infection including the establishment and operation of a committee on countermeasures against infection. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) The organization and operation of the committee on countermeasures against infection under paragraph (1), and other necessary measures shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

SECTION 2 Medical Corporation

Article 48 (Permission, etc. for Establishment)

(1) A person, who intends to establish a medical corporation under Article 33 (2), shall prepare the articles of association
and other documents, as prescribed by Presidential Decree, and shall obtain permission from a Mayor/Do Governor having jurisdiction over the principal place of business of the medical corporation.

(2) A medical corporation shall either possess the facilities or secure the fund required for the medical corporation to install such facilities.

(3) A medical corporation shall, whenever it intends to dispose of its property or modify its articles of association, obtain permission from a relevant Mayor/Do Governor.

(4) No entity, other than those under this Act shall use the title of a medical corporation or any other similar name.

Article 49 (Incidental Business)

(1) A medical corporation may engage in incidental business set forth in the following subparagraphs at the medical institution established by the medical corporation, in addition to medical services. In such cases, accounts for the earnings from such incidental businesses shall be separated from other accounts of the medical corporation:

   <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

   1. Training or continuing education for medical persons and other persons relating to medical service;
   2. Research and study on medical service or medical science;
   3. Installation and operation of facilities for medical care and welfare for the elderly under subparagraph 2 of Article 31 of the Welfare of the Aged Act;
   4. Installation and operation of a funeral parlor under Article 25 (1) of the Funeral Services, etc. Act;
   5. Installation and operation of an auxiliary parking lot under Article 19 (1) of the Parking Lot Act;
   6. Projects prescribed by Presidential Decree among those for development and operation of medical information system incidental to the practice of medical service;
   7. Other businesses including snack restaurants, ordinary restaurants, barber shops, beauty shops for the convenience of patients and staff of the medical institution established by the medical corporation, as prescribed by Ordinance of the Ministry of Health and Welfare.

(2) A medical corporation, which intends to engage in incidental businesses set forth in paragraph (1) 4, 5 and 7, may lease or entrust such business to any other person for operation and management.

(3) A medical corporation, which intends to engage in incidental business in accordance with paragraph (1) or (2), shall report in advance to a Mayor/Do Governor who has jurisdiction over the place of business of the medical institution as prescribed by Ordinance of the Ministry of Health and Welfare. The foregoing shall also apply to a change in any matter reported. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

Article 50 (Application Mutatis Mutandis of Civil Act)

Except as provided for otherwise in this Act, the provisions of the Civil Act that governs incorporated foundations shall apply mutatis mutandis to medical corporations.

Article 51 (Revocation of Permission for Establishment)

The Minister of Health and Welfare or a relevant Mayor/Do Governor may revoke permission for the establishment of a medical corporation, if a corporation falls under any of the following subparagraphs: <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

   1. If it engages in any business other than those stipulated in the articles of incorporation;
   2. If it fails to establish a medical institution within two years after its incorporation;
   3. If a medical institution established by a medical corporation has permission for establishment revoked pursuant to Article 64;
4. If it violates an order issued by the Minister of Health and Welfare or a Mayor/Do Governor for supervision;
5. If it engages in any business, other than incidental businesses under Article 49 (1).

SECTION 3 Association of Medical Institutions

Article 52 (Establishment of Association of Medical Institutions)

(1) The heads of a hospital-level medical institutions may establish an association with a nationwide organization in order to contribute to the sound development of medical institutions and the improvement of public health. <Amended by Act No. 9386, Jan. 30, 2009>

(2) The association under paragraph (1) shall be a legal entity.

CHAPTER IV EVALUATION OF NEW MEDICAL TECHNOLOGY

Article 53 (Evaluation of New Medical Technology)

(1) In order to protect public health and promote the development of medical technology, the Minister of Health and Welfare shall conduct an evaluation of the safety, validity, etc. of new medical technology (hereinafter referred to as "evaluation of new medical technology") through a review by the Committee for Evaluation of New Medical Technology under Article 54, as prescribed by Presidential Decree. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) "New medical technology" under paragraph (1) means medical technology newly developed, of which the Minister of Health and Welfare concludes necessary to evaluate the safety and validity. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(3) The Minister of Health and Welfare shall notify the results of the evaluation of new medical technology to the President of the Health Insurance Review and Assessment Service under Article 57 of the National Health Insurance Act. In such cases, the results of the evaluation of new medical technology may be disclosed to the general public, as prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(4) Other necessary matters concerning the subject, procedure, etc. for the evaluation of new medical technology shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

Article 54 (Establishment, etc. of Committee for Evaluation of New Medical Technology)

(1) The Minister of Health and Welfare shall establish the Committee for Evaluation of New Medical Technology (hereinafter referred to as the "Committee") within the Ministry of Health and Welfare for a review on the matters concerning the evaluation of new medical technology. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) The Committee shall be composed of 20 or less committee members including one chairperson.

(3) The committee members shall be commissioned or appointed by the Minister of Health and Welfare from among the persons who fall under any of the following subparagraphs: Provided, That the committee chairperson shall be appointed from among the persons who fall under subparagraph 1 or 2: <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

1. Persons recommended by the medical doctors' association, the dentists' association, and the oriental medical doctors' association prescribed by Article 28 (1), respectively;
2. Persons who have good knowledge about public health and medical services;
3. Persons recommended by a consumer group;
4. Licensed attorneys having at least five-year career experience relating to public health and medical services;
5. Grade V or higher public officials accountable for affairs in policies on public health and medical services in the Ministry of Health and Welfare.

(4) The term of office for the committee chairperson and members shall be three years, and they may be reappointed or recommissioned: Provided, That the term of office for any public official under paragraph (3) 5 shall correspond to the term of his/her service as a public official.

(5) A vacancy of a committee member shall be filled with a new member appointed, and the term of office for such a new member shall begin on the date on which he/she is appointed.

(6) The Committee shall have subcommittees for evaluation of specialized fields, each of which shall devote to review on the matters of a specific field among the matters brought before the Committee.

(7) Other necessary matters concerning the organization, management, etc. of the Committee and subcommittees shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

Article 55 (Entrustment of Affairs, etc. Relating to Collection of Data)
The Minister of Health and Welfare may entrust the relevant specialized institution or organization with the affairs incidental to the evaluation including collection of data and survey, as prescribed by Ordinance of the Ministry of Health and Welfare, if necessary for executing the affairs relating to the evaluation of new medical technology. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

CHAPTER V ADVERTISEMENT OF MEDICAL SERVICE

Article 56 (Prohibition, etc. of Medical Service Advertisement)
(1) Any person, other than a medical corporation, medical institution, or medical person, shall not run an advertisement for medical service.

(2) Any medical corporation, medical institution or medical person shall not run an advertisement for medical service, which falls under any of the following subparagraphs: <Amended by Act No. 9386, Jan. 30, 2009>

1. Advertisement of new medical technology without going through the evaluation under Article 53;
2. Advertisement with any content that is likely to mislead consumers by guaranteeing the effect of treatment or in any other way;
3. Advertisement with any content that compares with a function or treatment method of any other medical institution or medical person;
4. Advertisement with any content that defames any other medical corporation, medical institution, or medical person;
5. Advertisement with any content that directly exposes performance of medical treatment, such as the scene of an operation;
6. Advertisement in which any important information, such as serious side effects in relation to the functions of a medical person or the treatment methods is omitted;
7. Advertisement that includes any content not accepted objectively or groundless;
8. Advertisement that shows its contents in the form of a news article or expert opinion using a newspaper, broadcasting medium, magazine, or any other medium;
9. Advertisement with contents not examined in accordance with Article 57 or different from the contents examined;
10. Domestic advertisement for attracting foreign patients under Article 27 (3);
11. Any other medical advertisement with any content that causes, or is likely to cause, a serious hazard to public health, as prescribed by Presidential Decree.

(3) Any medical corporation, medical institution, or medical person shall not run any medical advertisement with a false or exaggerated content.

(4) A medical advertisement shall not be run in any of the following methods:
1. Broadcasting under subparagraph 1 of Article 2 of the Broadcasting Act;
2. Any other method against which it is necessary to impose a restriction in order to protect public health and maintain the order in competition within the medical circle, as prescribed by Presidential Decree.

(5) Necessary matters concerning medical advertisements including more specific standards of medical advertisements prohibited pursuant to paragraph (1) or (2) shall be prescribed by Presidential Decree.

Article 57 (Review on Advertisements)

(1) Each advertisement to be run by any medical corporation, medical institution, or medical person shall pass a prior review of the Minister of Health and Welfare in regard to its details, method, etc. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) A person who intends to undergo a review under paragraph (1) shall pay a certain amount of fee prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(3) The Minister of Health and Welfare may entrust affairs pertaining to the review under paragraph (1) to the organization established pursuant to Article 28. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(4) The subject and standards for the review under paragraph (1), and other matters necessary for the examination shall be prescribed by Presidential Decree.

CHAPTER VI SUPERVISION

Article 58 (Accreditation of Medical Institutions)

(1) The Minister of Health and Welfare may accredit a hospital-level medical institution (hereinafter referred to as "accreditation of medical institutions") in order to improve the quality of medical service and the safety of patients.

(2) The Minister of Health and Welfare may entrust affairs pertaining to the accreditation of medical institutions with the relevant specialized institution (hereinafter referred to as "accrediting institution"), as prescribed by Presidential Decree. In such cases, the Minister may provide the budget subsidies as required.

(3) The Minister of Health and Welfare may consolidate evaluations on medical institutions conducted under other Acts and subordinate statutes and permit the accrediting institution to conduct such evaluations.

[This Article Wholly Amended by Act No. 10387, Jul. 23, 2010]

Article 58-2 (Medical Institution Accreditation Commission)

(1) The Minister of Health and Welfare shall establish the Medical Institution Accreditation Commission under his/her authority (hereinafter referred to as "Commission") to review major policies on accreditation of medical institutions.

(2) The Commission shall be comprised of 15 or less members including one chairperson.

(3) The Vice Minister of Health and Welfare shall be the chairperson of the Commission, and the commission members

shall be commissioned or appointed by the Minister of Health and Welfare from the following persons:

1. Persons recommended by an organization of medical persons under Article 28 and an association of medical institutions under Article 52;

2. Persons recommended by a labor circle, civic organization (referring to non-profit, non-governmental organization under Article 52 of the Assistance for Non-Profit, Non-Governmental Organizations Act), and a consumer organization under Article 29 of the Framework Act on Consumers;

3. Persons who have good knowledge and experience in public health;

4. A public official of Grade III who belongs to the Ministry of Health and Welfare, or a public official who belongs to the Senior Civil Service.

(4) The Commission shall review the following:

1. Matters concerning major policies on accreditation of medical institutions, including accreditation standards and accreditation publication;

2. Matters concerning consolidation of a medical institution evaluation system under Article 58 (3);

3. Matters concerning utilization of accreditation of medical institutions under Article 58-7 (2);

4. Other matters referred for deliberation by the chairperson of the Commission.

(5) The composition and operation of the Commission and other necessary matters therefor shall be prescribed by Presidential Decree.

[This Article Newly Inserted by Act No. 10387, Jul. 23, 2010]

Article 58-3 (Accreditation Standards, Methods, etc. of Medical Institutions)

(1) The accreditation standards of medical institutions shall include the following:

1. Patient rights and safety;

2. Activities to promote service quality of medical institutions;

3. Processes and outcomes of medical service provision;

4. Organization, human resource management and operation of medical institutions;

5. Patient satisfaction.

(2) The Minister of Health and Welfare shall evaluate whether a medical institution which has requested for accreditation meets the accreditation standards under paragraph (2).

(3) The Minister of Health and Welfare shall notify, without delay, the head of the relevant medical institution of the results and accreditation level evaluated under paragraph (2).

(4) Accreditation levels shall be divided into accreditation, conditional accreditation and non-accreditation.

(5) The term of validity of accreditation shall be four years: Provided, That term of validity of conditional accreditation shall be one year.

(6) The head of a medical institution which has been granted conditional accreditation shall obtain re-accreditation within the term of validity, as prescribed by Ordinance of the Ministry of Health and Welfare.

(7) Details in accreditation standards pursuant to paragraph (1) shall be determined by the Minister of Health and Welfare.

[This Article Newly Inserted by Act No. 10387, Jul. 23, 2010]

Article 58-4 (Applications for Accreditation of Medical Institutions)

(1) The head of a medical institution intending to be accredited as a medical institution may file an application with the
Article 58-5 (Applications for Objections)

(1) The head of a medical institution that has filed an application for accreditation may file an application for objections with the Minister of Health and Welfare with regards to evaluation results or accreditation level.

(2) The application for objections under paragraph (1) shall be filed within 30 days from the date the head of a medical institution is notified of the evaluation results or accreditation level: Provided, That where the head of a medical institution could not observe the period due to any cause not attributable to himself/herself, it shall be counted from the date on which such cause has been extinguished.

(3) Necessary matters concerning the means to file an application for objections under paragraph (1) and notification of process results, etc. shall be prescribed by Ordinance of the Ministry of Health and Welfare.

[This Article Newly Inserted by Act No. 10387, Jul. 23, 2010]

Article 58-6 (Certificate of Accreditation and Accreditation Mark)

(1) The Minister of Health and Welfare may grant a certificate of accreditation to a medical institution which has been accredited, produce a mark showing the accreditation (hereinafter referred to as "accreditation mark"), and permit the medical institution to use such mark.

(2) Without being accredited pursuant to Article 58 (1), no person shall produce or use a certificate of accreditation or an accreditation mark or assume accreditation in other means.

(3) Necessary matters concerning the design of an accreditation mark and means of indication, etc. shall be prescribed by Ordinance of the Ministry of Health and Welfare.

[This Article Newly Inserted by Act No. 10387, Jul. 23, 2010]

Article 58-7 (Publication and Utilization of Accreditation)

(1) The Minister of Health and Welfare shall publish, on its Web site, etc., matters prescribed by Ordinance of the Ministry of Health and Welfare, such as accreditation standards, term of validity of accreditation, and evaluation results under Article 58-3 (2) of a medical institution which has been accredited.

(2) By utilizing the evaluation results and accreditation levels under Article 58-3 (3), the Minister of Health and Welfare may provide the medical institution with the following administrative and financial support, etc:

1. Designation of tertiary care hospitals under Article 3 (4);
2. Designation of specialized hospitals under Article 3 (5);
3. Other matters prescribed in other Acts or deemed necessary by the Minister of Health and Welfare.

(3) Necessary matters concerning notification, etc. under paragraph (1) shall be prescribed by Ordinance of the Ministry of Health and Welfare.

[This Article Newly Inserted by Act No. 10387, Jul. 23, 2010]
Article 58-8 (Request to Provide Data)

(1) If necessary for accreditation, the Minister of Health and Welfare may request the relevant administrative agency, medical institution, other public organization, etc. to provide data and request them to cooperate.

(2) A person who has been requested to provide data and cooperate shall comply with such request unless there exist any justifiable grounds.

[This Article Newly Inserted by Act No. 10387, Jul. 23, 2010]

Article 58-9 (Cancellation of Accreditation of Medical Institutions)

(1) The Minister of Health and Welfare may cancel accreditation or conditional accreditation of medical institution where it falls under any of the following subparagraphs: Provided, That if it falls under paragraph (1) and (2), the Minister shall cancel accreditation or conditional accreditation:

1. Where it has received accreditation or conditional accreditation by fraud or other unlawful means;
2. Where the permission for the establishment of a medical institution has been revoked, or where a medical institution has been ordered to permanently close down pursuant to Article 64 (1);
3. Where a grave fact, which becomes the premise or basis of accreditation or conditional accreditation such as alteration to the type of a medical institution, has changed.

(2) A medical institution whose accreditation has been cancelled pursuant to paragraph (1) 1, may not file an application for accreditation within one year from the date on which its accreditation or conditional accreditation has been cancelled.

[This Article Newly Inserted by Act No. 10387, Jul. 23, 2010]

Article 59 (Guidance and Order)

(1) The Minister of Health and Welfare or a relevant Mayor/Do Governor may provide guidance or issue an order to medical institutions or medical persons, if considered necessary for policies on public health and medical services, or if a serious hazard occurs or is likely to occur to public health. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) The Minister of Health and Welfare, a relevant Mayor/Do Governor or the head of a relevant Si/Gun/Gu may order a medical person or founders of medical institutions to resume medical service, if there is a reasonable ground to believe that suspension of medical service by the medical person without any justifiable reason, or temporary shutdown or permanent closedown of medical institutions by a group of the founders causes or is likely to cause great difficulties in giving medical treatment to patients. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(3) Any medical person or founder of a medical institution shall not disobey an order issued pursuant to paragraph (2) without any justifiable reason.

Article 60 (Establishment, etc. of Plan for Supply and Demand for Patient Beds)

(1) The Minister of Health and Welfare shall establish a basic implementation policy for reasonable supply and demand for available hospital beds. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) A Mayor/Do Governor shall prepare a plan for supply and demand for available hospital beds for a Special Metropolitan City, or each Metropolitan City or a Do, considering the current status of the locality based on the basic implementation policy under paragraph (1), to submit it to the Minister of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(3) The Minister of Health and Welfare may recommend a relevant Mayor/Do Governor to adjust a plan for supply and demand for available hospital beds submitted pursuant to paragraph (2), as prescribed by Ordinance of the Ministry of Health and Welfare, if there is any ground for such recommendation, such as that the plan's non-conformity to the basic
implementation policy under paragraph (1). <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>  

Article 61 (Report and Inspection, etc. of Business)  
(1) The Minister of Health and Welfare or the head of a relevant Si/Gun/Gu may order a medical institution or a medical person to submit a business report as necessary, or assign a relevant public official to inspect the current status of business, facilities or related documents including the medical records of medical treatment, midwifery, and nursing, to ascertain true facts by hearing statements of interested parties. In such cases, any medical person or medical institution involved shall not reject such inspection or ascertainment. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) A related public official assigned pursuant to paragraph (1) shall carry an identification certificate showing his/her authority to present it to the relevant people.

(3) Matters pertaining to the reports under paragraph (1) shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>  

Article 62 (Accounting Standards for Medical Institutions)  
(1) A founder of a medical institution shall endeavor to keep its accounts transparent.

(2) A founder of a general hospital equivalent to or greater than the size prescribed by Ordinance of the Ministry of Health and Welfare shall comply with the accounting standards for medical institutions to keep its accounts transparent. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(3) The accounting principles for medical institutions under paragraph (2) shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>  

Article 63 (Order, etc. for Correction)  
The Minister of Health and Welfare or the head of a relevant Si/Gun/Gu may restrict or ban the use of facilities and equipment, in part or in whole, of a medical institution or a general hospital, or order it to correct a violation, within a fixed period of time, if the medical institution violates Articles 16 (2), 23 (2), 27-2 (1), (2) (referring to a person attracting foreign patients), (3) (including a person attracting foreign patients), and (5), 34 (2), 35 (2), and 36, 37 (1) and (2), 38 (1) and (2), 41 through 43, 45, 46, 47 (1), 56 (2) through (4), 57 (1), 58 (5), and 62 (2), or if the general hospital, superior general hospital or specialized hospital fails to satisfy the requirements under Article 3-3 (1), 3-4 (1) or 3-5 (2), respectively. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9386, Jan. 30, 2009; Act No. 9932, Jan. 18, 2010>  

Article 63 (Order, etc. for Correction)  
The Minister of Health and Welfare or the head of a relevant Si/Gun/Gu may restrict or ban the use of facilities and equipment, in part or in whole, of a medical institution or a general hospital, or order it to correct a violation, within a fixed period of time, if the medical institution violates Articles 16 (2), 23 (2), 27-2 (1), (2) (referring to a person attracting foreign patients), (3) (including a person attracting foreign patients), and (5), 34 (2), 35 (2), and 36, 37 (1) and (2), 38 (1) and (2), 41 through 43, 45, 46, 47 (1), 56 (2) through (4), 57 (1), 58-4 (2), and 62 (2), or if the general hospital, superior general hospital or specialized hospital fails to satisfy the requirements under Article 3-3 (1), 3-4 (1) or 3-5 (2), respectively. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9386, Jan. 30, 2009; Act No. 9932, Jan. 18, 2010; Act No. 10387, Jul. 23, 2010>  

Article 64 (Revocation, etc. of Permission for Establishment)  
(1) The Minister of Health and Welfare or the head of a relevant Si/Gun/Gu may suspend medical service of a medical institution, or revoke permission for the establishment of a medical institution, or order a medical institution to permanently close down, if the medical institution falls under any of the following subparagraphs: Provided, That the
Minister shall revoke permission for the establishment of the medical institution or the permanent closedown of the medical institution if it falls under subparagraph 8, while an order to close down a medical institution may be issued only to any of the medical institutions that have submitted a report pursuant to Article 33 (3) and the main sentence of Article 35 (1): <Amended by Act No. 8559, Jul. 27, 2007; Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

1. When it fails to commence its service without any justifiable reason within three months after reporting on, or obtaining permission for its establishment;

2. When it engages an unqualified person to perform medical practice or engages a medical person to perform any medical practice, other than those licensed;

3. When it avoids or hinders the relevant public official's performance of duties pursuant to Article 61 or violates an order issued pursuant to Article 59 or 63;

4. When permission for the establishment of a medical corporation, non-profit corporation, quasi-government agency, local medical center or the Korea Veterans Welfare and Health Care Corporation under Article 33 (2) 3 through 5 is revoked, or such institution or corporation is dissolved;

5. When it violates Article 33 (5), 40, and 56;

6. When it does not comply with a corrective order issued pursuant to Article 63 (excluding a corrective order issued due to the violation of Article 27-2 (1), (3) or (5));

7. When it commits an act in collusion with others, in violation of Article 24 (2) of the Pharmaceutical Affairs Act;

8. When a sentence of imprisonment without prison labor or heavier punishment imposed on a founder of a medical institution on a charge of a fraudulent claim for medical expenses becomes final and conclusive.

(2) Any person, who has the permission for the establishment revoked or receives an order of closedown pursuant to paragraph (1), shall be barred from establishing or running a medical institution within six months from the date on which permission is revoked or the order of closedown is issued or in the case of a person who has received the disposition of the suspension of medical services, during a term of business suspension: Provided, That a person, whose permission for the establishment of a medical institution is revoked or receives an order of closedown pursuant to paragraph (1) 8, shall be barred from establishing or running a medical institution within three years from the date on which permission is revoked or the order of closedown is issued.

Article 65 (Revocation and Re-issuance of License)

(1) The Minister of Health and Welfare may revoke a license of a medical person, if he/she falls under any of the following subparagraphs: Provided, That the license of a medical person who falls under subparagraph 1 shall be revoked with no exception: <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9386, Jan. 30, 2009; Act No. 9932, Jan. 18, 2010>

1. When he/she falls under any subparagraph of Article 8;

2. When he/she continues medical practice during the period for which his/her qualification is suspended pursuant to Article 66 or receives the disposition of qualification suspension three times or more;

3. When he/she fails to fulfill any condition attached to his/her license pursuant to Article 11 (1);

4. Deleted; <by Act No. 9906, Dec. 31, 2009>

5. When he/she leases his/her license certificate to someone else.

(2) The Minister of Health and Welfare may re-issue a license to a person whose license has been revoked pursuant to paragraph (1), if grounds for such revocation cease to exist, or if it is found that the person has shown significant signs of repentance: Provided, That a license shall not be re-issued within one year after revocation if the license was revoked pursuant to paragraph (1) 3, within two years if the license was revoked pursuant to paragraph (1) 2, 4, or 5, or within three years if the former license was revoked pursuant to subparagraph 4 of Article 8, respectively. <Amended by Act No. 8559, Jul. 27, 2007; Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>
Article 66 (Suspension, etc. of Qualification)
(1) The Minister of Health and Welfare may suspend a license of a medical person for one year or less, if he/she falls under any of the following subparagraphs. In such cases, matters necessary for medico-technical judgment may be decided after hearing the opinions of relevant experts: <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9906, Dec. 31, 2009; Act No. 9932, Jan. 18, 2010; Act No. 10325, May 27, 2010>

1. When he/she severely undermines the dignity of medical persons;
2. When he/she is employed by a person ineligible for establishing a medical institution to perform medical practice;
3. When he/she prepares and issues a false medical certificate, or a false postmortem examination report or certificate under Article 17 (1) and (2) or prepares a false medical record card under Article 22 (1);
4. When he/she violates Article 20;
5. When he/she engages a non-medical person to perform any medical practice or engages a medical person to perform medical practice, other than the licensed practice, in violation of Article 27 (1);
6. When he/she engages any person, other than a medical technician to perform the job of the medical technician or assign to a medical technician any job beyond the scope of the technician's job;
7. When he/she makes a claim for medical expenses by unjustifiable means, such as falsification or alteration of related documents;
8. When he/she runs an advertisement, in violation of Article 56 (2) through (4) or 57 (1);
9. When he/she receives financial benefits, etc., in violation of Article 23-2;
10. When he/she violates this Act or any order issued pursuant to this Act.

(2) The scope of the acts under paragraph (1) 1 shall be prescribed by Presidential Decree.

(3) A medical institution shall not perform medical services, if its founder receives the disposition of qualification suspension under paragraph (1) 7, during such qualification suspension period. <Amended by Act No. 10387, Jul. 23, 2010>

Article 67 (Disposition of Penalty Surcharge)
(1) The Minister of Health and Welfare or the head of a relevant Si/Gun/Gu may impose a penalty surcharge not exceeding 50 million won on a medical institution, if it falls under any of subparagraphs of Article 64 (1), in lieu of the disposition of suspension of medical service, as prescribed by Presidential Decree. In such cases, such penalty surcharge shall not be imposed more than three times. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) The amount of the penalty surcharge under paragraph (1) to be imposed depending upon the type, degree, etc. of an offense, and other necessary matters shall be prescribed by Presidential Decree.

(3) If any penalty surcharge under paragraph (1) is not paid within the time limit, the Minister of Health and Welfare or head of a Si/Gun/Gu shall collect it in the same manner as delinquent national or local taxes are collected. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

Article 68 (Criteria for Administrative Disposition)
The detailed criteria for the administrative dispositions under Articles 63, 64 (1), 65 (1), and 66 (1) shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

Article 69 (Medical Instructors)
(1) The Ministry of Health and Welfare, each City/Do, and a Si/Gun/Gu shall have medical instructors who shall perform the duties of the relevant public officials under Article 61. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) A medical instructor shall be appointed by the Minister of Health and Welfare, a relevant Mayor/Do Governor, or the head of a relevant Si/Gun/Gu from among public officials under his/her control, and necessary matters concerning qualification, appointment, etc. shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(3) A medical instructor and other public official shall not disclose any confidential information on a medical institution, medical person or patient that he/she becomes aware of in the course of performing his/her duties.

CHAPTER VII CONCILIATION OF DISPUTES

Article 70 (Medical Examination and Conciliation Committee)

(1) For conciliation of disputes arising from medical practice (hereinafter referred to as "medical malpractice disputes"), the Central Medical Examination and Conciliation Committee shall be installed under the control of the Minister of Health and Welfare, while a local medical examination and conciliation committee shall be founded under the control of each Mayor/Do Governor. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) The composition and management of the central and local medical examination and conciliation committees, the qualifications of conciliators, and other necessary matters shall be prescribed by Presidential Decree.

(3) The functions of the Central Medical Examination and Conciliation Committee shall be to conciliate medical malpractice disputes and to review on the following matters as referred to the committee by the Minister of Health and Welfare: <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

1. Scope of medical practice;
2. Limitations on services by type of medical persons;
3. Other important matters pertaining to medical services.

Article 71 (Application for Dispute Conciliation)

When a medical malpractice dispute arises, either party to the dispute may file an application for conciliation of the dispute with a relevant Mayor/Do Governor.

Article 72 (Jurisdiction)

(1) A relevant Mayor/Do Governor shall, upon receiving an application for dispute conciliation under Article 71, refer the case to the local medical examination and conciliation committee for conciliation: Provided, That the Mayor/Do Governor shall transfer an application for dispute conciliation to the Minister of Health and Welfare within 20 days after the receipt of the application, if two or more local governments of Cities/Do have jurisdiction over the case, or if the local medical examination and conciliation committee concludes that the committee is unable to conciliate the case. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) The Minister of Health and Welfare shall, upon receiving an application for dispute conciliation transferred pursuant to paragraph (1), refer the case to the Central Medical Examination and Conciliation Committee. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

Article 73 (Commencement of Conciliation)

The central and local medical examination and conciliation committees shall, upon receiving an application for dispute conciliation referred to them, commence their proceedings for dispute conciliation without delay.
Article 74 (Fact Finding, etc.)

(1) The central or local medical examination and conciliation committee may, if considered necessary for conciliation of a medical malpractice dispute, assign either its conciliator or a relevant public official concerned to request a party or a potential witness to make an appearance before the committee to make statements. In addition, the committee may assign its conciliator or a related public official to inspect relevant documents, or make an inquiry into the facts to an administrative agency or a medical institution or any other public or private organization, or have access to the relevant medical institution for investigation.

(2) A conciliator or related public official who conducts an investigation pursuant to paragraph (1) shall carry an identification certificate showing his/her authority to present it the relevant people.

Article 75 (Protocol of Conciliation)

(1) The central or local medical examination and conciliation committee shall prepare a proposed conciliation and present it to the parties concerned within 90 days from the date on which the conciliation application is referred thereto.

(2) When the proposed conciliation under paragraph (1) is accepted by the parties concerned, all conciliators shall draw up a protocol of conciliation, and sign and affix their seals on it together with the parties concerned.

(3) The protocol of conciliation under paragraph (2) shall have the same effect as the compromise protocol under the Civil Procedure Act.

Article 76 (Conciliation Procedures, etc.)

The conciliation application, procedures for conciliation, and other necessary matters concerning the affairs pertaining to conciliation shall be prescribed by Presidential Decree.

CHAPTER VIII SUPPLEMENTARY PROVISIONS

Article 77 (Medical Specialists)

(1) Any medical doctor, dentist or oriental medical doctor, who intends to become a medical specialist, shall have his/her qualification accredited by the Minister of Health and Welfare after finishing the training course prescribed by Presidential Decree. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) Any person, other than those whose qualification as a medical specialist has been accredited pursuant to paragraph (1) shall not indicate his/her specialized medical department: Provided, That the Minister of Health and Welfare may, in an effort to manage the medical system efficiently, allow any dentist or oriental medical doctor whose qualification as a medical specialist has been accredited to indicate his/her specialized department only at a medical institution prescribed by Ordinance of the Ministry of Health and Welfare, among general hospitals, dental hospitals, and oriental medical hospitals. >>Term of validity of the proviso concerning a dentist: Dec. 31, 2013; Term of validity of the proviso concerning an oriental medical doctor: Dec. 31, 2009>> <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9386, Jan. 30, 2009; Act No. 9932, Jan. 18, 2010>

(3) The matters concerning the accreditation of medical specialist and the specialized medical departments shall be prescribed by Presidential Decree.

Article 78 (Specialized Nurses)

(1) The Minister of Health and Welfare may, in addition to a license for nurse, accredit a nurse as a specialized nurse. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) The classification and criteria of qualifications for specialized nurses under paragraph (1), the qualification certificate,
and other necessary matters shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

Article 79 (Medical Persons for Specific Areas)

(1) Any medical doctor, a dentist or oriental medical doctor, who has been licensed for a specific area pursuant to the former provisions before this Act enters into force, shall be deemed to be a medical person, only when he/she engages in medical services within the specific area as permitted.

(2) The Minister of Health and Welfare may revoke a license of any medical person under paragraph (1), if he/she performs medical practice at any place outside of the specifically permitted area. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(3) Any change in the specifically permitted area of a medical person under paragraph (1) and other necessary matters shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(4) Notwithstanding Article 5, a medical doctor, dentist or oriental medical doctor for a specific area, who has engaged in medical services within the specifically permitted area for ten years or longer, or who has an at least five-year career experience in medical services at the time when this Act enters into force, may be licensed for medical doctor, dentist or oriental medical doctor, as prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

Article 80 (Nursing Assistants)

(1) A person, who intends to become a nursing assistant, shall be accredited by a relevant Mayor/Do Governor.

(2) Notwithstanding Article 27, a nursing assistant may engage in assisting nursing services. In such cases, the provisions governing nurses shall apply mutatis mutandis in applying this Act, while "license" shall be read as "qualification" and "license certificate" as "qualification certificate"

(3) Necessary matters concerning the accreditation of qualifications for nursing assistants, the limitations on their service, etc. shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

Article 81 (Quasi-Medical Person)

(1) Notwithstanding Article 27, any bone-setter, acupuncturist or moxibustionist (hereinafter referred to as "quasi-medical person"), who has been accredited pursuant to the former provisions before this Act enters into force, may engage in such profession within his/her place of practice.

(2) The provisions relevant to medical persons and medical institutions in this Act shall apply mutatis mutandis to quasi-medical persons. In such cases, "medical person" shall be read as "quasi-medical person" the "license" as "qualification" "license certificate" as "qualification certificate" and "medical institution" as "place of practice"

(3) Necessary matters concerning the practices of quasi-medical persons, the limitations on their practices, the standards of the places of practice, etc. shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

Article 82 (Massagists)

(1) A massagist shall be a visually-impaired person under the Welfare of Disabled Persons Act, who falls under any of the following subparagraphs and who is accredited by a relevant Mayor/Do Governor: <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

1. A person who has finished the curricula on physical therapy following limitation on services to be rendered by a
massagist as set forth in paragraph (4) at one of special schools under subparagraph 5 of Article 2 of the Elementary and Secondary Education Act, which provides education equivalent to a high school;

2. A person who has finished educational courses equivalent to, or higher than a junior high school and two-year or longer courses for massage therapy at a massage therapy institution designated by the Minister of Health and Welfare.

(2) Notwithstanding Article 27, a massagist under paragraph (1) may engage in massage business.

(3) As to massagists, Articles 8, 25, 28 through 32, 33 (2) 1, (3), (5), and the main sentence of (8), 36, 40, 59 (1), 61, and 63 (applicable only when violating Article 36), 64 through 66, 68, 83, and 84 shall be applicable mutatis mutandis. In such cases, "medical person" shall be read as "massagist" "license" as "qualification" "license certificate" as "qualification certificate" "medical institution" as "place of massage practice or massage parlor" and "head of the competent organization relating to medical services" as "president of the massagists' association" <Amended by Act No. 9386, Jan. 30, 2009>

(4) Necessary matters concerning the limitations on the business of massagists, the standards of the facilities for the places of massage practice or massage parlors, etc. shall be prescribed by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

Article 83 (Subsidy for Expenses, etc.)

(1) The Minister of Health and Welfare or a relevant Mayor/Do Governor may, if deemed necessary for improvement of public health, subsidize the whole of part of expenses for facilities, operation, and survey and research for any medical person, medical institution, central association or organization relating to medical services. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) When the following medical institution requests accreditation, the Minister of Health and Welfare may subsidize the whole of part of expenses for accreditation for such medical institution within the limits of the budget: <Newly Inserted by Act No. 10387, Jul. 23, 2010>

1. A medical institution that should file an application for accreditation pursuant to Article 58-4 (2) ; <<Enforcement Date: Jan. 1, 2013>>

2. A medical institution which meets the standard prescribed by the Minister of Health and Welfare among medical institutions with less than 300 patient beds (excluding general hospitals).

Article 84 (Hearing)

The Minister of Health and Welfare, a relevant Mayor/Do Governor or the head of a relevant Si/Gun/Gu shall hold a hearing whenever he/she intends to make any of the following dispositions: <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010; Act No. 10387, Jul. 23, 2010>

1. Revoking permission for establishment pursuant to Article 51;

2. Cancellation of accreditation or conditional accreditation of a medical institution under Article 58-9;

3. Issuing an order to ban the use of any facility, equipment, etc. pursuant to Article 63;

4. Revoking permission for the establishment or issuing an order to close down a medical institution pursuant to Article 64 (1);

5. Revoking a license pursuant to Article 65 (1).

Article 85 (Fees)

(1) A person, who intends to have a license or license certificate re-issued, who intends to take the national examination, etc., or who wants to have a radiation generator for diagnosis inspected pursuant to this Act, shall pay a certain amount
of fees, as predetermined by Ordinance of the Ministry of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) A specialized organization concerned under Article 9 (2) may appropriate the fees received for the national examination, etc. pursuant to paragraph (1) for expenses necessary for the administration of such examination, subject to approval of the Minister of Health and Welfare. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

Article 86 (Delegation or Entrustment of Authority)

(1) The Minister of Health and Welfare or a relevant Mayor/Do Governor may partially delegate his/her authority under this Act to the Mayor/Do governor, the Director General of the Korea Center for Disease Control and Prevention, the head of a Si/Gun/Gu, or the director of a public health clinic, as prescribed by Presidential Decree. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

(2) The Minister of Health and Welfare may entrust a related specialized organization with part of affairs under this Act, as prescribed by Presidential Decree. <Amended by Act No. 8852, Feb. 29, 2008; Act No. 9932, Jan. 18, 2010>

CHAPTER IX PENAL PROVISIONS

Article 87 (Penal Provisions)

(1) A person, who falls under any of the following subparagraphs, shall be sentenced to imprisonment for a term of not more than five years or a fine not exceeding 20 million won: <Amended by Act No. 9386, Jan. 30, 2009>

1. A person who leases his/her license certificate to any other person;
2. A person who violates Articles 12 (2), 18 (3), 23 (3), 27 (1), and 33 (2) and (8) (including a case to which said paragraph shall apply mutatis mutandis pursuant to Article 82 (3)).

(2) Any person who violates Article 38 (3) shall be sentenced to imprisonment for not more than three years or a fine not exceeding 30 million won.

Article 88 (Penal Provisions)

Any person, who violates Article 19, 21 (1), 27 (3) and (4), 27-2 (1) and (2), 33 (4), the proviso to Article 35 (1), 59 (3), 64 (2) (including cases to which said paragraph shall apply mutatis mutandis pursuant to Article 82 (3)), or 69 (3), or who performs massage for profit without qualification as a massagist accredited pursuant to Article 82 (1), shall be sentenced to imprisonment for not more than three years or a fine not exceeding ten million won: Provided, That the public prosecution against any person who violates Articles 19, 21 (1), or 69 (3) requires a criminal complaint filed by a victim. <Amended by Act No. 9386, Jan. 30, 2009; Act No. 9906, Dec. 31, 2009>

Article 88-2 (Penal Provisions)

Any person who violates Article 23-2 shall be sentenced to imprisonment for not more than two years, or a fine not exceeding three million won. In such cases, the received financial benefits, etc. shall be confiscated, and when it is impossible to confiscate the financial benefits, such asset value shall be charged.
[This Article Newly Inserted by Act No. 10325, May 27, 2010]

Article 88-3 (Penal Provisions)

Any person who violates Article 20 shall be sentenced to imprisonment for not more than two years, or a fine not exceeding ten million won.
[This Article Newly Inserted by Act No. 9906, Dec. 31, 2009]
Article 89 (Penal Provisions)
Any person who violates any provisions of Articles 15 (1), 17 (1) and (2) (excluding the latter part of the proviso to paragraphs (1) and the proviso to paragraph (2)), 56 (1) through (4), 57 (1), and 58-6 (2) shall be sentenced to imprisonment for not more than one year, or a fine not exceeding five million won. <Amended by Act No. 10387, Jul. 23, 2010>

Article 90 (Penal Provisions)
Any person, who has violated Articles 16 (1) and (2), 17 (3) or (4), 18 (4), 21 (3) and (5), 22, 26, 27 (2) or 33 (1), (3) (including cases to which said paragraph shall apply mutatis mutandis pursuant to Article 82 (3)), and (5) (which refers only to a case of permission), the main sentence of Article 35 (1), Articles 41, 42 (1), 48 (3) and (4), and 77 (2), or the orders under Article 63, or who has been employed by a person who is not eligible for establishing a medical institution to perform medical practice, shall be sentenced to a fine not exceeding three million won. <Amended by Act No. 8559, Jul. 27, 2007; Act No. 9386, Jan. 30, 2009>

Article 91 (Joint Penal Provisions)
Where a representative of a corporation or an agent, employee or other servant of the corporation or an individual commits a violation under Article 87, 88, 88-3, 89, or 90 in connection with the business of the corporation or the individual, not only shall such violator be punished, but the corporation or the individual shall be punished by a fine under the relevant provisions: Provided, That this shall not apply where such corporation or individual has not been negligent in giving due attention and supervision concerning the relevant business to prevent such violation. <Amended by Act No. 10325, May 27, 2010>
[This Article Wholly Amended by Act No. 9906, Dec. 31, 2009]
<This paragraph amended by Act No. 9906 on December 31, 2009 following the decision of unconstitutionality made by the Constitutional Court on July 30, 2009>

Article 92 (Fines for Negligence)
(1) Any person who falls under any of the following subparagraphs shall be sentenced to a fine for negligence not exceeding three million won:

1. A person who installs and operates a radiation generator for diagnosis without submitting a report under Article 37 (1);
2. A person who fails to appoint a person responsible for safety control, conduct a periodic inspection and measurement, or take measures to control radiation exposure to staff in radiation-related service, in compliance with Article 37 (2);
3. A person who fails to furnish information on elective treatment, in violation of Article 46 (3);
4. A person, who fails to submit a report, in violation of Article 49 (3).

(2) Any person, who fails to submit a report under Article 61 (1) or who rejects, hinders or avoids an inspection, shall be sentenced to a fine for negligence not exceeding two million won.

(3) Any person who falls under any of the following subparagraphs shall be sentenced to a fine for negligence not exceeding one million won: <Amended by Act No. 9386, Jan. 30, 2009>

1. A person who fails to take the continuing education course under Article 30 (3) (including the case to which said paragraph shall apply mutatis mutandis pursuant to Article 82 (3));
2. A person who fails to submit a report on a change under Article 33 (5) (including the case to which said paragraph shall apply mutatis mutandis pursuant to Article 82 (3));
3. A person who fails to submit a report on suspension or temporary shutdown of medical services under Article 40 (1) (including the case to which said paragraph shall apply mutatis mutandis pursuant to Article 82 (3)), or who fails to transfer a medical record card or similar, in violation of Article 40 (2);
4. A person who uses the title of a medical institution or any similar name, in violation of Article 42 (3);

5. A person who commits violation in indicating his/her medical department under Article 42 (5).

(4) Fines for negligence under paragraphs (1) through (3) shall be imposed and collected by the Minister of Health and Welfare or the head of each Si/Gun/Gu, as prescribed by Presidential Decree. <Newly Inserted by Act No. 9386, Jan. 30, 2009; Act No. 9932, Jan. 18, 2010>

Article 93 Deleted.<by Act No. 9386, Jan. 30, 2009>

**ADDENDA**

Article 1 (Enforcement Date)

This Act shall enter into force on the date of its promulgation: Provided, That the amended provisions of Articles 4, 17 (1), 36, 46 (3) through (6), 49, the part, other than subparagraphs of Article 51, and subparagraph 5 of the same Article, Chapter IV (Articles 53 through 55), 56 (2) 1, 92 (1) 3 and 4 shall enter into force on April 28, 2007, and the amended provisions of Article 3 (3) 2 as amended shall enter into force on June 27, 2007, while the provisions of Article 20 (17) of Addenda shall enter into force on September 1, 2007.

Article 2 (Transitional Measures concerning Enforcement Date)

Until the provisions of Articles 3 (3) 2, 4, 17 (1), 36, 46 (4) through (6) and 49, the part, other than subparagraphs of Articles 51 and 56 (2) 1 as amended become enforceable pursuant to the proviso to Article 1 of Addenda, the former corresponding provisions of Articles 3 (3) 2, 4, 18 (1), 32, 37-2 (3) through (5), 42, the part, other than subparagraphs of Articles 45 and 46 (2) 1 shall remain applicable.

Article 3 (Effective Period)

The amended provisos to Articles 43 and 77 (2) shall be effective until December 31, 2008.

Article 4 (Applicability to Regulation and Examination on Advertisement of Medical Service)

The amended provisions of Articles 56 and 57 shall apply to the advertisements of medical service run on and after April 4, 2007, which corresponds to the enforcement date of the partial amendment to the Medical Service Act (Act No. 8203).

Article 5 (Transitional Measures concerning Licenses, etc. for Medical Doctor, etc.)

The persons, who obtained a license for medical doctor, dentist, oriental medical doctor, midwife, nurse, or nursing assistant (or assistant nurse), and the persons who obtained an accredited qualification for medical specialist, specialized nurse (including qualification for nurse for a specific medical field), or massagist, pursuant to the former provisions in force at the time when this Act enters into force, shall be deemed to hold a license issued pursuant to this Act.

Article 6 (Transitional Measures concerning Medical Institutions, etc.)

The medical institutions and massage parlors established pursuant to the former provisions in force at the time when this Act enters into force shall be deemed to have been established pursuant to this Act.

Article 7 (Transitional Measures concerning Establishment of Medical Doctors' Association, etc.)

The medical doctors' association, the dentists' association, the oriental medical doctors' association, the midwives' association, and the nurses' association established pursuant to the former provisions in force as of August 17, 1973, which corresponds to the enforcement date of the amendment to the Medical Service Act (Act No. 2533), shall be deemed to have been established pursuant to this Act respectively.

Article 8 (Transitional Measures concerning Implementation of National Examination for Midwife)

As to the licenses for midwife to the trainees in the medical institutions under subparagraph 1 of Article 6 in force as of
March 29, 1988, which corresponds to the enforcement date of the amendment to the Medical Service Act (Act No. 3948), the former provisions shall remain applicable.

Article 9 (Transitional Measures concerning Qualifications for Taking National Examination for Medical Doctor, Dentist, Oriental Medical Doctor, or Nurse)

As to the persons with qualification for taking the examination recognized by the Minister of Health and Welfare and the students enrolled in any of foreign universities and colleges recognized by the Minister of Health and Welfare, pursuant to the former provisions in force as of July 8, 1994, which corresponds to the enforcement date of the amendment to the Medical Service Act (Act No. 4732), the former provisions shall remain applicable.

Article 10 (Transitional Measures concerning Permission for Mutual Aid Program)

The mutual aid programs for which each central association obtained a permission of the Minister of Health and Welfare pursuant to the former provisions in force as of July 8, 1994, which corresponds to the enforcement date of the amendment to the Medical Service Act (Act No. 4732), shall be deemed to have been reported pursuant to this Act.

Article 11 (Transitional Measures concerning Appointment of Medical Instructors)

The medical monitors appointed pursuant to the former provisions in force as of July 8, 1994, which corresponds to the enforcement date of the amendment to the Medical Service Act (Act No. 4732), shall be deemed to have been appointed as medical instructors pursuant to this Act.

Article 12 (Transitional Measures concerning Special Exceptions for National and Public Medical Institutions, etc.)

As to the medical institutions established with a permission obtained or a report submitted on or before July 13, 2000 that corresponds to the enforcement date of the amendment to the Medical Service Act (Act No. 6157), to which the provisions concerning special exceptions for national and public medical institutions, etc. have been applied pursuant to former Article 38, the provisions of Article 36 as amended shall not be applicable.

Article 13 (Transitional Measures concerning Medical Fee)

It shall be deemed that the medical fees approved by the Mayor/Do governor pursuant to the former provisions in force as of July 13, 2000, which corresponds to the enforcement date of the amendment to the Medical Service Act (Act No. 6157), have been reported to the Mayor/Do governor or the head of Si/Gun/Gu respectively pursuant to the provisions of Article 45 as amended.

Article 14 (Transitional Measures concerning Medical Practices Included in Descriptions of Medical Care Benefit Expenses)

The medical practices (including non-benefit medical practices) included in the descriptions of medical care benefit expenses predetermined and publicly notified by the Minister of Health, Welfare and Family Affairs pursuant to Article 42 (4) of the National Health Insurance Act as of July 28, 2007, which corresponds to the enforcement date of the partial amendment to the Medical Service Act (Act No. 8067), shall be deemed to have passed the evaluation of new medical technology pursuant to the provisions of Article 53 as amended.

Article 15 (Transitional Measures concerning Re-issuance of Licenses to Medical Persons)

As to the medical persons who have their licenses revoked on any ground other than the ground for revocation of license under the amended provisions of Article 65 (1) in force as of July 13, 2000, which corresponds to the enforcement date of the amendment to the Medical Service Act (Act No. 6157), the licenses revoked may be re-issued on and after July 13, 2000, which corresponds to the enforcement date of the amendment to the Medical Service Act (Act No. 6157), notwithstanding the provisions of Article 65 (2) as amended.

Article 16 (Transitional Measures concerning Establishment of Plan for Supply and Demand for Patient Beds)

The basic implementation policy and the plan for supply and demand for patient beds established pursuant to Article 13 of the former Special Act on Sound Finance of National Health Insurance before January 1, 2007, which corresponds to the
enforcement date of the partial amendment to the Medical Service Act (Act No. 8154) shall be deemed to be the basic implementation policy and the plan for supply and demand for patient beds under the provisions of Article 60 as amended.

Article 17 (Transitional Measures concerning Orders for Corrective Measures, etc.)
The offences committed in violation of Article 14 (1) or (2) of the former Special Act on Sound Finance of National Health Insurance before January 1, 2007, which corresponds to the enforcement date of the partial amendment to the Medical Service Act (Act No. 8154), and restrictions, bans, and orders for corrective measures already imposed or issued on or against such offences shall be deemed to be the offenses committed in violation of Article 38 (1) or (2) as amended and the orders for corrective measures, etc. against such offenses issued pursuant to the provisions of Article 63 as amended.

Article 18 (General Transitional Measures concerning Dispositions, etc.)
The actions taken by or against administrative agencies pursuant to the former provisions in force at the time when this Act enters into force shall be deemed to be the actions taken by or against such administrative agencies pursuant to the corresponding provisions of this Act.

Article 19 (Transitional Measures concerning Penal Provisions or Fine for Negligence)
(1) The acts committed before this Act enters into force shall be governed by the former provisions in applying penal provisions or the provisions pertaining to fine for negligence.

(2) The offences committed in violation of Article 14 (3) of the former Special Act on Sound Finance of National Health Insurance before January 1, 2007, which corresponds to the enforcement date of the partial amendment to the Medical Service Act (Act No. 8154), shall be governed by the former provisions in applying penal provisions.

Article 20 Omitted.

Article 21 (Relations with Other Acts and Subordinate Statutes)
A citation of the former Medical Service Act, or any provisions thereof, by any other Act and subordinate statute enforceable at the time when this Act enters into force, if any, shall be deemed to be a citation of this Act or the corresponding provisions hereof in lieu of the former provisions.

ADDENDA<Act No. 8559, Jul. 27, 2007>
(1) (Enforcement Date) This Act shall enter into force six months after the date of its promulgation: Provided, That the amended provisions of Article 64 (1) 5 and proviso to Article 65 (2) shall enter into force on the date of its promulgation.

(2) (Applicability concerning Penal Provisions) The amended provision of Article 90 shall enter into force from the first medical prescription issued after this Decree enters into force.

ADDENDUM<Act No. 8651, Oct. 17, 2007>
This Act shall enter into force six months after the date of its promulgation.

ADDENDA<Act No. 8852, Feb. 29, 2008>

Article 1 (Enforcement Date)
This Act shall enter into force on the date of its promulgation. (Proviso Omitted.)

Articles 2 through 7 Omitted.

ADDENDUM<Act No. 9135, Oct. 14, 2008>
This Act shall enter into force on the date of its promulgation.
ADDENDA<Act No. 9386, Jan. 30, 2009>

Article 1 (Enforcement Date)
This Act shall enter into force one year after the date of its promulgation: Provided, That the amended provisions of Articles 27 (1), 33, the proviso to Article 43 (5), the proviso to Article 77 (2), Article 87 (1) 2, and Article 4 of the Addenda shall enter into force on the date of its promulgation. The amended provision of Articles 27 (3) and (4), 27-2, 56 and 63 (limited to corrective orders issued when violating the amended provisions of Article 27-2 (1), (2), (3) and (5)) and 88 shall enter into force three months after the date of its promulgation while the amended provisions of Article 3-5 shall enter into force two years after the date of its promulgation.

Article 2 (Effective Period)
Matters concerning a dentist from among the amended provisions of the provisos to Articles 43 (5) and 77 (2) is effective until December 31, 2013 while matters concerning an oriental medical doctor from among the amended provisions of the proviso to Article 77 (2) is effective until December 31, 2009.

Article 3 (Transitional Measures concerning Kinds and Establishment of Medical Institutions)
(1) A medical clinic, dental clinic, oriental medical clinic or midwifery clinic under the former provisions at the time this Act enters into force shall be deemed a medical clinic, dental clinic, oriental medical clinic or midwifery clinic under the amended provisions of Article 3 (2) 1 or 2.

(2) A hospital, dental hospital, oriental medical hospital and general hospital under the former provisions at the time this Act enters into force shall be deemed a hospital, dental hospital, oriental medical hospital and general hospital under the amended provisions of Article 3 (2) 3.

(3) A medical institution accredited as a specialized general medical care institution under Article 40 (2) of the National Health Insurance Act at the time this Act enters into force shall be deemed to be designated as a superior general hospital under the amended provisions of Article 3-4 (1).

(4) A medical institution established by a government-invested institution under the former provisions at the time this Act enters into force shall be deemed established under the amended provisions of Article 33 (2) 5.

Article 4 (Transitional Measures concerning Establishment of Medical Institution by Medical Person Having Multiple Licenses)
Where a person having not less than two medical licenses intends to establish a clinic-level medical institution together at one location by types of his/her licenses under the amended provisions of the proviso to Article 33 (8) from January 1, 2009 to June 30, 2009 reports to the head of a Si/Gun/Gu, as prescribed by the Minister of Health, Welfare and Family Affairs, shall be deemed to have reported under Article 33 (3).

Article 5 (Transitional Measures concerning Penal Provisions and Fines for Negligence)
The application of penal provisions and fines for negligence for an act conducted before this Act enters into force shall be governed by the former provisions.

Article 6 Deleted.

Article 7 (Relation to other Acts and Subordinate Statutes)
Where the former provisions of the Medical Service Act are cited in other Acts and subordinate statutes at the time this Act enters into force, the corresponding provisions of this Act are deemed cited in lieu of the former provisions if the corresponding provisions exist in this Act.

ADDENDUM<Act No. 9906, Dec. 31, 2009>
This Act shall enter into force on the date of its promulgation.
ADDENDA<Act No. 9932, Jan. 18, 2010>

Article 1 (Enforcement Date)
This Act shall enter into force two months after the date of its promulgation. (Proviso Omitted.)

Articles 2 through 5 Omitted.

ADDENDUM<Act No. 10325, May 27, 2010>
This Act shall enter into force from the date on which six months lapse after the promulgation of this Act.

ADDENDA<Act No. 10387, Jul. 23, 2010>

(1) (Enforcement Date) This Act shall enter into force from the date on which six months lapse after the promulgation of this Act: Provided, That the amended provisions of Article 66 (3) shall enter into force on the date of its promulgation, and the amended provisions of Article 58-4 (2) , 63 and 83 (2) 1 shall enter into force on January 1, 2013.

(2) (Transitional Measures concerning Evaluation on Medical Institutions) A medical institution which has undergone evaluation conducted based on evaluation standards for year 2010 pursuant to the former Article 58 as at the time this Act enters into force shall be deemed to have filed an application for accreditation pursuant to the amended provisions of Article 58-4 (1) . In such cases, when the medical institution is accredited, the accrediting institution may collect fees required for the accreditation under the amended provision of paragraph (3) of the same Article.

(3) Omitted.