GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2015

H HOUSE BILL 543

Short Title:	Amend Laws Pertaining to NC Medical Board.	(Public)
Sponsors:	Representatives Brawley and Jones (Primary Sponsors).	
	For a complete list of Sponsors, refer to the North Carolina General Assembly We	eb Site.
Referred to:	Health, if favorable, Finance.	

April 6, 2015

A BILL TO BE ENTITLED
AN ACT AMENDING LAWS PERTAINING TO THE NORTH CAROLINA MEDICAL
BOARD.

The General Assembly of North Carolina enacts:

SECTION 1. G.S. 90-2(b) reads as rewritten:

"(b) No member shall serve more than two complete consecutive three-year terms, terms in a lifetime, except that each member shall serve until a successor is chosen and qualifies."

SECTION 2. G.S. 90-3(b) reads as rewritten:

"(b) To be considered qualified for a physician position or the physician assistant or nurse practitioner position on the Board, an applicant shall meet each of the following criteria:

. . . .

 (10) Have not served more than 72 months as a member of the Board." **SECTION 3.** G.S. 90-3(c) reads as rewritten:

"(c) The <u>review panelReview Panel</u> shall recommend at least two qualified nominees for each open position on the Board. If the Governor chooses not to appoint either of the recommended nominees, the Review Panel shall recommend at least two new qualified nominees."

SECTION 4. G.S. 90-3 is amended by adding new subsections to read:

- "(f) Notwithstanding any provision of G.S. 90-16, the Board may provide confidential and nonpublic licensing and investigative information in its possession to the Review Panel.
- (g) All applications, records, papers, files, reports, and all investigative and licensing information received by the Review Panel from the Board and other documents received or gathered by the Review Panel, its members, employees, agents, and consultants as a result of soliciting, receiving, and reviewing applications and making recommendations as required in this section shall not be considered public records within the meaning of Chapter 132 of the General Statutes. All such information shall be privileged, confidential, and not subject to discovery, subpoena, or other means of legal compulsion for release to any person other than to the Review Panel, the Board, and their employees, agents, or consultants, except as provided in this section. The Review Panel shall publish on its Internet Web site the names and practice addresses of all applicants within 10 days after the application deadline. The Review Panel shall publish on its Internet Web site the nominees recommended to the Governor within 10 days after notifying the Governor of those recommendations and not less than 30 days prior to the expiration of the open position on the Board.



(h) The Review Panel is a public body within the meaning of Article 33C of Chapter 143 of the General Statutes. In addition to the provisions contained in Article 33C of Chapter 143 of the General Statutes permitting a public body to conduct business in a closed session, the Review Panel shall meet in closed session to review applications; interview applicants; review and discuss information received from the Board; and discuss, debate, and vote on recommendations to the Governor."

SECTION 5. G.S. 90-5.2(7) reads as rewritten:

"(7) An A current, active e-mail address or facsimile number address, which shall not be made available to the public and shallconsidered a public record within the meaning of Chapter 132 of the General Statutes. This information may be used or made available by the Board for the purpose of expediting the dissemination of disseminating or soliciting information about a affecting public health emergency. or the practice of medicine."

SECTION 6. G.S. 90-5.2(a1) reads as rewritten:

"(a1) The Board shall make e-mail addresses and facsimile numbers reported pursuant to G.S. 90-5.2(a)(7) available to the Department of Health and Human Services for use in the North Carolina Controlled Substance Reporting System established by Article 5E of this Chapter."

SECTION 7. G.S. 90-8.1 reads as rewritten:

"§ 90-8.1. Rules governing applicants for licensure.

(a) The North Carolina Medical Board is empowered to adopt rules that prescribe additional qualifications for an applicant, including education and examination requirements and application procedures.

(b) The Board shall not deny an application for licensure based solely on the applicant's failure to become board certified."

SECTION 8. G.S. 90-13.1(a) reads as rewritten:

"(a) Each applicant for a license to practice medicine and surgery in this State under either G.S. 90-9.1 or G.S. 90-9.2 shall pay to the North Carolina Medical Board an application fee of three-four hundred fifty dollars (\$350.00).(\$400.00)."

SECTION 9. G.S. 90-13.2 reads as rewritten:

"§ 90-13.2. Registration every year with Board.

(a) Every person licensed to practice medicine by the North Carolina Medical Board shall register annually with the Board within 30 days of the person's birthday.

(b) A person who registers with the Board shall report to the Board the person's name and office and residence address and any other information required by the Board, and shall pay an annual registration fee of one hundred seventy fivetwo hundred fifty dollars (\$175.00),(\$250.00), except those who have a limited license to practice in a medical education and training program approved by the Board for the purpose of education or training shall pay a registration fee of one hundred twenty-five dollars (\$125.00),(\$125.00) and those who have a retired limited volunteer license pursuant to G.S. 90-12.1B shall pay an annual registration fee of twenty five dollars (\$25.00), and those who haveor a limited volunteer license pursuant to G.S. 90-12.1A shall pay no annual registration fee. However, licensees who have a limited license to practice for the purpose of education and training under G.S. 90-12.01 shall not be required to pay more than one annual registration fee for each year of training.

- (c) A physician who is not actively engaged in the practice of medicine in North Carolina and who does not wish to register the license may direct the Board to place the license on inactive status.
- (d) A physician who is not actively engaged in the practice of medicine in North Carolina and who does not wish to register the license may direct the Board to place the license on inactive status.

Page 2 H543 [Edition 1]

- (e) A physician who fails to register as required by this section shall pay an additional fee of fifty dollars (\$50.00) to the Board. The license of any physician who fails to register and who remains unregistered for a period of 30 days after certified notice of the failure is automatically inactive. The Board shall retain jurisdiction over the holder of the inactive license.
- (f) Except as provided in G.S. 90-12.1B, a person whose license is inactive shall not practice medicine in North Carolina nor be required to pay the annual registration fee.
- (g) Upon payment of all accumulated fees and penalties, the license of the physician may be reinstated, subject to the Board requiring the physician to appear before the Board for an interview and to comply with other licensing requirements. The penalty may not exceed the maximum fee for a license under G.S. 90-13.1.
- (h) The Board shall not deny a licensee's annual registration based solely on the licensee's failure to become board certified."

SECTION 10. G.S. 90-14(n) reads as rewritten:

"(n) Notwithstanding subsection (m) of this section, if the licensee has retained eounsel and the Board has not made a nonpublic determination to initiate disciplinary proceedings, counsel, the Board may serve to both the licensee and the licensee's counsel orders to produce, orders to appear, or submit to assessment or examination or orders following a hearing, or provide notice that the Board will not be taking any further action against a licensee to both the licensee and the licensee's counsel.licensee."

SECTION 11. G.S. 90-14.2 is amended by adding a new subsection to read:

- "(c) Once charges have been issued, the parties may engage in discovery as provided in G.S. 1A-1, the North Carolina Rules of Civil Procedure. Additionally, the Board shall provide the respondent or respondent's counsel with all exculpatory evidence in its possession, except for the following:
 - (1) <u>Information that is subject to attorney-client privilege.</u>
 - (2) <u>Information that would identify an anonymous complainant.</u>
 - (3) <u>Information related to advisory opinions, recommendations, or deliberations</u> by the Board, its staff, and its consultants that will not be entered into evidence."

SECTION 12. G.S. 90-14.13(a1)(1) reads as rewritten:

- "(a1) A hospital is not required to report:
 - (1) The suspension or limitation of a physician's privileges for failure to timely complete medical records unless the suspension or limitation is the third within the calendar year for failure to timely complete medical records. Upon reporting the third suspension or limitation, the hospital shall also report the previous two suspensions or limitations.records."

SECTION 13. G.S. 90-21.22A is recodified as G.S. 90-21.22B under Article 1D of Chapter 90 of the General Statutes.

SECTION 14. Article 1D of Chapter 90 of the General Statutes is renamed as follows:

"Article 1D.

Peer Review. Health Program for Medical Professionals."

SECTION 15. Article 1D of Chapter 90 of the General Statutes is amended by adding a new section to read:

"§ 90-21.22A. Health Program for Medical Professionals.

(a) The Board may enter into an agreement with the North Carolina Medical Society, the North Carolina Academy of Physician Assistants, and the North Carolina Physicians Health Program for the purposes of identifying, reviewing, and evaluating the ability of licensees of the Board who have been referred to the North Carolina Physicians Health Program to function

H543 [Edition 1] Page 3

in their professional capacity; and coordinating regimens for treatment and rehabilitation. The agreement shall include guidelines for all of the following:

- (1) The assessment, referral, monitoring, support, and education of licensees of the Board by reason of a physical or mental illness, a substance abuse-related disorder, or professional sexual misconduct.
- (2) Procedures for the Board to refer licensees to the North Carolina Physicians Health Program.
- (3) <u>Criteria for the North Carolina Physicians Health Program to report licensees</u> to the Board.
- (4) A procedure by which licensees may obtain review of recommendations for assessment or treatment by the North Carolina Physicians Health Program.
- (5) Periodic reporting of statistical information by the North Carolina Physicians
 Health Program to the Board, the North Carolina Medical Society, and the
 North Carolina Academy of Physician Assistants.
- (6) Maintaining the confidentiality of nonpublic information.
- (b) The Board, the North Carolina Medical Society, and the North Carolina Academy of Physician Assistants may provide funds for the administration of the North Carolina Physicians Health Program.
- (c) The North Carolina Physicians Health Program shall report immediately to the Board detailed information about any licensee of the Board who meets any of the following criteria:
 - (1) Constitutes an imminent danger to patient care by reason of a physical or mental illness, a substance abuse-related disorder, professional sexual misconduct, or any other reason.
 - (2) Has entered into a monitoring contract with the health program and fails to comply with the terms of the monitoring contract.
 - (3) Refuses to submit to an assessment as ordered by the Board.
 - (4) Is still unsafe to practice medicine after treatment.
- (d) Any information acquired, created, or used in good faith by the North Carolina Physicians Health Program pursuant to this section is privileged, confidential, and not subject to discovery, subpoena, or other means of legal compulsion for release to any person other than to the Board, the North Carolina Physicians Health Program, or their employees or consultants. No person who participates in good faith in the North Carolina Physicians Health Program shall be required to disclose in a civil case the fact of participation or any information acquired or opinions, recommendations, or evaluations acquired or developed solely during the course of participating in the program pursuant to this section.
- (e) Upon the written request of a licensee, the North Carolina Physicians Health Program shall provide the licensee or the licensee's legal counsel with a copy of a written assessment of the licensee prepared as part of the licensee's participation in the program. In addition, the licensee shall be entitled to a copy of any written assessment created by an alcohol or chemical dependency treatment facility at the recommendation of the North Carolina Physicians Health Program, to the extent permitted by State and federal laws and regulations. Any information furnished to a licensee pursuant to this subsection shall be inadmissible in evidence and shall not be subject to discovery in any civil proceeding. However, this subsection shall not be construed to make information, documents, or records otherwise available for discovery or use in a civil action immune from discovery or use in a civil action merely because the information, documents, or records were included as part of the North Carolina Physicians Health Program's assessment of the licensee or were the subject of information furnished to the licensee pursuant to this subsection.
- (f) Activities conducted in good faith pursuant to the agreement authorized by subsection (a) of this section shall not be grounds for civil action under the laws of this State.

Page 4 H543 [Edition 1]

1 (g) The Board has authority to adopt, amend, or repeal rules as may be necessary to 2 3 carry out and enforce the provisions of this section.

SECTION 16. G.S. 90-16(d) and G.S. 90-21.22 are repealed. **SECTION 17.** This act becomes effective October 1, 2015.

H543 [Edition 1] Page 5