

**GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2007**

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HOUSE BILL 818*

Short Title: Amend Practice of Medicine Laws.-AB (Public)

Sponsors: Representatives Allen; Alexander and England.

Referred to: Health, if favorable, Judiciary III.

March 15, 2007

1 A BILL TO BE ENTITLED
2 AN ACT TO AMEND THE LAWS PERTAINING TO THE PRACTICE OF
3 MEDICINE.

4 The General Assembly of North Carolina enacts:

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

7 "**§ 90-1A. Definitions.**

8 The following definitions apply in this Article:

9 (1) Board. – The North Carolina Medical Board.

10 (2) Hearing officer. – Any current or past member of the Board who is a
11 physician, physician assistant, or nurse practitioner and has an active
12 license or approval to practice medical acts, tasks, or functions issued
13 by the Board, or any current or retired judge of the Office of
14 Administrative Hearings, a State district court, a State superior court,
15 the North Carolina Court of Appeals, the North Carolina Supreme
16 Court, or of the federal judiciary who has an active license to practice
17 law in North Carolina and who is a member in good standing of the
18 North Carolina State Bar.

19 (3) Integrative medicine. – A diagnostic or therapeutic treatment that may
20 not be considered a conventionally accepted medical treatment and
21 that a licensed physician in the physician's professional opinion
22 believes may be of potential benefit to the patient, so long as the
23 treatment poses no greater risk of harm to the patient than the
24 comparable conventional treatments.

25 (4) License. – An authorization issued by the Board to a physician or
26 physician assistant to practice medical acts, tasks, or functions.

27 (5) The practice of medicine or surgery. – The practice of medicine or
28 surgery includes any of the following acts:

- 1 a. Advertising, holding out to the public, or representing in any
2 manner that the individual is authorized to practice medicine in
3 this State.
- 4 b. Offering or undertaking to prescribe, order, give, or administer
5 any drug or medicine for the use of any other individual.
- 6 c. Offering or undertaking to prevent or diagnose, correct, or treat
7 in any manner or by any means, methods, or devices any
8 disease, illness, pain, wound, fracture, infirmity, defect, or
9 abnormal physical or mental condition of any individual,
10 including the management of pregnancy or parturition.
- 11 d. Offering or undertaking to perform any surgical operation on
12 any individual.
- 13 e. Rendering a determination of medical necessity or a decision
14 affecting the diagnosis or treatment of a patient.
- 15 f. Using the designation 'Doctor,' 'Doctor of Medicine,' 'Doctor of
16 Osteopathy,' 'Doctor of Osteopathic Medicine,' 'Physician,'
17 'Surgeon,' 'Physician and Surgeon,' 'Dr.,' 'M.D.,' 'D.O.,' or any
18 combination thereof in the conduct of any occupation or
19 profession pertaining to the prevention, diagnosis, or treatment
20 of human disease or condition, unless the designation
21 additionally contains the description of another branch of the
22 healing arts for which the individual holds a valid license in this
23 State.
- 24 g. Cosmetic procedures employing lasers or other means that
25 involve the revision, destruction, incision, or structural
26 alteration of human tissue, unless otherwise permitted by law.
- 27 h. Rendering a written or otherwise documented medical opinion
28 concerning the diagnosis or treatment of a patient or the actual
29 rendering of treatment to a patient in this State by a physician
30 located outside this State as a result of transmission of
31 individual patient data by electronic or other means from within
32 a state to the physician or the physician's agent.
- 33 i. The performance of any act described in this subdivision by use
34 of any electronic means, including the Internet or a toll-free
35 telephone number."

36 **SECTION 2.** G.S. 90-2.1 is repealed.

37 **SECTION 3.** Article 1 of Chapter 90 of the General Statutes is amended by
38 adding a new section to read:

39 "**§ 90-5.1. Powers and duties of the Board.**

40 (a) The Board shall have the power and duty to:

41 (1) Administer this Article.

42 (2) Issue interpretations of this Article.

43 (3) Adopt, amend, or repeal rules as may be necessary to carry out and
44 enforce the provisions of this Article.

- 1 (4) Require an applicant or licensee to submit to the Board evidence of the
2 applicant's or licensee's continuing competence in the practice of
3 medicine.
- 4 (5) Regulate the retention and disposition of medical records, whether in
5 the possession of a licensee or non-licensee, and, in the case of the
6 death of a licensee, provide for the disposition of the medical records
7 by the estate of the licensee.
- 8 (6) Appoint a temporary or permanent custodian for medical records
9 abandoned by a licensee.
- 10 (7) Develop educational programs to facilitate licensee awareness of
11 provisions contained in this Article and public awareness of the role
12 and function of the Board.
- 13 (8) Develop and implement methods to identify dyscompetent physicians
14 and physicians who fail to meet acceptable standards of care.
- 15 (9) Develop and implement methods to assess and improve physician
16 practice.
- 17 (10) Develop and implement methods to ensure the ongoing competence of
18 licensees.

19 (b) Nothing in subsection (a) of this section shall restrict or otherwise limit
20 powers and duties conferred on the Board in other sections of this Article."

21 **SECTION 4.** G.S. 90-6(a) is recodified as G.S. 90-8.1; G.S. 90-6(b) and (c),
22 respectively, are recodified as G.S. 90-8.2(a) and (b), respectively; G.S. 90-12.1 is
23 recodified as G.S. 90-12.4; G.S. 90-12.2 is recodified as G.S. 90-12.5; G.S. 90-15 is
24 recodified as G.S. 90-13.1; and G.S. 90-15.1 is recodified as G.S. 90-13.2.

25 **SECTION 5.** G.S. 90-8.1, as recodified in Section 4 of this act, reads as
26 rewritten:

27 "**§ 90-8.1. Rules governing applicants for license, examinations, etc.; appointment**
28 **of subcommittees.licensure.**

29 (a) The North Carolina Medical Board is empowered to ~~prescribe such~~adopt
30 rules as it may deem proper, governing applicants for license, admission to
31 examinations, the conduct of applicants during examinations, and the conduct of
32 examinations proper.that prescribe additional qualifications for an applicant, including
33 education and examination requirements and application procedures."

34 **SECTION 6.** G.S. 90-8.2, as recodified in Section 4 of this act, reads as
35 rewritten:

36 "**§ 90-8.2. Appointment of subcommittees.**

37 (a) The North Carolina Medical Board shall appoint and maintain a
38 subcommittee to work jointly with a subcommittee of the Board of Nursing to develop
39 rules to govern the performance of medical acts by registered nurses, including the
40 determination of reasonable fees to accompany an application for approval not to
41 exceed one hundred dollars (\$100.00) and for renewal of approval not to exceed fifty
42 dollars (\$50.00). ~~The fee for reactivation of an inactive incomplete application shall be~~
43 ~~five dollars (\$5.00).~~ Rules developed by this subcommittee from time to time shall
44 govern the performance of medical acts by registered nurses and shall become effective

1 when adopted by both the North Carolina Medical Board and the Board of Nursing. The
2 North Carolina Medical Board shall have responsibility for securing compliance with
3 these rules.

4 (b) The North Carolina Medical Board shall appoint and maintain a
5 subcommittee of four licensed physicians to work jointly with a subcommittee of the
6 North Carolina Board of Pharmacy to develop rules to govern the performance of
7 medical acts by clinical pharmacist practitioners, including the determination of
8 reasonable fees to accompany an application for approval not to exceed one hundred
9 dollars (\$100.00) and for renewal of approval not to exceed fifty dollars (\$50.00). The
10 fee for reactivation of an inactive incomplete application shall be five dollars (\$5.00).
11 Rules recommended by the subcommittee shall be adopted in accordance with Chapter
12 150B of the General Statutes by both the North Carolina Medical Board and the North
13 Carolina Board of Pharmacy and shall not become effective until adopted by both
14 Boards. The North Carolina Medical Board shall have responsibility for ensuring
15 compliance with these rules."

16 **SECTION 7.** G.S. 90-9 and G.S. 90-10 are repealed.

17 **SECTION 8.** Article 1 of Chapter 90 of the General Statutes is amended by
18 adding the following new sections to read:

19 **§ 90-9.1. Requirements for licensure as a physician.**

20 (a) Except as provided in G.S. 90-9.2, to be eligible for licensure as a physician,
21 an applicant shall submit proof satisfactory to the Board that the applicant:

22 (1) Has passed each part of an examination described in G.S. 90-10.1;

23 (2) Is a graduate of:

24 a. A medical college approved by the Liaison Commission on
25 Medical Education, the Committee for the Accreditation of
26 Canadian Medical Schools, or an osteopathic college approved
27 by the American Osteopathic Association and has successfully
28 completed one year of training in a medical education program
29 approved by the Board after graduation from medical school; or

30 b. A medical college approved by the Liaison Commission on
31 Medical Education, the Committee for the Accreditation of
32 Canadian Medical Schools, or an osteopathic college approved
33 by the American Osteopathic Association, is a dentist licensed
34 to practice dentistry under Article 2 of Chapter 90 of the
35 General Statutes, and has been certified by the American Board
36 of Oral and Maxillofacial Surgery after having completed a
37 residency in an Oral and Maxillofacial Surgery Residency
38 program approved by the Board before completion of medical
39 school; and

40 (3) Is of good moral character.

41 (b) No license may be granted to any applicant who graduated from a medical or
42 osteopathic college that has been disapproved by the Board pursuant to rules adopted by
43 the Board.

1 (c) The Board may, by rule, require an applicant to comply with other
2 requirements or submit additional information the Board deems appropriate.

3 **"§ 90-9.2. Requirements for graduates of foreign medical schools.**

4 (a) To be eligible for licensure under this section, an applicant who is a graduate
5 of a medical school not approved by the Liaison Commission on Medical Education, the
6 Committee for the Accreditation of Canadian Medical Schools, or the American
7 Osteopathic Association shall submit proof satisfactory to the Board that the applicant:

8 (1) Has successfully completed three years of training in a medical
9 education program approved by the Board after graduation from
10 medical school;

11 (2) Is of good moral character;

12 (3) Has a currently valid standard certificate of Educational Commission for
13 Foreign Medical Graduates (ECFMG); and

14 (4) Is able to communicate in English.

15 (b) The Board may waive ECFMG certification if the applicant:

16 (1) Has passed the ECFMG examination and successfully completed an
17 approved Fifth Pathway Program. The applicant is required to provide
18 the original ECFMG Certification Status Report from the ECFMG; or

19 (2) Has been licensed in another state on the basis of written examination
20 before the establishment of ECFMG in 1958.

21 (c) The Board may, by rule, require an applicant to comply with other
22 requirements or submit additional information the Board deems appropriate.

23 **"§ 90-9.3. Requirements for licensure as a physician assistant.**

24 (a) To be eligible for licensure as a physician assistant, an applicant shall submit
25 proof satisfactory to the Board that the applicant:

26 (1) Has successfully completed an educational program for physician
27 assistants or surgeon assistants accredited by the Committee on Allied
28 Health Education and Accreditation or by the Committee's predecessor
29 or successor entities;

30 (2) Holds or previously held a certificate issued by the National
31 Commission on Certification of Physician Assistants; and

32 (3) Is of good moral character.

33 (b) Before initiating practice of medical acts, tasks, or functions as a physician
34 assistant, the physician assistant shall provide the Board the name, address, and
35 telephone number of the physician who will supervise the physician assistant in the
36 relevant medical setting.

37 (c) The Board may, by rule, require an applicant to comply with other
38 requirements or submit additional information the Board deems appropriate. The Board
39 may set fees for physician assistants pursuant to rules adopted by the Board.

40 **"§ 90-10.1. Examinations accepted by the Board.**

41 The Board may administer or accept the following examinations for licensure:

42 (1) A State Board licensing examination.

43 (2) The National Board of Medical Examiners (NBME) examination or its
44 successor.

- 1 (3) The United States Medical Licensing Examination (USMLE) of this
2 section or its successor.
3 (4) The Federation Licensing Examination (FLEX) or its successor.
4 (5) Other examinations the Board deems equivalent to the examinations
5 described in subdivisions (1) through (3) of this section pursuant to
6 rules adopted by the Board."

7 **SECTION 9.** G.S. 90-11 reads as rewritten:

8 "**§ 90-11. Qualifications of applicant for license. Criminal background checks.**

9 (a) ~~Every applicant for a license to practice medicine or to perform medical acts,~~
10 ~~tasks, and functions as a physician assistant in the State shall satisfy the North Carolina~~
11 ~~Medical Board that the applicant is of good moral character and meets the other~~
12 ~~qualifications for the issuance of a license before any such license is granted by the~~
13 ~~Board to the applicant.~~

14 (b) The Department of Justice may provide a criminal record check to the Board
15 for a person who has applied for a license through the Board. The Board shall provide to
16 the Department of Justice, along with the request, the fingerprints of the applicant, any
17 additional information required by the Department of Justice, and a form signed by the
18 applicant consenting to the check of the criminal record and to the use of the
19 fingerprints and other identifying information required by the State or national
20 repositories. The applicant's fingerprints shall be forwarded to the State Bureau of
21 Investigation for a search of the State's criminal history record file, and the State Bureau
22 of Investigation shall forward a set of the fingerprints to the Federal Bureau of
23 Investigation for a national criminal history check. The Board shall keep all information
24 pursuant to this subsection privileged, in accordance with applicable State law and
25 federal guidelines, and the information shall be confidential and shall not be a public
26 record under Chapter 132 of the General Statutes.

27 The Department of Justice may charge each applicant a fee for conducting the
28 checks of criminal history records authorized by this subsection."

29 **SECTION 10.** G.S. 90-12 and G.S. 90-13 are repealed.

30 **SECTION 11.** Article 1 of Chapter 90 of the General Statutes is amended by
31 adding the following new sections to read:

32 "**§ 90-12A. Limited license to practice in a medical education and training**
33 **program.**

34 (a) As provided in rules adopted by the Board, the Board may issue a limited
35 license known as a 'resident's training license' to a physician not otherwise licensed by
36 the Board who is participating in a graduate medical education training program.

37 (b) A resident's training license shall become inactive at the time its holder ceases
38 to be a resident in a training program or obtains any other license to practice medicine
39 issued by the Board. The Board shall retain jurisdiction over the holder of the inactive
40 license.

41 "**§ 90-12.1A. Limited volunteer license.**

42 (a) The Board may issue a 'military limited volunteer license' to an applicant
43 who:

- 44 (1) Has a license to practice medicine and surgery in another state;

1 (2) Produces a letter from the state of licensure indicating the applicant is
2 in good standing; and

3 (3) Is authorized to treat personnel enlisted in a branch of the United
4 States armed services or veterans.

5 (b) The Board may issue a 'retired limited volunteer license' to an applicant who
6 is a retired physician and has allowed his or her license to practice medicine and surgery
7 in this State or another state to become inactive.

8 (c) A physician holding a limited license under this section shall comply with the
9 continuing medical education requirements pursuant to rules adopted by the Board.

10 (d) The Board shall issue a limited license under this section within 30 days after
11 an applicant provides the Board with information satisfying the requirements of this
12 section.

13 (e) The holder of a limited license under this section may practice medicine and
14 surgery only at clinics that specialize in the treatment of indigent patients. The holder of
15 the limited license may not receive compensation for services rendered at clinics
16 specializing in the care of indigent patients.

17 (f) The holder of a limited license issued pursuant to this section who practices
18 medicine or surgery at places other than clinics that specialize in the treatment of
19 indigent patients shall be guilty of a Class 3 misdemeanor and, upon conviction, shall be
20 fined not less than twenty-five dollars (\$25.00) nor more than fifty dollars (\$50.00) for
21 each offense. The Board, in its discretion, may revoke the limited license after due
22 notice is given to the holder of the limited license.

23 (g) The Board may, by rule, require an applicant for a limited license under this
24 section to comply with other requirements or submit additional information the Board
25 deems appropriate.

26 **"§ 90-12.2A. Special purpose license.**

27 (a) The Board may issue a special purpose license to practice medicine to an
28 applicant who:

29 (1) Holds a full and unrestricted license to practice in at least one other
30 jurisdiction; and

31 (2) Does not have any current or pending disciplinary or other action
32 against him or her by any medical licensing agency in any state or
33 other jurisdiction.

34 (b) The holder of the special purpose license practicing medicine or surgery
35 beyond the limitations of the license shall be guilty of a Class 3 misdemeanor and, upon
36 conviction, shall be fined not less than twenty-five dollars (\$25.00) nor more than fifty
37 dollars (\$50.00) for each offense. The Board, at its discretion, may revoke the special
38 license after due notice is given to the holder of the special purpose license.

39 **"§ 90-12.3. Medical school faculty license.**

40 (a) The Board may issue a medical school faculty license to practice medicine
41 and surgery to a physician who:

42 (1) Holds a full-time appointment as either a lecturer, assistant professor,
43 associate professor, or full professor at one of the following medical
44 schools:

- 1 a. Duke University School of Medicine;
2 b. The University of North Carolina at Chapel Hill School of
3 Medicine;
4 c. Wake Forest University School of Medicine; or
5 d. East Carolina University School of Medicine; and

6 (2) Is not subject to disciplinary order or other action by any medical
7 licensing agency in any state or other jurisdiction.

8 (b) The holder of the medical school faculty license issued under this section
9 shall not practice medicine or surgery outside the confines of the medical school or an
10 affiliate of the medical school. The holder of the medical school faculty license
11 practicing medicine or surgery beyond the limitations of the license shall be guilty of a
12 Class 3 misdemeanor and, upon conviction, shall be fined not less than twenty-five
13 dollars (\$25.00) nor more than fifty dollars (\$50.00) for each offense. The Board, at its
14 discretion, may revoke the special license after due notice is given to the holder of the
15 medical school faculty license.

16 (c) The Board may adopt rules and set fees related to issuing medical school
17 faculty licenses. The Board may, by rule, set a time limit for the term of a medical
18 school facility license."

19 **SECTION 12.** G.S. 90-13.1, as recodified in Section 4 of this act, reads as
20 rewritten:

21 "**§ 90-13.1. License fee; ~~salaries, fees, and expenses of Board fees.~~**

22 (a) Each applicant for a license to practice medicine and surgery in this State
23 under either G.S. ~~90-9, 90-10, or 90-13~~90-9.1, 90-9.2, or 90-9.3 shall pay to the North
24 Carolina Medical Board an application fee of three hundred fifty dollars (\$350.00).

25 (b) ~~Whenever Each applicant for a limited license is granted as provided into~~
26 practice in a medical education and training program under G.S. 90-12, the
27 applicant90-12A shall pay to the Board a fee ~~not to exceed~~of one hundred fifty dollars
28 (\$150.00), except where a limited license to practice in a medical education and training
29 program approved by the Board for the purpose of education or training is granted, the
30 applicant shall pay a fee of one hundred dollars ~~(\$100.00), and (\$100.00).~~

31 (c) ~~where An applicant for a limited volunteer license to practice medicine and~~
32 surgery only at clinics that specialize in the treatment of indigent patients is granted, the
33 applicantunder G.S. 90-12.1A shall not pay a fee.

34 (d) A fee of twenty-five dollars (\$25.00) shall be paid for the issuance of a
35 duplicate license.

36 (e) All fees shall be paid in advance to the North Carolina Medical Board, to be
37 held in a fund for the use of the Board. ~~The compensation and expenses of the members~~
38 and officers of the Board and all expenses proper and necessary in the opinion of the
39 Board to the discharge of its duties under and to enforce the laws regulating the practice
40 of medicine or surgery shall be paid out of the fund, upon the warrant of the Board. The
41 per diem compensation of Board members shall not exceed two hundred dollars
42 (\$200.00) per day per member for time spent in the performance and discharge of duties
43 as a member. Any unexpended sum or sums of money remaining in the treasury of the

1 Board at the expiration of the terms of office of the members of the Board shall be paid
2 over to their successors in office.

3 For the initial and annual registration of an assistant to a physician, the Board may
4 require the payment of a fee not to exceed a reasonable amount."

5 SECTION 13. G.S. 90-13.2, as recodified in Section 4 of this act, reads as
6 rewritten:

7 "**§ 90-13.2. Registration every year with Board.**

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

10 (b) A person who registers with the Board shall report to the Board the person's
11 name and office and residence address and any other information required by the Board,
12 and shall pay ~~a~~ an annual registration fee of one hundred seventy-five dollars (\$175.00),
13 except those who have a limited license to practice in a medical education and training
14 program approved by the Board for the purpose of education or training shall pay a
15 registration fee of one hundred twenty-five dollars (\$125.00) and those who have a
16 limited volunteer license shall pay an annual registration fee of twenty-five dollars
17 (\$25.00). However, licensees who have a limited license to practice for the purpose of
18 education and training under G.S. 90-21A shall not be required to pay more than one
19 annual registration fee for each year of training.

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

23 (d) For purposes of annual registration, the Board shall use a simplified
24 registration form which allows registrants to confirm information on file with the Board.

25 (e) A physician who fails to register as required by this section shall pay an
26 additional fee of fifty dollars (\$50.00) to the Board. The license of any physician who
27 fails to register and who remains unregistered for a period of 30 days after certified
28 notice of the failure is automatically inactive. The Board shall retain jurisdiction over
29 the holder of the inactive license.

30 (f) Except as provided in G.S. ~~90-12(d)~~, 90-12.1A, a person whose license is
31 inactive shall not practice medicine in North Carolina nor be required to pay the annual
32 registration fee.

33 (g) Upon payment of all accumulated fees and penalties, the license of the
34 physician may be reinstated, subject to the Board requiring the physician to appear
35 before the Board for an interview and to comply with other licensing requirements. The
36 penalty may not exceed the maximum fee for a license under G.S. ~~90-13.90-13.1~~."

37 SECTION 14. Article 1 of Chapter 90 of the General Statutes is amended by
38 adding a new section to read:

39 "**§ 90-13.3. Salaries, fees, expenses of the Board.**

40 (a) The compensation and expenses of the members and officers of the Board
41 and all expenses proper and necessary in the opinion of the Board to the discharge of its
42 duties under and to enforce the laws regulating the practice of medicine or surgery shall
43 be paid out of the fund, upon the warrant of the Board.

1 (b) The per diem compensation of Board members shall not exceed two hundred
2 dollars (\$200.00) per day per member for time spent in the performance and discharge
3 of duties as a member. Any unexpended sum of money remaining in the treasury of the
4 Board at the expiration of the terms of office of the members of the Board shall be paid
5 over to their successors in office."

6 **SECTION 15.** G.S. 90-14(11) reads as rewritten:

7 **"§ 90-14. Revocation, suspension, annulment or denial of license.**

8 (a) The Board shall have the power to place on probation with or without
9 conditions, impose limitations and conditions on, publicly reprimand, assess monetary
10 redress, issue public letters of concern, mandate free medical services, require
11 satisfactory completion of treatment programs or remedial or educational training, fine,
12 deny, annul, suspend, or revoke a license, or other authority to practice medicine in this
13 State, issued by the Board to any person who has been found by the Board to have
14 committed any of the following acts or conduct, or for any of the following reasons:

15 ...

16 (11) Lack of professional competence to practice medicine with a
17 reasonable degree of skill and safety for ~~patients~~-patients or failing to
18 maintain acceptable standards of one or more areas of professional
19 physician practice. In this connection the Board may consider repeated
20 acts of a physician indicating the physician's failure to properly treat a
21 patient. The Board may, upon reasonable grounds, require a physician
22 to submit to inquiries or examinations, written or oral, as the Board
23 deems necessary to determine the professional qualifications of such
24 licensee. In order to annul, suspend, deny, or revoke a license of an
25 accused person, the Board shall find by the greater weight of the
26 evidence that the care provided was not in accordance with the
27 standards of practice for the procedures or treatments administered.

28 "

29 **SECTION 16.** G.S. 90-14.5 reads as rewritten:

30 **"§ 90-14.5. Use of hearing committee and ~~depositions~~.depositions; appointment of**
31 **hearing officers.**

32 (a) The Board, in its discretion, may designate in writing three or more ~~of its~~
33 ~~members~~hearing officers to conduct hearings as a hearing committee to take evidence.

34 (b) Evidence and testimony may be presented at hearings before the Board or a
35 hearing committee in the form of depositions before any person authorized to administer
36 oaths in accordance with the procedure for the taking of depositions in civil actions in
37 the superior court.

38 (c) The hearing committee shall submit a recommended decision that contains
39 findings of fact and conclusions of law to the Board. Before the Board makes a final
40 decision, it shall give each party an opportunity to file written exceptions to the
41 recommended decision made by the hearing committee and to present oral arguments to
42 the Board. A quorum of the Board will issue a final decision.

43 (d) Hearing officers are entitled to receive compensation and reimbursement as
44 authorized by this Article."

1 **SECTION 17.** G.S. 90-14.6(b) reads as rewritten:

2 "(b) Subject to the North Carolina Rules of Civil Procedure and Rules of
3 Evidence, in proceedings held pursuant to this Article, the ~~licensee~~individual under
4 investigation may call witnesses, including medical practitioners licensed in the United
5 States, ~~with expertise in the same field of practice as the licensee under investigation,~~
6 ~~and the Board shall consider this testimony.~~States with training and experience in the
7 same field of practice as the individual under investigation and familiar with the
8 standard of care among members of the same health care profession in North Carolina.
9 Witnesses shall not be restricted to experts certified by the American Board of Medical
10 Specialties."

11 **SECTION 18.** G.S. 90-16 reads as rewritten:

12 "**§ 90-16. Self-reporting requirements; confidentiality of Board investigative**
13 **information; cooperation with law enforcement; patient protection;**
14 **Board to keep public records.**

15 (a) The North Carolina Medical Board shall keep a regular record of its
16 proceedings ~~in a book kept for that purpose, together~~ with the names of the members of
17 the Board present, the names of the applicants for license, and other information as to its
18 actions. ~~The North Carolina Medical Board shall cause to be entered in a separate book~~
19 ~~the name of each applicant to whom a license is issued to practice medicine or surgery,~~
20 ~~along with any information pertinent to such issuance.~~ The North Carolina Medical
21 Board shall publish the names of those licensed ~~in three daily newspapers published in~~
22 ~~the State of North Carolina,~~ within 30 days after granting the same. ~~A transcript of any~~
23 ~~such entry in the record books, or certificate that there is not entered therein the name~~
24 ~~and proficiency or date of granting such license of a person charged with the violation~~
25 ~~of the provisions of this Article, certified under the hand of the secretary and the seals of~~
26 ~~the North Carolina Medical Board, shall be admitted as evidence in any court of this~~
27 ~~State when it is otherwise competent.~~license.

28 (b) The Board may in a closed session receive evidence involving or concerning
29 the treatment of a patient who has not expressly or impliedly consented to the public
30 disclosure of such treatment as may be necessary for the protection of the rights of such
31 patient or of the accused physician and the full presentation of relevant evidence.

32 (c) All records, papers, investigative files, investigative reports, other
33 investigative information and other documents containing information in the possession
34 of or received or gathered by the Board, or its members or employees as a result of
35 investigations, inquiries or interviews conducted in connection with a licensing,
36 complaint or, disciplinary matter, or report of professional liability insurance awards or
37 settlements pursuant to G.S. 90-14.13, shall not be considered public records within the
38 meaning of Chapter 132 of the General Statutes and are privileged, confidential, and not
39 subject to discovery, subpoena, or other means of legal compulsion for release to any
40 person other than the Board, its employees or agents involved in the application for
41 license or discipline of a license holder, except as provided in subsection (d) of this
42 section. For purposes of this subsection, investigative information includes information
43 relating to the identity of, and a report made by, a physician or other person performing
44 an expert review for the ~~Board.~~Board and transcripts of any deposition taken by Board

1 counsel in preparation for or anticipation of a hearing held pursuant to this Article but
2 not admitted into evidence at the hearing.

3 (d) The Board shall provide the licensee or applicant with access to all
4 information in its possession that the Board intends to offer into evidence in presenting
5 its case in chief at the contested hearing on the matter, subject to any privilege or
6 restriction set forth by rule, statute, or legal precedent, upon written request from a
7 licensee or applicant who is the subject of a complaint or investigation, or from the
8 licensee's or applicant's counsel, unless good cause is shown for delay. The Board is not
9 required to provide any of the following:

10 (1) A Board investigative report.

11 (2) The identity of a non-testifying complainant.

12 (3) Attorney-client communications, attorney work product, or other
13 materials covered by a privilege recognized by the Rules of Civil
14 Procedure or the Rules of Evidence.

15 (e) Information furnished to a licensee or applicant, or counsel for a licensee or
16 applicant, under subsection (d) of this section shall be subject to discovery or subpoena
17 between and among the parties in a civil case in which the licensee is a party.

18 (f) Any notice or statement of charges against any licensee, or any notice to any
19 licensee of a hearing in any proceeding shall be a public record within the meaning of
20 Chapter 132 of the General Statutes, notwithstanding that it may contain information
21 collected and compiled as a result of any such investigation, inquiry or interview; and
22 provided, further, that if any such record, paper or other document containing
23 information theretofore collected and compiled by the Board, as hereinbefore provided,
24 is received and admitted in evidence in any hearing before the Board, it shall thereupon
25 be a public record within the meaning of Chapter 132 of the General Statutes.

26 (g) In any proceeding before the Board, in any record of any hearing before the
27 Board, and in the notice of the charges against any licensee (notwithstanding any
28 provision herein to the contrary) the Board may withhold from public disclosure the
29 identity of a patient who has not expressly or impliedly consented to the public
30 disclosure of treatment by the accused physician.

31 (h) If investigative information in the possession of the Board, its employees, or
32 agents indicates that a crime may have been committed, the Board ~~shall~~ may report the
33 information to the appropriate law enforcement ~~agency~~ agency or district attorney of the
34 district in which the offense was committed.

35 (i) The Board shall cooperate with and assist a law enforcement agency or
36 district attorney conducting a criminal investigation or prosecution of a licensee by
37 providing information that is relevant to the criminal investigation or prosecution to the
38 investigating ~~agency~~ agency or district attorney. Information disclosed by the Board to
39 an investigative agency or district attorney remains confidential and may not be
40 disclosed by the investigating agency except as necessary to further the investigation.

41 (j) All persons licensed under this Article shall self-report to the Board within 30
42 days of arrest or indictment any of the following:

43 (1) Any felony arrest or indictment.

44 (2) Any arrest for driving while impaired or driving under the influence.

1 (3) Any arrest or indictment for the possession, use, or sale of any
2 controlled substance.

3 (k) The Board, its members and staff, may release confidential or nonpublic
4 information to any health care licensure board in this State or another state or authorized
5 Department of Health and Human Services personnel with enforcement or investigative
6 responsibilities about the issuance, denial, annulment, suspension, or revocation of a
7 license, or the voluntary surrender of a license by a licensee of the Board, including the
8 reasons for the action, or an investigative report made by the Board. The Board shall
9 notify the licensee within 60 days after the information is transmitted. A summary of the
10 information that is being transmitted shall be furnished to the licensee. If the licensee
11 requests in writing within 30 days after being notified that the information has been
12 transmitted, the licensee shall be furnished a copy of all information so transmitted. The
13 notice or copies of the information shall not be provided if the information relates to an
14 ongoing criminal investigation by any law enforcement agency or authorized
15 Department of Health and Human Services personnel with enforcement or investigative
16 responsibilities."

17 **SECTION 19.** G.S. 90-18 reads as rewritten:

18 "**§ 90-18. Practicing without license; ~~practicing defined~~; penalties.**

19 (a) No person shall perform any act constituting the practice of medicine or
20 surgery, as defined in this Article, or any of the branches thereof, ~~nor in any case~~
21 ~~prescribe for the cure of diseases~~ unless the person shall have been first licensed and
22 registered so to do in the manner provided in this Article, and if any person shall
23 practice medicine or surgery without being duly licensed and registered, as provided in
24 this Article, the person shall not be allowed to maintain any action to collect any fee for
25 such services. The person so practicing without license shall be guilty of a Class 1
26 misdemeanor, except that if the person so practicing without a license is an out-of-state
27 practitioner who has not been licensed and registered to practice medicine or surgery in
28 this State, the person shall be guilty of a Class I felony.

29 ~~(b) Any person shall be regarded as practicing medicine or surgery within the~~
30 ~~meaning of this Article who shall diagnose or attempt to diagnose, treat or attempt to~~
31 ~~treat, operate or attempt to operate on, or prescribe for or administer to, or profess to~~
32 ~~treat any human ailment, physical or mental, or any physical injury to or deformity of~~
33 ~~another person. A person who resides in any state or foreign country and who, by use of~~
34 ~~any electronic or other mediums, performs any of the acts described in this subsection,~~
35 ~~including prescribing medication by use of the Internet or a toll free telephone number,~~
36 ~~shall be regarded as practicing medicine or surgery and shall be subject to the provisions~~
37 ~~of this Article and appropriate regulation by the North Carolina Medical Board.~~

38 (c) The following shall not constitute practicing medicine or surgery as defined
39 in ~~subsection (b) of this section:~~ this Article:

40 (1) The administration of domestic or family ~~remedies in cases of~~
41 emergency remedies.

42 (2) The practice of dentistry by any legally licensed dentist engaged in the
43 practice of dentistry and dental surgery.

- 1 (3) The practice of pharmacy by any legally licensed pharmacist engaged
2 in the practice of pharmacy.
- 3 (3a) The provision of drug therapy management by a licensed pharmacist
4 engaged in the practice of pharmacy pursuant to an agreement that is
5 physician, pharmacist, patient, and disease specific when performed in
6 accordance with rules and rules developed by a joint subcommittee of
7 the North Carolina Medical Board and the North Carolina Board of
8 Pharmacy and approved by both Boards. Drug therapy management
9 shall be defined as: (i) the implementation of predetermined drug
10 therapy which includes diagnosis and product selection by the patient's
11 physician; (ii) modification of prescribed drug dosages, dosage forms,
12 and dosage schedules; and (iii) ordering tests; (i), (ii), and (iii) shall be
13 pursuant to an agreement that is physician, pharmacist, patient, and
14 disease specific.
- 15 (4) The practice of medicine and surgery by any surgeon or physician of
16 the United States army, navy, or public health service in the discharge
17 of his official duties.
- 18 (5) The treatment of the sick or suffering by mental or spiritual means
19 without the use of any drugs or other material means.
- 20 (6) The practice of optometry by any legally licensed optometrist engaged
21 in the practice of optometry.
- 22 (7) The practice of midwifery as defined in G.S. 90-178.2.
- 23 (8) The practice of chiropody by any legally licensed chiropodist when
24 engaged in the practice of chiropody, and without the use of any drug.
- 25 (9) The practice of osteopathy by any legally licensed osteopath when
26 engaged in the practice of osteopathy as defined by law, and especially
27 G.S. 90-129.
- 28 (10) The practice of chiropractic by any legally licensed chiropractor when
29 engaged in the practice of chiropractic as defined by law, and without
30 the use of any drug or surgery.
- 31 (11) The practice of medicine or surgery by any nonregistered reputable
32 physician or surgeon who comes into this State, either in person or by
33 use of any electronic or other mediums, on an irregular basis, to
34 consult with a resident registered physician or to consult with
35 personnel at a medical school about educational or medical training.
36 This proviso shall not apply to physicians resident in a neighboring
37 state and regularly practicing in this State.
- 38 (11a) The practice of medicine or surgery by any physician who comes into
39 this State to practice medicine or surgery so long as:
- 40 a. The physician or surgeon has an oral or written agreement with
41 a sports team to provide general or emergency medical care to
42 the team members, coaching staff, or families traveling with the
43 team for a specific sporting event taking place in this State; and

1 b. The physician or surgeon does not provide care or consultation
2 to any person residing in this State other than an individual
3 described in sub-subdivision a. of this subdivision.

4 The exemption shall remain in force while the physician or surgeon is
5 traveling with the team. The exemption shall not exceed 10 days per
6 individual sporting event. However, the executive director of the
7 Board may grant a physician or surgeon additional time for exemption
8 of up to 20 additional days per individual sporting event.

9 (12) Any person practicing radiology as hereinafter defined shall be
10 deemed to be engaged in the practice of medicine within the meaning
11 of this Article. "Radiology" shall be defined as, that method of medical
12 practice in which demonstration and examination of the normal and
13 abnormal structures, parts or functions of the human body are made by
14 use of X ray. Any person shall be regarded as engaged in the practice
15 of radiology who makes or offers to make, for a consideration, a
16 demonstration or examination of a human being or a part or parts of a
17 human body by means of fluoroscopic exhibition or by the shadow
18 imagery registered with photographic materials and the use of X rays;
19 or holds himself out to diagnose or able to make or makes any
20 interpretation or explanation by word of mouth, writing or otherwise of
21 the meaning of such fluoroscopic or registered shadow imagery of any
22 part of the human body by use of X rays; or who treats any disease or
23 condition of the human body by the application of X rays or radium.
24 Nothing in this subdivision shall prevent the practice of radiology by
25 any person licensed under the provisions of Articles 2, 7, 8, and 12A
26 of this Chapter.

27 (13) The performance of any medical acts, tasks, and functions by a
28 licensed physician assistant at the direction or under the supervision of
29 a physician in accordance with rules adopted by the Board. This
30 subdivision shall not limit or prevent any physician from delegating to
31 a qualified person any acts, tasks, and functions that are otherwise
32 permitted by law or established by custom. The Board shall authorize
33 physician assistants licensed in this State or another state to perform
34 specific medical acts, tasks, and functions during a disaster.

35 (14) The practice of nursing by a registered nurse engaged in the practice of
36 nursing and the performance of acts otherwise constituting medical
37 practice by a registered nurse when performed in accordance with
38 rules and regulations developed by a joint subcommittee of the North
39 Carolina Medical Board and the Board of Nursing and adopted by both
40 boards.

41 (15) The practice of dietetics/nutrition by a licensed dietitian/nutritionist
42 under the provisions of Article 25 of this Chapter.

43 (16) The practice of acupuncture by a licensed acupuncturist in accordance
44 with the provisions of Article 30 of this Chapter.

- 1 (17) The use of an automated external defibrillator as provided in
2 G.S. 90-21.15.
- 3 (18) The practice of medicine by any nonregistered physician residing in
4 another state or foreign country who is contacted by one of the
5 physician's regular patients for treatment by use of the Internet or a
6 toll-free telephone number while the physician's patient is temporarily
7 in this State.
- 8 (19) The practice of medicine or surgery by any physician who comes into
9 this State to practice medicine or surgery at a camp that specializes in
10 providing therapeutic recreation for individuals with chronic illnesses,
11 as long as all the following conditions are satisfied:
- 12 a. The physician provides documentation to the medical director
13 of the camp that the physician is licensed and in good standing
14 to practice medicine in another state.
- 15 b. The physician provides services only at the camp or in
16 connection with camp events or camp activities that occur off
17 the grounds of the camp.
- 18 c. The physician receives no compensation for the services.
- 19 d. The physician provides those services within this State for no
20 more than 30 days per calendar year.
- 21 e. The camp has a medical director who holds an unrestricted
22 license to practice medicine and surgery issued under this
23 Article."

24 **SECTION 20.** G.S. 90-18.1(a) reads as rewritten:

25 "(a) Any person who is licensed under the provisions of G.S. ~~90-1190-9.3~~
26 perform medical acts, tasks, and functions as an assistant to a physician may use the title
27 "physician assistant". Any other person who uses the title in any form or holds out to be
28 a physician assistant or to be so licensed, shall be deemed to be in violation of this
29 Article."

30 **SECTION 21.** G.S. 90-18.1 is amended by adding the following new
31 subsections to read:

32 "(g) Any person who is licensed under G.S. 90-9.3 to perform medical acts, tasks,
33 and functions as an assistant to a physician shall comply with each of the following:

- 34 (1) Maintain a current and active license to practice in this State.
35 (2) Maintain an active registration with the Board.
36 (3) Have a current Intent to Practice form filed with the Board.

37 (h) A physician assistant serving active duty in the United States military is
38 exempt from the requirements of subdivision 9 (g)(3) of this section.

39 (i) A physician assistant's license shall become inactive any time the holder fails
40 to comply with the requirements of subsection (g) of this section. A physician assistant
41 with an inactive license shall not practice medical acts, tasks, or functions. The Board
42 shall retain jurisdiction over the holder of the inactive license."

43 **SECTION 22.** G.S. 90-21 is repealed.

44 **SECTION 23.** This act is effective when it becomes law.