April 20, 2005

H 1301. PHYSICAL THERAPY BD./COMPETENCY OF LICENSEES. AUTHORIZING THE NORTH CAROLINA BOARD OF PHYSICAL THERAPY EXAMINERS TO REQUIRE LICENSEES TO DEMONSTRATE CONTINUING COMPETENCE IN THE PRACTICE OF PHYSICAL THERAPY. Enacts new GS 90-270.26(3a) as title indicates. Specifically authorizes board to require evidence of continuing education experiences, evidence of minimum standard accomplishments, or evidence of compliance with other measures. Amends GS 90-270.32 to authorize board to decline to renew licenses for failure of licensee to make the required showing. Intro. by L. Allen.

Ref. to Health

GS 90

May 17, 2005

H 1301. PHYSICAL THERAPY BD./COMPETENCY OF LICENSEES. Intro. 4/20/05. House committee substitute makes the following changes to 1st edition. Modifies proposed GS 90-270.26(3a) to also authorize the Board of Physical Therapy Examiners to require that physical therapists and physical therapist assistants provide information to the Board on their qualifications in response to complaints or incident reports.

June 29, 2006

H 1301. PT BD. LIC/STRNGTH BD. MED/PATIENT SAFE ORG. (NEW). Filed 4/19/05. Senate committee substitute makes the following changes to 2nd edition.

Modifies statutes governing the Medical Board (the "Board") and its licensing, to be effective October 1, 2006.

Makes following changes to GS 90-14 governing adverse licensing action. Adds language giving the Board express authority to place licensees on probation, limit their licenses, assess monetary redress and mandate free medical services, and impose other forms of disciplinary action. Deletes authority of individual Board members and physicians to submit inquiries or conduct examinations of physicians investigated for lack of competence, leaving this authority to the Board. Adds new subdivision (a)(11a) to allow adverse action against a licensee who has not maintained continued competency for two-years before application for an initial license or reactivation, subject to rules to be adopted by the Board. Replaces the State Medical Society Physician Health and Effectiveness Committee with the North Carolina Physicians Health Program for referrals of physicians and physician assistants with impairment due to alcohol, drug addiction, or mental illness, and excludes sexual misconduct from definition of mental illness. Extends immunity from liability in connection with good faith actions that applied to those who make reports to those involved in investigations and who give medical opinions in connection with licensing actions. Applies to acts or omissions that occur on or after October 1, 2006.

Replaces GS 90-14.5 governing the Board's use of a trial examiner with authority to nominate a hearing committee of three or more of its members who may conduct proceedings and make recommendations to the Board. Applies to hearings that take place on or after October 1, 2006.

Makes following changes to GS 90-14.13 governing reports of certain action involving licensees. Specifies the conditions involving changes to privileges and other actions that must be reported by health care institutions and requires such reports within 30 days of when the action takes effect. Clarifies that an insurance company's duty to report damage awards and settlements applies to physician assistants as well as physicians and clarifies the events requiring a report. Applies to settlements entered into on or after October 1, 2006. Imposes penalty of \$250 for a first violation and \$500 for a subsequent violation for a health care institution's or insurance company's failure to make a required report. Authorizes the Board to obtain information in connection with actions required to be reported and makes responses confidential.

Makes following changes to GS 90-16 governing the Board records. Adds investigative information to confidentiality protections. Directs the Board to provide the subject licensee or applicant with access to information to be presented at a contested hearing, subject to applicable privileges or restrictions, but excludes from the disclosure obligation a Board investigative report, the identity of a non-testifying complainant, and attorney-client, work-product, or other privileged

materials. Provides that information furnished to a licensee or an applicant is subject to discovery or subpoena in civil actions. Requires the Board to report crimes to law enforcement and to cooperate in investigations. Requires licensees to self-report within 30 days felony arrests or indictments, arrests for driving while impaired or under the influence, and controlled substance arrests and indictments.

Amends GS 90-21.22(d) by specifying that societies subject to peer review agreements must report information about a physician or physician assistant constituting an imminent danger to the public or to him- or herself when the danger is by reason of impairment, mental or physical illness, the commission or professional sexual boundary violations, or any other reason.

Amends GS 131E-87 governing reports of disciplinary action by state-licensed hospitals to include voluntary reductions of privileges.

Directs the Board and the subcommittee of the Board of Nursing to develop disciplinary rules for registered nurses; requires the Board, the Board of Nursing, and the Pharmacy Board to file reports by September 1, 2006, in connection with nurse practitioners and pharmacist practitioners; and requires the Board to makes reports for additional action before the 2007 General Assembly convenes.

Adds new GS 55B-14(c)(9), to add physicians practicing orthopedics and a licensed podiatrist to the list of professions that may form a professional corporation. Conforms title.

Rewrites GS 131E-95(c) to provide for limited release of confidential information to patient safety organizations.

July 21, 2006

SL 2006-144 (H 1301). PHYSICAL THERAPY BOARD LICENSURE/STRENGTHEN MEDICAL BOARD/PATIENT SAFETY ORGANIZATIONS. AN ACT AUTHORIZING THE NORTH CAROLINA BOARD OF PHYSICAL THERAPY EXAMINERS TO REQUIRE LICENSEES TO DEMONSTRATE CONTINUING COMPETENCE IN THE PRACTICE OF PHYSICAL THERAPY, AND STRENGTHENING THE AUTHORITY OF THE NORTH CAROLINA MEDICAL BOARD TO DISCIPLINE PHYSICIANS AND CERTAIN OTHERS, AND DESIGNATING INFORMATION RELEASED TO PATIENT SAFETY ORGANIZATIONS AS CONFIDENTIAL, AND ALLOWING CERTAIN GROUPS TO PRACTICE AS PROFESSIONAL CORPORATIONS. Summarized in Daily Bulletin 4/20/05, 5/17/05, and 6/29/06. Enacted July 19, 2006. Sections 4–9 are effective October 1, 2006. The remainder is effective July 19, 2006.