# North Carolina Medical Board



John W. Rusher, MD, JD: President | Michaux R. Kilpatrick, MD, PhD: President-Elect | Christine M. Khandelwal, DO: Secretary/Treasurer

October 14, 2022

The Honorable Elaine Marshall, Secretary of State (via email to pubs@sosnc.gov) The Honorable Joshua Stein, Attorney General (via email to mlovell@ncdoj.gov) The Jt. Legislative Administrative Procedure Oversight Committee (via email to virginia.barlow@ncleg.gov)

Dear All:

The NC Medical Board (NCMB) is filing this report in compliance with North Carolina General Statutes § 93B-2. Below is data from January 1, 2021 to December 31, 2021.

### Annual reports required; contents; open to inspection

### (a) An annual report containing all of the information:

#### (1) The address of the board, and the names of its members and officers.

The NCMB offices are located at 3127 Smoketree Court, Raleigh, NC 27604. The names of current Board members and officers include:

John W. Rusher, MD, JD, President
Michaux R. Kilpatrick, MD, PhD, President-Elect
Christine M. Khandelwal, DO, Secretary/Treasurer
William Brawley, Public Member
W. Howard Hall, MD
Sharona Johnson, PhD, FNP-BC
Joshua Malcolm, JD, Public Member
Damian F. McHugh, MD
Shawn P. Parker, JD, MPA, Public Member
Miguel A. Pineiro, PA-C, MHPE
Melinda Privette, MD, JD
Anuradha Rao-Patel, MD
Devdutta G. Sangvai, MD, MBA

### (1a) The total number of licensees supervised by the board.

License/Certification Type	Count
Physician (MD/DO)	44,128
Physician Assistant	9,434

Nurse Practitioners*	10,843
Resident Training License	3,457
Licensed Perfusionist	204
Anesthesiologist Assistant	52
Polysomnographic Technologists	606
<b>Total Licensees</b>	68,724

<sup>\*</sup>NPs are regulated jointly by the NC Board of Nursing and the NCMB.

- (2) The number of persons who applied to the board for examination. Not Applicable (N/A).
- (3) The number who were refused examination. N/A.
- (4) The number who took the examination. N/A.
- (5) The number to whom initial licenses were issued.

License/Certification Type	Count
Medical Doctors (MDs)	2,675
Doctors of Osteopathy (DOs)	463
Volunteer Licenses	260
Limited Emergency Licenses	372
Special Permits/Faculty Limited License	9
TOTAL Physician Licenses	3,779
Resident Training Licenses	1,211
Physician Assistants (PAs)	1,020
Licensed Perfusionist	21
Anesthesiologist Assistant	6
<b>Total Licensees</b>	6,037

The NCMB maintains a registry of polysomnographic technicians ("sleep techs"), but does not license them. In 2020, the NCMB registered 108 sleep techs in North Carolina.

- (5a) The number who failed the examination: N/A.
- (6) The number who applied for license by reciprocity or comity. N/A.
- (7) The number who were granted licenses by reciprocity or comity. N/A.
- (7a) The number of official complaints received involving licensed or unlicensed activities. In 2021, the NCMB opened 2,895 cases. Of those cases, 1,835 complaints were from patients/public. The other cases were opened based on out-of-state actions, field investigations, malpractice payment reviews, licensing applications, Safe Opioid Prescribing Initiative, and annual renewals.

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(7b) The number of disciplinary actions taken against licensees, or other actions taken against nonlicensees, including injunctive relief. The NCMB took 174 prejudicial actions\* against licensees in 2021. It also took 13 non-adverse actions.\* Please note that some individuals may have had more than one action taken within a year.

\*Prejudicial action includes: revocation, suspension, reprimands, surrender or denial of a license, probation, condition, limitation or restriction of license or practice, public letters of concern and/or fines.

- **The number of licenses suspended or revoked.** The NCMB suspended 36 licenses and revoked 3 licenses.
- (9) The number of licenses terminated for any reason other than failure to pay the required renewal fee. In 2021, 2 licenses were made inactive, 36 licenses were suspended, 4 licenses were surrendered, and 3 licenses were revoked for a total of 45.
- (9a) The number of applicants for a license and, of that number, the number granted a license. There were 6,555 applications for license. Of that number, 6,137 were granted.
- (9b) The number of applicants with a conviction record and, of that number, the number granted a license, denied a license for any reason, and denied a license because of a conviction. In 2017, the Board voted to remove the question regarding charges, arrests, and convictions from its licensing applications. The Board would rely on collecting misdemeanor and felony information from background checks. There are restrictions on the use of the data from background checks and the Board is unable to ascertain the number of applicants with a conviction record and of that number the number granted a license. However, the Board denied only 2 licenses in 2021. Both denials were based on prior NCMB disciplinary actions related to inappropriate sexual relationships with patients and alcohol use disorder.
- (9c) The number of applicants with military training, the number granted a license, the number denied a license for any reason, and a summary of the reasons for denial. In 2021, the total number of applicants with military training was 28. The number granted a license was 26 and the number denied was 0.
- (9d) The number of applicants who are military spouses, the number granted a license, the number denied a license for any reason, and a summary of the reasons for denial. In 2021, there were 0 applicants who are military spouses.
- (10) The substance of any anticipated request by the occupational licensing board to the General Assembly to amend statutes related to the occupational licensing board. None.

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<sup>\*</sup>Non-adverse actions include consent orders lifted, reentry agreements or special purpose licenses.

- (11) The substance of any anticipated change in rules adopted by the occupational licensing board or the substance of any adoption of new rules by the occupational licensing board. The Board proposed or adopted rules pertaining to:
  - a. Removes requirement to include PA license number on prescriptions per G.S. 90-18.1. See 21 NCAC 32S .0212. Effective February 1, 2021.
  - b. Remove requirement to include supervising physician's name and phone number on physician assistant prescriptions. See 21 NCAC 32S .0212: Effective February 1, 2021.
  - c. Limitations on prescribing certain drugs to alleviate shortages being administered to patients for the potential treatment of COVID-19 and ensure medications are available to those in need. See 21 NCAC 32B .1708; 32M .0119: Effective April 1, 2021.
  - d. Temporary emergency licensure process to allow health care providers to provide COVID-19 assistance. See 21 NCAC 32B .1707: Expired April 11, 2021
  - e. Modernization and updates to rules pertaining to nurse practitioners. See 21 NCAC 32M .0101-0110: Effective June 1, 2021. 21 NCAC 32M .0109, .0117: Effective August 1, 2021.
  - f. Add cultural competency and implicit bias training toward CME credit. 21 NCAC 32R .0102 (physicians); and 32S .0216 (physician assistants): Effective January 1, 2022.
  - g. Clarify supervisory exemptions involving multiple physicians involved in postgraduate training programs. 21 NCAC 32S .0213: Effective May 1, 2022.
  - h. Eliminate USMLE Step 2 Clinical Skills and COMPLEX Level 2 Practice Exams from exam requirements for licensing applicants. 21 NCAC 32B .1303 (physicians); 32B .1350 (reinstatements); 32 .1402 (resident training licenses): Effective May 1, 2022.
  - i. Clarify that challenges to validity of investigations will not be considered through declaratory rulings; limited to disciplinary hearing process exhaustion of administrative remedies. 21 NCAC 32A .0112: Effective July 1, 2022.
  - j. Adopt amendment to Pharmacy Board Rules by reference in administration of vaccines by immunizing pharmacists. 21 NCAC 32U .0101-0102: Effective July 1, 2022.
  - k. Supervision of certified nurse midwives. See 21 NCAC 32B .1003.
  - 1. Add substance and clarification to meaning of investigations and notifications. 21 NCAC 32N .0107.
  - m. Establish rule for petitioning the Medical Board for rule making. 21 NCAC 32A .0115

If you have any questions, please do not hesitate to contact me.

Regards,

R. David Henderson

R. David Henderson Chief Executive Officer

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