

2018

NORTH CAROLINA MEDICAL BOARD ANNUAL REPORT

NORTH CAROLINA
 **MEDICAL BOARD**

MEDIA CONTACT

NCMB's Communications Department is available to discuss information and data contained in this report. Contact us for assistance with questions, data requests and other needs.

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Letter from the President

By almost any measure 2018 was a busy year for the North Carolina Medical Board, with growth in nearly every category we monitor.

The licensee population continues to rise, with overall growth of about 3 percent. The highest rate of growth in the licensee population is in a category dear to me – osteopathic physicians (DOs) – which saw their numbers increase by 12 percent last year. Although the overall number of DOs licensed by NCMB is still relatively small at about 2,500, as an osteopathic physician it heartens me to see the profession thriving in NC.

As the number of physicians and PAs grows, along with the population of the state, NCMB has stepped up its efforts to engage with both the public and the profession.

In 2018, NCMB used social media to direct patients to medication safety information and other resources on our website and continues to actively seek opportunities to present to community organizations.

We also manage a very active professional outreach program, which frequently sends Board Members across North Carolina to share information with licensees at professional conferences, medical staff meetings and private medical practices. If your practice or organization has never hosted an NCMB speaker, consider inviting us to present. We've received excellent feedback and plan to continue this outreach.

Sincerely,

A handwritten signature in black ink that reads "Barbara E. Walker, DO". The signature is fluid and cursive.

Barbara E. Walker, DO

Board President

2019 Board Roster

The Board is made up of 13 members, including eight physicians, one physician assistant, one nurse practitioner and three non-clinicians.

Board Members serve three-year terms and by law may serve up to two consecutive terms. Board Member biographies may be viewed online at www.ncmedboard.org/about.

2018–2019 Board Members

PRESIDENT

Barbara E. Walker, DO
Family Practice and OMT, Kure Beach

PRESIDENT-ELECT

Bryant A. Murphy, MD, MBA
Anesthesiology, Chapel Hill

SECRETARY/TREASURER

Venkata R. Jonnalagadda, MD
Psychiatry, Greenville

PAST-PRESIDENT

Timothy E. Lietz, MD
Emergency Medicine, Charlotte

Debra A. Bolick, MD
Psychiatry and Geriatric Psychiatry,
Hickory

A. Wayne Holloman
Public Member, Greenville

Christine M. Khandelwal, DO
Hospice and Palliative Medicine, Apex

Michaux R. Kilpatrick, MD, PhD
Neurological Surgery, Stereotactic and
Functional Neurosurgery, High Point

**Varnell McDonald-Fletcher,
PA-C, EdD**
Colorectal Surgery, Durham

Shawn P. Parker, JD, MPA
Public Member, Raleigh

Jerri L. Patterson, NP
Pain Management, West End

John W. Rusher, MD, JD
Pediatrics, Raleigh

Ralph A. Walker, JD
Public Member, Greensboro



NCMB'S MISSION, VISION AND VALUES

NCMB was established by the NC General Assembly in 1859 to regulate medicine and surgery, "...for the benefit and protection of the people of North Carolina." To provide greater insight into how the Board carries out its statutory mandate, Board Members revised NCMB's mission statement in 2018 and, for the first time, adopted a vision statement and core values. These words confirm NCMB's commitment to efficiency, impartiality, customer service and, of course, public protection.



MISSION STATEMENT

The North Carolina Medical Board protects the people of North Carolina, and the integrity of the medical profession, through just and vigilant licensing and regulation.



VISION

NCMB will be a proactive and progressive leader that addresses emerging challenges in medicine.



CORE VALUES

Integrity

We are committed to acting honestly, ethically, and impartially

Accountability

We accept responsibility for our actions, and disclose results in a transparent manner

Excellence

We strive to deliver the highest quality work, and superior service

Progressive

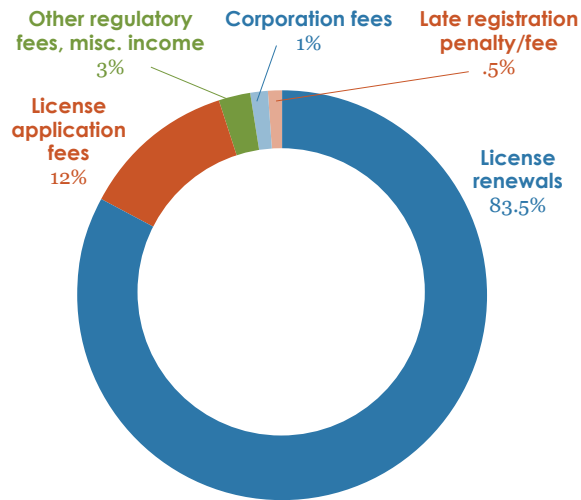
We rise to meet the organization's changing needs with a spirit of creativity, inclusion and innovation



Financial Performance

Financial information below shows NCMB's revenues and expenses for the fiscal year Nov. 1, 2017-Oct. 31, 2018.

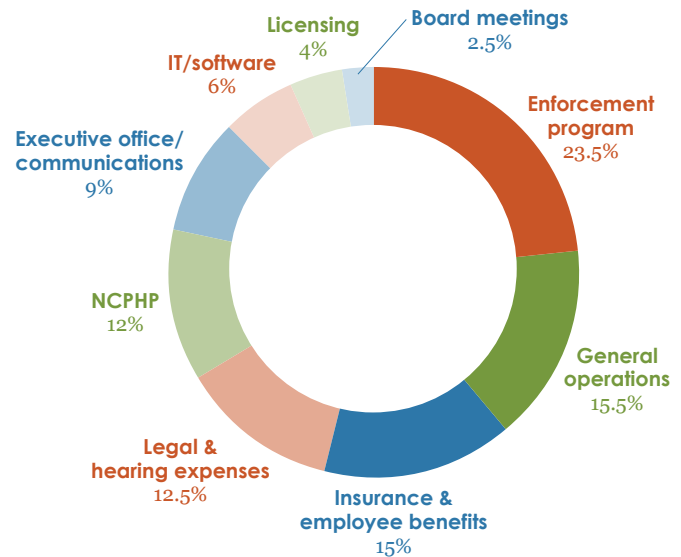
REVENUES



License renewals	\$10,470,600
License application fees	\$1,528,400
Other regulatory fees, misc. income	\$352,100
Corporation fees	\$146,300
Late registration penalty/fee	\$75,000
TOTAL*	\$12,572,400

* Totals rounded to the nearest hundred

EXPENSES



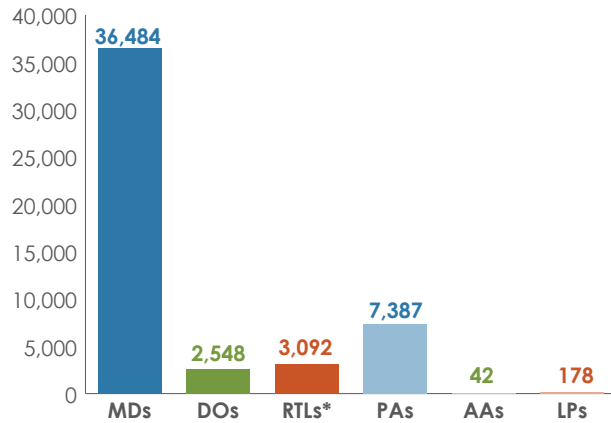
Enforcement program	\$2,528,800
General Operations	\$1,677,600
Insurance and Employee benefits	\$1,643,900
Legal and hearing expenses	\$1,342,200
NCPHP	\$1,298,300
Executive office/Communications	\$987,800
IT/Software	\$612,300
Licensing	\$434,700
Board Meetings	\$31,100
TOTAL*	\$10,782,700

NCMB collected \$19,670 in administrative fines during the 2018 budget year, which was distributed to local school systems.



Total Licensee Population

TOTAL LICENSEE POPULATION



PHYSICIANS BY SEX*

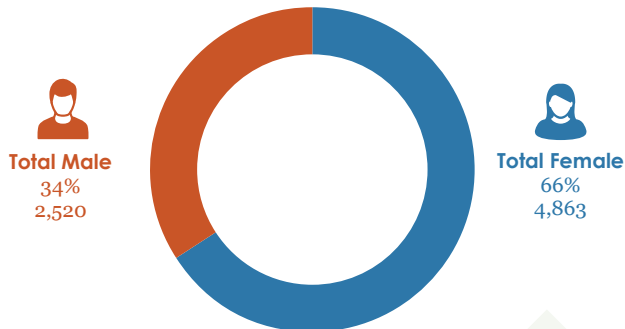
Female



Male



PAs BY SEX*



PROFESSIONALS LICENSED BY NCMB

MD = Allopathic physician

DO = Osteopathic physician

RTL = Resident Training Licensee

PA = Physician Assistant

LP = Licensed Perfusionist

AA = Anesthesiologist Assistant

* Total does not equal total population because a small number of licensees decline to state their sex

DATA SPOTLIGHT

DOs
experienced
the highest rate of
year-over-year growth,
with an increase of 12
percent from 2017. The total
DO population has increased
57 percent since
Dec. 31, 2013.

Licensing Program

NCMB's licensing program is integral to its public protection mission. Rigorous licensing requirements ensure that only clinicians who meet NCMB's high standards are issued a professional license.

Licenses issued in 2018

PHYSICIAN LICENSES

Full physician license (MD)	2,519
Full physician license (DO)	405
Volunteer license	169
Limited emergency license	68
Special permit/faculty limited license	7
TOTAL	3,168

PHYSICIAN ASSISTANT LICENSES

Full PA license	846
Limited emergency license	9
Volunteer license	5
TOTAL	860

RESIDENT PHYSICIANS

DOs	217
MDs	941
TOTAL	1,158

OTHER LICENSE TYPES ISSUED

Licensed perfusionists	32
Anesthesiology Assistant	6

EMERGENCY LICENSURE: FACING DOWN FLORENCE

With a potentially devastating Hurricane Florence on direct course for North Carolina and just days away, NCMB took emergency action to allow out-of-state doctors and PAs to volunteer in the state.

NCMB developed an online emergency license application, which was operational in less than 48 hours. Staff worked throughout the storm issuing licenses, troubleshooting, updating disaster information on the website and staying in contact with the NC Office of Emergency Medical Services. In all, NCMB issued 76 emergency disaster licenses in response to Florence.

NCMB is tremendously grateful to all physicians and PAs who obtained emergency licensure for their willingness to help North Carolinians. The Board has since taken steps to formally adopt its emergency policies as rule, so that emergency licensure will be available in the event of future disasters, natural or otherwise.

Medical Corporations in 2018

370 new registrants (total)



102

Professional corporations



268

Professional limited liability companies

4,825 total registrants (PCs/PLLCs)



2,774

Professional corporations



2,051

Professional limited liability companies

CORPORATE DISSOLUTIONS & REINSTATEMENTS

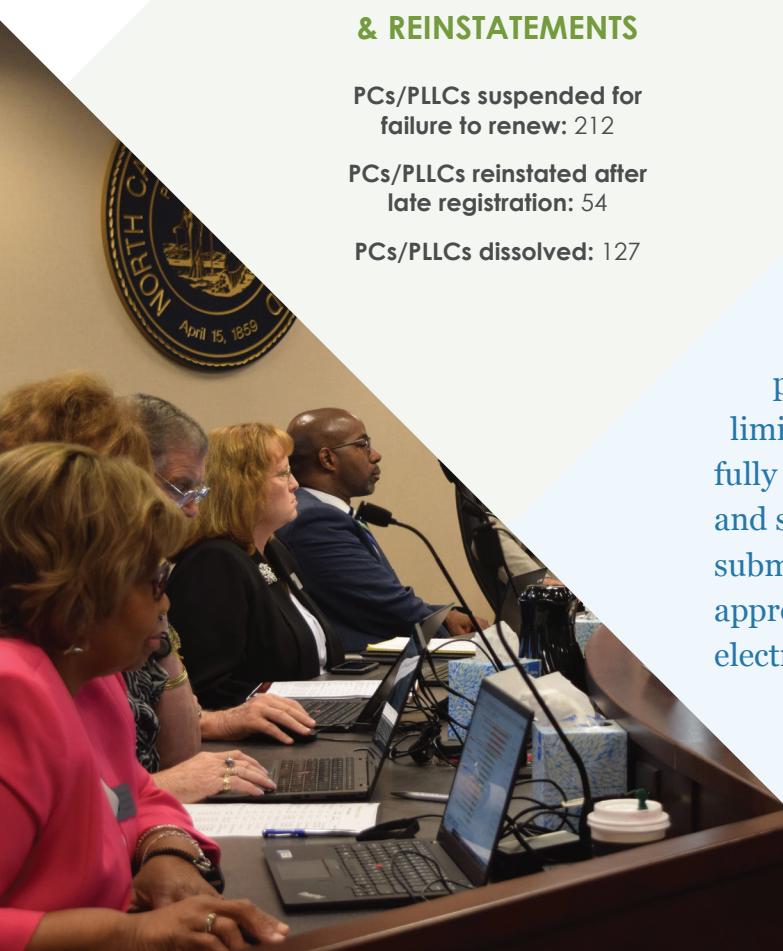
PCs/PLLCs suspended for
failure to renew: 212

PCs/PLLCs reinstated after
late registration: 54

PCs/PLLCs dissolved: 127

MEDICAL CORPORATIONS PROCESS GOES PAPERLESS

In November 2018, NCMB completed the process of converting all medical corporations (professional corporations, professional associations and professional limited liability companies) processes to a fully paperless system. All applications and supporting documents are now submitted electronically. In addition, approval packets are now returned electronically from NCMB.



Investing In Our Licensees

TRAINING INITIATIVE REACHES THOUSANDS

NCMB wrapped up its controlled substances CME collaboration with Wake AHEC in 2018, organizing 22 live two-hour panel discussions during 2018 that reached more than 2,100 medical professionals. A one-hour controlled substances prescribing webinar created as a companion piece to the live sessions has been viewed by more than 5,500 practitioners since it was first posted in 2017. Viewing the webinar and attending a panel session, both offered at no charge, provided three hours of CME credit – enough to satisfy the physician or PA CME requirement for controlled substances prescribers.

NCMB is grateful to NC AHEC and the Governor's Institute for their generous support of this project.

Although the live panel discussions have concluded, free CME credit is still available through this project. NCMB and Wake AHEC are finalizing a videotaped version of the two-hour panel session, which will be available online in 2019. In addition, the one-hour webinar has been rerecorded and recertified for CME credit. Upon completion, these activities will be available at www.ncmedboard.org/prescribingCME.

CLINICIAN WELLNESS

In October 2018, NCMB, NC Medical Society and others convened a statewide summit in Raleigh focused on identifying and addressing systemic drivers of clinician burnout. NCMB appreciated the opportunity to hear stories and solutions from within hospital systems, physician practices and other settings.

NCMB is doing its part – in 2018 the Board voted to remove license application questions that ask physician and PAs to disclose mental and/or physical health conditions. It's hoped that removing this question will encourage clinicians to get the help they need, without fear it will compromise their chances to obtain a professional license. The Board removed a similar question from its annual renewal in 2017, after receiving feedback that some physicians and PAs were not seeking needed help due to fear of action being taken against their licenses.

OPIOID PRESCRIBING TRAINING



5,560+
webinar views



2,100+ panel
attendees reached

NCMB's collaboration with Wake AHEC reached thousands of controlled substance prescribers.

We are very proud of this successful initiative!

www.ncmedboard.org/prescribingCME.

Enforcement Activity

NCMB's enforcement program includes activities related to opening, investigating, reviewing, evaluating and prosecuting disciplinary cases. Staff in the Investigations, Legal and Chief Medical Officer's departments are primarily responsible for enforcement activities.

ENFORCEMENT OVERVIEW



2,680

cases opened



139

cases determined outside of NCMB's jurisdiction



2,541

cases determined potentially actionable



2,502

cases closed



322

cases closed administratively by staff
(Consistent with protocols approved by the Board)



1,073

cases closed with no formal action



364

private actions



207

public adverse actions



15

public non-adverse actions

Complaints from patients and the public are the leading source of enforcement cases. On average, it takes 99 days to close a case.



CASES OPENED BY PRIMARY ALLEGATION*

Quality of care	795
Action by out of state medical board/regulator	334
Communication issue	304
Prescribing issues	133
Medical records issue/alleged HIPAA violation	121
Patient dismissed, abandoned or refused appointment	57
Billing/fee issue	49
Alcohol/substance use	43
Sexual misconduct/boundary violation	35
Failure to disclose reportable information	20
Misdemeanor or felony arrest/conviction	19

* Table displays the most common allegations associated with enforcement cases opened in 2018. Allegations that resulted in fewer than 10 cases are not shown.

CASES OPENED BY TYPE/SOURCE*

Complaints from patients/public: 1502

Review of out-of-state action: 354

Field investigations section: 320

Malpractice payment reviews: 260

License application: 61

Safe Opioid Prescribing Initiative: 15

Medical Examiner case: 13

* Sources that resulted in fewer than 10 cases being opened are not shown

Case Resolutions and Actions Taken



Adverse Actions

Conditions on license/practice	62
Public letters of concern	54
Reprimands	29
Suspensions	25
Limitations on license/practice	7
Non-practice agreements	7
Fines	6
License surrenders	6
License denials	3
License revocations	3
Amended consent orders	2
License inactivation in lieu of other action	1
Other	1
Summary suspensions	1
TOTAL ADVERSE ACTIONS	207



Non-Adverse Actions

Consent order lifted	11
Reentry agreement	2
Special purpose license issued	2
TOTAL NON-ADVERSE	15

Causes of Public Actions

Quality of care	65
Alcohol/substance abuse	35
Action by out of state medical authority	32
Prescribing issues	28
Sexual misconduct/boundary violation	15
Medical records issues	8
Conviction of felony	4
False/deceptive representations	4
Amendment to consent order	2
Failure to cooperate with Board order	2
Mental/physical condition affecting practice	1

Enforcement cases are typically resolved with one of three actions: no formal action is taken, private action is taken or public action is taken.

BRIDGING THE LANGUAGE GAP

NCMB implemented telephone language interpretation services Nov. 1 – the beginning of its budget year – to improve the Board’s ability to serve all North Carolinians. The Board has access to interpreters fluent in 240 languages and dialects, which it can connect to in moments when non-English speakers call or email. NCMB is now using Google Translate, which allows online visitors to convert NCMB’s website into the language of their choice. NCMB has also translated its complaint form and several other brochures into Spanish, the language for which there is greatest demand. NCMB frequently serves as a resource for the public on a variety of health care topics and is proud to serve all residents of the state.

National Engagement

NCMB, CHARLOTTE HOST FSMB ANNUAL MEETING



NATIONAL IMPACT

Shawn P. Parker, JD, a Raleigh health care attorney who serves as one of NCMB's three non-clinician Board Members, won election in April 2018 to the Board of Directors of the national Federation of State Medical Boards. Service on the FSMB Board allows NCMB a national voice in medical regulation and provides enhanced visibility on important issues that affect the practice of medicine. NCMB has had several Board Members serve in leadership roles with FSMB and is honored for Mr Parker continue this tradition!

In April 2018, NCMB hosted more than 450 medical regulators and stakeholders in Charlotte for the Annual Meeting of the Federation of State Medical Boards.

The FSMB is a national not-for-profit organization comprised of the 70 state medical and osteopathic boards of the

United States and its territories. The organization alternates between holding the annual meeting in its home state of Texas and in major cities across the U.S., but had not previously come to North Carolina. To give visitors a proper introduction to the Tar Heel State, NCMB

kicked off the event with a barbecue face off (Eastern NC style vs. Western style) reception, a Bluegrass ensemble and some old-fashioned North Carolina hospitality!



NC Medical Board
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Like Page

Medicine cabinets are gateways to drug abuse.



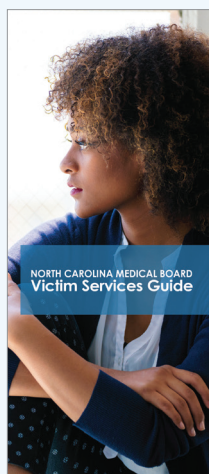
Unsecured medicines are a risk.
Every day, more than 1,700 children and young adults begin experimenting with prescription drugs.
WWW.NCMEDBOARD.ORG/SAFE-MEDICATION-DISPOSAL

124 Reactions 5 Comments 19 Shares

Public Outreach

REACHING MORE NORTH CAROLINIANS

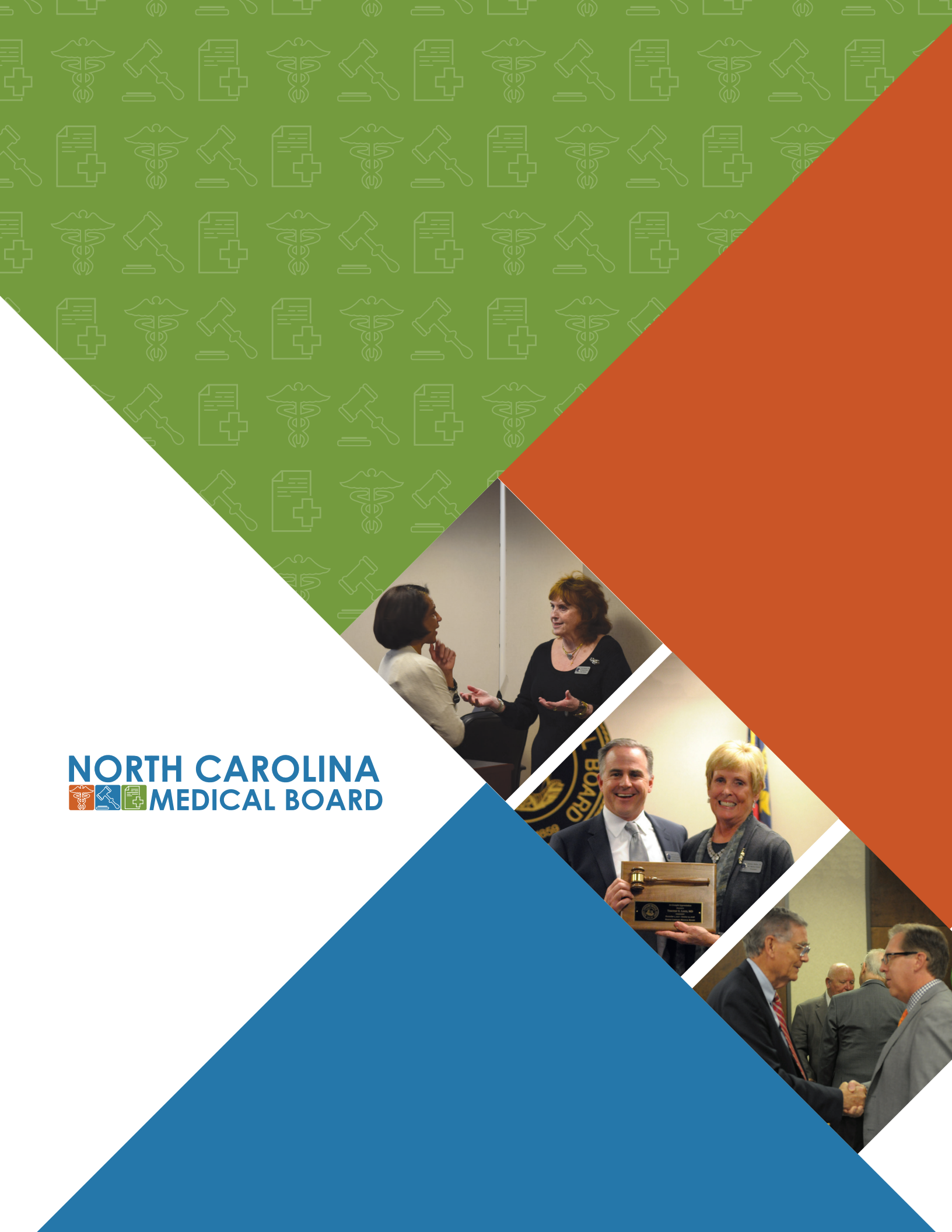
One of NCMB's greatest challenges is reaching the public. In recent years, the Board has expanded content on its website and become active on social media to reach more North Carolinians. In 2018 the Board continued this strategy, using social media to highlight information about non-opioid pain medication options and, in a separate campaign, safe medication storage information. More than 200,000 individuals saw NCMB's social media posts and hundreds visited more in-depth information on the Board's website. Developing more patient-centered information and resources, as well as effective ways to reach the public, will remain a communication priority.



SUPPORTING VICTIMS OF SEXUAL ASSAULT

In 2018 NCMB officially launched a program it began developing in 2017, when Board Members, NCMB investigators and Board attorneys completed training in handling cases that involve trauma. The Board's certified Victim Services Coordinator matches individuals who report professional sexual misconduct by a licensed physician or PA with available assistance and resources in their part of the state, and checks in periodically to determine if needed services have been obtained. NCMB's program was inspired by similar services offered to sexual assault

victims by law enforcement, district attorney's offices and the U.S. military. The NCMB assists victims of trauma across the state, regardless of the outcome of the case against the licensed physician or PA, or whether an enforcement case is active. The Board has shared information about the Victim Services Program with other medical regulators nationally and hopes other boards will adopt similar services.



NORTH CAROLINA
 **MEDICAL BOARD**