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ANNUAL
REPORT

EXPANDING TO KEEP PACE WITH A DRAMATIC INCREASE IN WORKLOAD

Last year was significant for NCMB because its intensifying focus on licensing and enforcement case metrics produced the realization that NCMB must seek an increase to licensing and registration fees to cope with the unprecedented growth in all aspects of its work since the General Assembly last increased physician application and renewal fees in 2016.

SINCE THAT TIME, NCMB HAS SEEN A:

- 33 percent increase in the total licensee population
- 54 percent increase in the number of professional licenses issued
- 74 percent increase in the total number of complaints from patients and the public
- 50 percent increase in the total number of enforcement cases opened
- 65 percent increase in the total number of enforcement cases closed

From 2016 to 2021, there was an increase in licenses issued by 36%, cases opened by 18%, and complaints from the public by 38%. However, during this period staff only increased by 7.5%. By 2021, it became clear that NCMB was critically understaffed, and the organization began hiring in earnest to handle the workload. Since 2021, staff has increased by 65% to meet the demands of the increased work volume. By the end of 2024, it was clear that the organization



NCMB's offices in Raleigh.

was finally approaching the minimum necessary staffing and could make reasonable projections about financial needs for the next decade.

When the General Assembly increased fees for physicians in 2016, NCMB's projections suggested the next increase would be needed about 10 years later. NCMB has begun conversations with stakeholders and legislators and will continue that work in 2025. An increase will enable NCMB to continue making strategic investments in staffing and technology to sustain improvements in efficiency and quality, including shortening the time to issue a medical license.

Dr. Sangvai will serve as NCMB President from Nov. 1, 2024–Oct. 31, 2025.



IN THE PAGES OF THIS REPORT, YOU’LL FIND AN ACCOUNTING OF NCMB’S CORE WORK OF MEDICAL LICENSURE AND REGULATION, AS WELL AS STORIES THAT ILLUSTRATE HOW BOARD MEMBERS AND STAFF HAVE MADE POSITIVE IMPACTS ON LICENSEES AND THE PUBLIC IN NORTH CAROLINA.

In 2024, NCMB made significant progress in streamlining the licensing process — including adding staff to address workload, developing metrics through a licensing dashboard and, most recently, creating a new executive role dedicated to the critical functions of license applications and renewals. Additional highlights include efforts to reduce non-actionable complaints, a data study to look at discipline among physician assistants, and continued efforts to reach medical students and PA students with the goal of helping them avoid future regulatory issues.

Last year proved, once again, to be a record year for NCMB, with new highs in the number of complaints received, new cases opened and cases closed, as well as volume of licenses issued. This year-over-year-over-year increase is now a trend, coming out of the pandemic with historic increases in volume of work. This puts an incredible strain on the organization. NCMB has made adjustments to its processes, technology and staffing to respond, looking for ways to be more efficient while also maintaining a high standard for this important work.

I continue to be inspired by my colleagues and staff for their commitment to the vision of the organization, their aspirations to do more, their engagement in the broader healthcare community, and in finding ways to support licensees. As you read through the following pages, you’ll get a better understanding why I am deeply moved to be a part of this institution.

I am proud of NCMB’s accomplishments from the last year, and I look forward to continuing the important work of licensing and regulation “...for the benefit and protection of the people of North Carolina.”

Sincerely,

Devdutta G. Sangvai,
MD, JD, MBA,
Board President



WELCOME NEW BOARD MEMBERS!

In 2024, NCMB gained four new Board Members — an internist, an acute pain specialist and two new public members.

A native of eastern North Carolina, Eric R. Bonner, MD, MBA, FACP is the Chief Medical Officer of OIC of Rocky Mount. His medical practice focuses on improving health literacy in his community and eliminating racial health disparities.

J. Nelson Dollar, MA, is the Executive Director for Child and Adolescent Health Policy at UNC Health. He formerly served as a Senior Policy Advisor to the Speaker of the North Carolina House and was a member of that Chamber for 14 years, most notably serving as the Senior Chair of the House Appropriations Committee along with Chairing the Health and Health Care Reform Committees.

Anthony R. Plunkett, MD, is Chief of Acute Pain Service and Chief of Anesthesia for the U.S. Army Reserves, Womack Army Medical Center, Fort Bragg. He also serves as Clinical Professor of Anesthesiology at the Uniformed Services University of the Health Sciences.

Vicki A. Harry is a wife, mother, grandmother, small business owner, and former teacher who currently lives in Willow Spring. Harry taught multiple subjects at Wake Christian Academy in Raleigh. She also coached basketball for four years and went on to become the school's Director of Development. In 2013, Harry opened a business, "Thanks a Latte Coffee and Gift Boutique" in Holly Springs, and later opened a second location in Angier.

2024–2025 BOARD MEMBERS

The North Carolina Medical Board is made up of 13 members, including eight physicians, one physician assistant, one nurse practitioner, and three nonclinicians. Board Members are appointed to three-year terms and may serve up to two consecutive terms.

View Board Member biographies at www.ncmedboard.org/boardmembers.

EXECUTIVE COMMITTEE



PRESIDENT

Devdutta G. Sangvai, MD, JD, MBA, Durham, Family Medicine



PRESIDENT-ELECT

Anuradha Rao-Patel, MD, Raleigh, Physical Medicine & Rehabilitation



SECRETARY/ TREASURER

Robert L. Rich Jr., MD, Bladenboro, Family Medicine



AT-LARGE MEMBER

Sharona Y. Johnson, PhD, FNP-BC, Goldsboro, Family Nurse Practitioner

BOARD MEMBERS



AT-LARGE MEMBER

Mark A. Newell,
MD, MMM,
Greenville, Trauma/
Critical Care Surgery



Earic R. Bonner,
MD, MBA,
Rocky Mount, Internal
Medicine, Hospitalist



Candace A. Bradley,
DO, MBA,
Eden, Family Medicine



J. Nelson Dollar, MA,
Cary, Public Member



W. Howard Hall, MD,
Morganton, OB/GYN



Vicki A. Harry,
Willow Spring,
Public Member



Joshua D. Malcolm, JD,
Pembroke,
Public Member



Miguel A. Pineiro,
PA-C, MHPE,
Cary, Primary Care

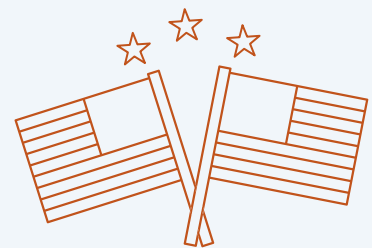


Anthony R. Plunkett, MD,
Pinehurst,
Anesthesiology

NEW MILITARY RELOCATION LICENSE

In 2024, NCMB created a new expedited license application for physicians and PAs who are military service members or spouses of military service members who are relocating to North Carolina on military orders.

NCMB issued 18 military relocation licenses last year.





NEW CONSUMER RESOURCES SECTION

In 2024, NCMB expanded the resources and information it offers to patients and the public with a fully redesigned Consumer Resources section on its website.

The centerpiece of the revamped section is the Smart Patient Toolkit, a collection of short articles that seek to increase patients' ability to successfully advocate for themselves and become confident healthcare consumers.

TOPICS COVERED INCLUDE:

Health literacy

Informed consent

HIPAA rights and obtaining your medical records

Patient dismissals

Patient rights during physical examinations



Consumer Resources

MEDBOARD MATTERS STILL GOING STRONG



In 2024, NCMB celebrated the four-year anniversary of its podcast, MedBoard Matters.

Since its launch in October 2020, MedBoard Matters has built a consistent audience, reaching listeners in 53 countries. As of December 2024, the podcast had published 44 episodes, including eight in 2024, and reached more than 9,200 downloads.

Episodes span a variety of topics from foundational education on NCMB's mission and responsibilities as well as timely topics relevant in medicine and medical regulation.

Browse past episodes online by visiting www.ncmedboard.org/podcast.

MOST-LISTENED TO EPISODES IN 2024 INCLUDE:

Violence in the Healthcare Workplace

Suicidal Ideation in North Carolina Physicians

Serving as a Board Member with NCMB

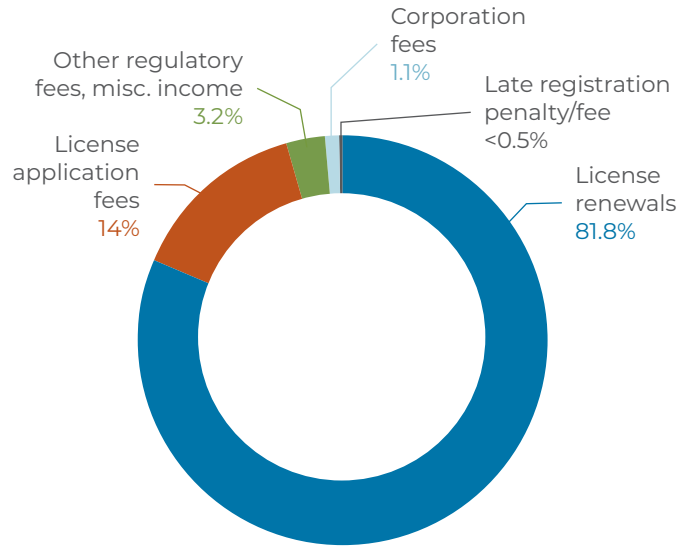
Combating Congenital Syphilis in North Carolina

NCMB: Celebrating 165 years

FINANCIAL PERFORMANCE

The information reported shows NCMB's revenues and expenses for the budget year beginning Nov. 1, 2023, and ending Oct. 31, 2024.

REVENUES*

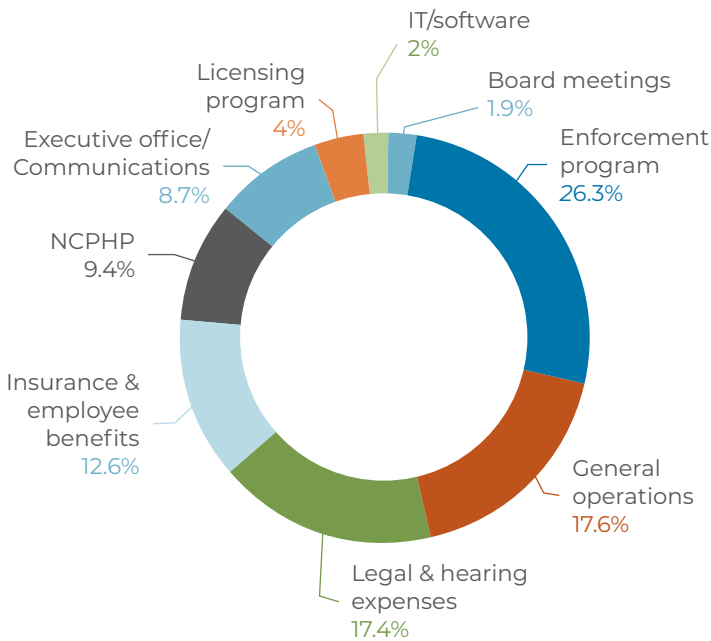


License renewals	\$12,756,000
License application fees	\$2,178,200
Other regulatory fees, misc. income	\$486,300
Corporation fees	\$164,500
Late registration penalties/fees	\$17,300
TOTAL*	\$15,602,300

*Totals rounded to the nearest hundred

*Totals may not equal 100 percent due to rounding.

EXPENSES*



Enforcement program	\$4,279,100
General operations	\$2,856,800
Legal & hearing expenses	\$2,832,400
Insurance & employee benefits	\$2,047,700
NCPHP	\$1,523,200
Executive office/communications	\$1,410,800
Licensing program	\$652,000
IT/software	\$339,900
Board meetings	\$305,800
TOTAL*	\$16,247,700

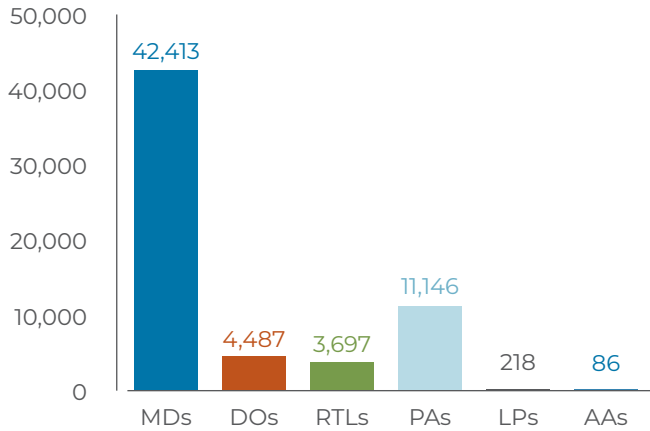
*Totals rounded to the nearest hundred

*Totals may not equal 100 percent due to rounding.

TOTAL LICENSEE POPULATION

(as of Dec. 31, 2024)

TOTAL LICENSEE POPULATION



Total licensee population = 62,047

PROFESSIONALS LICENSED BY NCMB

MD = Allopathic physician

DO = Osteopathic physician

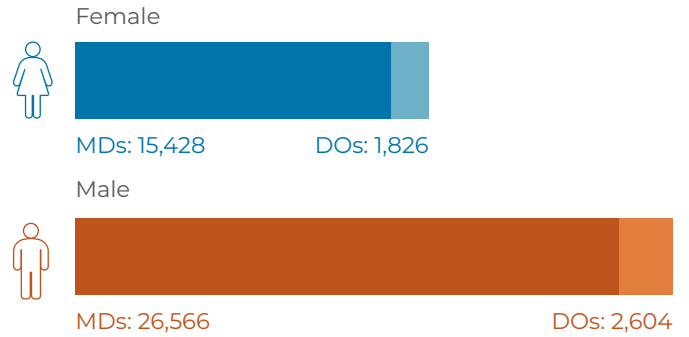
RTL = Resident Training Licensee

PA = Physician Assistant

LP = Licensed Perfusionist

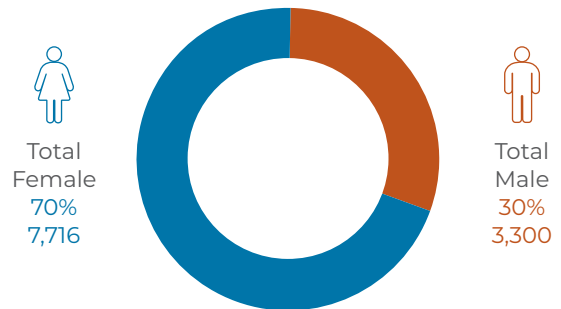
AA = Anesthesiologist Assistant

PHYSICIANS BY GENDER*



*Total does not equal total physician population because some licensees decline to state their gender.

PAs BY GENDER*



*Total does not equal total PA population because some licensees decline to state their gender.

NEW LEADERSHIP ROLE OVER LICENSING, REGISTRATION

How can NCMB's licensing program issue professional licenses faster while maintaining the highest selection standards and verification processes? That is the essential question NCMB asks when carrying out its responsibility to issue licenses only to those medical professionals it believes can practice safely.

In 2024, NCMB's CEO, Thomas W. Mansfield, JD, created a new Chief-level leadership position to oversee the Board's license application process, as well as license renewal functions. NCMB's intention is to drive innovation and improvement by giving licensing and renewal a dedicated leader who can focus their sole attention on these critical functions. The new Chief, Becky Powers, started in January 2025.



PHYSICIANS AND PAs BY COUNTY

County	MD/DO	PA	County	MD/DO	PA	County	MD/DO	PA
Alamance	297	96	Gaston	458	133	Pender	51	35
Alexander	12	10	Gates	2	2	Perquimans	3	3
Alleghany	15	1	Graham	3	3	Person	32	15
Anson	10	4	Granville	135	29	Pitt	1,062	198
Ashe	47	10	Greene	7	3	Polk	39	12
Avery	36	4	Guilford	1,603	489	Randolph	108	39
Beaufort	53	22	Halifax	68	21	Richmond	31	12
Bertie	11	6	Harnett	180	88	Robeson	146	60
Bladen	21	12	Haywood	132	32	Rockingham	99	29
Brunswick	222	99	Henderson	335	95	Rowan	270	98
Buncombe	1,683	417	Hertford	47	7	Rutherford	70	30
Burke	227	46	Hoke	42	28	Sampson	57	15
Cabarrus	574	178	Hyde	1	0	Scotland	64	23
Caldwell	98	24	Iredell	398	122	Stanly	73	30
Camden	6	3	Jackson	86	25	Stokes	19	10
Carteret	163	68	Johnston	186	119	Surry	120	45
Caswell	9	0	Jones	10	4	Swain	23	14
Catawba	438	136	Lee	91	45	Transylvania	73	11
Chatham	171	35	Lenoir	90	21	Tyrrell	0	0
Cherokee	42	12	Lincoln	100	39	Union	323	112
Chowan	29	9	Macon	61	9	Vance	60	28
Clay	15	5	Madison	22	6	Wake	3,853	1,447
Cleveland	166	48	Martin	8	4	Warren	6	1
Columbus	69	21	McDowell	47	23	Washington	7	1
Craven	296	66	Mecklenburg	4,635	1,508	Watauga	175	56
Cumberland	878	396	Mitchell	21	8	Wayne	196	58
Currituck	12	6	Montgomery	13	10	Wilkes	76	29
Dare	88	29	Moore	450	209	Wilson	112	46
Davidson	140	69	Nash	168	43	Yadkin	14	3
Davie	73	39	New Hanover	1,009	380	Yancey	21	7
Duplin	36	21	Northampton	3	1	TOTAL		
Durham	3,273	666	Onslow	267	116	In State	32,003	9,694
Edgecombe	40	16	Orange	2,341	220	TOTAL		
Forsyth	2,461	770	Pamlico	7	3	Out of State	14,897	1,452
Franklin	16	11	Pasquotank	117	27	TOTAL	46,900	11,146

LICENSING PROGRAM

The North Carolina Medical Board licenses and registers a variety of medical professionals and entities. NCMB has regulatory authority (e.g. the ability to discipline or order remediation) over individuals it licenses. All licensed professionals are listed below. Registered individuals are not subject to discipline.

LICENSES ISSUED IN 2024

Physician licenses

Full physician license (MD)	3,210
Full physician license (DO)	584
Volunteer license	202
Limited Emergency License	156
Special permit/faculty limited license	16
Military relocation license	15
TOTAL	4,183

Physician assistant licenses

Full PA license	1,122
Limited emergency license	40
Volunteer license	19
Military relocation license	3
TOTAL	1,184

Resident physician licenses

MDs	1,066
DOs	255
TOTAL	1,321

Other license types issued

Licensed perfusionists	25
Anesthesiology assistants	22

DATA SPOTLIGHT: LICENSING

In 2024, NCMB had one of its busiest years on record, issuing more than 6,700 licenses to physicians, PAs, and other licensed professionals.

The all-time record for licenses issued was set in 2020 when the Board issued 2,000 limited emergency licenses due to the coronavirus pandemic.

NEW LICENSING DASHBOARD



In 2024, NCMB's Licensing Department created a series of reports that measure various aspects of the license application review process. By better understanding where delays or challenges occur, NCMB hopes to be able to more effectively identify problems and direct appropriate resources to solve them.

METRICS TRACKED INCLUDE:

Total number of applications issued by type

Average days to process

Current licensing staff

Average caseload per credentialing coordinator

Average days to complete internal review of applications requiring Legal/Medical review

REDUCING NON-ACTIONABLE COMPLAINTS

NCMB introduced a new online decision tool in 2024 to help individuals determine if the Board’s complaint process is an effective way to address their concerns with a licensed physician or PA.

In a typical year, NCMB receives more than 2,000 complaints from patients and the public — scores of which involve professionals not regulated

by the Board or issues over which it does not have jurisdiction. When a patient files a complaint that NCMB cannot address, it can delay finding a solution and leave complainants frustrated.

NCMB’s new decision tool helps individuals identify whether the matter they wish to report is something the Board has the authority to investigate. If a matter is outside of NCMB’s jurisdiction, the tool directs the individual to the applicable regulatory board or organization that can assist them.

ENFORCEMENT ACTIVITY

NCMB’s enforcement program includes 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



3,664

Cases opened



3,770

Cases closed*



215

Public actions, adverse



15

Public actions, non-adverse



1,683

Accepted as Information



78

Investigative Interviews



450

Private letters of concern

**Some portion of cases closed in 2024 were opened in 2023 or earlier*



2024 was another record year NCMB’s enforcement program, with 3,664 new enforcement cases opened from all sources. That represents an 8 percent increase from 2023.

ENFORCEMENT ACTIVITY

CASES OPENED 2024

Cases opened by type/source*

Complaints from patients/public	2,315
Field investigations department	374
Out of state actions reviewed	378
Malpractice cases reviewed	258
Information reported at renewal	241
Information identified in license application	94
NC DHHS/Safe Opioid Prescribing Initiative	11

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

DEFINING TERMS: WHAT IS AN 'OFE'?

Much of the work NCMB does to ensure that licensees are safe to practice happens behind the scenes. An example of this is a tool known as an “order for examination” or OFE.

An OFE requires the licensee to obtain a specific type of examination, depending on the circumstances of their case. The findings become part of the investigation, where the results are used to tailor appropriate resolution or remediation.

Assessments provide insight into a variety of potential issues, including substance use, behavioral health, neurological function, and clinical knowledge and skills.

NCMB issued 200 OFEs in 2024 — a nearly 18 percent increase from 2023.



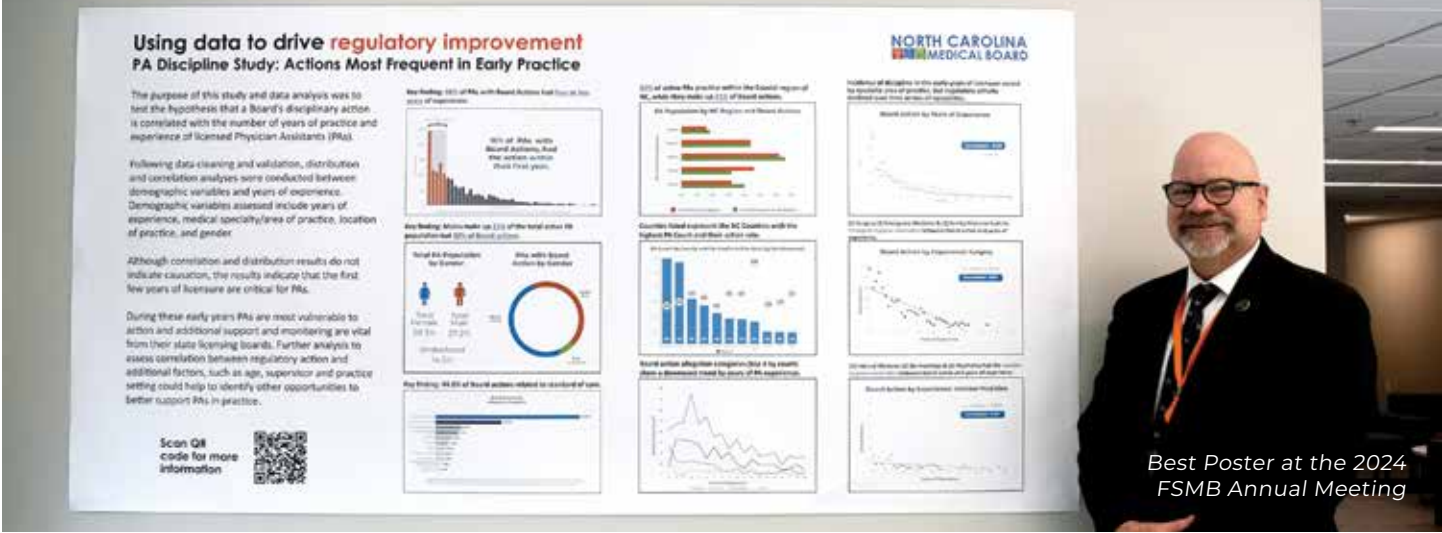
DATA SPOTLIGHT: PATIENT COMPLAINTS

NCMB received the largest-ever number of complaints from patients and the public, logging more than 2,300 — a 12 percent increase from the previous year.

Cases opened by primary allegation*

Substandard care – non-prescribing	1,384
Substandard care – prescribing	383
Issue self – reported by licensee	268
Failure to comply with regulation related to the practice of medicine	212
Communication issue with licensee	162
Medical record issue/HIPAA violation	108
Felony arrest/charge/conviction	68
Misdemeanor arrest/charge/conviction	61
Licensee alcohol/substance use	54
Sexual impropriety/misconduct with patients	51
Death certificate issue	46
Patient abandoned, dismissed or refused appointment	43
Practicing without appropriate supervision	39
Billing/fee/insurance issue	35
Communication issue with medical office staff	34
Aiding unlicensed practice/corporate practice of medicine issue	32
Licensee alcohol/substance use or relapse	31
Licensee DUI/DWI	31
Impairment due to mental or physical health issue	13

*Allegations that resulted in fewer than 10 cases are not shown.



STUDYING PA DISCIPLINE FOR DEEPER INSIGHT

As part of its efforts to use data to inform and enhance its regulatory work, in 2024 NCMB commissioned a study that looked at the incidence of discipline among licensed physician assistants.

The results were illuminating: Nearly half of all PAs who had at least one NCMB disciplinary action received the action during their first four years

of licensure in the state. While correlation is not causation, this suggests that the first few years of licensure are critical for PAs. During these early years, PAs are most vulnerable to action, which suggests that additional support from their state licensing board could be beneficial.

NCMB currently presents its Regulatory Immersion Series mock disciplinary committee program to every PA school in the state and will continue to identify ways it can provide additional resources that might help PAs avoid missteps that can lead to regulatory action.

SUPPORTING THE STATE'S RESPONSE TO HURRICANE HELENE

In late September 2024, Hurricane Helene slammed into western NC, dumping 40 trillion gallons of rainfall on a region that rarely finds itself in the crosshairs of a major hurricane. The storm has since been confirmed as NC's most deadly and costly hurricane ever, with estimated damages of about \$53 billion.

With 25 counties in western NC facing historic levels of devastation and displacement, hundreds of thousands of residents found themselves temporarily homeless and without access to basic necessities, including medical care. At the request of the NC Department of Health and Human Services, NCMB built a

first-of-its-kind online directory of medical practices and other healthcare facilities to help members of the public find medical care in the affected region. The directory also served as a resource to care managers seeking to direct patients with Medicaid to providers who were open and providing care. With the help of stakeholder groups across the state, NCMB collected practice status information from more than 1,600 open medical practices and healthcare facilities.

NCMB issued nearly 200 Limited Emergency Licenses to physicians and PAs who assisted in the Hurricane Helene response.



CASE RESOLUTIONS AND ACTIONS TAKEN

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

ABOUT CASE RESOLUTIONS

No action: When NCMB does not find sufficient evidence that a violation of the Medical Practice Act has occurred, it does not have a legal basis for action.

Private action: Cases that result in private action may include possible violations or departures from good medical practice but, in the Board's view, do not warrant public action.

Public action – adverse: Cases that are closed with adverse public action typically involve one or more serious departures from accepted standards of care and clear evidence of violation(s).

CASE RESOLUTIONS 2024

Adverse actions

Public letters of concern	67
Conditions on license/practice	47
Reprimand	25
License suspensions	25
Limitations on license/practice	23
License revoked	9
License surrendered	8
License denied	4
License made inactive	4
Public non-practice agreement (NPA)	2
Annulments	1
TOTAL	215

Non-adverse actions

Full/partial relief of consent order obligations	13
Reentry agreements	1
Amended consent	1
TOTAL	15

Causes of adverse actions*

Quality of care	84
Prescribing issues	39
Reciprocal action in response to out-of-state action	32
False/deceptive representation	21
Other unprofessional conduct	21
Medical records issue	20
Sexual misconduct	18
Licensee alcohol/substance use	17
Conviction of a felony	8
Failure to cooperate with Board order or request	2
Mental/physical condition affecting practice	2

*A single enforcement case may have multiple causes of action (e.g. quality of care AND medical records issues).

DEFINING TERMS: WHAT IS AN 'AAI'?

When an investigation does not identify — or finds insufficient evidence of — a violation, the Board votes to accept the case as “information”, abbreviated “AAI”. In 2024, NCMB closed 1,683 cases “AAI”.

DEFINING TERMS: WHAT ARE ILOCs AND PLOCs?

During the course of an investigation, if the Board has concerns about a licensee’s conduct or competence while evaluating the evidence, it will often use a tool known as an Interim Letter of Concern or “ILOC.”

An ILOC is a confidential, “interim” action taken while a case is still in the investigative stage. An ILOC usually highlights Board concerns and requests that the licensee take a corrective or remedial action such as continuing medical education (CME). If the licensee complies, ILOCs are typically followed by Private Letters of Concern or “PLOCs.”

PLOCs, which are also issued independent of ILOCs, express the nature of the Board’s concern and warn the licensee that similar conduct in the future may result in the Board taking additional action against their license.

In 2024, the Board issued a total of 450 confidential letters — 132 ILOCs and 318 PLOCs.



NCMB’S MOCK DISCIPLINARY PROGRAM TURNS FIVE YEARS OLD!

In 2024, NCMB continued to expand its Regulatory Immersion Series mock disciplinary committee program, which teaches medical and PA students across North Carolina about professionalism and the role of medical regulation in clinical practice.

Last year, NCMB again reached every medical school and PA program in the state, including North Carolina’s newest PA program at South College in Asheville. Since its inception in late 2019, NCMB has reached thousands of students and continues to evolve on case topics including use of social media, HIPAA violations, and substance use disorder.

2024 RIMS BY THE NUMBERS



15

Schools reached in total



1,252

Students reached in total



13

In-person sessions



4

Virtual sessions



5

Medical schools



695

Medical students



10

PA schools



557

PA students



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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