



BOARD MEETING MINUTES

March 15-17, 2023

**3127 Smoketree Court
Raleigh, North Carolina**

and Virtual

General Session Minutes of the North Carolina Medical Board (NCMB) Meeting held March 15-17, 2023.

The March 15-17, 2023, meeting of the North Carolina Medical Board was held virtual and at 3127 Smoketree Court, Raleigh, NC 27604. John W. Rusher, MD, JD; President, called the meeting to order. Board members in attendance were: Michaux R. Kilpatrick, MD; President-Elect; Christine M. Khandelwal, DO; Secretary/Treasurer; Shawn P. Parker, JD; W. Howard Hall, MD; Joshua D. Malcolm, JD; Damian F. McHugh, MD; Devdutta G. Sangvai, MD, MBA; Mr. William M. Brawley; Anuradha Rao-Patel, MD; Sharona Y. Johnson, PhD, FNP-BC; Miguel A. Pineiro, PA-C; and Melinda H. Privette, MD, JD.

PRESIDENTIAL REMARKS

Dr. Kilpatrick reminded the Board members of their duty to avoid conflicts of interest with respect to any matters coming before the Board as required by the State Government Ethics Act. Reported conflicts were included within individual committee reports.

ANNOUNCEMENTS and UPDATES

Dr. Kilpatrick recognized new staff as they were introduced by their perspective manager. She also recognized staff with milestone anniversaries.

PRESENTATION(S)

Board member training was provided by Mr. Mansfield

NORTH CAROLINA PHYSICIAN HEALTH PROGRAM REPORTS (NCPHP)

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, and 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes and/or to preserve attorney-client privilege.

Dr. Jordan gave the PHP Compliance Committee report. The specifics of this report are not included because the information contained in the report is confidential and non-public.

A motion passed to return to open session.

Mr. Malcolm gave the PHP Board of Directors report.

NCMB ATTORNEY'S REPORT

Mr. Brian L. Blankenship, Deputy General Counsel and Mr. Thomas W. Mansfield, Chief Legal Officer, gave the Attorney's Report on Friday, March 17th, 2023.

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Mr. Blankenship and Mr. Mansfield updated the Board on the schedule of upcoming hearings, hearing assignments and rule activity of the Board.

A motion passed to close the session pursuant to N.C. Gen Stat. §143-318.11(a) to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, and/or 90-21.22 of the North Carolina General Statutes and not considered public records within the meaning of Chapter 132 of the General Statutes and/or to preserve attorney/client privilege.

Within the closed session:

Mr. Mansfield provided information and legal advice within the attorney-client privilege and regarding two outside litigation matters. Mr. Blankenship provided information and legal advice within the attorney-client privilege regarding attorney work product occurring since the last Attorney's Report was presented.

Mr. Blankenship and Mr. Patrick Berckmiller, Chief Investigative Officer, provided the Board with information regarding the increase in cases received and Board actions as they relate to staffing in connection with the Board's Annual Report.

A motion was passed to return to open session.

The Board accepted the report as information.

NCMB COMMITTEE REPORTS

Executive Committee Report

Members present via video/teleconference were: Michaux R. Kilpatrick, MD, PhD Chairperson; Christine M. Khandelwal, DO; Devdutta G. Sangvai, MD, MBA; Anu Rao-Patel, MD; and John W. Rusher, MD, JD

Financial Update

a. Year-To-Date Financials

The Committee reviewed the following financial reports through November 30, 2022: Balance Sheet, Profit & Loss versus Budget, and the Profit & Loss Comparison.

Committee Recommendation: Accept the financial information as reported.

Board Action: Accept Committee recommendation. Accept the financial information as reported

b. Investment Account Update

The Committee reviewed the investment statements for January and February 2023.

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Committee Recommendation: Accept the investment statements as reported.

Board Action: Accept the Committee recommendation. Accept the investment statements as reported.

c. FY2022 Budget to Actuals Report

Old Business

a. Recruiting Update

As part of the FY23 budget, the Board approved 15 new positions to support the Board's licensing and investigative work. Mr. Ted Pauling, Director of Human Resources and Diversity, Equity, Inclusion and Belonging, gave an update on the recruiting process for those positions. Seven of the positions have been filled and staff is actively recruiting for two other positions. The remaining six positions should be filled by the end of the fiscal year.

Committee Recommendation: Accept the recruiting report as information.

Board Action: Accept the Committee recommendation. Accept the recruiting report as information.

New Business:

a. Legislative Report

The Committee discussed the following introduced bills:

H218/S175 – The SAVE Act. The SAVE Act eliminates physician supervision for nurse practitioners, certified nurse midwives, and certified registered nurse anesthetists, and eliminates joint regulation by the NCMB and the NC Board of Nursing. As proposed, the bill will increase the risk to patients, increase bad outcomes, and is not likely to meaningfully increase access to care.

Committee Recommendation: Oppose the bill in its current form.

Board Action: Accept the Committee recommendation. Oppose the bill in its current form.

H316 – The Respiratory Care Modernization Act. The bill creates an Advanced Respiratory Care Practitioner ("ARCP") that is delegated authority to perform medical acts, tasks, and functions by a supervising physician, including the ability to prescribe non-controlled and controlled substances related to care involving cardiovascular or cardiopulmonary systems. The ARCP's scope of practice is based on what ARCPs learn in their educational program, which is modeled after nurse practitioner and physician assistant programs. There is currently only one educational program in Ohio; UNC-Charlotte is also considering offering the program.

The education program enables the ARCP to obtain patient histories, perform physical examinations, order and interpret diagnostic tests, prescribe and administer medications, assess risks, and practice evidence-based medicine. There appear to be no states that have passed ARCP legislation.

Committee Recommendation: Oppose the bill.

Board Action: Accept the Committee recommendation. Oppose the bill.

The Committee also discussed the following draft legislation:

Licensure for Military Servicemembers and Spouses. Congress recently passed Public Law

No:

117-333, Section 19: Portability of professional licenses of members of uniformed services and their spouses. It requires state licensing authorities to recognize a license from another jurisdiction for servicemembers or their spouses who have been relocated due to military orders for military services. Staff submitted proposed language which, if enacted, would carry out the intent of the federal law and resolve unaddressed practical issues.

Committee Recommendation: Support adding language to the Interstate Medical Licensure Compact bill in which the NCMB would recognize a license from another jurisdiction for servicemembers or their spouses who have been relocated to North Carolina due to military orders for military services.

Board Action: Accept the Committee recommendation. Support adding language to the Interstate Medical Licensure Compact bill in which the NCMB would recognize a license from another jurisdiction for servicemembers or their spouses who have been relocated to North Carolina due to military orders for military services.

Internationally Trained Hospital Physician Employee License. Staff is aware of a draft bill that would create an Internationally Trained Hospital Physician Employee License, which is like a Medical School Faculty License but would allow similar candidates to work full-time in any hospital. The license applies to internationally trained physicians who have been offered full-time employment at a NC hospital. Applicants must also have a license to practice in a foreign country within the past 5 years, have completed medical school and PGT training that is like current NCMB requirements, have no disciplinary history, practiced medicine for 5 years, are proficient in English, and are legally authorized to work in US.

Committee Recommendation: Accept as information.

Board Action: Accept the Committee recommendation. Accept as information.

Policy Committee Report

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Members present were: John W. Rusher, MD, JD; Chairperson; William M. Brawley; W. Howard Hall, MD; Sharona Y. Johnson, PhD, FNP-BC; and Robert L. Rich, Jr., MD

Old Business:

a. 9.1.3. Licensee Employment, Appendix A

The Committee gave an overview of the efforts made by staff and Committee members, and discussions with the North Carolina Healthcare Association (“NCHA”), to further revise the proposed position statement and incorporate changes to address the NCHA’s suggestions and concerns. The NCHA has reviewed the most recent version of the proposed position statement and staff received positive feedback. The Committee also reviewed the revised position statement favorably and agreed that the Board should adopt and publish the most recent version of the position statement.

Committee recommendation: Adopt and publish the most recent version of the position statement.

Board Action: Accept Committee recommendation. Adopt and publish the most recent version of the position statement.

b. 5.1.4. Telemedicine

The Committee reviewed and discussed the additional comments received from Committee members and addressed additional language concerns in the revised position statement. The Committee agreed that it would be helpful for staff to create a FAQ to address specific issues that the Board encounters related to telemedicine.

The Committee directed staff to make additional changes to the position statement and circulate to licensees and stakeholders for review and comment. Staff will compile any comments or proposed changes received and present them to the Committee for discussion and consideration at a later meeting, with the anticipated date of May 2023.

Committee recommendation: Staff to make the discussed changes and submit the revised position statement for review and comment by licensees and stakeholders and bring back comments or proposed changes at a later meeting, with the anticipated date of May 2023. Staff to begin drafting FAQs to address specific issues that the Board encounters related to telemedicine.

Board Action: Accept Committee recommendation. Staff to make the discussed changes and submit the revised position statement for review and comment by licensees and stakeholders and bring back comments or proposed changes at a later meeting, with the anticipated date of May 2023. Staff to begin drafting FAQs to address specific issues that the Board encounters related to telemedicine.

c. 6.1.4. Clinician Obligation to Complete a Certificate of Death

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The Committee reviewed and approved the changes made to the position statement regarding the North Carolina Database Application for Vital Events (“NCDAVE”) system. The Committee then recommended staff revise the position statement to further clarify the Board’s expectations regarding terminology used in providing a cause of death and present those revisions to the Committee for consideration at a later meeting, with the anticipated date of May 2023.

Committee recommendation: Staff to revise the position statement to further clarify the Board’s expectations regarding terminology used in providing a cause of death and present those revisions to the Committee for consideration at a later meeting, with the anticipated date of May 2023.

Board Action: Accept Committee recommendation. Staff to revise the position statement to further clarify the Board’s expectations regarding terminology used in providing a cause of death and present those revisions to the Committee for consideration at a later meeting, with the anticipated date of May 2023.

b. 4.1.3: Policy for the Use of Opioids for the Treatment of Pain

The Committee agreed to table revisions of the position statement until the Federation of State Medical Boards (“FSMB”) finalizes its draft *Strategies for Prescribing Opioids for the Management of Pain* policy at the May 2023 FSMB meeting.

Committee recommendation: Accept as Information.

Board Action: Accept Committee recommendation. Accept as Information.

Licensing Committee Report

Members present were: W. Howard Hall, MD, Chairperson; Miguel Pineiro, PA-C, MHPE; Melinda H. Privette, MD, JD and Robert L. Rich, Jr., MD

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The License Committee reviewed seven cases. A written report was presented for the Board’s review. The Board adopted the Committee’s recommendation to approve the written report. The specifics of this report are not included because these actions are not public.

A motion passed to return to open session.

License Interview Report

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, and 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes and/or to preserve attorney-client privilege.

Four licensure interviews were conducted. A written report was presented for the Board's review. The Board adopted the Committee's recommendation to approve the written report. The specifics of this report are not included because these actions are not public information.

A motion passed to return to open session.

Advanced Practice Providers and Allied Health Committee Report

Members present were: Sharona Y. Johnson, PhD, FNP-BC, Chairperson; Devdutta G. Sangvai, MD, MBA; Miguel Pineiro, PA-C, MHPE; Shawn P. Parker, JD; Miguel A. Pineiro, PA-C and William M. Brawley

Old Business:

- a. 21 NCAC 32M .0107 – Continuing Education (CE) for Nurse Practitioners – M. Jimison, Sr. Board Attorney

Committee Recommendation: Accept proposed rule amendment.

Board Action: Accepted Committee recommendation. Accepted proposed rule amendment.

21 NCAC 32B .1002 – Physician Supervision of Nurse Midwives – M. Jimison, Sr. Board Attorney

Committee Recommendation: Approve rule adoption with the strike through of lines 8 through 12.

Board Action: Did not accept committee recommendation. Approved the original rule adoption as written, with no strike throughs.

New Business:

Closed Session

JSC Final Recommendations Grid, September 2022, November 2022 and January 2023.

Committee Recommendation: Accept as information.

Board Action: Accepted as information.

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Disciplinary (Malpractice) Committee Report

Members present were: Christine M. Khandelwal, DO; Chairperson; Anuradha Rao-Patel, MD, Vice Chair; Melinda H. Privette, MD, JD; Miguel A. Pineiro, PA-C, MHPE; W. Howard Hall, MD, and John W. Rusher, MD, JD.

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, and 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes and/or to preserve attorney-client privilege.

The Disciplinary (Malpractice) Committee reviewed 60 cases. A written report was presented for the Board's review. The Board adopted the Committee's recommendation to approve the written report. The specifics of this report are not included because these actions are not public information.

A motion passed to return to open session.

Disciplinary (Investigative) Committee Report

Members present were Christine M. Khandelwal, DO; Chairperson; Anuradha Rao-Patel, MD, Vice Chair; Melinda H. Privette, MD, JD; Miguel A. Pineiro, PA-C, MHPE; W. Howard Hall, MD, and John W. Rusher, MD, JD.

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, and 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes and/or to preserve attorney-client privilege.

The Disciplinary (Investigative) Committee reviewed 36 investigative cases. A written report was presented for the Board's review. The Board adopted the recommendations and approved the written report. The specifics of this report are not included because these actions are not public information.

A motion passed to return to open session.

Disciplinary (Complaints) Committee Report

Members present were: Christine M. Khandelwal, DO; Chairperson; Anuradha Rao-Patel, MD, Vice Chair; Melinda H. Privette, MD, JD; Miguel A. Pineiro, PA-C, MHPE; W. Howard Hall, MD, and John W. Rusher, MD, JD.

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, and 90-21.22 of the North Carolina General Statutes and not considered a public

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record within the meaning of Chapter 132 of the General Statutes and/or to preserve attorney-client privilege.

The Disciplinary (Complaints) Committee reviewed 72 complaint cases. A written report was presented for the Board's review. The Board adopted the Committee's recommendation to approve the written report. The specifics of this report are not included because these actions are not public.

A motion passed to return to open session.

Disciplinary (Compliance) Committee Report

Members present were: Devdutta G. Sangvai, Chairperson; W. Howard Hall, MD; (Vice-Chair) Sharona Y. Johnson, FNP-BC; Christine M. Khandelwal, DO; Melinda H. Privette, MD, JD and Anuradha Rao-Patel, MD. Absent were: Joshua D. Malcolm, JD.

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, and 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes and/or to preserve attorney-client privilege.

The Disciplinary (Compliance) Committee reviewed five investigative cases. A written report was presented for the Board's review. The Board adopted the recommendations and approved the written report. The specifics of this report are not included because these actions are not public information.

A motion passed to return to open session.

Investigative Interview Report

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, and 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes and/or to preserve attorney-client privilege.

Eleven interviews were conducted. A written report was presented for the Board's review. The Board adopted the recommendations and approved the written report. The specifics of this report are not included because these actions are not public information.

A motion passed to return to open session.

Outreach Committee Report

Members present were: W. Howard, MD; Chairperson; Miguel A. Pineiro, PA-C, MHPE; Melinda H. Privette, MD, JD and Devdutta G. Sangvai, MD, MBA

Old Business:

a. Update on presentations

Professional and public presentations

The Communications Director and Chief Communications and Administrative Officer gave an update on recent and upcoming professional and public outreach. Professional outreach has been dominated by the Regulatory Immersion Series, with sessions scheduled out through August 2023. After a recent string of presentations to Wake County senior centers, NCMB is looking forward to participating in an in-person health care, where staff will greet visitors with information and branded giveaway items to raise awareness, this spring. Staff will soon begin working on developing new potential senior audiences, with plans to reach out to assisted living centers and other geriatric populations.

Committee recommendation: Accept as information.

Board action: Accept Committee recommendation: Accept as information.

b. Wellness and Burnout Updates

Review of March 14 Consortium Meeting

The Committee Chair and the Chief Medical Officer gave a brief summary of the recent meeting of the NC Clinician and Physician Wellness Consortium, which they attended along with the Chief Legal Officer. The group engaged in a substantive discussion about the importance of understanding and developing ways to positively impact system drivers that negatively impact clinician wellness. Some of this discussion was focused on the Lorna Breen Foundation, an organization that seeks to destigmatize mental health issues, and remove barriers, real and perceived, to seeking care and support by clinicians. NCMB's decision to cease requiring licensees to disclose whether they are in treatment for mental health concerns was applauded and there was discussion about whether hospital and health system credentialing processes could be persuaded to take a similar action to stop requiring disclosure. In addition, the group looked at the Lorna Breen Foundation's "All In" pledge and discussed whether North Carolina health care institutions could be persuaded to sign on, signaling their commitment to improving clinician wellness for their workforces. There was also discussion about encouraging the state's health systems to engage the data supporting their role as leaders in leading system-based causes in this area. The use of a local certification or a five-star rating program was discussed as another tool to achieve the Consortium's goals to expand their collaboration to benefit the public, the institutions and clinicians.

Committee recommendation: Accept as information.

Board action: Accept Committee recommendation: Accept as information.

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c. New licensee information project

The Communications Director gave an update on the Communications Department's efforts to develop information and resources for newly licensed physicians and PAs and received feedback on a new resource page staff created to organize key information for new licensees using existing NCMB content. Overall, Committee members were pleased with the organization and ease of use of the page. It was suggested that staff do some additional work to make the section pertaining to NCMB administrative rules more user friendly, as this is a dense topic for most, and that staff add a link to the NC Board of Nursing for nurse practitioners who may come across the page when evaluating North Carolina as a potential place to practice. The Communications Director indicated that next steps include developing new content for recent licensees and planning a communication campaign to encourage new licensees to use the information and resources.

Committee recommendation: Direct staff to continue work on the new licensee information project and report back to the Committee as needed.

Board action: Accept Committee recommendation: Direct staff to continue work on the new licensee information project and report back to the Committee as needed.

d. Licensee survey topics - update

The Chief Communications and Administrative Officer provided an update on NCMB's plans to conduct a licensee survey – the first since before COVID-19. Staff have completed multiple versions of the survey questions, with feedback from Board Members and Staff. NCMB expects to send the final draft of the survey questions to Board Members, as well as contacts at stakeholder organizations, by the end of March and the survey would be deployed sometime in April. Results from the survey are set to be reported out to the Board at the July 2023 Board Meeting.

Committee recommendation: Accept as information.

Board action: Accept Committee recommendation: Accept as information.

New Business:

Misc. Other Outreach Activities

- a. Podcast on Duty to Report
- b. New complaint video

The Committee Chair complimented the Communications Staff on its February 2023 MedBoard Matters podcast episode, which features an in-depth exploration North Carolina's "Duty to Report" statute, which requires NCMB licensees to report sexual misconduct by other licensees to the Board. The episode features background on the genesis of the 2019 law, provided by NCMB's Legislative Liaisons, as well as discussion of NCMB's experience to date receiving reports of suspected sexual misconduct and guidance for licensees on how to make a report. The March

2023 podcast episode will focus on the other aspect of Duty to Report, which obligates licensees to report prescribing misconduct the NCMB.

In addition, the Communications Director reported that NCMB has created a new video to raise public awareness of the Board and how the complaint process helps NCMB fulfill its mission of patient protection. The Committee watched the 90-second video and gave some feedback, including a request that the video be made accessible in Spanish. The Communications Director indicated that the video will be translated soon.

Finally, there was brief discussion of whether NCMB might be able to develop an app to provide a way to engage with public and professional audiences who are accustomed to finding information via digital apps. The Communications Department plans to research the feasibility of an app and report back to the Committee.

Committee recommendation: Accept as information.

Board action: Accept Committee recommendation: Accept as information.

Diversity and Inclusion Workgroup

Members present were Melinda H. Privette, MD, JD, Chair; Anu Rao-Patel, MD; Joshua Malcom, JD; and Michaux R. Kilpatrick, MD, PhD (ex officio)

Old Business:

- a. Update on May DE&I training for Board members and staff

Mr. Pauling provided an update on the Diversity, Equity and Inclusion training for board members and staff that will occur during the May Board Meeting. Dr. Sneha Thamocharan, who serves as Director of Justice, Equity, Diversity and Inclusion at Wake Forest School of Medicine, will be providing the training again this year.

Committee Recommendation: Accept as Information.

Board Recommendation: Accept workgroup recommendation. Accept as Information.

- b. Monitor the FSMB's Workgroup on Diversity, Equity and Inclusion in Medical Regulatory

Dr. Kilpatrick gave an update on the FSMB's Workgroup Diversity, Equity and Inclusion (DEI) informational report. The report is expected on or before the FSMB annual meeting, which takes place in May 2023.

Mr. Henderson discussed hiring a consultant to compare the NCMB's practices with the information provided in the FSMB report, which will include a Playbook to guide state medical board. The consultant would be hired at a rate of \$175/hour.

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Committee Recommendation: Authorize staff to hire a consultant at a rate of \$175/hour to compare NCMB practices with those described by the FSMB DEI Workgroup.

Board Recommendation: Authorize staff to hire a consultant at a rate of \$175/hour to compare NCMB practices with those described by the FSMB DEI Workgroup.

c. HNC 2030 Initiative on Drug Overdose Deaths – Use of NC Controlled Substances Reporting System

Ms. Meredith provided a report on the NCMB's initiative to implement broader use of the NC Controlled Substances Reporting System as a partner of the HNC 2023/State Health Improvement Plan. NCMB staff have met with NCDHHS to improve obtaining information to identify noncompliance and communicating with licensees about noncompliance. In addition, staff have drafted an attestation to add to annual renewals.

Committee Recommendation: Accept as Information.

Board Recommendation: Accept workgroup recommendation. Accept as Information.

New Business:

a. Workgroup goals moving forward, including bias in investigative and licensing processes

The Workgroup discussed ways of identifying ways unconscious bias may be affecting NCMB processes. The Workgroup was interested in various projects but wanted a better understanding of the data NCMB has available and was interested in an update on the NCMB's data project with Blaze Advisors.

Committee Recommendation: Accept as Information.

Board Recommendation: Accept workgroup recommendation. Accept as Information.

ADJOURNMENT

The Medical Board adjourned at 1:10 p.m. on Friday, March 17, 2023

The next meeting of the Medical Board is scheduled for May 17-19, 2023



Devdutta G. Sangvai, MD, MBA, Secretary/Treasure

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9.1.3. Licensee Employment

The Board recognizes that the practice of medicine continues to shift from licensees practicing in personally owned practices toward licensees practicing while subject to employment and other contractual relationships. The medical practice of the employed licensee may present unique challenges to maintaining professionalism in the practice of medicine.

In order for licensees to avoid putting themselves in professional situations that may expose them to sanctions by the Board, the Board recommends licensees consider the following when entering a new work environment:

- Understand the organizational structure and ownership of their potential employer.
- Employment agreements are legal documents. Licensees are encouraged to seek their own legal counsel before signing them.
- Be familiar with your employer's policies for healthcare delivery within the practice or healthcare system.
- Recognize that your professional obligation to provide care that conforms to the standards of acceptable and prevailing medical practice, or the ethics of the medical profession, supersedes your employment relationship.
- Patient welfare must take priority in any situation where the interests of licensees' and employers' conflict.

The Board encourages its licensees to review and consider the following when entering into employment relationships.

1. Responsibilities to Patients and the Profession
 - a. Patient advocacy is a fundamental element of the patient-licensee relationship that should not be altered by the employer or setting in which licensees practice, or the methods by which they are compensated.
 - b. A licensee's paramount responsibility is to their patients. At the same time, employed licensees occupy a position of significant trust and owe a duty of loyalty to their employer. Having two distinct loyalties can create conflicts of interest that employed licensees should strive to recognize and address.
 - c. When factors outside a licensee's medical judgment (e.g., moral, religious, financial, etc.) influence or limit a licensee's particular treatment or referral options, a licensee is ethically obligated to disclose those factors to the patient. The Board reminds its licensees of the position statement "[2.1.1 The Licensee-Patient Relationship](#)," which states that it is unethical for a licensee to allow financial incentives or other interests to adversely affect or influence a licensee's medical judgment or patient care.
 - d. Employed licensees should be free to exercise, in their individual capacity, their personal and professional judgment in voting, speaking, and advocating on any manner regarding patient

care interests, the profession, healthcare in the community, and the independent exercise of medical judgment.

- e. Licensees working in a supervisory or administrative role who direct individual patient care decisions of other licensees are themselves engaged in the practice of medicine and may be subject to Board scrutiny.
- f. Employed licensees have a responsibility to assure that bills issued for services they provide are accurate and should therefore retain the right to review billing claims as may be necessary to verify that such bills are correct.
- g. Employed licensees should be free to engage in volunteer work outside of, and which does not interfere with, their duties as employees.

2. Consideration and Termination of Employment Agreements

- a. Licensees are encouraged to obtain the advice of legal counsel when negotiating employment agreements. Licensees are encouraged to work with their counsel to review, inquire about, and fully understand, the terms of proposed employment agreements, including, but not limited to, terms addressing:
 - i. The licensee's work duties and other obligations;
 - ii. Compensation, including productivity and incentive compensation, as well as benefits;
 - iii. Restrictions contained in the agreement, including non-compete and non-solicitation clauses or other restrictions; and
 - iv. The terms of employment and any potential bases for early termination.
- b. Licensees should be aware of the Board's position statement on the [Corporate Practice of Medicine](#) and only accept employment that involves the practice of medicine with lawfully authorized employers.
- c. Termination of an employment or contractual relationship between a licensee and an entity employing that licensee does not necessarily end the patient-licensee relationship between the employed licensee and persons under his/her care. Whether serving in an employer or employee role, licensees should refer to the Board's position statement "[2.1.2: Departures from or Closings of Medical Practices](#)" regarding patient notification and choice, continuity of care, and providing medical records to patients.

Actions taken against a licensee's privileges should be reported to the Board consistent with [N.C. Gen. Stat. § 90-14.13](#). Any licensee with reporting responsibilities for the privileging actions contained in N.C. Gen. Stat. § 90-14.13 has the professional ethical responsibility to assure that proper reporting has occurred and may face an inquiry by the Board for the failure to do so.