



BOARD MEETING MINUTES

January 24-26, 2024

**3127 Smoketree Court
Raleigh, North Carolina**

Virtual

General Session Minutes of the North Carolina Medical Board (NCMB) Meeting held January 24-26, 2024.

The January 24-26, 2024, meeting of the North Carolina Medical Board was held Virtual. Christine M. Khandelwal, DO, President, called the meeting to order. Board members in attendance were Devdutta G. Sangvai, MD, MBA, President-Elect; Anuradha Rao-Patel, MD, Secretary/Treasurer; Candace A. Bradley, DO, MBA; Mr. William M. Brawley; W. Howard Hall, MD; N. Melinda Hill-Price, MD, JD.; Sharona Y. Johnson, PhD, FNP-BC; Joshua D. Malcolm, JD; Mark A. Newell, MD, MMM; Miguel A. Pineiro, PA-C; Robert Rich, Jr., MD; David P. Sousa, JD, MBA.

PRESIDENTIAL REMARKS

Dr. Christine M. Khandelwal 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. Khandelwal recognized new staff, and a staff promotion since the November 2023 Board meeting, as they were introduced by their perspective manager.

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.

NCMB ATTORNEY'S REPORT

Mr. Brian L. Blankenship, Chief Legal Officer, gave the Attorney's Report on Friday, January 26, 2024.

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

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. Blankenship provided information and legal advice within the attorney-client privilege and regarding 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.

A motion was passed to return to open session.

NCMB COMMITTEE REPORTS

Executive Committee Report

Members present via video/teleconference were Christine M. Khandelwal, DO, MPHE, Chair; Devdutta G. Sangvai, MD, MBA; Anuradha Rao-Patel, MD; and W. Howard Hall, MD.

Financial Update

a. Year-To-Date Financials

The Committee reviewed the following financial reports through November 30, 2023: 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 November and December 2023.

Committee Recommendation: Accept the investment statements as reported.

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

c. Report on Audit of Financial Statements

Mr. Joshua Anderson, CPA, Dean Dorton Allen Ford, PLLC, met with the Executive Committee to present the Year-End Financial Statement Audit Report for the fiscal year ending October 31, 2023.

According to the Independent Auditor's Report: "In our opinion, the accompanying financial statements referred to above present fairly, in all material respects, the financial position of the Board, as of October 31, 2023 and 2022, and the respective changes in financial position and cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America."

A motion passed to go into restricted closed session pursuant to Section 143- 318.11(a)(1) and Section 143-748 of the North Carolina General Statutes to preserve the confidentiality of internal audit work papers.

The Committee and other Board members met privately with the auditors to give the auditors the opportunity to share any concerns regarding the audit report or process

A motion passed to return to open session.

Committee Recommendation: Accept the Year-End Financial Statement Audit Report as reported with no concerns found.

Board Action: Accept Committee recommendation. Accept the Year-End Financial Statement Audit Report as reported.

New Business:

a. July Board Meeting Format

The Committee discussed the President's proposal of having the July 2024 Board Meeting to be held as an in-person meeting with Board members present at the office on Smoketree Court.

Committee Recommendation: Conduct the July 2024 meeting with Board members in person at 3127 Smoketree Court.

Board Action: Accept Committee recommendation. Conduct the July 2024 meeting with Board members in person at 3127 Smoketree Court.

b. Legislative Update

The Committee reviewed the Legislative update. There were no new bills for discussion.

Committee Recommendation: Accept as information.

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

c. Call for recommendations for election of Member at Large to the Executive Committee

As provided in the Bylaws, the Executive Committee met with other members of the Board to solicit recommendations for the open position: one Member at Large.

Committee Recommendation: Accept as Information.

Board Action: Accept Committee recommendation. Accept as information.

d. Meeting to Discuss Nominees

A motion passed to go into closed session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to consider the qualifications, competence, performance, character, fitness, conditions of appointment, or conditions of initial employment of an individual public officer or employee or prospective public officer or employee.

As per Article IV, Section 2 of the NCMB Bylaws, the Executive Committee retired to discuss candidates for the vacant Member-at-Large seat on the Executive Committee.

A motion passed to return to open session.

e. Announcement of Nominee

The Executive Committee nominates the following member for the following position: Member at Large: Miguel A. Pineiro, PA-C, MHPE

Committee Recommendation: Approve the nominee as presented.

Board Action: Accept Committee recommendation. Approve the nominee as presented.

Policy Committee Report

Members present were: David P. Sousa, JD, MBA, Chair; W. Howard Hall, MD; N. Melinda Hill-Price, MD, JD; Joshua D. Malcolm, JD; Mark A. Newell, MD, MMM; and Anuradha Rao-Patel, MD.

Old Business:

a. 2.2.4: Conflicts in the Healthcare Setting
(previously under the heading “9.1.2: Professional Behavior Within the Healthcare Team”)

During the January 2024 meeting, the Committee reviewed the draft of the new, proposed position statement titled “Conflicts in the Healthcare Setting.” The Committee reviewed the new position statement favorably. Staff was instructed to add additional language encouraging licensee to reflect and debrief after incidents of conflict in the healthcare setting and to then circulate the new, proposed position statement to the Board’s stakeholders for comment. Staff will bring back any comments received by stakeholders at the March 2024 meeting.

Committee recommendation: Staff to circulate the new, proposed position statement to the Board’s stakeholders for comment. Staff to bring back any comments received by stakeholders at the March 2024 meeting.

Board Action: Accept Committee recommendation. Staff to circulate the new, proposed position statement to the Board’s stakeholders for comment. Staff to bring back any comments received by stakeholders at the March 2024 meeting.

b. 5.1.5: Licensee Use of Innovative or New Treatment

During the January 2024 meeting, the Committee agreed to table discussion of the proposed revisions to the position statement until the March 2024 meeting in order to give Committee members additional time to review and consider the proposed revisions and make any additional revisions. Staff was instructed to combine the current, proposed revisions into one document, circulate to Board members for review and further comment, and bring back all revisions at the March 2024 meeting.

Committee recommendation: Staff to combine the current, proposed revisions into one document, circulate to Board members for review and further comment, and bring back all revisions at the March 2024 meeting.

Board Action: Accept Committee recommendation. Staff to combine the current, proposed revisions into one document, circulate to Board members for review and further comment, and bring back all revisions at the March 2024 meeting.

New Business:

a. 5.1.4: Telemedicine

During the January 2024 meeting, staff provided a timeline of the initial changes to the position statement and an overview of the questions and concerns received from certain stakeholders after the Board adopted those revisions. Specifically, staff has received inquiries regarding the change in the Board's position regarding the prescribing of controlled substances via telemedicine without an in-person examination for conditions other than the treatment of pain.

The Committee discussed the proposed revision, which would revert the language regarding prescribing controlled substances back to the language used prior to September 2023. Based on the discussion and additional concerns regarding that language, the Committee tasked staff with making additional proposed revisions to the first paragraph under the "Prescribing" header, circulate the proposed revisions to Committee members for review and comment, and bring back at the March 2024 meeting.

Committee recommendation: Staff to make additional proposed revisions to the first paragraph under the "Prescribing" header, circulate the proposed revisions to Committee members for review and comment, and bring back at the March 2024 meeting.

Board Action: Accept Committee recommendation. Staff to make additional proposed revisions to the first paragraph under the "Prescribing" header, circulate the proposed revisions to Committee members for review and comment, and bring back at the March 2024 meeting.

Miscellaneous:

During the January 2024 meeting, the Committee did a cursory overview of the position statement review tracking chart. Committee members expressed interest in reviewing position statements: "3.1.1: Professional Use of Social Media," "3.1.2: Policy for the Use of Audio or Visual Recordings in Patient Care," "4.1.1: Contact with Patients Before Prescribing," and "9.1.2 Professional Behavior Within the Healthcare Team" during upcoming meetings to

determine if there were any revisions that should be made to those position statements. The Committee discussed reviewing the tracking chart prior to the March 2024 Committee meeting and identifying position statements that may be particularly ripe for review.

Committee recommendation: Accept as Information

Board Action: Accept Committee recommendation. Accept as information.

Licensing Committee Report

Members present were: W. Howard Hall, MD, Chairperson; Candace A. Bradley, DO, MBA; Sharona Y. Johnson, PhD, FNP-BC; Joshua D. Malcolm, JD; Devdutta G. Sangvai, MD, MBA; David P. Sousa, JD, MBA

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 License Committee reviewed four 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.

Six licensure interview was 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.

Disciplinary (Malpractice) Committee Report

Members present were: Anuradha Rao-Patel, MD, Chair; N. Melinda Hill-Price, MD, JD; Sharona Y. Johnson, PhD, FNP-BCN; Mark A. Newell, MD, MMM; Miguel A. Pineiro, PA-C, MHPE; Robert L. Rich, Jr., MD; David P. Sousa, JD, MBA

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 38 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: Anuradha Rao-Patel, MD, Chair; N. Melinda Hill-Price, MD, JD; Sharona Y. Johnson, PhD, FNP-BCN; Mark A. Newell, MD, MMM; Miguel A. Pineiro, PA-C, MHPE; Robert L. Rich, Jr., MD; David P. Sousa, JD, MBA

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 45 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: Anuradha Rao-Patel, MD, Chair; N. Melinda Hill-Price, MD, JD; Sharona Y. Johnson, PhD, FNP-BCN; Mark A. Newell, MD, MMM; Miguel A. Pineiro, PA-C, MHPE; Robert L. Rich, Jr., MD; David P. Sousa, JD, MBA

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 (Complaints) Committee reviewed 48 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: Anuradha Rao-Patel, MD, Chair; N. Melinda Hill-Price, MD, JD; Sharona Y. Johnson, PhD, FNP-BCN; Mark A. Newell, MD, MMM; Miguel A. Pineiro, PA-C, MHPE; Robert L. Rich, Jr., MD; David P. Sousa, JD, MBA

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.

Ten 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: N. Melinda Hill-Price, MD, JD; Chair; William M. Brawley; W. Howard Hall, MD; Miguel A. Pineiro, PA-C, MHPE; Robert L. Rich, Jr., MD; Devdutt, G. Sangvai, MD, MBA

Old Business

- a. Update on presentations
 - i. Professional and public presentations
 - ii. Regulatory Immersion Series events
 - (a) Year in Review, adjusting RIMS
 - (b) Training/refresher needs for existing or new RIMS faculty

The Communications Director and Chief Administrative and Communications Officer gave an update on public and professional outreach presentations, including year in review recap for the Regulatory Immersion Series program. NCMB presented 16 sessions of the mock disciplinary experience, reaching all PA programs in the state and four of the five medical schools. In all, NCMB reached nearly 1,200 medical and PA students. NCMB will present to the final medical school, ECU's Brody School of Medicine, at the end of January and again in

April. Committee members discussed ways to use the RIMS content with other audiences, ways to adapt the RIMS program so that it is less resource-intensive to present, and plans to train and prep existing and new RIMS faculty to ensure they are well prepared and familiar with all case studies and training materials. The Committee also discussed the Communications Department's plans to continue expanding its outreach efforts to include new audiences.

Committee recommendation: Accept as Information.

Board action: Accept Committee recommendation. Accept as Information.

b. Status of work on wellness and resilience

The Chief Medical Officer gave an update on the work of the NC Clinician and Physician Retention and Well-being Consortium (NCCPRW). The Consortium met Thursday January 4, 2024, to welcome J. Corey Feist, JD, MBA, Chief Executive Officer of the Lorna Breen Heroes' Foundation. Attorney Feist presented an overview of the All In Campaign strategy for engagement of key North Carolina stakeholders in the press towards removal of intrusive inquiries into the mental health status of physicians and physician assistants. The strategy includes establishing a culture where seeking mental health support is viewed as a strength and not a source of stigma for licensees. The program strategy has a very strong track record of success and is growing in momentum. The Consortium is viewed as a strategic part of the planned collaborative work and continues forward in developing the structure and vision to align with the campaign. Updates in this area will be shared as new objectives are achieved.

Committee recommendation: Accept as information.

Board action: Accept Committee recommendation. Accept as Information.

New Business:

a. NCMB phone app

The Communications Director kicked off a committee discussion on Board Members' vision for an NCMB smartphone app, with particular emphasis on determining who the primary audience for such an app is and what messages or content would be most suited to an app environment. The Communications Director noted that NCMB will need to engage an app developer to assist with research and planning for an app. Committee members expressed the view that licensees likely stand to benefit most from an app, especially if it is designed to help them more easily access important information that helps them avoid problems and keep abreast of new rules, policies, requirements or laws that affect the practice of medicine. Alerts or reminders that would help licensees track their annual renewal date or other deadlines might also be of use. The Committee discussed that complex processes, such as applying for a license or renewing a license, may not be feasible in an app environment. It was noted that, depending on interest and perceived demand, NCMB could eventually develop a separate app for members of the public. It was further noted that developing an app may be costly and it was suggested that NCMB look into the possibility of seeking grant funding to support development of an app.

Committee recommendation: Direct staff to continue assessing the feasibility of developing an NCMB smartphone app and report back to the Committee later this year.

Board action: Accept Committee recommendation. Direct staff to continue assessing the feasibility of developing an NCMB smartphone app and report back to the Committee later this year.

- b. Miscellaneous updates from the Communications Department
 - 1. Podcast year in review

The Communications Specialist gave a year in review update on MedBoard Matters, NCMB's podcast. The podcast produced 9 episodes in 2023, on roughly a monthly publication schedule (each season now includes a Winter hiatus). Of note, MedBoard Matters has a global audience, reaching listeners in 43 countries. The podcast will resume in February with an episode on how NCMB partners with NC DHHS to raise awareness of public health concerns and help state public health leaders route key messages to licensed medical professionals.

Committee recommendation: Accept as information.

Board action: Accept Committee recommendation. Accept as Information.

Health Equity Workgroup

Members present were: Sharona Y. Johnson, PhD, FNP-BC, Chair; Candace A. Bradley, DO, MBA; Miguel A. Pineiro, PA-C, MHPE;; Anuradha Rao-Patel, MD

New Business:

- 1. The Health Equity Workgroup received information about a recent law in North Carolina prohibiting state agencies from promoting certain concepts in employee trainings and soliciting or requiring applicants to make diversity statements or answer questions pertaining to their beliefs, affiliations, ideals, or principles related to matters of political debate or social action. In addition, information was provided on lawsuits against other state medical boards requiring implicit bias training or laws reserving a particular seat to a minority member.

Workgroup Recommendation: Accept as Information.

Board Recommendation: Accept committee recommendation. Accept as Information.

- 2. Health Equity Strategic Framework: Board Member Functioning and Appointments
 - (a) The Health Equity Workgroup is charged with using the Quality Improvement Report as a strategic framework and evaluating each recommendation. At this meeting, the Workgroup reviewed the recommendations from the report related to board functioning and appointments. One of those recommendations included reviewing the roles and responsibilities of the Diversity and Inclusion Workgroup. In order to be more proactive and to align with the Board's statutory obligation to protect the public, the Workgroup was converted to the Health Equity Workgroup in order to ensure all North Carolinians have access to quality care and adopt the Quality Improvement Report as a framework.

Workgroup Recommendation: Accept as Information.

Board Recommendation: Accept committee recommendation. Accept as Information.

- (b) Other recommendations from the report included looking at the Review Panel and appointment process for board members along with demographic, geographic and area of practice data on board members from the past five years. The Workgroup also considered the following statement:

The NCMB was established to regulate the practice of medicine for the benefit and protection of the people of North Carolina. In order to protect all North Carolinians, the NCMB takes the position that its board members should come from all parts of the state, with experience in a variety of medical specialties, and who reasonably reflect the gender, ethnicity, race, and age of patients throughout North Carolina.

*The Review Panel decides who is nominated for a position to the Board and the appointment is ultimately determined by the Governor. Both the Review Panel and the Governor are statutorily mandated **“to endeavor to see, insofar as possible, that its appointees and nominees to the NCMB reflect the composition of the State with regard to gender, ethnic, racial, and age composition.”***

Workgroup Recommendation: Adopt the above statement for outreach to attract candidates to serve on the NCMB and share it with Review Panel. Continue to share data on board member composition with the Review Panel.

Board Recommendation: Accept workgroup recommendation. Adopt the following statement for outreach to attract candidates to serve on the NCMB and share it with the Review Panel:

The NCMB was established to regulate the practice of medicine for the benefit and protection of the people of North Carolina. In order to protect all North Carolinians, the NCMB takes the position that its board members should come from all parts of the state, with experience in a variety of medical specialties, and who reasonably reflect the gender, ethnicity, race, and age of patients throughout North Carolina.

*The Review Panel decides who is nominated for a position to the Board and the appointment is ultimately determined by the Governor. Both the Review Panel and the Governor are statutorily mandated **“to endeavor to see, insofar as possible, that its appointees and nominees to the NCMB reflect the composition of the State with regard to gender, ethnic, racial, and age composition.”***

Continue to share data on board member composition with the Review Panel.

- (c) The Quality Improvement Report recommended reviewing processes for outreaching to underrepresented areas for open board member seats. Traditionally, NCMB communications have included website notices and publications in the March/April Forum. In 2021, after only receiving seven applications for three open seats, the Communications Department engaged in a recruitment campaign that involved general and specialty stakeholders as well as a personal letter from NCMB CEO to former NCMB presidents to

communicate with colleagues about the open seats. As result, 22 applications were received for three open seats. This year the Communications Department is engaging in a similar campaign as well as publishing a podcast on serving on the Board, which will interview former board members about their service. Discussion also included expanding outreach to employers about the value of having employees serve on the Board.

Workgroup Recommendation: Accept as Information.

Board Recommendation: Accept workgroup recommendation. Accept as Information.

- (d) The Quality Improvement Report also recommends expanding training sources on bias, competency, access to simulation training, and a variety of assessment tools, like Implicit Association Tests. Staff collected and provided extensive training tools board members may opt to use voluntarily.

Workgroup Recommendation: Accept as Information.

Board Recommendation: Accept workgroup recommendation. Accept as Information.

- (e) Finally, the Workgroup scheduled to consider at its next meeting the recommendations of the Quality Improvement Report pertaining to licensing.

Workgroup Recommendation: Accept as Information.

Board Recommendation: Accept as Information.

ADJOURNMENT

The Medical Board officially adjourned at 1:07 p.m. on Friday, January 26, 2024.

The next meeting of the Medical Board will be in-person, March 20-22, 2024.



Anuradha Rao-Patel, MD, Secretary/Treasurer