Senate Bill No. 10

(By Senators Jenkins and Plymale)

[Introduced February 13, 2013; referred to the Committee on Government Organization; and then to the Committee on the Judiciary.]

A BILL to amend and reenact §30-3-14 of the Code of West Virginia, 1931, as amended; to amend and reenact §30-4-21 of said code; and to amend and reenact §30-14-12a of said code, all relating to the Board of Medicine, Board of Dental Examiners and the Board of Osteopathy; and permitting the boards to independently initiate disciplinary proceedings in certain circumstances.

Be it enacted by the Legislature of West Virginia:

That §30-3-14 of the Code of West Virginia, 1931, as amended, be amended and reenacted; that §30-4-21 of said code be amended and reenacted; and that §30-14-12a of said code be amended and reenacted, all to read as follows:

ARTICLE 3. WEST VIRGINIA MEDICAL PRACTICE ACT.

- §30-3-14. Professional discipline of physicians and podiatrists; reporting of information to board pertaining to medical professional liability and professional incompetence required; penalties; grounds for license denial and discipline of physicians and podiatrists; investigations; physical and mental examinations; hearings; sanctions; summary sanctions; reporting by the board; reapplication; civil and criminal immunity; voluntary limitation of license; probable cause determinations.
 - 1 (a) The board may independently initiate disciplinary
 - 2 proceedings as well as initiate disciplinary proceedings based
 - 3 on information received from medical peer review
 - 4 committees, physicians, podiatrists, hospital administrators,
 - 5 professional societies and others.
 - 6 The board may initiate investigations as to professional
 - 7 incompetence or other reasons for which a licensed physician
 - 8 or podiatrist may be adjudged unqualified based upon

- criminal convictions; complaints by citizens, pharmacists, physicians, podiatrists, peer review committees, hospital administrators, professional societies 11 or others: unfavorable outcomes arising out of medical professional 12 The board shall initiate an investigation if it 13 liability. receives notice that three or more judgments or any combination of judgments and settlements resulting in five 15 or more unfavorable outcomes arising from medical 17 professional liability have been rendered or made against the physician or podiatrist within a five-year period. The board 18 may not consider any judgments or settlements as conclusive 19 20 evidence of professional incompetence or conclusive lack of qualification to practice. 21
- 22 (b) Upon request of the board, any medical peer review 23 committee in this state shall report any information that may 24 relate to the practice or performance of any physician or 25 podiatrist known to that medical peer review committee. 26 Copies of the requests for information from a medical peer

- 27 review committee may be provided to the subject physician
- 28 or podiatrist if, in the discretion of the board, the provision
- 29 of such copies will not jeopardize the board's investigation.
- 30 In the event that copies are provided, the subject physician or
- 31 podiatrist is allowed fifteen days to comment on the
- 32 requested information and such the comments must be
- 33 considered by the board.
- 34 The chief executive officer of every hospital shall, within
- 35 sixty days after the completion of the hospital's formal
- 36 disciplinary procedure and also within sixty days after the
- 37 commencement of and again after the conclusion of any
- 38 resulting legal action, report in writing to the board the name
- 39 of any member of the medical staff or any other physician or
- 40 podiatrist practicing in the hospital whose hospital privileges
- 41 have been revoked, restricted, reduced or terminated for any
- 42 cause, including resignation, together with all pertinent
- 43 information relating to such action. The chief executive
- 44 officer shall also report any other formal disciplinary action

taken against any physician or podiatrist by the hospital upon the recommendation of its medical staff relating to 47 professional ethics, medical incompetence, professional liability, moral turpitude or drug or alcohol abuse. Temporary suspension for failure to maintain records 49 on a timely basis or failure to attend staff or section meetings 50 need not be reported. Voluntary cessation of hospital 51 privileges for reasons unrelated to professional competence 52 53 or ethics need not be reported.

Any A managed care organization operating in this state 54 which provides a formal peer review process shall report in 55 56 writing to the board, within sixty days after the completion of any formal peer review process and also within sixty days 57 58 after the commencement of and again after the conclusion of 59 any resulting legal action, the name of any physician or 60 podiatrist whose credentialing has been revoked or not renewed by the managed care organization. The managed 61 care organization shall also report in writing to the board any 62

other disciplinary action taken against a physician or podiatrist relating to professional ethics, professional liability, moral turpitude or drug or alcohol abuse within 65 sixty days after completion of a formal peer review process which results in the action taken by the managed care 67 organization. For purposes of this subsection, "managed care 68 organization" means a plan that establishes, operates or 69 maintains a network of health care providers who have 70 entered into agreements with and been credentialed by the 71 72 plan to provide health care services to enrollees or insureds to whom the plan has the ultimate obligation to arrange for 73 74 the provision of or payment for health care services through organizational arrangements for ongoing quality assurance, 75 utilization review programs or dispute resolutions. 76

Any professional society in this state comprised primarily
of physicians or podiatrists which takes formal disciplinary
action against a member relating to professional ethics,
professional incompetence, medical professional liability,

moral turpitude or drug or alcohol abuse shall report in writing to the board within sixty days of a final decision the name of the member, together with all pertinent information

84 relating to the action.

Every person, partnership, corporation, association, 85 professional 86 insurance company, society or other 87 organization providing professional liability insurance to a physician or podiatrist in this state, including the State Board of Risk and Insurance Management, shall submit to the board 89 90 the following information within thirty days from any a judgment or settlement of a civil or medical professional 91 liability action excepting product liability actions: The name of the insured; the date of any judgment or settlement; 93 whether any an appeal has been taken on the judgment and, 94 if so, by which party; the amount of any settlement or 96 judgment against the insured; and other information required 97 by the board.

Within thirty days from the entry of an order by a court in a medical professional liability action or other civil action in which a physician or podiatrist licensed by the board is determined to have rendered health care services below the applicable standard of care, the clerk of the court in which the order was entered shall forward a certified copy of the order to the board.

Within thirty days after a person known to be a physician 105 or podiatrist licensed or otherwise lawfully practicing 106 medicine and surgery or podiatry in this state or applying to 107 be licensed is convicted of a felony under the laws of this 108 109 state or of any a crime under the laws of this state involving alcohol or drugs in any way, including any a controlled 110 111 substance under state or federal law, the clerk of the court of record in which the conviction was entered shall forward to 113 the board a certified true and correct abstract of record of the convicting court. The abstract shall include the name and 114 address of the physician or podiatrist or applicant, the nature 115

116 of the offense committed and the final judgment and 117 sentence of the court.

118 Upon a determination of the board that there is probable cause to believe that any person, partnership, corporation, 119 association, insurance company, professional society or other 120 organization has failed or refused to make a report required 121 122 by this subsection, the board shall provide written notice to 123 the alleged violator stating the nature of the alleged violation 124 and the time and place at which the alleged violator shall appear to show good cause why a civil penalty should not be 125 imposed. The hearing shall be conducted in accordance with 126 127 the provisions of article five, chapter twenty-nine-a of this code. After reviewing the record of the hearing, if the board 128 129 determines that a violation of this subsection has occurred, the board shall assess a civil penalty of not less than \$1,000 130 131 nor more than \$10,000 against the violator. The board shall notify any the person so assessed of the assessment in writing 132 and the notice shall specify the reasons for the assessment. 133

134 If the violator fails to pay the amount of the assessment to the board within thirty days, the Attorney General may institute 136 a civil action in the circuit court of Kanawha County to recover the amount of the assessment. In any a civil action, 137 the court's review of the board's action shall be conducted in 138 accordance with the provisions of section four, article five, 139 chapter twenty-nine-a of this code. Notwithstanding any 140 141 other provision of this article to the contrary, when there are conflicting views by recognized experts as to whether any 142 alleged conduct breaches an applicable standard of care, the 143 evidence must be clear and convincing before the board may 144 145 find that the physician or podiatrist has demonstrated a lack of professional competence to practice with a reasonable 146 147 degree of skill and safety for patients. 148 Any person may report to the board relevant facts about 149 the conduct of any physician or podiatrist in this state which in the opinion of that person amounts to medical professional 150 liability or professional incompetence. 151

- The board shall provide forms for filing reports pursuant to this section. Reports submitted in other forms shall be accepted by the board.
- The filing of a report with the board pursuant to any a 155 provision of this article, any an investigation by the board or 156 157 any a disposition of a case by the board does not preclude any an action by a hospital, other health care facility or 158 159 professional society comprised primarily of physicians or podiatrists to suspend, restrict or revoke the privileges or membership of the physician or podiatrist. Notwithstanding 161 162 any provision of this code to the contrary, the board may 163 independently initiate disciplinary proceedings based on a report or information from an agent or investigator of the 164 Board of Pharmacy related to data from the Controlled 165 166 Substances Monitoring Program.
- 167 (c) The board may deny an application for license or 168 other authorization to practice medicine and surgery or 169 podiatry in this state and may discipline a physician or

- 170 podiatrist licensed or otherwise lawfully practicing in this
- 171 state who, after a hearing, has been adjudged by the board as
- 172 unqualified due to any of the following reasons:
- 173 (1) Attempting to obtain, obtaining, renewing or
- 174 attempting to renew a license to practice medicine and
- 175 surgery or podiatry by bribery, fraudulent misrepresentation
- 176 or through known error of the board;
- 177 (2) Being found guilty of a crime in any jurisdiction
- 178 which offense is a felony, involves moral turpitude or
- 179 directly relates to the practice of medicine. Any A plea of
- 180 nolo contendere is a conviction for the purposes of this
- 181 subdivision;
- 182 (3) False or deceptive advertising;
- 183 (4) Aiding, assisting, procuring or advising any an
- 184 unauthorized person to practice medicine and surgery or
- 185 podiatry contrary to law;
- 186 (5) Making or filing a report that the person knows to be
- 187 false; intentionally or negligently failing to file a report or

- record required by state or federal law; willfully impeding or obstructing the filing of a report or record required by state or federal law; or inducing another person to do any of the foregoing. The reports and records covered in this subdivision mean only those that are signed in the capacity as a licensed physician or podiatrist;
- (6) Requesting, receiving or paying directly or indirectly 194 a payment, rebate, refund, commission, credit or other form 195 of profit or valuable consideration for the referral of patients 196 to any a person or entity in connection with providing 197 medical or other health care services or clinical laboratory 198 199 services, supplies of any kind, drugs, medication or any other medical goods, services or devices used in connection with 200 201 medical or other health care services;
- 202 (7) Unprofessional conduct by <u>any a physician</u> or 203 podiatrist in referring a patient to <u>any a clinical laboratory or</u> 204 pharmacy in which the physician or podiatrist has a 205 proprietary interest unless the physician or podiatrist

- discloses in writing such the interest to the patient. The written disclosure shall indicate that the patient may choose any clinical laboratory for purposes of having any laboratory work or assignment performed or any pharmacy for purposes of purchasing any a prescribed drug or any other medical goods or devices used in connection with medical or other health care services;
- As used in this subdivision, "proprietary interest" does not include an ownership interest in a building in which space is leased to a clinical laboratory or pharmacy at the prevailing rate under a lease arrangement that is not conditional upon the income or gross receipts of the clinical laboratory or pharmacy;
- 219 (8) Exercising influence within a patient-physician 220 relationship for the purpose of engaging a patient in sexual 221 activity;
- (9) Making a deceptive, untrue or fraudulent representationin the practice of medicine and surgery or podiatry;

- 224 (10) Soliciting patients, either personally or by an agent,
- 225 through the use of fraud, intimidation or undue influence;
- 226 (11) Failing to keep written records justifying the course
- 227 of treatment of a patient including, but not limited to, patient
- 228 histories, examination and test results and treatment
- 229 rendered, if any;
- 230 (12) Exercising influence on a patient in such a way as to
- 231 exploit the patient for financial gain of the physician or
- 232 podiatrist or of a third party. Any influence includes, but is
- 233 not limited to, the promotion or sale of services, goods,
- 234 appliances or drugs;
- 235 (13) Prescribing, dispensing, administering, mixing or
- 236 otherwise preparing a prescription drug, including any a
- 237 controlled substance under state or federal law, other than in
- 238 good faith and in a therapeutic manner in accordance with
- 239 accepted medical standards and in the course of the
- 240 physician's or podiatrist's professional practice. *Provided*,
- 241 That A physician who discharges his or her professional

- obligation to relieve the pain and suffering and promote the
- 243 dignity and autonomy of dying patients in his or her care and,
- 244 in so doing, exceeds the average dosage of a pain relieving
- 245 controlled substance, as defined in Schedules II and III of the
- 246 Uniform Controlled Substance Act, does not violate this
- 247 article;
- 248 (14) Performing any a procedure or prescribing any a
- 249 therapy that, by the accepted standards of medical practice in
- 250 the community, would constitute experimentation on human
- 251 subjects without first obtaining full, informed and written
- 252 consent;
- 253 (15) Practicing or offering to practice beyond the scope
- 254 permitted by law or accepting and performing professional
- 255 responsibilities that the person knows or has reason to know
- 256 he or she is not competent to perform;
- 257 (16) Delegating professional responsibilities to a person
- 258 when the physician or podiatrist delegating the
- 259 responsibilities knows or has reason to know that the person

- 260 is not qualified by training, experience or licensure to 261 perform them;
- 262 (17) Violating any <u>a</u> provision of this article or a rule or 263 order of the board or failing to comply with a subpoena or 264 subpoena duces tecum issued by the board;
- 265 (18) Conspiring with any other person to commit an act 266 or committing an act that would tend to coerce, intimidate or 267 preclude another physician or podiatrist from lawfully 268 advertising his or her services;
- 269 (19) Gross negligence in the use and control of 270 prescription forms;
- 271 (20) Professional incompetence; or
- 272 (21) The inability to practice medicine and surgery or 273 podiatry with reasonable skill and safety due to physical or 274 mental impairment, including deterioration through the aging 275 process, loss of motor skill or abuse of drugs or alcohol. A 276 physician or podiatrist adversely affected under this 277 subdivision shall be afforded an opportunity at reasonable

intervals to demonstrate that he or she may resume the competent practice of medicine and surgery or podiatry with reasonable skill and safety to patients. In any proceeding under this subdivision, neither the record of proceedings nor any orders entered by the board shall be used against the physician or podiatrist in any other proceeding.

(d) The board shall deny any an application for a license 284 285 or other authorization to practice medicine and surgery or podiatry in this state to any applicant who, and shall revoke 286 the license of any a physician or podiatrist licensed or 287 otherwise lawfully practicing within this state who is found 288 289 guilty by any a court of competent jurisdiction of any a 290 felony involving prescribing, selling, administering, 291 dispensing, mixing or otherwise preparing any a prescription drug, including any a controlled substance under state or 292 293 federal law, for other than generally accepted therapeutic purposes. Presentation to the board of a certified copy of the 294 guilty verdict or plea rendered in the court is sufficient proof 295

thereof for the purposes of this article. A plea of nolo contendere has the same effect as a verdict or plea of guilt. 297 298 Upon application of a physician that has had his or her license revoked because of a drug related felony conviction, 299 upon completion of any sentence of confinement, parole, 300 probation or other court-ordered supervision and full 301 302 satisfaction of any fines, judgments or other fees imposed by 303 the sentencing court, the board may issue the applicant a new license upon a finding that the physician is, except for the 304 underlying conviction, otherwise qualified to practice 305 medicine. Provided, That The board may place whatever 306 307 terms, conditions or limitations it deems appropriate upon a physician licensed pursuant to this subsection.

309 (e) The board may refer any cases coming to its attention 310 to an appropriate committee of an appropriate professional 311 organization for investigation and report. Except for 312 complaints related to obtaining initial licensure to practice 313 medicine and surgery or podiatry in this state by bribery or

fraudulent misrepresentation, any a complaint filed more than two years after the complainant knew or, in the exercise 316 of reasonable diligence, should have known of the existence of grounds for the complaint, shall be dismissed. *Provided*, 317 That In cases of conduct alleged to be part of a pattern of 318 similar misconduct or professional incapacity that, if 319 continued, would pose risks of a serious or substantial nature 320 to the physician's or podiatrist's current patients, the 321 investigating body may conduct a limited investigation related to the physician's or podiatrist's current capacity and 323 qualification to practice and may recommend conditions, 324 325 restrictions or limitations on the physician's or podiatrist's license to practice that it considers necessary for the 326 protection of the public. 327 Any report shall contain recommendations for any necessary disciplinary measures 329 and shall be filed with the board within ninety days of any referral. The recommendations shall be considered by the 330 board and the case may be further investigated by the board. 331

- The board, after full investigation, shall take whatever action
- 333 it considers appropriate, as provided in this section.
- 334 (f) The investigating body, as provided in subsection (e) of this section, may request and the board, under any 335 circumstances, may require a physician or podiatrist or 336 337 person applying for licensure or other authorization to 338 practice medicine and surgery or podiatry in this state to 339 submit to a physical or mental examination by a physician or 340 physicians approved by the board. A physician or podiatrist submitting to an examination has the right, at his or her 341 expense, to designate another physician to be present at the 342 343 examination and make an independent report to the investigating body or the board. The expense of the 344 345 examination shall be paid by the board. Any An individual who applies for or accepts the privilege of practicing 347 medicine and surgery or podiatry in this state is considered to have given his or her consent to submit to all examinations 348 349 when requested to do so in writing by the board and to have

waived all objections to the admissibility of the testimony or examination report of any examining physician on the 351 ground that the testimony or report is privileged 352 communication. If a person fails or refuses to submit to an 353 354 examination under circumstances which the board finds are not beyond his or her control, failure or refusal is prima facie 355 evidence of his or her inability to practice medicine and 356 357 surgery or podiatry competently and in compliance with the 358 standards of acceptable and prevailing medical practice.

- (g) In addition to any other investigators it employs, the
 board may appoint one or more licensed physicians to act for
 it in investigating the conduct or competence of a physician.
- 362 (h) In every disciplinary or licensure denial action, the 363 board shall furnish the physician or podiatrist or applicant 364 with written notice setting out with particularity the reasons 365 for its action. Disciplinary and licensure denial hearings 366 shall be conducted in accordance with the provisions of 367 article five, chapter twenty-nine-a of this code. However,

hearings shall be heard upon sworn testimony and the rules of evidence for trial courts of record in this state shall apply 369 370 to all hearings. A transcript of all hearings under this section 371 shall be made and the respondent may obtain a copy of the transcript at his or her expense. The physician or podiatrist 372 has the right to defend against any a charge by the 373 374 introduction of evidence, the right to be represented by 375 counsel, the right to present and cross-examine witnesses and 376 the right to have subpoenas and subpoenas duces tecum 377 issued on his or her behalf for the attendance of witnesses and the production of documents. The board shall make all 378 379 its final actions public. The order shall contain the terms of all action taken by the board. 380

381 (i) In disciplinary actions in which probable cause has 382 been found by the board, the board shall, within twenty days 383 of the date of service of the written notice of charges or sixty 384 days prior to the date of the scheduled hearing, whichever is 385 sooner, provide the respondent with the complete identity,

address and telephone number of any person known to the board with knowledge about the facts of any of the charges; 387 provide a copy of any statements in the possession of or 388 under the control of the board; provide a list of proposed 389 390 witnesses with addresses and telephone numbers, with a brief summary of his or her anticipated testimony; provide 391 392 disclosure of any trial expert pursuant to the requirements of 393 Rule 26(b)(4) of the West Virginia Rules of Civil Procedure; provide inspection and copying of the results of any reports 394 of physical and mental examinations or scientific tests or 395 experiments; and provide a list and copy of any proposed 396 397 exhibit to be used at the hearing. Provided, That The board shall not be The board is not required to furnish or produce 398 399 any materials which contain opinion work product information or would be a violation of the attorney-client 400 401 privilege. Within twenty days of the date of service of the 402 written notice of charges, the board shall disclose any exculpatory evidence with a continuing duty to do so 403

throughout the disciplinary process. Within thirty days of 404 receipt of the board's mandatory discovery, the respondent 405 406 shall provide the board with the complete identity, address and telephone number of any person known to the 407 respondent with knowledge about the facts of any of the 408 409 charges; provide a list of proposed witnesses, with addresses and telephone numbers, to be called at hearing, with a brief 410 summary of his or her anticipated testimony; provide 411 disclosure of any trial expert pursuant to the requirements of 412 Rule 26(b)(4) of the West Virginia Rules of Civil Procedure; 413 provide inspection and copying of the results of any reports 414 415 of physical and mental examinations or scientific tests or experiments; and provide a list and copy of any proposed 416 417 exhibit to be used at the hearing.

418 (j) Whenever it finds any a person unqualified because of 419 any of the grounds set forth in subsection (c) of this section, 420 the board may enter an order imposing one or more of the 421 following:

- 422 (1) Deny his or her application for a license or other
- 423 authorization to practice medicine and surgery or podiatry;
- 424 (2) Administer a public reprimand;
- 425 (3) Suspend, limit or restrict his or her license or other
- 426 authorization to practice medicine and surgery or podiatry for
- 427 not more than five years, including limiting the practice of
- 428 that person to, or by the exclusion of, one or more areas of
- 429 practice, including limitations on practice privileges;
- 430 (4) Revoke his or her license or other authorization to
- 431 practice medicine and surgery or podiatry or to prescribe or
- 432 dispense controlled substances for a period not to exceed ten
- 433 years;
- 434 (5) Require him or her to submit to care, counseling or
- 435 treatment designated by the board as a condition for initial or
- 436 continued licensure or renewal of licensure or other
- 437 authorization to practice medicine and surgery or podiatry;
- 438 (6) Require him or her to participate in a program of
- 439 education prescribed by the board;

- 440 (7) Require him or her to practice under the direction of 441 a physician or podiatrist designated by the board for a
- 442 specified period of time; and
- 443 (8) Assess a civil fine of not less than \$1,000 nor more 444 than \$10,000.
- (k) Notwithstanding the provisions of section eight, 445 446 article one, chapter thirty of this code, if the board determines the evidence in its possession indicates that a 447 physician's or podiatrist's continuation in practice or 448 449 unrestricted practice constitutes an immediate danger to the public, the board may take any of the actions provided in 451 subsection (i) of this section on a temporary basis and without a hearing if institution of proceedings for a hearing 452 before the board are initiated simultaneously with the 453 temporary action and begin within fifteen days of the action. 454 The board shall render its decision within five days of the 455

456 conclusion of a hearing under this subsection.

- (1) Any A person against whom disciplinary action is 457 taken pursuant to the provisions of this article has the right 458 459 to judicial review as provided in articles five and six, chapter twenty-nine-a of this code: Provided, That a circuit judge 460 may also remand the matter to the board if it appears from 461 462 competent evidence presented to it in support of a motion for remand that there is newly discovered evidence of such a 463 464 character as ought to produce an opposite result at a second 465 hearing on the merits before the board and:
- 466 (1) The evidence appears to have been discovered since467 the board hearing; and
- 468 (2) The physician or podiatrist exercised due diligence in 469 asserting his or her evidence and that due diligence would 470 not have secured the newly discovered evidence prior to the 471 appeal.
- A person may not practice medicine and surgery or podiatry or deliver health care services in violation of any a disciplinary order revoking, suspending or limiting his or her

license while any an appeal is pending. Within sixty days, the board shall report its final action regarding restriction, limitation, suspension or revocation of the license of a 477 physician or podiatrist, limitation on practice privileges or 478 other disciplinary action against any a physician or podiatrist 479 480 to all appropriate state agencies, appropriate licensed health facilities and hospitals, insurance companies or associations 481 482 writing medical malpractice insurance in this state, the American Medical Association, the American Podiatry 483 484 Association, professional societies of physicians or podiatrists in the state and any entity responsible for the 486 fiscal administration of Medicare and Medicaid.

487 (m) Any A person against whom disciplinary action has
488 been taken under the provisions of this article shall, at
489 reasonable intervals, be afforded an opportunity to
490 demonstrate that he or she can resume the practice of
491 medicine and surgery or podiatry on a general or limited
492 basis. At the conclusion of a suspension, limitation or

- restriction period, the physician or podiatrist may resume practice if the board has so ordered.
- (n) Any entity, organization or person, including the 495 board, any member of the board, its agents or employees and 496 497 any entity or organization or its members referred to in this 498 article, any insurer, its agents or employees, a medical peer review committee and a hospital governing board, its 499 500 members or any committee appointed by it acting without malice and without gross negligence in making any report or 501 502 other information available to the board or a medical peer 503 review committee pursuant to law and any person acting 504 without malice and without gross negligence who assists in the organization, investigation or preparation of any such 505 report or information or assists the board or a hospital 506 507 governing body or any committee in carrying out any of its duties or functions provided by law is immune from civil or 508 criminal liability, except that the unlawful disclosure of 509 confidential information possessed by the board is a 510 misdemeanor as provided in this article.

(o) A physician or podiatrist may request in writing to the 512 board a limitation on or the surrendering of his or her license 513 514 to practice medicine and surgery or podiatry or other appropriate sanction as provided in this section. The board 515 may grant the request and, if it considers it appropriate, may 516 waive the commencement or continuation of other 517 proceedings under this section. A physician or podiatrist 518 whose license is limited or surrendered or against whom 519 520 other action is taken under this subsection may, at reasonable 521 intervals, petition for removal of any restriction or limitation on or for reinstatement of his or her license to practice 522 523 medicine and surgery or podiatry. 524 (p) In every case considered by the board under this 525 article regarding discipline or licensure, whether initiated by the board or upon complaint or information from any a 526 person or organization, the board shall make a preliminary 527 determination as to whether probable cause exists to 528

substantiate charges of disqualification due to any reason set

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forth in subsection (c) of this section. If probable cause is found to exist, all proceedings on the charges shall be open 531 532 to the public who are entitled to all reports, records and 533 nondeliberative materials introduced at the hearing including the record of the final action taken: Provided, That any 534 535 medical records, which were introduced at the hearing and 536 which pertain to a person who has not expressly waived his 537 or her right to the confidentiality of the records, may not be 538 open to the public nor is the public entitled to the records. (q) If the board receives notice that a physician or 539 podiatrist has been subjected to disciplinary action or has had 541 his or her credentials suspended or revoked by the board, a 542 hospital or a professional society, as defined in subsection (b) 543 of this section, for three or more incidents during a five-year period, the board shall require the physician or podiatrist to 544 545 practice under the direction of a physician or podiatrist designated by the board for a specified period of time to be 546 established by the board. 547

(r) Notwithstanding any other provisions of this article, 548 the board may, at any time, on either on its own motion, or 549 550 upon motion by the complainant, or upon motion by the physician or podiatrist or by stipulation of the parties, refer 551 552 the matter to mediation. The board shall obtain a list from the West Virginia State Bar's mediator referral service of 553 certified mediators with expertise in professional disciplinary 554 The board and the physician or podiatrist may 555 matters. choose a mediator from that list. If the board and the 556 physician or podiatrist are unable to agree on a mediator, the 557 board shall designate a mediator from the list by neutral 558 559 rotation. The mediation shall not be considered is not a proceeding open to the public and any reports and records 560 561 introduced at the mediation shall do not become part of the 562 public record. The mediator and all participants in the 563 mediation shall maintain and preserve the confidentiality of 564 all mediation proceedings and records. The mediator may not be subpoenaed or called to testify or otherwise be subject 565

566 to process requiring disclosure of confidential information in any a proceeding relating to or arising out of the disciplinary 567 or licensure matter mediated: 568 Provided. That any confidentiality agreement and any written agreement made 569 and signed by the parties as a result of mediation may be 570 used in any proceedings subsequently instituted to enforce 571 the written agreement. The agreements may be used in other 572 proceedings if the parties agree in writing.

ARTICLE 4. WEST VIRGINIA DENTAL PRACTICE ACT. \$30-4-21. Complaints; investigations.

- 1 (a) Upon receipt of a written complaint filed against any
- 2 <u>a</u> dentist or dental hygienist, the board shall provide a copy
- 3 of the complaint to the dentist or dental hygienist as specified
- 4 by legislative rule promulgated by the board.
- 5 (b) The board may investigate the complaint. If the
- 6 board finds upon investigation that probable cause exists that
- 7 the dentist or dental hygienist has violated any a provision of
- 8 this article or the rules, the board shall serve the dentist or

- 9 dental hygienist with a written statement of charges and a
- 10 notice specifying the date, time and place of hearing. The
- 11 hearing shall be held in accordance with section twenty-two
- 12 of this article.
- 13 (c) Notwithstanding any provision of this code to the
- 14 contrary, the board may independently initiate disciplinary
- 15 proceedings based on a report or information from an agent
- 16 or investigator of the Board of Pharmacy related to data from
- 17 the Controlled Substances Monitoring Program.

ARTICLE 14. OSTEOPATHIC PHYSICIANS AND SURGEONS.

- §30-14-12a. Initiation of suspension or revocation proceedings allowed and required; reporting of information to board pertaining to professional malpractice and professional incompetence required; penalties; probable cause determinations.
 - 1 (a) The board may independently initiate suspension or
 - 2 revocation proceedings as well as initiate suspension or
 - 3 revocation proceedings based on information received from
 - 4 any person.

5 The board shall initiate investigations as to professional incompetence or other reasons for which a licensed osteopathic physician and surgeon may be adjudged 7 unqualified if the board receives notice that three or more 8 judgments or any combination of judgments and settlements resulting in five or more unfavorable outcomes arising from medical professional liability have been rendered or made 11 against such osteopathic physician within a five-year period. 12 (b) Upon request of the board, any a medical peer review 13 committee in this state shall report any information that may 14 relate to the practice or performance of any an osteopathic 15 16 physician known to that medical peer review committee. Copies of such requests for information from a medical peer 17 review committee may be provided to the subject osteopathic 18 physician if, in the discretion of the board, the provision of 19 20 such copies will not jeopardize the board's investigation. In the event that copies are provided, the subject osteopathic 21 physician has fifteen days to comment on the requested

- 23 information and such the comments must be considered by 24 the board.
- 25 After the completion of a hospital's formal disciplinary procedure and after any resulting legal action, the chief executive officer of such the hospital shall report in writing 27 to the board within sixty days the name of any member of the 28 medical staff or any other osteopathic physician practicing in 29 the hospital whose hospital privileges have been revoked, 30 31 restricted, reduced or terminated for any cause, including resignation, together with all pertinent information relating 32 to such action. The chief executive officer shall also report 33 34 any other formal disciplinary action taken against any an 35 osteopathic physician by the hospital upon recommendation of its medical staff relating to professional 36 ethics, medical incompetence, medical malpractice, moral 37 38 turpitude or drug or alcohol abuse. Temporary suspension 39 for failure to maintain records on a timely basis or failure to attend staff or section meetings need not be reported. 40

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Any professional society in this state comprised primarily 41 of osteopathic physicians or physicians and surgeons of other 42 schools of medicine which takes formal disciplinary action 43 against a member relating to professional ethics, professional 44 incompetence, professional malpractice, moral turpitude or 45 drug or alcohol abuse, shall report in writing to the board 46 within sixty days of a final decision the name of such 47 member, together with all pertinent information relating to 48 49 such action. Every person, partnership, corporation, association, 50 company, professional society or other 51 insurance 52 organization providing professional liability insurance to an osteopathic physician in this state shall submit to the board 53 54 the following information within thirty days from any judgment, dismissal or settlement of a civil action or of any 56 claim involving the insured: The date of any judgment,

dismissal or settlement; whether any an appeal has been

taken on the judgment, and, if so, by which party; the amount

- of any settlement or judgment against the insured; and suchother information required by the board.
- 61 Within thirty days after a person known to be an osteopathic physician licensed or otherwise lawfully 62 practicing medicine and surgery in this state, or applying to 63 be licensed, is convicted of a felony under the laws of this 64 state or of any crime under the laws of this state involving 65 alcohol or drugs in any way, including any a controlled 66 substance under state or federal law, the clerk of the court of 67 68 record in which the conviction was entered shall forward to 69 the board a certified true and correct abstract of record of the 70 convicting court. The abstract shall include the name and 71 address of such the osteopathic physician or applicant, the 72 nature of the offense committed and the final judgment and
- Upon a determination of the board that there is probable cause to believe that any a person, partnership, corporation, association, insurance company, professional society or other

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sentence of the court.

organization has failed or refused to make a report required by this subsection, the board shall provide written notice to 79 the alleged violator stating the nature of the alleged violation and the time and place at which the alleged violator shall 80 appear to show good cause why a civil penalty should not be 81 imposed. The hearing shall be conducted in accordance with 82 the provisions of article five, chapter twenty-nine-a of this 83 code. After reviewing the record of such hearing, if the 84 board determines that a violation of this subsection has 85 occurred, the board shall assess a civil penalty of not less 86 than \$1,000 nor more than \$10,000 against such violator. 87 88 The board shall notify anyone assessed of the assessment in writing and the notice shall specify the reasons for the 89 90 assessment. If the violator fails to pay the amount of the 91 assessment to the board within thirty days, the Attorney 92 General may institute a civil action in the circuit court of 93 Kanawha County to recover the amount of the assessment. In any such civil action, the court's review of the board's 94

- 95 action shall be conducted in accordance with the provisions
 96 of section four, article five, chapter twenty-nine-a of this
 97 code.
- Any person may report to the board relevant facts about
 the conduct of any osteopathic physician in this state which
 in the opinion of such person amounts to professional
 malpractice or professional incompetence.
- The board shall provide forms for filing reports pursuant to this section. Reports submitted in other forms shall be accepted by the board.
- The filing of a report with the board pursuant to any a 106 provision of this article, any an investigation by the board or 107 any a disposition of a case by the board does not preclude 108 any action by a hospital, other health care facility or 109 professional society comprised primarily of osteopathic 110 physicians or physicians and surgeons of other schools of 111 medicine to suspend, restrict or revoke the privileges or 112 membership of such osteopathic physician. Notwithstanding

- any provision of this code to the contrary, the board may
 independently initiate disciplinary proceedings based on a
 report or information from an agent or investigator of the
 Board of Pharmacy related to data from the Controlled
 Substances Monitoring Program.
- 118 (c) In every case considered by the board under this article regarding suspension, revocation or issuance of a 119 120 license, whether initiated by the board or upon complaint or 121 information from any person or organization, the board shall make a preliminary determination as to whether probable 122 cause exists to substantiate charges of cause to suspend, 123 124 revoke or refuse to issue a license as set forth in subsection 125 (a), section eleven of this article. If such probable cause is 126 found to exist, all proceedings on such the charges shall be 127 are open to the public who are entitled to all reports, records 128 and nondeliberative materials introduced at such hearing, 129 including the record of the final action taken: *Provided*, That any medical records, which were introduced at such the 130

hearing and which pertain to a person who has not expressly waived his or her right to the confidentiality of such the 132 records, shall not be open to the public nor is the public 133 134 entitled to such records. If a finding is made that probable cause does not exist, the public has a right of access to the 135 136 complaint or other document setting forth the charges and the 137 findings of fact and conclusions supporting such finding that probable cause does not exist, if the finding so long as the 138 subject osteopathic physician consents to such access. 139

(d) If the board receives notice that an osteopathic 140 physician has been subjected to disciplinary action or has had 141 142 his or her credentials suspended or revoked by the board, a 143 medical peer review committee, a hospital or professional 144 society, as defined in subsection (b) of this section, for three or more incidents in a five-year period, the board shall 145 require the osteopathic physician to practice under the 147 direction of another osteopathic physician for a specified 148 period to be established by the board.

(NOTE: The purpose of this bill is to permit the Board of Medicine, Board of Dental Examiners and the Board of Osteopathy to independently initiate disciplinary proceedings in certain circumstances.

Strike-throughs indicate language that would be stricken from the present law and underscoring indicates new language that would be added.)