

An Act

ENROLLED SENATE
BILL NO. 876

By: McCortney of the Senate

and

Caldwell (Chad) of the
House

An Act relating to the State Board of Medical Licensure and Supervision; amending 59 O.S. 2011, Section 487, which relates to secretary; authorizing Board to hire physician as Medical Advisor; amending 59 O.S. 2011, Section 493.1, as amended by Section 2, Chapter 280, O.S.L. 2013 (59 O.S. Supp. 2018, Section 493.1), which relates to applicant documentation and qualifications; modifying required documentation; amending 59 O.S. 2011, Section 495a.1, as amended by Section 1, Chapter 175, O.S.L. 2018 (59 O.S. Supp. 2018, Section 495a.1), which relates to license registration; directing Board to promulgate certain rules; setting certain fine; amending 59 O.S. 2011, Section 503, as amended by Section 1, Chapter 176, O.S.L. 2014 (59 O.S. Supp. 2018, Section 503), which relates to sanctions for unprofessional conduct; modifying procedure pursuant to sanctions; amending 59 O.S. 2011, Section 503.1, which relates to emergency suspension of licensure; modifying conditions under which Board may suspend license; authorizing promulgation of rules; directing contents of rules; amending 59 O.S. 2011, Section 508, which relates to revocation of licensure; modifying conditions under which Board may issue certain fine and require applicant to take certain action; amending 59 O.S. 2011, Section 509, as amended by Section 2, Chapter 175, O.S.L. 2018 (59 O.S. Supp. 2018, Section 509), which relates to unprofessional conduct; modifying certain definition; clarifying time period; amending 59 O.S. 2011, Section 509.1,

which relates to disciplinary actions; providing that investigative files shall remain confidential; amending 59 O.S. 2011, Section 512, as amended by Section 3, Chapter 176, O.S.L. 2014 (59 O.S. Supp. 2018, Section 512), which relates to salary of secretary; requiring certain investigators to be certified peace officers; providing statewide jurisdiction; requiring investigators to perform certain duties; requiring licensees to cooperate with investigators; broadening services the Board may contract to perform; amending 59 O.S. 2011, Section 513, which relates to quasi-judicial powers of the Board; modifying conditions under which the Board shall revoke a license; amending 59 O.S. 2011, Section 518.1, which relates to the Allied Professional Peer Assistance Program; authorizing program to employ director and fix compensation; authorizing Board to define duties of director; authorizing program to contract with outside entities for certain services; requiring contracts to be ratified by the Board; updating statutory references; providing for codification; and providing an effective date.

SUBJECT: State Board of Medical Licensure and Supervision

BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

SECTION 1. AMENDATORY 59 O.S. 2011, Section 487, is amended to read as follows:

Section 487. A. The State Board of Medical Licensure and Supervision may appoint the secretary to serve as Medical Advisor or hire a physician to serve as Medical Advisor to the Board and the Board staff. The Board may hire the secretary as an employee of the Board at such hours of employment and compensation as determined by the Board. The Board may hire a licensed allopathic physician to serve as the ~~secretary-medical~~ secretary or medical advisor, or

both, to the Board and its staff. This position shall be in the exempt unclassified service, as provided for in subsection B of Section 840-5.5 of Title 74 of the Oklahoma Statutes. The secretary shall not be a member of the Board and shall not vote on Board actions.

B. The secretary of the Board shall preserve a true record of the official proceedings of the meetings of the Board. He or she shall also preserve a record of physicians licensed, applying for such license or applying for reinstatement of such license in this state showing:

1. Age;
2. Ethnic origin;
3. Sex;
4. Place of practice and residence;

5. The time spent in premedical and medical study, together with the names of the schools attended, and the date of graduation therefrom, with the degrees granted;

6. The grades made in examination for license or grades filed in application therefor; and

7. A record of the final disposition of each application for licensure.

The secretary of the Board shall, on or before the first day of May in each year, transmit an official copy of ~~said~~ the register for the preceding calendar year, to the Secretary of State for permanent record, a certified copy of which shall be admitted as evidence in all courts of the state.

SECTION 2. AMENDATORY 59 O.S. 2011, Section 493.1, as amended by Section 2, Chapter 280, O.S.L. 2013 (59 O.S. Supp. 2018, Section 493.1), is amended to read as follows:

Section 493.1. A. An applicant to practice medicine and surgery in this state shall provide to the State Board of Medical

Licensure and Supervision and attest to the following information and documentation in a manner required by the Board:

1. The applicant's full name and all aliases or other names ever used, current address, Social Security number and date and place of birth;

2. A ~~signed and notarized~~ photograph of the applicant, taken within the previous twelve (12) months;

3. ~~Originals of all~~ All documents and credentials required by the Board, or notarized photocopies or other verification acceptable to the Board of such documents and credentials;

4. A list of all jurisdictions, United States or foreign, in which the applicant is licensed or has applied for licensure to practice medicine and surgery or is authorized or has applied for authorization to practice medicine and surgery;

5. A list of all jurisdictions, United States or foreign, in which the applicant has been denied licensure or authorization to practice medicine and surgery or has voluntarily surrendered a license or an authorization to practice medicine and surgery;

6. A list of all sanctions, judgments, awards, settlements, or convictions against the applicant in any jurisdiction, United States or foreign, that would constitute grounds for disciplinary action under this act or the Board's rules;

7. A detailed educational history, including places, institutions, dates, and program descriptions, of all his or her education, including all college, preprofessional, professional, and professional graduate education;

8. A detailed chronological life history from age eighteen (18) years to the present, including places and dates of residence, employment, and military service (United States or foreign) and all professional degrees or licenses or certificates now or ever held; and

9. Any other information or documentation specifically requested by the Board that is related to the applicant's ability to practice medicine and surgery.

B. The applicant shall possess a valid degree of Doctor of Medicine from a medical college or school located in the United States, its territories or possessions, or Canada that was approved by the Board or by a private nonprofit accrediting body approved by the Board at the time the degree was conferred. The application shall be considered by the Board based upon the product and process of the medical education and training.

C. The applicant shall have satisfactorily completed twelve (12) months of progressive postgraduate medical training approved by the Board or by a private nonprofit accrediting body approved by the Board in an institution in the United States, its territories or possessions, or in programs in Canada, England, Scotland, Ireland, Australia or New Zealand approved by the Board or by a private nonprofit accrediting body approved by the Board.

D. The applicant shall submit a history from the Administration of the Medical School from which the applicant graduated of any suspension, probation, or disciplinary action taken against the applicant while a student at that institution.

E. The applicant shall have passed medical licensing examination(s) satisfactory to the Board.

F. The applicant shall have demonstrated a familiarity with all appropriate statutes and rules and regulations of this state and the federal government relating to the practice of medicine and surgery.

G. The applicant shall be physically, mentally, professionally, and morally capable of practicing medicine and surgery in a manner reasonably acceptable to the Board and in accordance with federal law and shall be required to submit to a physical, mental, or professional competency examination or a drug dependency evaluation if deemed necessary by the Board.

H. The applicant shall not have committed or been found guilty by a competent authority, United States or foreign, of any conduct that would constitute grounds for disciplinary action under this act

or rules of the Board. The Board may modify this restriction for cause.

I. Upon request by the Board, the applicant shall make a personal appearance before the Board or a representative thereof for interview, examination, or review of credentials. At the discretion of the Board, the applicant shall be required to present his or her original medical education credentials for inspection during the personal appearance.

J. The applicant shall be held responsible for verifying to the satisfaction of the Board the identity of the applicant and the validity of all credentials required for his or her medical licensure. The Board may review and verify medical credentials and screen applicant records through recognized national physician information services.

K. The applicant shall have paid all fees and completed and attested to the accuracy of all application and information forms required by the Board.

L. Grounds for the denial of a license shall include:

1. Use of false or fraudulent information by an applicant;
2. Suspension or revocation of a license in another state unless the license has been reinstated in that state;
3. Refusal of licensure in another state other than for examination failure; and
4. Multiple examination failures.

M. The Board shall not deny a license to a person otherwise qualified to practice allopathic medicine within the meaning of this act solely because the person's practice or a therapy is experimental or nontraditional.

SECTION 3. AMENDATORY 59 O.S. 2011, Section 495a.1, as amended by Section 1, Chapter 175, O.S.L. 2018 (59 O.S. Supp. 2018, Section 495a.1) is amended to read as follows:

Section 495a.1. A. At regular intervals set by the State Board of Medical Licensure and Supervision, no less than one time per annum, each licensee licensed by ~~this act~~ the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act shall demonstrate to the Board the licensee's continuing qualification to practice medicine and surgery. The licensee shall apply for license reregistration on a form or forms provided by the Board, which shall be designed to require the licensee to update or add to the information in the Board's file relating to the licensee and his or her professional activity. It shall also require the licensee to report to the Board the following information:

1. Any action taken against the licensee for acts or conduct similar to acts or conduct described in ~~this act~~ the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act as grounds for disciplinary action by:

- a. any jurisdiction or authority (United States or foreign) that licenses or authorizes the practice of medicine and surgery,
- b. any peer review body,
- c. any health care institution,
- d. any professional medical society or association,
- e. any law enforcement agency,
- f. any court, or
- g. any governmental agency;

2. Any adverse judgment, settlement, or award against the licensee arising from a professional liability claim;

3. The licensee's voluntary surrender of or voluntary limitation on any license or authorization to practice medicine and surgery in any jurisdiction, including military, public health and foreign;

4. Any denial to the licensee of a license or authorization to practice medicine and surgery by any jurisdiction, including military, public health or foreign;

5. The licensee's voluntary resignation from the medical staff of any health care institution or voluntary limitation of the licensee's staff privileges at such an institution if that action occurred while the licensee was under formal or informal investigation by the institution or a committee thereof for any reason related to alleged medical incompetence, unprofessional conduct, or mental or physical impairment;

6. The licensee's voluntary resignation or withdrawal from a national, state, or county medical society, association, or organization if that action occurred while the licensee was under formal or informal investigation or review by that body for any reason related to possible medical incompetence, unprofessional or unethical conduct, or mental or physical impairment;

7. Whether the licensee has abused or has been addicted to or treated for addiction to alcohol or any chemical substance during the previous registration period, unless such person is in a rehabilitation program approved by the Board;

8. Whether the licensee has had any physical injury or disease or mental illness during the previous registration period that affected or interrupted his or her practice of medicine and surgery; and

9. The licensee's completion of continuing medical education or other forms of professional maintenance or evaluation, including specialty board certification or recertification, during the previous registration period.

B. The Board may require continuing medical education for license reregistration and require documentation of that education. The Board shall promulgate rules on the specific requirements of the amount of continuing medical education needed for reregistration. Failure to meet the requirements in the allotted time may result in the licensee being required to pay a nondisciplinary fine by the Board secretary of up to but not more than One Thousand Dollars (\$1,000.00).

C. The Board shall require that the licensee receive not less than one (1) hour of education in pain management or one (1) hour of education in opioid use or addiction each year preceding an application for renewal of a license, unless the licensee has demonstrated to the satisfaction of the Board that the licensee does not currently hold a valid federal Drug Enforcement Administration registration number.

D. The licensee shall sign and attest to the veracity of the application form for license reregistration. Failure to report fully and correctly shall be grounds for disciplinary action by the Board.

E. The Board shall establish a system for reviewing reregistration forms. The Board may initiate investigations and disciplinary proceedings based on information submitted by licensees for license reregistration.

F. Upon a finding by the Board that the licensee is fit to continue to practice medicine and surgery in this state, the Board shall issue to the licensee a license to practice medicine and surgery during the next registration period.

SECTION 4. AMENDATORY 59 O.S. 2011, Section 503, as amended by Section 1, Chapter 176, O.S.L. 2014 (59 O.S. Supp. 2018, Section 503), is amended to read as follows:

Section 503. The State Board of Medical Licensure and Supervision may suspend, revoke or order any other appropriate sanctions against the license of any physician or surgeon holding a license to practice in this state for unprofessional conduct, but no such suspension, revocation or other penalty shall be made until the licensee is cited to appear for hearing. No such citation shall be issued except upon sworn complaint filed with the secretary of the Board charging the licensee with having been guilty of unprofessional conduct and setting forth the particular act or acts alleged to constitute unprofessional conduct. In the event it comes to the attention of the Board that a violation of the rules of professional conduct may have occurred, even though a formal complaint or charge may not have been filed, the Board staff may conduct an investigation of the possible violation, and may upon its

own motion institute a formal complaint. In the course of the investigation persons appearing before the Board may be required to testify under oath. Upon the filing of a complaint, either by an individual or the Board staff as provided herein, the citation must forthwith be issued by the secretary of the Board over the signature of the secretary and seal of the Board, setting forth the complaint of unprofessional conduct, and giving due notice of the time and place of the hearing by the Board. ~~The citation shall be made returnable at the next regular meeting of the Board occurring at least thirty (30) days after the service of the citation.~~ In any case in which a physician disputes allegations made in a complaint, the matter shall be set and heard by the Board at the next regular meeting of the Board occurring at least thirty (30) days after the day of service of the citation, exclusive of the day of service, but will be heard not later than the next regular meeting of the Board occurring ninety (90) days after service of the citation, exclusive of the day of service. No continuance may be granted by the Board on its own motion or at the request of the defendant or his or her counsel or at the request of the attorney for the state, unless the record of the case, either orally or in writing, sets forth a finding that the ends of justice served by the granting of such continuance outweigh the best interest of the public and the defendant in a speedy hearing. The defendant shall file a written answer under oath with the secretary of the Board within twenty (20) days after the service of the citation, exclusive of the day of service. The secretary of the Board may extend the time of answer upon satisfactory showing that the defendant is for reasonable cause unable to answer within the twenty (20) days exclusive of the day of service, but in no case shall the time be extended beyond the date of the next regular meeting of the Board, unless a continuance is granted by the Board.

SECTION 5. AMENDATORY 59 O.S. 2011, Section 503.1, is amended to read as follows:

Section 503.1. The Secretary of the State Board of Medical Licensure and Supervision, upon concurrence of the President of the Board that an emergency exists for which the immediate suspension of a license is imperative for the public health, safety and welfare, may conduct a hearing as contemplated by Section 314 of Title 75 of the Oklahoma Statutes ~~to~~ and may, upon probable cause, suspend

temporarily the license of any person under the jurisdiction of the Board.

SECTION 6. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 503.2 of Title 59, unless there is created a duplication in numbering, reads as follows:

A. The State Board of Medical Licensure and Supervision may promulgate rules to create administrative remedies for licensee violations of statutory or regulatory prescribed unprofessional conduct.

B. The Board is authorized to prescribe by rule administrative remedies, disciplinary actions and administrative procedures to provide remedies and disciplinary actions for licensee violations of statutory or regulatory prescribed unprofessional conduct, to include fines up to the limits otherwise prescribed by statute or rule.

C. Any such administrative action rules promulgated by the Board shall provide procedure:

1. For the licensee to contest or dispute any administrative action;

2. For procedures for resolution of any such contest or dispute; and

3. For appropriate protection of private information consistent with state and federal law.

SECTION 7. AMENDATORY 59 O.S. 2011, Section 508, is amended to read as follows:

Section 508. A. Whenever any license has been procured or obtained by fraud or misrepresentation on the licensure application, or was issued by mistake; or if the diploma of graduation in medicine and surgery or any other credentials required as necessary to the admission to the examination for license were obtained by fraud or misrepresentation on the licensure application, or were issued by mistake; or if the reciprocity endorsement from another state, upon which a license has been issued in this state, was

procured by fraud or misrepresentation, or was issued by mistake, it shall be the duty of the State Board of Medical Licensure and Supervision to take appropriate disciplinary action in the same manner as is provided by the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act for the disciplining of unprofessional conduct or in cases of unintentional misrepresentation of information on the licensure application, the State Board of Medical Licensure and Supervision shall delegate to the Board secretary the ability to issue a nondisciplinary administrative fine of up to but not more than One Thousand Dollars (\$1,000.00) per licensure applicant or to require a continuing medical education course in ethics, or to take both actions, to impress upon the applicant the seriousness of completing the application truthfully.

B. Use of fraudulent information to obtain a license shall be a misdemeanor offense, punishable, upon conviction, by the imposition of a fine of not less than One Thousand Dollars (\$1,000.00), or by imprisonment in the county jail for not more than one (1) year, or by both such fine and imprisonment.

SECTION 8. AMENDATORY 59 O.S. 2011, Section 509, as amended by Section 2, Chapter 175, O.S.L. 2018 (59 O.S. Supp. 2018, Section 509), is amended to read as follows:

Section 509. The words "unprofessional conduct" as used in Sections 481 through 518.1 of this title are hereby declared to include, but shall not be limited to, the following:

1. Procuring, aiding or abetting a criminal operation;
2. The obtaining of any fee or offering to accept any fee, present or other form of remuneration whatsoever, on the assurance or promise that a manifestly incurable disease can or will be cured;
3. Willfully betraying a professional secret to the detriment of the patient;
4. Habitual intemperance or the habitual use of habit-forming drugs;

5. Conviction or confession of, or plea of guilty, nolo contendere, no contest or Alford plea to a felony or ~~of~~ any offense involving moral turpitude;

6. All advertising of medical business in which statements are made which are grossly untrue or improbable and calculated to mislead the public;

7. Conviction or confession of, or plea of guilty, nolo contendere, no contest or Alford plea to a crime involving violation of:

- a. the antinarcotic or prohibition laws and regulations of the federal government,
- b. the laws of this state, ~~or~~
- c. State Board of Health rules, or
- d. a determination by a judge or jury;

8. Dishonorable or immoral conduct which is likely to deceive, defraud, or harm the public;

9. The commission of any act which is a violation of the criminal laws of any state when such act is connected with the physician's practice of medicine. A complaint, indictment or confession of a criminal violation shall not be necessary for the enforcement of this provision. Proof of the commission of the act while in the practice of medicine or under the guise of the practice of medicine shall be unprofessional conduct;

10. Failure to keep complete and accurate records of purchase and disposal of controlled drugs or of narcotic drugs;

11. The writing of false or fictitious prescriptions for any drugs or narcotics declared by the laws of this state to be controlled or narcotic drugs;

12. Prescribing or administering a drug or treatment without sufficient examination and the establishment of a valid physician-

patient relationship and not prescribing in a safe, medically accepted manner;

13. The violation, or attempted violation, direct or indirect, of any of the provisions of the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act, either as a principal, accessory or accomplice;

14. Aiding or abetting, directly or indirectly, the practice of medicine by any person not duly authorized under the laws of this state;

15. The inability to practice medicine with reasonable skill and safety to patients by reason of age, illness, drunkenness, excessive use of drugs, narcotics, chemicals, or any other type of material or as a result of any mental or physical condition. In enforcing this ~~subsection~~ section the State Board of Medical Licensure and Supervision may, upon probable cause, request a physician to submit to a mental or physical examination by physicians designated by it. If the physician refuses to submit to the examination, the Board shall issue an order requiring the physician to show cause why the physician will not submit to the examination and shall schedule a hearing on the order within thirty (30) days after notice is served on the physician, exclusive of the day of service. The physician shall be notified by either personal service or by certified mail with return receipt requested. At the hearing, the physician and the physician's attorney are entitled to present any testimony and other evidence to show why the physician should not be required to submit to the examination. After a complete hearing, the Board shall issue an order either requiring the physician to submit to the examination or withdrawing the request for examination. The medical license of a physician ordered to submit for examination may be suspended until the results of the examination are received and reviewed by the Board;

16. a. Prescribing, dispensing or administering of controlled substances or narcotic drugs in excess of the amount considered good medical practice,
- b. prescribing, dispensing or administering controlled substances or narcotic drugs without medical need in

accordance with pertinent licensing board standards,
or

- c. prescribing, dispensing or administering opioid drugs in excess of the maximum dosage authorized under Section 5 of this act 2-309I of Title 63 of the Oklahoma Statutes;

17. Engaging in physical conduct with a patient which is sexual in nature, or in any verbal behavior which is seductive or sexually demeaning to a patient;

18. Failure to maintain an office record for each patient which accurately reflects the evaluation, treatment, and medical necessity of treatment of the patient;

19. Failure to provide necessary ongoing medical treatment when a doctor-patient relationship has been established, which relationship can be severed by either party providing a reasonable period of time is granted; or

20. Failure to provide a proper and safe medical facility setting and qualified assistive personnel for a recognized medical act, including but not limited to an initial in-person patient examination, office surgery, diagnostic service or any other medical procedure or treatment. Adequate medical records to support diagnosis, procedure, treatment or prescribed medications must be produced and maintained.

SECTION 9. AMENDATORY 59 O.S. 2011, Section 509.1, is amended to read as follows:

Section 509.1. A. RANGE OF ACTIONS: The State Board of Medical Licensure and Supervision may impose disciplinary actions in accordance with the severity of violation of the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act. Disciplinary actions may include, but are not limited to the following:

1. Revocation of the medical license with or without the right to reapply;

2. Suspension of the medical license;

3. Probation;
4. Stipulations, limitations, restrictions, and conditions relating to practice;
5. Censure, including specific redress, if appropriate;
6. Reprimand;
7. A period of free public or charity service;
8. Satisfactory completion of an educational, training, and/or treatment program or programs; and
9. Administrative fines of up to Five Thousand Dollars (\$5,000.00) per violation.

Provided, as a condition of disciplinary action sanctions, the Board may impose as a condition of any disciplinary action, the payment of costs expended by the Board for any legal fees and costs and probation and monitoring fees including, but not limited to, staff time, salary and travel expense, witness fees and attorney fees. The Board may take such actions singly or in combination as the nature of the violation requires.

B. LETTER OF CONCERN: The Board may authorize the secretary to issue a confidential letter of concern to a licensee when evidence does not warrant formal proceedings, but the secretary has noted indications of possible errant conduct that could lead to serious consequences and formal action. The letter of concern may contain, at the secretary's discretion, clarifying information from the licensee.

C. EXAMINATION/EVALUATION: The Board may, upon reasonable cause, require professional competency, physical, mental, or chemical dependency examinations of any licensee, including withdrawal and laboratory examination of body fluids.

D. DISCIPLINARY ACTION AGAINST LICENSEES:

1. The Board shall promulgate rules describing acts of unprofessional or unethical conduct by physicians pursuant to the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act; and

2. Grounds for Action: The Board may take disciplinary action for unprofessional or unethical conduct as deemed appropriate based upon the merits of each case and as set out by rule. The Board shall not revoke the license of a person otherwise qualified to practice allopathic medicine within the meaning of the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act solely because the person's practice or a therapy is experimental or nontraditional.

Reports of all disciplinary action provided for in this section will be available to the public upon request. Investigative files shall remain confidential.

E. SURRENDER IN LIEU OF PROSECUTION:

1. The Board may accept a surrender of license from a licensee who has engaged in unprofessional conduct in lieu of Board staff prosecuting a pending disciplinary action or filing formal disciplinary proceedings only as provided in this section. To effect such a surrender, the licensee must submit a sworn statement to the Board:

- a. expressing the licensee's desire to surrender the license,
- b. acknowledging that the surrender is freely and voluntarily made, that the licensee has not been subjected to coercion or duress, and that the licensee is fully aware of the consequences of the license surrender,
- c. stating that the licensee is the subject of an investigation or proceeding by the Board or a law enforcement or other regulatory agency involving allegations which, if proven, would constitute grounds for disciplinary action by the Board, and

- d. specifically admitting to and describing the misconduct.

2. The sworn written statement must be submitted with the licensee's wallet card and wall certificate. The Secretary or Executive Director of the Board may accept the sworn statement, wallet card and wall certificate from a licensee pending formal acceptance by the Board. The issuance of a complaint and citation by the Board shall not be necessary for the Board to accept a surrender under this subsection. A surrender under this subsection shall be considered disciplinary action by the Board in all cases, even in cases where surrender occurs prior to the issuance of a formal complaint and citation, and shall be reported as disciplinary action by the Board to the public and any other entity to whom the Board regularly reports disciplinary actions.

3. As a condition to acceptance of the surrender, the Board may require the licensee to pay the costs expended by the Board for any legal fees and costs and any investigation, probation and monitoring fees including, but not limited to, staff time, salary and travel expense, witness fees and attorney fees.

4. The licensee whose surrender in lieu of prosecution is accepted by the Board shall be ineligible to reapply for reinstatement of his or her license for at least one (1) year from the date of the accepted surrender.

F. ALL LICENSED PROFESSIONALS: All disciplinary actions defined in this section are applicable to any and all professional licensees under the legislative jurisdiction of the State Board of Medical Licensure and Supervision.

SECTION 10. AMENDATORY 59 O.S. 2011, Section 512, as amended by Section 3, Chapter 176, O.S.L. 2014 (59 O.S. Supp. 2018, Section 512), is amended to read as follows:

Section 512. A. The secretary of the State Board of Medical Licensure and Supervision shall be paid an annual salary in an amount fixed by the Board. The Board shall have the authority to expend such funds as are necessary in carrying out the duties of the Board and shall have the authority to hire all necessary personnel, at salaries to be fixed by the Board, as the Board shall deem

necessary. The Board shall have the authority to hire attorneys to represent the Board in all legal matters and to assist authorized state and county officers in prosecuting or restraining violations of Section 481 et seq. of this title, and to fix the salaries or per diem of ~~said~~ the attorneys.

B. The Board shall have the authority to hire one or more investigators as may be necessary to carry out the provisions of ~~this act~~ the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act at an annual salary to be fixed by the Board. Such investigators may be commissioned peace officers of this state. In addition such investigators shall have the authority and duty to investigate and inspect the records of all persons in order to determine whether or not a disciplinary action for unprofessional misconduct is warranted or whether the narcotic laws or the dangerous drug laws have been complied with.

C. 1. For purposes of this section, investigators shall be peace officers certified by the Council on Law Enforcement Education and Training and shall have statewide jurisdiction to perform the duties authorized by this section. In addition, the investigators shall have all the powers now or hereafter vested by law in peace officers.

2. Investigators for the Oklahoma State Board of Medical Licensure and Supervision shall perform such services as are necessary in the investigation of criminal activity or preparation of administrative actions.

3. Any licensee or applicant for license subject to the provisions of the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act shall be deemed to have given consent to any duly authorized investigator of the Board to access, enter or inspect the records, either on-site or at the Board office, or facilities of such licensee or applicant subject to the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act. Refusal to allow such access, entry or inspection may constitute grounds for the denial, nonrenewal, suspension or revocation of a license. Upon refusal of such access, entry or inspection, pursuant to this section, the Board or a duly authorized representative may make application for and obtain a search warrant from the district

court where the facility or records are located to allow such access, entry or inspection.

D. 1. The Board is specifically authorized to contract with state agencies or other bodies to perform investigative services or other administrative services at a rate set by the Board.

2. The Board is authorized to pay the travel expenses of Board employees and members in accordance with the State Travel Reimbursement Act.

3. The expenditures authorized herein to include capital purchases shall not be a charge against the state, but the same shall be paid solely from the Board's depository fund.

SECTION 11. AMENDATORY 59 O.S. 2011, Section 513, is amended to read as follows:

Section 513. A. 1. The State Board of Medical Licensure and Supervision is hereby given quasi-judicial powers while sitting as a Board for the purpose of revoking, suspending or imposing other disciplinary actions upon the license of physicians or surgeons of this state, and appeals from its decisions shall be taken to the Supreme Court of this state within thirty (30) days of the date that a copy of the decision is mailed to the appellant, as shown by the certificate of mailing attached to the decision.

2. The license of any physician or surgeon who has been convicted of any felony in or without the State of Oklahoma, and whether in a state or federal court, may be suspended by the Board upon the submission thereto of a certified copy of the judgment and sentence of the trial court and the certificate of the clerk of the court of the conviction.

3. Upon proof of a ~~final~~ felony conviction by the courts ~~and after exhaustion of the appellate process~~, the Board shall revoke the physician's license. If the felony conviction is overturned on appeal and no other appeals are sought, the Board shall restore the license of the physician. ~~Suspension or revocation of the license of any person convicted of a felony on any other grounds than that of moral turpitude or the violation of the federal or state narcotic laws, shall be on the merits of the particular case, but the court~~

~~Court records in the trial of such case when~~ of such a conviction
~~has been had~~ shall be prima facie evidence of the conviction.

4. The Board shall also revoke and cancel the license of any physician or surgeon who has been charged in a court of record of this or other states of the United States or in the federal court with the commission of a felony and who is a fugitive from justice, upon the submission of a certified copy of the charge together with a certificate from the clerk of the court that after the commitment of the crime the physician or surgeon fled from the jurisdiction of the court and is a fugitive from justice.

B. To the extent necessary to allow the Board the power to enforce disciplinary actions imposed by the Board, in the exercise of its authority, the Board may punish willful violations of its orders and impose additional penalties as allowed by Section 509.1 of this title.

SECTION 12. AMENDATORY 59 O.S. 2011, Section 518.1, is amended to read as follows:

Section 518.1. A. There is hereby established the Allied Professional Peer Assistance Program to rehabilitate allied medical professionals whose competency may be compromised because of the abuse of drugs or alcohol, so that such allied medical professionals can be treated and can return to or continue the practice of allied medical practice in a manner which will benefit the public. The program shall be under the supervision and control of the State Board of Medical Licensure and Supervision.

B. The Board may appoint one or more peer assistance evaluation advisory committees, hereinafter called the "allied peer assistance committees". Each of these committees shall be composed of members, the majority of which shall be licensed allied medical professionals with expertise in chemical dependency. The allied peer assistance committees shall function under the authority of the State Board of Medical Licensure and Supervision in accordance with the rules of the Board. The program may be one hundred percent (100%) outsourced to professional groups specialized in this arena. The committee members shall serve without pay, but may be reimbursed for the expenses incurred in the discharge of their official duties in accordance with the State Travel Reimbursement Act.

C. The Board may appoint and employ a qualified person or persons to serve as program coordinators and shall fix such person's compensation. The program may employ a director for purposes of ongoing nonclerical administrative duties and shall fix the director's compensation. The Board shall define the duties of the program coordinators and director who shall report directly to the Board.

D. The Board is authorized to adopt and revise rules, not inconsistent with the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act, as may be necessary to enable it to carry into effect the provisions of this section.

E. A portion of licensing fees for each allied profession, not to exceed Ten Dollars (\$10.00), may be used to implement and maintain the Allied Professional Peer Assistance Program.

F. All monies paid pursuant to subsection E of this section shall be deposited in an agency special account revolving fund under the State Board of Medical Licensure and Supervision, and shall be used for the general operating expenses of the Allied Professional Peer Assistance Program, including payment of personal services.

G. Records and management information system of the professionals enrolled in the Allied Professional Peer Assistance Program and reports shall be maintained in the program office in a place separate and apart from the records of the Board. The records shall be made public only by subpoena and court order; provided however, confidential treatment shall be cancelled upon default by the professional in complying with the requirements of the program.

H. Any person making a report to the Board or to an allied peer assistance committee regarding a professional suspected of practicing allied medical practice while habitually intemperate or addicted to the use of habit-forming drugs, or a professional's progress or lack of progress in rehabilitation, shall be immune from any civil or criminal action resulting from such reports, provided such reports are made in good faith.

I. A professional's participation in the Allied Professional Peer Assistance Program in no way precludes additional proceedings

by the Board for acts or omissions of acts not specifically related to the circumstances resulting in the professional's entry into the program. However, in the event the professional defaults from the program, the Board may discipline the professional for those acts which led to the professional entering the program.

J. The Executive Director of the Board shall suspend the license immediately upon notification that the licensee has defaulted from the Allied Professional Peer Assistance Program, and shall assign a hearing date for the matter to be presented to the Board.

K. All treatment information, whether or not recorded, and all communications between a professional and therapist are both privileged and confidential. In addition, the identity of all persons who have received or are receiving treatment services shall be considered confidential and privileged.

L. As used in this section, unless the context otherwise requires:

1. "Board" means the State Board of Medical Licensure and Supervision; and

2. "Allied peer assistance committee" means the peer assistance evaluation advisory committee created in this section, which is appointed by the State Board of Medical Licensure and Supervision to carry out specified duties.

M. The Allied Professional Peer Assistance Program may contract with outside entities for services that are not available to it or can be obtained for a lesser cost through such a contract. The contract shall be ratified by the Board.

SECTION 13. This act shall become effective November 1, 2019.

Passed the Senate the 20th day of May, 2019.

Presiding Officer of the Senate

Passed the House of Representatives the 22nd day of May, 2019.

Presiding Officer of the House
of Representatives

OFFICE OF THE GOVERNOR

Received by the Office of the Governor this _____

day of _____, 20_____, at _____ o'clock _____ M.

By: _____

Approved by the Governor of the State of Oklahoma this _____

day of _____, 20_____, at _____ o'clock _____ M.

Governor of the State of Oklahoma

OFFICE OF THE SECRETARY OF STATE

Received by the Office of the Secretary of State this _____

day of _____, 20_____, at _____ o'clock _____ M.

By: _____