

AN INFORMATION GUIDE FOR
ALABAMA MEDICAL LICENSEES:
THE ALABAMA BOARD OF MEDICAL EXAMINERS
AND
THE MEDICAL LICENSURE COMMISSION OF ALABAMA



Originally written for Alabama licensed physicians by Arthur F. Toole, III, M. D., former Member of the Alabama Board of Medical Examiners, as a basic guide to the organization and purpose of the Alabama Board of Medical Examiners and the Medical Licensure Commission of Alabama.

Revised February 2015

An Information Guide for Alabama Medical Licensees: the Board of Medical Examiners and the Medical Licensure Commission

Introduction

You have been granted a license to practice the profession of medicine or osteopathy in the state of Alabama. This license is one of your most important assets, because it allows you to use the long years of your education to serve patient and community health needs and to make a living for yourself and your family. Your license is also a privilege that comes with the responsibility to practice competently, ethically and compassionately.

Alabama law charges the Board of Medical Examiners ("the Board") and Medical Licensure Commission ("the Commission") with protecting the health and safety of the citizens of Alabama. Sections 34-24-50, et. seq., of the *Code of Alabama* (the "Medical Practice Act") establish a unique bicameral system for the regulation of medical and osteopathic practitioners in this state. The Board certifies that applicants meet the statutory requirements for licensure, investigates complaints, and initiates formal, administrative actions against physicians licensed in Alabama. The Commission grants licenses to practice medicine or osteopathy in Alabama and hears and adjudicates formal allegations concerning a physician's ability to practice safely.

The Board of Medical Examiners

Sixteen licensed Alabama physicians are responsible for the Board's activities. The major activities of the Board are: reviewing initial license applications; investigating complaints and acting on them; issuing, monitoring, and disciplining Alabama Controlled Substances Certificates (ACSCs); reviewing adverse clinical privileges actions; and reviewing all malpractice settlements and judgments resulting in a monetary award being paid on behalf of a licensee.

The Board also licenses qualified applicants to practice as Physician Assistants (PAs) and Anesthesiologist Assistants (AAs) in Alabama and approves registration agreements between physicians and assistants to physicians. In addition, in conjunction with the Board of Nursing and upon the recommendation of a Joint Committee of physicians and nurses, the Board approves the collaborative practice applications of physicians and Certified Registered Nurse Practitioners (CRNPs) and Certified Nurse Midwives (CNMs). The Board is also responsible for issuing Qualified Alabama Controlled Substance Certificates (QACSC) and Limited Purpose Schedule II Permits (LPSPs) to qualified PAs, CRNPs and CNMs.

The Medical Licensure Commission

The Commission is composed of eight members who serve staggered five-year terms, with four appointed by the Governor, two by the Lieutenant Governor and two by

the Speaker of the House of Representatives. Seven of the members of the Commission are licensed physicians, and one is a public member. The Commission has the sole authority to issue medical licenses in Alabama.

If an investigation by the Board concludes that there is sufficient evidence to show that the physician is not qualified to practice medicine safely, the Board may file with the Commission formal charges containing the allegations of improper medical practice. The Code of Alabama currently states twenty-three grounds for disciplining a physician's license. A hearing before the Commission is similar to a court trial, with the presentation of evidence from the prosecution and the defense, following the rules of evidence. A physician appearing before the Commission is accorded full due process and has the right to an attorney, to call witnesses and to present evidence. After all testimony and evidence is presented, the Commission may take any of several actions, including dismissing the case if it deems that insufficient evidence was presented, subjecting the physician's license to restrictions, removing the privilege to practice medicine or osteopathy from the physician, or taking what other action it deems necessary.

Application for License to Practice Medicine or Osteopathy

Successful applicants for an Alabama medical license must meet all statutory and administrative rule requirements. This includes meeting medical school, postgraduate education, and licensing examination requirements, submitting to a criminal history background check, and being lawfully present in the U.S. There is no requirement to maintain malpractice liability insurance for a medical license in Alabama.

If an application contains derogatory or incomplete information, that application is extracted for individual review by the Board. Often the outlying item is one that the Board can resolve by further review or by requesting additional information. If there is considerable concern, the Board may invite the applicant to attend a meeting of the Credentials Committee to have an opportunity to explain completely and in person the questions raised on the application. This ensures that every effort is given the applicant to support the request for a license. Where statutory grounds exist, the Board may deny the application. A denial of an initial application may be appealed to the Commission.

When an application is approved by the Board, the Board certifies to the Commission that all statutory requirements have been met. The Commission may request further information concerning an application, schedule a hearing for the applicant to show cause why the application should not be denied, or deny a license on statutory grounds. If the application is approved, a license to practice medicine or osteopathy in Alabama is issued.

Renewal of License to Practice Medicine or Osteopathy

All licenses expire on December 31 of each calendar year, and renewal notices are mailed in October of each year to all licensees, using their mailing address on record with the Commission. Licenses that are not renewed by the expiration date of December 31 may be renewed during the grace period of January 1 through January 31 with a late fee. Licenses that are not renewed by midnight on January 31 are placed in inactive status which requires a reinstatement application to be submitted for reactivation of the license.

The answers given to questions on the renewal application are extremely important. It is your responsibility to ensure that the form is correct before you sign and submit it. It is recommended that this task not be delegated to another individual.

Alabama requires twenty five *AMA/PRA Category 1 Credits™* of continuing medical education (CME) per year. The license renewal application includes a certification that you have met this requirement. Board rules require that you maintain certificates of your CME credits for a minimum of three years. The Board randomly audits licensees for compliance with the CME rules. If, upon Board investigation, the licensee is unable to provide clear evidence of CME compliance, the physician may be subject to disciplinary proceedings, including reprimands, fines, and additional CME.

Licensees should ensure that they have provided current mailing and practice addresses. Alabama law requires that licensees notify the Commission of a change of address within fifteen days. Board and Commission correspondence and newsletters are sent to the address provided by the licensee. The Board and Commission do not send junk mail. All correspondence from the Board or Commission should be reviewed and attended to in a timely manner. The Board and Commission newsletter contains important information and updates for licensees.

Registrations

Alabama Controlled Substances Certificates (ACSC) and Qualified Alabama Controlled Substances Certificates (QACSC)

Every person who manufactures, distributes or dispenses any controlled substance in Alabama must obtain annually a registration issued by a certifying board. The Board of Medical Examiners is the certifying board that issues and enforces compliance with the use of controlled substances registrations to physicians (ACSC) and to qualified physician assistants, certified registered nurse practitioners and certified nurse midwives (QACSC). The Board is empowered to investigate alleged misuse of a controlled substances registration certificate and to take corrective action, which may include restriction, revocation, administrative fines, and requiring attendance at educational programs regarding the appropriate use of these substances. ACSCs and QACSCs are renewed annually on a calendar year basis and may be accomplished during the license renewal process.

Dispensing Physician

A physician who purchases oral or parenteral controlled substance medications and distributes such substances (other than clearly marked pre-packaged starter samples) for consumption or administration by patients off of the premises of the practice site is a Dispensing Physician. Dispensing Physicians must register with the Board each location where controlled substances are dispensed. Additionally, Dispensing Physicians must maintain pharmaceutical logs as required by the Board and the Drug Enforcement Administration and must report dispensed controlled substances to the Alabama Department of Public Health's Prescription Drug Monitoring Program Data Bank (PDMP). Dispensing Physician registration is not annually renewed and must be terminated with the Board if dispensing is discontinued.

Office Based Surgery

Physicians who perform surgery outside a hospital or outpatient facility licensed by the Alabama Department of Public Health must comply with the Board's Office Based Surgery Rules, which include certain requirements for certain levels of anesthesia used, registration with the Board of certain office based surgery physicians, and reporting of adverse events. Office Based Surgery registration is annually renewable on a calendar year basis. Physicians who respond on their license renewal application that they perform office based procedures will receive a notification from the Board after the license renewal period has ended.

Use of Lasers and Other Modalities Affecting Living Tissue

Physicians using lasers and other modalities affecting living tissue must comply with the Board's Use of Lasers Rules, which provide guidelines for the use of these modalities, provide for the delegation of non-ablative procedures (ablative procedures may only be performed by a physician and may not be delegated), require physician registration with the Board, and require reporting of adverse events. Registration as a Lasers Physician is not annually renewed and should be terminated with the Board if those procedures are discontinued.

Pain Management Services

A physician practice which advertises or holds itself out to the public as a provider of pain management services (medical services that involve the prescription of controlled substances in order to treat chronic non-malignant pain), physicians who are Dispensing Physicians and dispense opioids, and physicians who are the top prescribers of controlled substances for pain (as determined by Board rules) must comply with the Board's Pain Management Services Rules, which include requirements for registration, ownership, medical directors, and training. Pain Management Services registration is an annual registration that may be accomplished during the license renewal process.

Nurse Practitioners/Midwives and Assistants to Physicians

In the state of Alabama, CRNPs, CNMs and PAs are contractually linked, individually, to a specific physician, and each practitioner must conduct all medical activities within the boundaries of that contract. When a practice operating pursuant to a collaborative practice (CRNP/CNM) or registration (PA) agreement is conducted properly, the health care of our citizens is improved, and the practice is able to operate more efficiently. However, CRNPs, CNMs and PAs are not as extensively trained as physicians, and appropriate collaboration with medical direction and oversight by the physician (CRNP/CNM) or supervision by the physician (PA) is necessary to ensure the safety of the public. It is important to retain written documentation of quality assurance review and medical oversight or supervision as required by the rules specific to each arrangement.

CRNPs and CNMs are licensed by the Alabama Board of Nursing. The Board of Nursing and the Board of Medical Examiners collaboratively establish rules for those medical procedures and medical decisions a CRNP may perform and make independently, and those that must be performed in the direct collaboration with the physician. A Joint Committee of nurses and physicians oversees these relationships. In the event of possible violations, the nurse's license is adjudicated by the Board of Nursing and the physician's license by the Board of Medical Examiners and/or the Medical Licensure Commission.

PAs are licensed by the Board of Medical Examiners. Each is registered to a specific physician by the Board and their activities are monitored by the Board. If there are possible violations by the PA or physician, both the PA and the registered physician are responsible to the Board and/or Commission.

Anesthesiology Assistants (AAs) are licensed and regulated by the Board. Most of the regulations concerning PAs apply to AAs.

A physician who contemplates entering into a collaborative practice with a CRNP/CNM or who has a registration agreement with a PA/AA should become thoroughly familiar with the Board's rules relating to physician involvement with these practitioners. There are multiple requirements and responsibilities which should not be taken lightly. When a physician collaborates with a CRNP/CNM or is registered with a PA/AA, that physician is ultimately responsible for the medical activities of the individuals, for ensuring that the approved contract is followed, and for ensuring that dissolution of the contract is promptly reported to the involved Boards.

Investigations

Patient Complaints

The Board's investigative department reviews and investigates complaints

against physicians. Most complaints are made by patients and their families. The most common complaints involve patient communication. Except for extremely unusual circumstances, complaints for investigation must be in written form, and anonymous complaints are not accepted.

When a complaint is received, it is assigned to a Board investigator. All of the Board's investigators are experienced law enforcement professionals, and all have been trained in medical investigations. The investigator discusses the complaint with the complainant and, on occasion, an explanation from the investigator satisfies the complainant and the case is closed.

After obtaining particulars from the complainant, the investigator presents the complaint to the named physician(s) to obtain a first-hand, direct response from the physician and to answer the physician's questions. The investigator asks the physician to submit a timely written response about the complaint to the Board for its review. Meanwhile, the investigator obtains collateral materials from hospitals, pharmacies, other physicians, etc., for the Board's review.

After the investigator has retrieved basic information from the complainant(s), involved physician(s) and collateral material, it is placed on the Board's agenda for review and decision. If the decision is to gather more information, it may be obtained from further records, by asking the physician to supply more specific information, or by inviting the physician to attend a Credentials Committee meeting to give responses fully and in person.

The Board may decide that the issue in the complaint was a misunderstanding or an unfortunate, but recognizable, event that did not compromise patient safety. It may decide that there was some degree of medical practice below the desired level, but which did not affect the patient's safety. In this case, the Board may notify the physician through a confidential Letter of Concern that there may be areas of the physician's practice that need attention. If the level of the incident is more severe, or if there is a pattern of practice that could lead to further problems, the Board may order remedial education by attendance at a specific continuing medical education course.

If there is conduct that the Board concludes may be dangerous to public safety, it may file formal charges with the Commission and request restrictions, revocation or other action against the physician's license. If it determines that an immediate threat to the public health and safety may exist, then the Board can request from the Commission a summary suspension of the physician's license until the case can be heard by the Commission.

Adverse Actions by a Medical Facility

All healthcare facilities licensed in the state of Alabama are required by law to report to the Board, within thirty days, any disciplinary action taken concerning a

physician when the action is related to professional ethics, negligence or incompetence, moral turpitude, sexual misconduct, abusive or disruptive behavior, or drug or alcohol abuse. Such a report is investigated in a manner similar to a patient complaint.

Reviews of Alleged Malpractice

Physicians are required to report all settlements or judgements relating to the performance of their professional duties which result in a monetary payment or other sanction against an Alabama licensed physician. All of these cases are reviewed by the Board, although, due to the nature of litigation, it may be some years after the event before the case is concluded and reported to the Board. Once notified, the Board attempts to obtain all relevant material about the case from the physician, attorney and, if necessary, collateral sources. The Board reviews the case and makes a determination whether further action is required. The Board may request further information from the physician or from other sources. It may invite the physician to attend a Credentials Committee meeting to explain the physician's reasoning in the care of a patient or patients. After a full review, Board makes a decision whether to notify the physician that no action is being taken, issue a confidential Letter of Concern, or pursue disciplinary action.

Summary

In Alabama, the privilege to practice medicine or osteopathy is governed by a bicameral system: the Board is the investigative body composed of physicians, and the Commission is the judicial body composed largely of physicians and appointed by the senior officials of state government. For an action to be taken against a physician's license, the physician's conduct must have been sufficiently egregious to influence both groups of physicians, after full review, to agree that sanctions are in order. The bicameral system provides a dual path to achieve the objectives of the Medical Practice Act.

Your medical license is one of your most valuable assets. You should complete your application for license renewal, CME verification and other paperwork for the Board or Commission personally, because you are responsible for everything that you sign. You should instruct the individual in your office who distributes mail to immediately give you any correspondence from the Board of Medical Examiners or Medical Licensure Commission.

Further information may be obtained by accessing the website, www.albme.org or by calling (334) 242-4116.