Readopt with amendment Med 101 effective 4/11/00 (Document #7230, to read as follows:

PART Med 101 PURPOSE AND SCOPE

Med 101.01 Purpose and Scope.

- (a) The rules of this title implement the statutory responsibilities of the New Hampshire board of medicine under the following chapters:
 - (1) RSA 329, Physicians and Surgeons; and
 - (2) RSA 328-D, Physician Assistants.
 - (b) The board's statutory responsibilities include, but are not limited to:
 - (1) The examination and licensing of all practitioners listed in (a) above;
 - (2) The development of ethical and other professional standards to be followed by licensees under those chapters;
 - (3) [The process for investigating allegations of] Presiding over hearing's alleging misconduct and imposing disciplinary sanctions on licensees when appropriate; and
 - (4) The development of continuing professional education requirements and other requirements for demonstrating professional competence.

Repeal Med 102.01, effective 7/31/17 (Document #6554) and renumber Med 102.02 as Med 102.01, as follows:

[Med 102.01 "Administrator" means the person designated by the board under RSA 329:2 IV to represent their interests and to direct the staff and operations of the board in an efficient manner.]

Adopt Med 102.02 to read as follows:

Med 102.02 "Clinician licensee panel" means a panel of licensed clinicians to assist the Office of Professional Licensure and Certification (OPLC) in carrying out its investigative obligations under RSA 310.

Readopt with amendment Med 102.03, effective 7/31/97 (Document #6554), to read as follows:

Med 102.03 "Licensee" means any person holding a valid license or certification issued by the [board under any grant of statutory authority] **OPLC in accordance with the rules of the board**.

Repeal Med 102.07, effective 7/31/97 (Document #6554), as follows:

[Med 102.07 "Tentative decision" means a board action which instructs the board's staff or a board committee to prepare a draft document which satisfies generally stated policy objectives, subject to subsequent review and approval by the board.]

Repeal Med 102.08, effective 10/1/23 (Document #13712), as follows:

[Med 102.08 "Medical Review Subcommittee (MRSC)" means the medical review subcommittee of the board as described in RSA 329:17, V a.]

Readopt Med 103.02, effective 5/9/12 (Document #10125-A), to read as follows:

Med 103.02 Officers.

- (a) In December of each year, the board shall elect one member to serve as president and one member to serve as vice president [and one member to be the board's designee on the MRSC for the coming year].
- (b) The president shall chair the board's meetings[,] <u>and</u> establish the order of its business [and approve the actions of the administrator, consistent with the policies of the board].
 - (c) The vice-president shall assume the duties of the president in [his or her] their absence.
- [(d) The board shall elect a member as the board's designee on the MRSC. That member shall attend and be a full voting member at the MRSC meetings and as a consequence be recused from the discussion of disciplinary matters by the board.]

Repeal Med 103.03, effective 5/9/12 (Document #10125-A), as follows:

[Med 103.03 <u>Staff</u>. The board shall employ an executive director, an administrator and such other staff as is necessary to conduct the board's day to day operations and to fulfill its statutory duties.]

Readopt with amendment Med 104, effective 10/1/23 (Document #13712), to read as follows:

PART Med 104 PUBLIC INFORMATION

Med 104.01 Access to Public Records.

[(a) To ensure public access to the official records of the board, the board shall maintain an office in which all public records shall be open for inspection during regular state working hours. Members of the public may request in writing, to inspect public records in person or by obtaining a photocopy of such records.

(b) Requests for copies of public records should be addressed to the board's administrator at the following address:

Board of Medicine e/o Office of Professional Licensure and Certification 7 Eagle Square

Concord, New Hampshire 03301]

(a) Requests for information and access to public records shall be available as described in Plc 103.

[(e)](b) Minutes of all board and committee meetings shall be taken and shall be available for inspection during the [board's] OPLC's regular business hours within 144 hours of the date of the meeting or vote in questions, unless the 72-hour availability requirements of RSA 91-A:3, III is applicable.

[(d)](c) Board records which contain both public and confidential information shall be provided with the confidential information deleted.

[(e)](d) Final orders in disciplinary matters shall be retained indefinitely by the OPLC.

[Board of Medicine Philbrook Building 121 South Fruit Street Concord, New Hampshire 03301]

Repeal Med 105.03, effective 10/1/2023 (Document #13712), as follows:

[Med 105.03 Board Decisions.

- (a) Draft decisions shall not be binding upon the board. Changes in the form or the substance of a draft decision shall be made as often as necessary to produce a final document which satisfactorily sets forth the final result the board intends to reach.
- (b) A majority of the board shall take action when an emergency meeting is required by an imminent peril to the public health or safety or when the physical presence of a quorum is not reasonably practical for immediate board action pursuant to RSA 329:7, III, by telephone poll or written ballot provided that such action is ratified at a subsequent meeting of the board. The minutes and the procedures for emergency meetings shall comply with RSA 91 A:2.
- (c) The board's final decision shall be issued only after the necessary majority has voted on the final document.
- (d) A board member who was absent from the meeting at which a draft decision was reached shall be eligible to vote on the final decision prepared in accordance with the board's direction if the member is not otherwise recused from the matter in question.

Adopt Med 107 to read as follows:

PART Med 107 CLINICIAN LICENSEE PANEL

Med 107.01 Clinician Licensee Panel Requirements.

(a) A panel of clinician licensees shall be established to work in conjunction with the office of professional licensure and certification (OPLC) in carrying out its investigation obligations under RSA 310.

- (b) The panel shall consist of a minimum of 3 members, appointed by the executive director of the OPLC, that meet the following criteria:
 - (1) Hold an active New Hampshire license;
 - (2) Have no disciplinary actions taken against their license in any state or jurisdiction;
 - (3) Have no pending disciplinary actions on their license in any state or jurisdiction;
 - (4) Hold an active board certification issued by the ABMS or AOA;
 - (5) Have practiced as a physician or surgeon for at least 5 years post residency; and
 - (6) Preferential consideration shall be given to those interested in being appointed to the panel who have prior peer review experience.
- (c) The panel shall meet once a month or as necessary to meet their statutory obligations under RSA 329:9, XVII.

Repeal Med 408.01 and Med 408.02, effective 1/10/20 (Document #12972), and renumber Med 408.03 as Med 408.01, as follows:

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[PART Med 408 DISCIPLINARY MATTERS
Med 408.01 Initiation of Action.
(a) The board shall instruct the MRSC to investigate possible misconduct in accordance with RSA 329:17, II, III, III a, III b(a), IV, and V, RSA 151:6 b, and in response to written complaints.
(b) Except as required by Med 408.01(a), the MRSC shall undertake misconduct investigations, and recommend the settlement of misconduct investigations and the assessment of administrative fines as a matter of prosecutorial discretion, based upon its assessment of the allegations and the nature of the evidence. The board shall review any and all recommendations made by the MRSC and commence disciplinary actions on its own motion.
Med 408.02 Action on Complaints.
(a) Upon receipt of a written complaint, the MRSC shall investigate the allegations contained therein pursuant to the procedures outlined in Med 205.02 and Med 205.03.
(b) The board shall take final action on complaints in the manner provided by Med 205.02 and Med 205.03.

APPENDIX I

RULE	STATUTE	
Med 101.01	RSA 329:2; RSA 541-A:16, I(a)	
Med 102.01 (repealed)	RSA 541-A:16, I(a)	
Med 102.02	RSA 541-A:16, I(a)	
Med 102.03	RSA 541-A:16, I(a)	
Med 102.04 - Med 102.06	RSA 541-A:16, I(a)	
Med 102.07 (repealed)	RSA 541-A:16, I(a)	
Med 102.08 (repealed)	RSA 329:17, V-a; RSA 541-A:16, I(a)	
Med 103.02	RSA 329:2; RSA 329:3; RSA 329:7	
Med 103.03	RSA 329:2, IV	
Med 104	RSA 541-A:16, I(a)	
Med 105.03 (repealed)	RSA 541-A:16, I(a)	
Med 107	RSA 329:9, XVII	
Med 408 (repealed)	RSA 329:9, XV, XVII; RSA 329:17	