

By: Burkett, Thompson of Harris, Flynn,
Raymond

H.B. No. 3040

Substitute the following for H.B. No. 3040:

By: Price

C.S.H.B. No. 3040

A BILL TO BE ENTITLED

1 AN ACT

2 relating to the continuation and functions of the Texas Medical
3 Board; authorizing a fee.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

5 SECTION 1. Section 151.004, Occupations Code, is amended to
6 read as follows:

7 Sec. 151.004. APPLICATION OF SUNSET ACT. The Texas Medical
8 Board is subject to Chapter 325, Government Code (Texas Sunset
9 Act). Unless continued in existence as provided by that chapter,
10 the board is abolished and this subtitle and Chapters 204, 205, 206,
11 601, 602, 603, and 604 expire September 1, 2029 [~~2017~~].

12 SECTION 2. Section 152.010, Occupations Code, is amended by
13 amending Subsection (b) and adding Subsection (d) to read as
14 follows:

15 (b) The training program must provide the person with
16 information regarding:

17 (1) the law governing board operations [~~this~~
18 ~~subtitle~~];

19 (2) the programs, functions, rules, and budget of
20 ~~[operated by]~~ the board;

21 (3) the scope of and limitations on the rulemaking
22 authority [~~role and functions~~] of the board;

23 (4) [~~the rules of the board, with an emphasis on the~~
24 ~~rules that relate to disciplinary and investigatory authority,~~

1 ~~[(5) the current budget for the board,~~
2 ~~[(6)]~~ the results of the most recent formal audit of
3 the board;

4 (5) [(7)] the requirements of:

5 (A) laws relating to open meetings, public
6 information, administrative procedure, and disclosing conflicts of
7 interest; and

8 (B) other laws applicable to members of the board
9 in performing their duties; and

10 (6) [(8)] any applicable ethics policies adopted by
11 the board or the Texas Ethics Commission.

12 (d) The executive director of the board shall create a
13 training manual that includes the information required by
14 Subsection (b). The executive director shall distribute a copy of
15 the training manual annually to each board member. On receipt of
16 the training manual, each board member shall sign and submit to the
17 executive director a statement acknowledging receipt of the
18 training manual.

19 SECTION 3. The heading to Section [153.007](#), Occupations
20 Code, is amended to read as follows:

21 Sec. 153.007. AUTHORITY TO ISSUE SUBPOENA OR ADMINISTER
22 OATH; SUBPOENA ENFORCEMENT.

23 SECTION 4. Section [153.007](#), Occupations Code, is amended by
24 adding Subsections (e) and (f) to read as follows:

25 (e) If a person fails to comply with a subpoena issued under
26 this section, the board, acting through the attorney general, may
27 file suit to enforce the subpoena in a district court in Travis

1 County or in a county in which a hearing conducted by the board may
2 be held.

3 (f) On finding that good cause exists for issuing the
4 subpoena, the court shall order the person to comply with the
5 subpoena.

6 SECTION 5. Section 153.058(a), Occupations Code, is amended
7 to read as follows:

8 (a) The board shall develop and implement a policy to
9 encourage the use of:

10 (1) negotiated rulemaking procedures under Chapter
11 2008, Government Code, for the adoption of any rules by the board
12 [~~rules~~]; and

13 (2) appropriate alternative dispute resolution
14 procedures under Chapter 2009, Government Code, to assist in the
15 resolution of internal and external disputes under the board's
16 jurisdiction.

17 SECTION 6. Section 155.056, Occupations Code, is amended by
18 amending Subsection (a) and adding Subsection (a-1) to read as
19 follows:

20 (a) Except as provided by Subsection (a-1), an [An]
21 applicant must pass each part of an examination within three
22 attempts.

23 (a-1) The limit on the number of examination attempts under
24 Subsection (a) does not apply to the Texas medical jurisprudence
25 examination.

26 SECTION 7. Subchapter A, Chapter 156, Occupations Code, is
27 amended by adding Section 156.010 to read as follows:

1 Sec. 156.010. REFUSAL FOR VIOLATION OF BOARD ORDER. The
2 board may refuse to renew a registration permit issued under this
3 chapter if the license holder is in violation of a board order.

4 SECTION 8. Section 162.106, Occupations Code, is amended to
5 read as follows:

6 Sec. 162.106. INSPECTIONS. (a) The board may conduct
7 inspections [~~to enforce this subchapter, including inspections of~~
8 ~~an office site and of documents~~] of a physician's equipment and
9 office procedures [~~practice~~] that relate to the provision of
10 anesthesia in an outpatient setting as necessary to enforce this
11 subchapter.

12 (b) The board may establish a risk-based inspection process
13 in which the board conducts inspections based on the length of time
14 since:

15 (1) the equipment and outpatient setting were last
16 inspected; and

17 (2) the physician submitted to inspection.

18 (c) The board may contract with another state agency or
19 qualified person to conduct the inspections.

20 (d) [~~(b)~~] Unless it would jeopardize an ongoing
21 investigation, the board shall provide at least five business days'
22 notice before conducting an on-site inspection under this section.

23 (e) The board shall maintain a record of the outpatient
24 settings in which physicians provide anesthesia.

25 (f) A physician who provides anesthesia in an outpatient
26 setting shall inform the board of any other physician with whom the
27 physician shares equipment used to administer anesthesia.

1 (g) [~~(e)~~] This section does not require the board to make an
2 on-site inspection of a physician's office.

3 SECTION 9. Chapter [162](#), Occupations Code, is amended by
4 adding Subchapter G to read as follows:

5 SUBCHAPTER G. GENERAL PRACTICE PROVISIONS

6 Sec. 162.301. DUTIES RELATED TO CERTAIN PRESCRIPTIONS. (a)
7 A physician may not prescribe a drug listed in Subsection (b) to a
8 patient unless the physician has reviewed the patient's
9 prescription history by accessing the prescription information
10 submitted to the Texas State Board of Pharmacy as authorized by
11 Section [481.076](#)(a)(5), Health and Safety Code.

12 (b) Subsection (a) applies only to the prescribing of:

- 13 (1) opioids;
14 (2) benzodiazepines;
15 (3) barbiturates; or
16 (4) carisoprodol.

17 (c) A physician is not subject to the requirements of
18 Subsection (a) if:

19 (1) the patient has been diagnosed with cancer or the
20 patient is receiving hospice care; and

21 (2) the physician clearly notes in the prescription
22 record that the patient was diagnosed with cancer or is receiving
23 hospice care, as applicable.

24 (d) Failure by a physician to comply with the requirements
25 of this section is grounds for disciplinary action under Section
26 [164.051](#).

27 SECTION 10. Section [164.0015](#)(d), Occupations Code, is

1 amended to read as follows:

2 (d) The board may not issue a remedial plan to resolve a
3 complaint against a license holder if the license holder has
4 [~~previously~~] entered into a remedial plan with the board in the
5 preceding five years [~~for the resolution of a different complaint~~
6 ~~relating to this subtitle~~].

7 SECTION 11. Section 164.003, Occupations Code, is amended
8 by amending Subsections (b) and (f) and adding Subsection (f-1) to
9 read as follows:

10 (b) Rules adopted under this section must require that:

11 (1) an informal meeting in compliance with Section
12 2001.054, Government Code, be scheduled not later than the 180th
13 day after the date the board's official investigation of the
14 complaint is commenced as provided by Section 154.057(b), unless
15 good cause is shown by the board for scheduling the informal meeting
16 after that date;

17 (2) the board give notice to the license holder of the
18 time and place of the meeting not later than the 45th day before the
19 date the meeting is held;

20 (3) the complainant and the license holder be provided
21 an opportunity to be heard;

22 (4) at least one of the board members or district
23 review committee members participating in the informal meeting as a
24 panelist be a member who represents the public;

25 (5) the board's legal counsel or a representative of
26 the attorney general be present to advise the board or the board's
27 staff; [~~and~~]

1 (6) a member of the board's staff be at the meeting to
2 present to the board's representative the facts the staff
3 reasonably believes it could prove by competent evidence or
4 qualified witnesses at a hearing; and

5 (7) if the complaint includes an allegation that the
6 license holder has violated the standard of care, the panel
7 conducting the informal proceeding consider whether the physician
8 was practicing complementary and alternative medicine.

9 (f) The notice required by Subsection (b)(2) must be
10 accompanied by a written statement of the nature of the allegations
11 and the information the board intends to use at the meeting. If the
12 board does not provide the statement or information at that time,
13 the license holder may use that failure as grounds for rescheduling
14 the informal meeting. If the complaint includes an allegation that
15 the license holder has violated the standard of care, the notice
16 must include a copy of each ~~[the]~~ report prepared by an ~~[the]~~ expert
17 physician reviewer under Section 154.0561. The license holder must
18 provide to the board the license holder's rebuttal at least 15
19 business days before the date of the meeting in order for the
20 information to be considered at the meeting.

21 (f-1) Before providing a report to a license holder under
22 Subsection (f), the board must redact any identifying information
23 of an expert physician reviewer other than the specialty of the
24 expert physician reviewer.

25 SECTION 12. Sections 164.005(a) and (c), Occupations Code,
26 are amended to read as follows:

27 (a) In this section, "formal complaint" means a written

1 statement made by a credible person [~~under oath~~] that is filed and
2 presented by a board representative charging a person with having
3 committed an act that, if proven, could affect the legal rights or
4 privileges of a license holder or other person under the board's
5 jurisdiction.

6 (c) A charge must [~~be in the form of a written affidavit~~
7 ~~that~~]:

8 (1) be [~~is~~] filed with the board's records custodian or
9 assistant records custodian; and

10 (2) detail [~~details~~] the nature of the charge as
11 required by this subtitle or other applicable law.

12 SECTION 13. Subchapter A, Chapter 164, Occupations Code, is
13 amended by adding Section 164.0105 to read as follows:

14 Sec. 164.0105. MONITORING HARMFUL PRESCRIBING PATTERNS.

15 (a) The board shall periodically check the prescribing information
16 submitted to the Texas State Board of Pharmacy as authorized by
17 Section 481.076(a)(1), Health and Safety Code, to determine whether
18 a physician is engaging in potentially harmful prescribing patterns
19 or practices.

20 (b) The board, in coordination with the Texas State Board of
21 Pharmacy, shall determine the conduct that constitutes a
22 potentially harmful prescribing pattern or practice for purposes of
23 Subsection (a). In determining the conduct that constitutes a
24 potentially harmful prescribing pattern or practice, the board
25 shall consider:

26 (1) the number of times a physician prescribes a drug
27 listed in Section 162.301(b); and

1 (2) for prescriptions described by Subdivision (1),
2 patterns of prescribing combinations of those drugs and other
3 dangerous combinations of drugs identified by the board.

4 (c) If the board suspects that a physician may be engaging
5 in potentially harmful prescribing patterns or practices, the board
6 may notify the physician of the potentially harmful prescribing
7 pattern or practice.

8 (d) The board may initiate a complaint against a physician
9 based on information obtained under this section.

10 SECTION 14. Chapter 167, Occupations Code, is amended by
11 adding Sections 167.012 and 167.013 to read as follows:

12 Sec. 167.012. MEMORANDUM OF UNDERSTANDING WITH BOARD. The
13 governing board and the board shall enter into a memorandum of
14 understanding to better coordinate services and operations of the
15 program. The memorandum of understanding must be adopted by rule
16 and:

17 (1) establish performance measures for the program,
18 including the number of participants who successfully complete the
19 program;

20 (2) include a list of services the board will provide
21 for the program; and

22 (3) require that an internal audit of the program be
23 conducted at least once every three years to ensure the program is
24 properly documenting and referring all noncompliance to the board.

25 Sec. 167.013. GIFTS, GRANTS, AND DONATIONS. In addition to
26 any fees paid to the board or money appropriated to the board for
27 the program, the governing board may receive and accept a gift,

1 grant, donation, or other thing of value from any source, including
2 the United States or a private source, for the program.

3 SECTION 15. Subchapter A, Chapter 168, Occupations Code, is
4 amended by adding Section 168.003 to read as follows:

5 Sec. 168.003. LEGISLATIVE FINDING. The legislature finds
6 that deaths resulting from the use of opioids and other controlled
7 substances constitute a public health crisis and that there is a
8 compelling state interest in the board closely regulating the
9 prescribing of opioids and other controlled substances by
10 physicians and their delegates. Accordingly, the legislature finds
11 that inspections and investigations conducted by the board,
12 including the board's use of subpoenas for immediate production,
13 inspection, and copying of medical and billing records, are
14 necessary to adequately regulate the prescribing of opioids and
15 other controlled substances in order to protect the public health
16 and welfare.

17 SECTION 16. Section 168.052, Occupations Code, is amended
18 to read as follows:

19 Sec. 168.052. INSPECTIONS. (a) The board may inspect a
20 pain management clinic certified under this chapter, including the
21 documents of a physician practicing at the clinic, as necessary to
22 ensure compliance with this chapter.

23 (b) The board may inspect a clinic or facility that is not
24 certified under this chapter to determine whether the clinic or
25 facility is required to be certified under Section 168.101. The
26 board by rule shall establish the grounds for conducting an
27 inspection under this subsection, including grounds based on:

1 (1) the population of patients served by the clinic or
2 facility;

3 (2) the volume or combination of drugs prescribed to
4 patients served by the clinic or facility; and

5 (3) any other criteria the board considers sufficient
6 to require an inspection of the clinic or facility.

7 SECTION 17. Section 168.201, Occupations Code, is amended
8 by adding Subsection (a-1) to read as follows:

9 (a-1) For the purposes of this section, inappropriate
10 prescribing includes nontherapeutic prescribing or other conduct
11 as specified by board rule.

12 SECTION 18. Subtitle B, Title 3, Occupations Code, is
13 amended by adding Chapter 170 to read as follows:

14 CHAPTER 170. INTERSTATE MEDICAL LICENSURE COMPACT

15 Sec. 170.001. INTERSTATE MEDICAL LICENSURE COMPACT. The
16 Interstate Medical Licensure Compact is enacted and entered into
17 with all other jurisdictions that legally join in the compact,
18 which reads as follows:

19 INTERSTATE MEDICAL LICENSURE COMPACT

20 SECTION 1. PURPOSE

21 In order to strengthen access to health care, and in
22 recognition of the advances in the delivery of health care, the
23 member states of the Interstate Medical Licensure Compact have
24 allied in common purpose to develop a comprehensive process that
25 complements the existing licensing and regulatory authority of
26 state medical boards, and provides a streamlined process that
27 allows physicians to become licensed in multiple states, thereby

1 enhancing the portability of a medical license and ensuring the
2 safety of patients. The Compact creates another pathway for
3 licensure and does not otherwise change a state's existing Medical
4 Practice Act. The Compact also adopts the prevailing standard for
5 licensure and affirms that the practice of medicine occurs where
6 the patient is located at the time of the physician-patient
7 encounter, and therefore, requires the physician to be under the
8 jurisdiction of the state medical board where the patient is
9 located. State medical boards that participate in the Compact
10 retain the jurisdiction to impose an adverse action against a
11 license to practice medicine in that state issued to a physician
12 through the procedures in the Compact.

13 SECTION 2. DEFINITIONS

14 In this compact:

15 (a) "Bylaws" means those bylaws established by the
16 Interstate Commission pursuant to Section 11 for its governance, or
17 for directing and controlling its actions and conduct.

18 (b) "Commissioner" means the voting representative
19 appointed by each member board pursuant to Section 11.

20 (c) "Conviction" means a finding by a court that an
21 individual is guilty of a criminal offense through adjudication, or
22 entry of a plea of guilt or no contest to the charge by the offender.
23 Evidence of an entry of a conviction of a criminal offense by the
24 court shall be considered final for purposes of disciplinary action
25 by a member board.

26 (d) "Expedited License" means a full and unrestricted
27 medical license granted by a member state to an eligible physician

1 through the process set forth in the Compact.

2 (e) "Interstate Commission" means the interstate commission
3 created pursuant to Section 11.

4 (f) "License" means authorization by a state for a physician
5 to engage in the practice of medicine, which would be unlawful
6 without the authorization.

7 (g) "Medical Practice Act" means laws and regulations
8 governing the practice of allopathic and osteopathic medicine
9 within a member state.

10 (h) "Member Board" means a state agency in a member state
11 that acts in the sovereign interests of the state by protecting the
12 public through licensure, regulation, and education of physicians
13 as directed by the state government.

14 (i) "Member State" means a state that has enacted the
15 Compact.

16 (j) "Practice of Medicine" means the clinical prevention,
17 diagnosis, or treatment of human disease, injury, or condition
18 requiring a physician to obtain and maintain a license in
19 compliance with the Medical Practice Act of a member state.

20 (k) "Physician" means any person who:

21 (1) Is a graduate of a medical school accredited by the
22 Liaison Committee on Medical Education, the Commission on
23 Osteopathic College Accreditation, or a medical school listed in
24 the International Medical Education Directory or its equivalent;

25 (2) Passed each component of the United States Medical
26 Licensing Examination (USMLE) or the Comprehensive Osteopathic
27 Medical Licensing Examination (COMLEX-USA) within three attempts,

1 or any of its predecessor examinations accepted by a state medical
2 board as an equivalent examination for licensure purposes;

3 (3) Successfully completed graduate medical education
4 approved by the Accreditation Council for Graduate Medical
5 Education or the American Osteopathic Association;

6 (4) Holds specialty certification or a time-unlimited
7 specialty certificate recognized by the American Board of Medical
8 Specialties or the American Osteopathic Association's Bureau of
9 Osteopathic Specialists;

10 (5) Possesses a full and unrestricted license to
11 engage in the practice of medicine issued by a member board;

12 (6) Has never been convicted, received adjudication,
13 deferred adjudication, community supervision, or deferred
14 disposition for any offense by a court of appropriate jurisdiction;

15 (7) Has never held a license authorizing the practice
16 of medicine subjected to discipline by a licensing agency in any
17 state, federal, or foreign jurisdiction, excluding any action
18 related to non-payment of fees related to a license;

19 (8) Has never had a controlled substance license or
20 permit suspended or revoked by a state or the United States Drug
21 Enforcement Administration; and

22 (9) Is not under active investigation by a licensing
23 agency or law enforcement authority in any state, federal, or
24 foreign jurisdiction.

25 (1) "Offense" means a felony, gross misdemeanor, or crime of
26 moral turpitude.

27 (m) "Rule" means a written statement by the Interstate

1 Commission promulgated pursuant to Section 12 of the Compact that
2 is of general applicability, implements, interprets, or prescribes
3 a policy or provision of the Compact, or an organizational,
4 procedural, or practice requirement of the Interstate Commission,
5 and has the force and effect of statutory law in a member state, and
6 includes the amendment, repeal, or suspension of an existing rule.

7 (n) "State" means any state, commonwealth, district, or
8 territory of the United States.

9 (o) "State of Principal License" means a member state where
10 a physician holds a license to practice medicine and which has been
11 designated as such by the physician for purposes of registration
12 and participation in the Compact.

13 SECTION 3. ELIGIBILITY

14 (a) A physician must meet the eligibility requirements as
15 defined in Section 2(k) to receive an expedited license under the
16 terms and provisions of the Compact.

17 (b) A physician who does not meet the requirements of
18 Section 2(k) may obtain a license to practice medicine in a member
19 state if the individual complies with all laws and requirements,
20 other than the Compact, relating to the issuance of a license to
21 practice medicine in that state.

22 SECTION 4. DESIGNATION OF STATE OF PRINCIPAL LICENSE

23 (a) A physician shall designate a member state as the state
24 of principal license for purposes of registration for expedited
25 licensure through the Compact if the physician possesses a full and
26 unrestricted license to practice medicine in that state, and the
27 state is:

1 (1) the state of primary residence for the physician,
2 or
3 (2) the state where at least 25 percent of the practice
4 of medicine occurs, or
5 (3) the location of the physician's employer, or
6 (4) if no state qualifies under subsection (1),
7 subsection (2), or subsection (3), the state designated as state of
8 residence for purpose of federal income tax.

9 (b) A physician may redesignate a member state as state of
10 principal license at any time, as long as the state meets the
11 requirements in subsection (a).

12 (c) The Interstate Commission is authorized to develop
13 rules to facilitate redesignation of another member state as the
14 state of principal license.

15 SECTION 5. APPLICATION AND ISSUANCE OF EXPEDITED LICENSURE

16 (a) A physician seeking licensure through the Compact shall
17 file an application for an expedited license with the member board
18 of the state selected by the physician as the state of principal
19 license.

20 (b) Upon receipt of an application for an expedited license,
21 the member board within the state selected as the state of principal
22 license shall evaluate whether the physician is eligible for
23 expedited licensure and issue a letter of qualification, verifying
24 or denying the physician's eligibility, to the Interstate
25 Commission.

26 (i) Static qualifications, which include verification
27 of medical education, graduate medical education, results of any

1 medical or licensing examination, and other qualifications as
2 determined by the Interstate Commission through rule, shall not be
3 subject to additional primary source verification where already
4 primary source verified by the state of principal license.

5 (ii) The member board within the state selected as the
6 state of principal license shall, in the course of verifying
7 eligibility, perform a criminal background check of an applicant,
8 including the use of the results of fingerprint or other biometric
9 data checks compliant with the requirements of the Federal Bureau
10 of Investigation, with the exception of federal employees who have
11 suitability determination in accordance with U.S. C.F.R. Section
12 731.202.

13 (iii) Appeal on the determination of eligibility shall
14 be made to the member state where the application was filed and
15 shall be subject to the law of that state.

16 (c) Upon verification in subsection (b), physicians
17 eligible for an expedited license shall complete the registration
18 process established by the Interstate Commission to receive a
19 license in a member state selected pursuant to subsection (a),
20 including the payment of any applicable fees.

21 (d) After receiving verification of eligibility under
22 subsection (b) and any fees under subsection (c), a member board
23 shall issue an expedited license to the physician. This license
24 shall authorize the physician to practice medicine in the issuing
25 state consistent with the Medical Practice Act and all applicable
26 laws and regulations of the issuing member board and member state.

27 (e) An expedited license shall be valid for a period

1 consistent with the licensure period in the member state and in the
2 same manner as required for other physicians holding a full and
3 unrestricted license within the member state.

4 (f) An expedited license obtained through the Compact shall
5 be terminated if a physician fails to maintain a license in the
6 state of principal licensure for a non-disciplinary reason, without
7 redesignation of a new state of principal licensure.

8 (g) The Interstate Commission is authorized to develop
9 rules regarding the application process, including payment of any
10 applicable fees, and the issuance of an expedited license.

11 SECTION 6. FEES FOR EXPEDITED LICENSURE

12 (a) A member state issuing an expedited license authorizing
13 the practice of medicine in that state may impose a fee for a
14 license issued or renewed through the Compact.

15 (b) The Interstate Commission is authorized to develop
16 rules regarding fees for expedited licenses.

17 SECTION 7. RENEWAL AND CONTINUED PARTICIPATION

18 (a) A physician seeking to renew an expedited license
19 granted in a member state shall complete a renewal process with the
20 Interstate Commission if the physician:

21 (1) Maintains a full and unrestricted license in a
22 state of principal license;

23 (2) Has not been convicted, received adjudication,
24 deferred adjudication, community supervision, or deferred
25 disposition for any offense by a court of appropriate jurisdiction;

26 (3) Has not had a license authorizing the practice of
27 medicine subject to discipline by a licensing agency in any state,

1 federal, or foreign jurisdiction, excluding any action related to
2 non-payment of fees related to a license; and

3 (4) Has not had a controlled substance license or
4 permit suspended or revoked by a state or the United States Drug
5 Enforcement Administration.

6 (b) Physicians shall comply with all continuing
7 professional development or continuing medical education
8 requirements for renewal of a license issued by a member state.

9 (c) The Interstate Commission shall collect any renewal
10 fees charged for the renewal of a license and distribute the fees to
11 the applicable member board.

12 (d) Upon receipt of any renewal fees collected in subsection
13 (c), a member board shall renew the physician's license.

14 (e) Physician information collected by the Interstate
15 Commission during the renewal process will be distributed to all
16 member boards.

17 (f) The Interstate Commission is authorized to develop
18 rules to address renewal of licenses obtained through the Compact.

19 SECTION 8. COORDINATED INFORMATION SYSTEM

20 (a) The Interstate Commission shall establish a database of
21 all physicians licensed, or who have applied for licensure, under
22 Section 5.

23 (b) Notwithstanding any other provision of law, member
24 boards shall report to the Interstate Commission any public action
25 or complaints against a licensed physician who has applied or
26 received an expedited license through the Compact.

27 (c) Member boards shall report disciplinary or

1 investigatory information determined as necessary and proper by
2 rule of the Interstate Commission.

3 (d) Member boards may report any non-public complaint,
4 disciplinary, or investigatory information not required by
5 subsection (c) to the Interstate Commission.

6 (e) Member boards shall share complaint or disciplinary
7 information about a physician upon request of another member board.

8 (f) All information provided to the Interstate Commission
9 or distributed by member boards shall be confidential, filed under
10 seal, and used only for investigatory or disciplinary matters.

11 (g) The Interstate Commission is authorized to develop
12 rules for mandated or discretionary sharing of information by
13 member boards.

14 SECTION 9. JOINT INVESTIGATIONS

15 (a) Licensure and disciplinary records of physicians are
16 deemed investigative.

17 (b) In addition to the authority granted to a member board
18 by its respective Medical Practice Act or other applicable state
19 law, a member board may participate with other member boards in
20 joint investigations of physicians licensed by the member boards.

21 (c) A subpoena issued by a member state shall be enforceable
22 in other member states.

23 (d) Member boards may share any investigative, litigation,
24 or compliance materials in furtherance of any joint or individual
25 investigation initiated under the Compact.

26 (e) Any member state may investigate actual or alleged
27 violations of the statutes authorizing the practice of medicine in

1 any other member state in which a physician holds a license to
2 practice medicine.

3 SECTION 10. DISCIPLINARY ACTIONS

4 (a) Any disciplinary action taken by any member board
5 against a physician licensed through the Compact shall be deemed
6 unprofessional conduct which may be subject to discipline by other
7 member boards, in addition to any violation of the Medical Practice
8 Act or regulations in that state.

9 (b) If a license granted to a physician by the member board
10 in the state of principal license is revoked, surrendered or
11 relinquished in lieu of discipline, or suspended, then all licenses
12 issued to the physician by member boards shall automatically be
13 placed, without further action necessary by any member board, on
14 the same status. If the member board in the state of principal
15 license subsequently reinstates the physician's license, a license
16 issued to the physician by any other member board shall remain
17 encumbered until that respective member board takes action to
18 reinstate the license in a manner consistent with the Medical
19 Practice Act of that state.

20 (c) If disciplinary action is taken against a physician by a
21 member board not in the state of principal license, any other member
22 board may deem the action conclusive as to matter of law and fact
23 decided, and:

24 (i) impose the same or lesser sanction(s) against the
25 physician so long as such sanctions are consistent with the Medical
26 Practice Act of that state;

27 (ii) or pursue separate disciplinary action against

1 the physician under its respective Medical Practice Act, regardless
2 of the action taken in other member states.

3 (d) If a license granted to a physician by a member board is
4 revoked, surrendered or relinquished in lieu of discipline, or
5 suspended, then any license(s) issued to the physician by any other
6 member board(s) shall be suspended, automatically and immediately
7 without further action necessary by the other member board(s), for
8 ninety (90) days upon entry of the order by the disciplining board,
9 to permit the member board(s) to investigate the basis for the
10 action under the Medical Practice Act of that state. A member board
11 may terminate the automatic suspension of the license it issued
12 prior to the completion of the ninety (90) day suspension period in
13 a manner consistent with the Medical Practice Act of that state.

14 SECTION 11. INTERSTATE MEDICAL LICENSURE COMPACT
15 COMMISSION

16 (a) The member states hereby create the "Interstate Medical
17 Licensure Compact Commission".

18 (b) The purpose of the Interstate Commission is the
19 administration of the Interstate Medical Licensure Compact, which
20 is a discretionary state function.

21 (c) The Interstate Commission shall be a body corporate and
22 joint agency of the member states and shall have all the
23 responsibilities, powers, and duties set forth in the Compact, and
24 such additional powers as may be conferred upon it by a subsequent
25 concurrent action of the respective legislatures of the member
26 states in accordance with the terms of the Compact.

27 (d) The Interstate Commission shall consist of two voting

1 representatives appointed by each member state who shall serve as
2 Commissioners. In states where allopathic and osteopathic
3 physicians are regulated by separate member boards, or if the
4 licensing and disciplinary authority is split between multiple
5 member boards within a member state, the member state shall appoint
6 one representative from each member board. A Commissioner shall be
7 a(n):

8 (1) Allopathic or osteopathic physician appointed to a
9 member board;

10 (2) Executive director, executive secretary, or
11 similar executive of a member board; or

12 (3) Member of the public appointed to a member board.

13 (e) The Interstate Commission shall meet at least once each
14 calendar year. A portion of this meeting shall be a business
15 meeting to address such matters as may properly come before the
16 Commission, including the election of officers. The chairperson
17 may call additional meetings and shall call for a meeting upon the
18 request of a majority of the member states.

19 (f) The bylaws may provide for meetings of the Interstate
20 Commission to be conducted by telecommunication or electronic
21 communication.

22 (g) Each Commissioner participating at a meeting of the
23 Interstate Commission is entitled to one vote. A majority of
24 Commissioners shall constitute a quorum for the transaction of
25 business, unless a larger quorum is required by the bylaws of the
26 Interstate Commission. A Commissioner shall not delegate a vote to
27 another Commissioner. In the absence of its Commissioner, a member

1 state may delegate voting authority for a specified meeting to
2 another person from that state who shall meet the requirements of
3 subsection (d).

4 (h) The Interstate Commission shall provide public notice
5 of all meetings and all meetings shall be open to the public. The
6 Interstate Commission may close a meeting, in full or in portion,
7 where it determines by a two-thirds vote of the Commissioners
8 present that an open meeting would be likely to:

9 (1) Relate solely to the internal personnel practices
10 and procedures of the Interstate Commission;

11 (2) Discuss matters specifically exempted from
12 disclosure by federal statute;

13 (3) Discuss trade secrets, commercial, or financial
14 information that is privileged or confidential;

15 (4) Involve accusing a person of a crime, or formally
16 censuring a person;

17 (5) Discuss information of a personal nature where
18 disclosure would constitute a clearly unwarranted invasion of
19 personal privacy;

20 (6) Discuss investigative records compiled for law
21 enforcement purposes; or

22 (7) Specifically relate to the participation in a
23 civil action or other legal proceeding.

24 (i) The Interstate Commission shall keep minutes which
25 shall fully describe all matters discussed in a meeting and shall
26 provide a full and accurate summary of actions taken, including
27 record of any roll call votes.

1 (j) The Interstate Commission shall make its information
2 and official records, to the extent not otherwise designated in the
3 Compact or by its rules, available to the public for inspection.

4 (k) The Interstate Commission shall establish an executive
5 committee, which shall include officers, members, and others as
6 determined by the bylaws. The executive committee shall have the
7 power to act on behalf of the Interstate Commission, with the
8 exception of rulemaking, during periods when the Interstate
9 Commission is not in session. When acting on behalf of the
10 Interstate Commission, the executive committee shall oversee the
11 administration of the Compact including enforcement and compliance
12 with the provisions of the Compact, its bylaws and rules, and other
13 such duties as necessary.

14 (l) The Interstate Commission may establish other
15 committees for governance and administration of the Compact.

16 SECTION 12. POWERS AND DUTIES OF THE INTERSTATE COMMISSION

17 The Interstate Commission shall have the duty and power to:

18 (a) Oversee and maintain the administration of the Compact;

19 (b) Promulgate rules which shall be binding to the extent
20 and in the manner provided for in the Compact;

21 (c) Issue, upon the request of a member state or member
22 board, advisory opinions concerning the meaning or interpretation
23 of the Compact, its bylaws, rules, and actions;

24 (d) Enforce compliance with Compact provisions, the rules
25 promulgated by the Interstate Commission, and the bylaws, using all
26 necessary and proper means, including but not limited to the use of
27 judicial process;

1 (e) Establish and appoint committees including, but not
2 limited to, an executive committee as required by Section 11, which
3 shall have the power to act on behalf of the Interstate Commission
4 in carrying out its powers and duties;

5 (f) Pay, or provide for the payment of the expenses related
6 to the establishment, organization, and ongoing activities of the
7 Interstate Commission;

8 (g) Establish and maintain one or more offices;

9 (h) Borrow, accept, hire, or contract for services of
10 personnel;

11 (i) Purchase and maintain insurance and bonds;

12 (j) Employ an executive director who shall have such powers
13 to employ, select or appoint employees, agents, or consultants, and
14 to determine their qualifications, define their duties, and fix
15 their compensation;

16 (k) Establish personnel policies and programs relating to
17 conflicts of interest, rates of compensation, and qualifications of
18 personnel;

19 (l) Accept donations and grants of money, equipment,
20 supplies, materials and services, and to receive, utilize, and
21 dispose of it in a manner consistent with the conflict of interest
22 policies established by the Interstate Commission;

23 (m) Lease, purchase, accept contributions or donations of,
24 or otherwise to own, hold, improve or use, any property, real,
25 personal, or mixed;

26 (n) Sell, convey, mortgage, pledge, lease, exchange,
27 abandon, or otherwise dispose of any property, real, personal, or

1 mixed;

2 (o) Establish a budget and make expenditures;

3 (p) Adopt a seal and bylaws governing the management and
4 operation of the Interstate Commission;

5 (q) Report annually to the legislatures and governors of the
6 member states concerning the activities of the Interstate
7 Commission during the preceding year. Such reports shall also
8 include reports of financial audits and any recommendations that
9 may have been adopted by the Interstate Commission;

10 (r) Coordinate education, training, and public awareness
11 regarding the Compact, its implementation, and its operation;

12 (s) Maintain records in accordance with the bylaws;

13 (t) Seek and obtain trademarks, copyrights, and patents;

14 and

15 (u) Perform such functions as may be necessary or
16 appropriate to achieve the purposes of the Compact.

17 SECTION 13. FINANCE POWERS

18 (a) The Interstate Commission may levy on and collect an
19 annual assessment from each member state to cover the cost of the
20 operations and activities of the Interstate Commission and its
21 staff. The total assessment must be sufficient to cover the annual
22 budget approved each year for which revenue is not provided by other
23 sources. The aggregate annual assessment amount shall be allocated
24 upon a formula to be determined by the Interstate Commission, which
25 shall promulgate a rule binding upon all member states.

26 (b) The Interstate Commission shall not incur obligations
27 of any kind prior to securing the funds adequate to meet the same.

1 (c) The Interstate Commission shall not pledge the credit of
2 any of the member states, except by, and with the authority of, the
3 member state.

4 (d) The Interstate Commission shall be subject to a yearly
5 financial audit conducted by a certified or licensed public
6 accountant and the report of the audit shall be included in the
7 annual report of the Interstate Commission.

8 SECTION 14. ORGANIZATION AND OPERATION OF THE INTERSTATE
9 COMMISSION

10 (a) The Interstate Commission shall, by a majority of
11 Commissioners present and voting, adopt bylaws to govern its
12 conduct as may be necessary or appropriate to carry out the purposes
13 of the Compact within twelve (12) months of the first Interstate
14 Commission meeting.

15 (b) The Interstate Commission shall elect or appoint
16 annually from among its Commissioners a chairperson, a
17 vice-chairperson, and a treasurer, each of whom shall have such
18 authority and duties as may be specified in the bylaws. The
19 chairperson, or in the chairperson's absence or disability, the
20 vice-chairperson, shall preside at all meetings of the Interstate
21 Commission.

22 (c) Officers selected in subsection (b) shall serve without
23 remuneration from the Interstate Commission.

24 (d) The officers and employees of the Interstate Commission
25 shall be immune from suit and liability, either personally or in
26 their official capacity, for a claim for damage to or loss of
27 property or personal injury or other civil liability caused or

1 arising out of, or relating to, an actual or alleged act, error, or
2 omission that occurred, or that such person had a reasonable basis
3 for believing occurred, within the scope of Interstate Commission
4 employment, duties, or responsibilities; provided that such person
5 shall not be protected from suit or liability for damage, loss,
6 injury, or liability caused by the intentional or willful and
7 wanton misconduct of such person.

8 (1) The liability of the executive director and
9 employees of the Interstate Commission or representatives of the
10 Interstate Commission, acting within the scope of such person's
11 employment or duties for acts, errors, or omissions occurring
12 within such person's state, may not exceed the limits of liability
13 set forth under the constitution and laws of that state for state
14 officials, employees, and agents. The Interstate Commission is
15 considered to be an instrumentality of the states for the purposes
16 of any such action. Nothing in this subsection shall be construed
17 to protect such person from suit or liability for damage, loss,
18 injury, or liability caused by the intentional or willful and
19 wanton misconduct of such person.

20 (2) The Interstate Commission shall defend the
21 executive director, its employees, and subject to the approval of
22 the attorney general or other appropriate legal counsel of the
23 member state represented by an Interstate Commission
24 representative, shall defend such Interstate Commission
25 representative in any civil action seeking to impose liability
26 arising out of an actual or alleged act, error or omission that
27 occurred within the scope of Interstate Commission employment,

1 duties or responsibilities, or that the defendant had a reasonable
2 basis for believing occurred within the scope of Interstate
3 Commission employment, duties, or responsibilities, provided that
4 the actual or alleged act, error, or omission did not result from
5 intentional or willful and wanton misconduct on the part of such
6 person.

7 (3) To the extent not covered by the state involved,
8 member state, or the Interstate Commission, the representatives or
9 employees of the Interstate Commission shall be held harmless in
10 the amount of a settlement or judgment, including attorney's fees
11 and costs, obtained against such persons arising out of an actual or
12 alleged act, error, or omission that occurred within the scope of
13 Interstate Commission employment, duties, or responsibilities, or
14 that such persons had a reasonable basis for believing occurred
15 within the scope of Interstate Commission employment, duties, or
16 responsibilities, provided that the actual or alleged act, error,
17 or omission did not result from intentional or willful and wanton
18 misconduct on the part of such persons.

19 SECTION 15. RULEMAKING FUNCTIONS OF THE INTERSTATE
20 COMMISSION

21 (a) The Interstate Commission shall promulgate reasonable
22 rules in order to effectively and efficiently achieve the purposes
23 of the Compact. Notwithstanding the foregoing, in the event the
24 Interstate Commission exercises its rulemaking authority in a
25 manner that is beyond the scope of the purposes of the Compact, or
26 the powers granted hereunder, then such an action by the Interstate
27 Commission shall be invalid and have no force or effect.

1 (b) Rules deemed appropriate for the operations of the
2 Interstate Commission shall be made pursuant to a rulemaking
3 process that substantially conforms to the "Model State
4 Administrative Procedure Act" of 2010, and subsequent amendments
5 thereto.

6 (c) Not later than thirty (30) days after a rule is
7 promulgated, any person may file a petition for judicial review of
8 the rule in the United States District Court for the District of
9 Columbia or the federal district where the Interstate Commission
10 has its principal offices, provided that the filing of such a
11 petition shall not stay or otherwise prevent the rule from becoming
12 effective unless the court finds that the petitioner has a
13 substantial likelihood of success. The court shall give deference
14 to the actions of the Interstate Commission consistent with
15 applicable law and shall not find the rule to be unlawful if the
16 rule represents a reasonable exercise of the authority granted to
17 the Interstate Commission.

18 SECTION 16. OVERSIGHT OF INTERSTATE COMPACT

19 (a) The executive, legislative, and judicial branches of
20 state government in each member state shall enforce the Compact and
21 shall take all actions necessary and appropriate to effectuate the
22 Compact's purposes and intent. The provisions of the Compact and
23 the rules promulgated hereunder shall have standing as statutory
24 law but shall not override existing state authority to regulate the
25 practice of medicine.

26 (b) All courts shall take judicial notice of the Compact and
27 the rules in any judicial or administrative proceeding in a member

1 state pertaining to the subject matter of the Compact which may
2 affect the powers, responsibilities or actions of the Interstate
3 Commission.

4 (c) The Interstate Commission shall be entitled to receive
5 all service of process in any such proceeding, and shall have
6 standing to intervene in the proceeding for all purposes. Failure
7 to provide service of process to the Interstate Commission shall
8 render a judgment or order void as to the Interstate Commission, the
9 Compact, or promulgated rules.

10 SECTION 17. ENFORCEMENT OF INTERSTATE COMPACT

11 (a) The Interstate Commission, in the reasonable exercise
12 of its discretion, shall enforce the provisions and rules of the
13 Compact.

14 (b) The Interstate Commission may, by majority vote of the
15 Commissioners, initiate legal action in the United States District
16 Court for the District of Columbia, or, at the discretion of the
17 Interstate Commission, in the federal district where the Interstate
18 Commission has its principal offices, to enforce compliance with
19 the provisions of the Compact, and its promulgated rules and
20 bylaws, against a member state in default. The relief sought may
21 include both injunctive relief and damages. In the event judicial
22 enforcement is necessary, the prevailing party shall be awarded all
23 costs of such litigation including reasonable attorney's fees.

24 (c) The remedies herein shall not be the exclusive remedies
25 of the Interstate Commission. The Interstate Commission may avail
26 itself of any other remedies available under state law or the
27 regulation of a profession.

1 SECTION 18. DEFAULT PROCEDURES

2 (a) The grounds for default include, but are not limited to,
3 failure of a member state to perform such obligations or
4 responsibilities imposed upon it by the Compact, or the rules and
5 bylaws of the Interstate Commission promulgated under the Compact.

6 (b) If the Interstate Commission determines that a member
7 state has defaulted in the performance of its obligations or
8 responsibilities under the Compact, or the bylaws or promulgated
9 rules, the Interstate Commission shall:

10 (1) Provide written notice to the defaulting state and
11 other member states, of the nature of the default, the means of
12 curing the default, and any action taken by the Interstate
13 Commission. The Interstate Commission shall specify the conditions
14 by which the defaulting state must cure its default; and

15 (2) Provide remedial training and specific technical
16 assistance regarding the default.

17 (c) If the defaulting state fails to cure the default, the
18 defaulting state shall be terminated from the Compact upon an
19 affirmative vote of a majority of the Commissioners and all rights,
20 privileges, and benefits conferred by the Compact shall terminate
21 on the effective date of termination. A cure of the default does not
22 relieve the offending state of obligations or liabilities incurred
23 during the period of the default.

24 (d) Termination of membership in the Compact shall be
25 imposed only after all other means of securing compliance have been
26 exhausted. Notice of intent to terminate shall be given by the
27 Interstate Commission to the governor, the majority and minority

1 leaders of the defaulting state's legislature, and each of the
2 member states.

3 (e) The Interstate Commission shall establish rules and
4 procedures to address licenses and physicians that are materially
5 impacted by the termination of a member state, or the withdrawal of
6 a member state.

7 (f) The member state which has been terminated is
8 responsible for all dues, obligations, and liabilities incurred
9 through the effective date of termination including obligations,
10 the performance of which extends beyond the effective date of
11 termination.

12 (g) The Interstate Commission shall not bear any costs
13 relating to any state that has been found to be in default or which
14 has been terminated from the Compact, unless otherwise mutually
15 agreed upon in writing between the Interstate Commission and the
16 defaulting state.

17 (h) The defaulting state may appeal the action of the
18 Interstate Commission by petitioning the United States District
19 Court for the District of Columbia or the federal district where the
20 Interstate Commission has its principal offices. The prevailing
21 party shall be awarded all costs of such litigation including
22 reasonable attorney's fees.

23 SECTION 19. DISPUTE RESOLUTION

24 (a) The Interstate Commission shall attempt, upon the
25 request of a member state, to resolve disputes which are subject to
26 the Compact and which may arise among member states or member
27 boards.

1 (b) The Interstate Commission shall promulgate rules
2 providing for both mediation and binding dispute resolution as
3 appropriate.

4 SECTION 20. MEMBER STATES, EFFECTIVE DATE AND AMENDMENT

5 (a) Any state is eligible to become a member state of the
6 Compact.

7 (b) The Compact shall become effective and binding upon
8 legislative enactment of the Compact into law by no less than seven
9 (7) states. Thereafter, it shall become effective and binding on a
10 state upon enactment of the Compact into law by that state.

11 (c) The governors of non-member states, or their designees,
12 shall be invited to participate in the activities of the Interstate
13 Commission on a non-voting basis prior to adoption of the Compact by
14 all states.

15 (d) The Interstate Commission may propose amendments to the
16 Compact for enactment by the member states. No amendment shall
17 become effective and binding upon the Interstate Commission and the
18 member states unless and until it is enacted into law by unanimous
19 consent of the member states.

20 SECTION 21. WITHDRAWAL

21 (a) Once effective, the Compact shall continue in force and
22 remain binding upon each and every member state; provided that a
23 member state may withdraw from the Compact by specifically
24 repealing the statute which enacted the Compact into law.

25 (b) Withdrawal from the Compact shall be by the enactment of
26 a statute repealing the same, but shall not take effect until one
27 (1) year after the effective date of such statute and until written

1 notice of the withdrawal has been given by the withdrawing state to
2 the governor of each other member state.

3 (c) The withdrawing state shall immediately notify the
4 chairperson of the Interstate Commission in writing upon the
5 introduction of legislation repealing the Compact in the
6 withdrawing state.

7 (d) The Interstate Commission shall notify the other member
8 states of the withdrawing state's intent to withdraw within sixty
9 (60) days of its receipt of notice provided under subsection (c).

10 (e) The withdrawing state is responsible for all dues,
11 obligations and liabilities incurred through the effective date of
12 withdrawal, including obligations, the performance of which extend
13 beyond the effective date of withdrawal.

14 (f) Reinstatement following withdrawal of a member state
15 shall occur upon the withdrawing state reenacting the Compact or
16 upon such later date as determined by the Interstate Commission.

17 (g) The Interstate Commission is authorized to develop
18 rules to address the impact of the withdrawal of a member state on
19 licenses granted in other member states to physicians who
20 designated the withdrawing member state as the state of principal
21 license.

22 SECTION 22. DISSOLUTION

23 (a) The Compact shall dissolve effective upon the date of
24 the withdrawal or default of the member state which reduces the
25 membership in the Compact to one (1) member state.

26 (b) Upon the dissolution of the Compact, the Compact becomes
27 null and void and shall be of no further force or effect, and the

1 business and affairs of the Interstate Commission shall be
2 concluded and surplus funds shall be distributed in accordance with
3 the bylaws.

4 SECTION 23. SEVERABILITY AND CONSTRUCTION

5 (a) The provisions of the Compact shall be severable, and if
6 any phrase, clause, sentence, or provision is deemed unenforceable,
7 the remaining provisions of the Compact shall be enforceable.

8 (b) The provisions of the Compact shall be liberally
9 construed to effectuate its purposes.

10 (c) Nothing in the Compact shall be construed to prohibit
11 the applicability of other interstate compacts to which the states
12 are members.

13 SECTION 24. BINDING EFFECT OF COMPACT AND OTHER LAWS

14 (a) Nothing herein prevents the enforcement of any other law
15 of a member state that is not inconsistent with the Compact.

16 (b) All laws in a member state in conflict with the Compact
17 are superseded to the extent of the conflict.

18 (c) All lawful actions of the Interstate Commission,
19 including all rules and bylaws promulgated by the Commission, are
20 binding upon the member states.

21 (d) All agreements between the Interstate Commission and
22 the member states are binding in accordance with their terms.

23 (e) In the event any provision of the Compact exceeds the
24 constitutional limits imposed on the legislature of any member
25 state, such provision shall be ineffective to the extent of the
26 conflict with the constitutional provision in question in that
27 member state.

1 Sec. 170.002. RULES. The board may adopt rules necessary to
2 implement this chapter.

3 Sec. 170.003. COLLECTION OF FINGERPRINTS FOR EXPEDITED
4 LICENSE; DISSEMINATION OF INFORMATION. (a) The board may require
5 an applicant for an expedited license under the Interstate Medical
6 Licensure Compact to submit a set of fingerprints to the board for
7 the purpose of performing a criminal history record information
8 check to qualify the applicant for the expedited license.

9 (b) The board may not disseminate information obtained from
10 a criminal history record information check described by Subsection
11 (a) except as authorized by law.

12 SECTION 19. Subchapter B, Chapter 204, Occupations Code, is
13 amended by adding Section 204.0585 to read as follows:

14 Sec. 204.0585. EXECUTIVE SESSION. After hearing all
15 evidence and arguments in an open meeting, the physician assistant
16 board may conduct deliberations relating to a license application
17 or disciplinary action in an executive session. The board shall
18 vote and announce its decision in open session.

19 SECTION 20. Section 204.059, Occupations Code, is amended
20 by amending Subsection (b) and adding Subsection (d) to read as
21 follows:

22 (b) The training program must provide the person with
23 information regarding:

24 (1) the law governing physician assistant board
25 operations;

26 (2) the [~~this chapter and the physician assistant~~
27 ~~board's~~] programs, functions, rules, and budget of the physician

1 assistant board;

2 (3) the scope of and limitations on the rulemaking
3 authority of the physician assistant board;

4 (4) [~~(2)~~] the results of the most recent formal audit
5 of the physician assistant board;

6 (5) [~~(3)~~] the requirements of:

7 (A) laws relating to open meetings, public
8 information, administrative procedure, and disclosing conflicts of
9 interest; and

10 (B) other laws applicable to members of the
11 physician assistant board in performing their duties; and

12 (6) [~~(4)~~] any applicable ethics policies adopted by
13 the physician assistant board or the Texas Ethics Commission.

14 (d) The executive director of the medical board shall create
15 a training manual that includes the information required by
16 Subsection (b). The executive director shall distribute a copy of
17 the training manual annually to each physician assistant board
18 member. On receipt of the training manual, each board member shall
19 sign and submit to the executive director a statement acknowledging
20 receipt of the training manual.

21 SECTION 21. Subchapter D, Chapter 204, Occupations Code, is
22 amended by adding Section 204.1525 to read as follows:

23 Sec. 204.1525. CRIMINAL HISTORY RECORD INFORMATION
24 REQUIREMENT FOR LICENSE ISSUANCE. (a) The physician assistant
25 board shall require that an applicant for a license submit a
26 complete and legible set of fingerprints, on a form prescribed by
27 the board, to the board or to the Department of Public Safety for

1 the purpose of obtaining criminal history record information from
2 the Department of Public Safety and the Federal Bureau of
3 Investigation.

4 (b) The physician assistant board may not issue a license to
5 a person who does not comply with the requirement of Subsection (a).

6 (c) The physician assistant board shall conduct a criminal
7 history record information check of each applicant for a license
8 using information:

9 (1) provided by the individual under this section; and

10 (2) made available to the board by the Department of
11 Public Safety, the Federal Bureau of Investigation, and any other
12 criminal justice agency under Chapter 411, Government Code.

13 (d) The physician assistant board may:

14 (1) enter into an agreement with the Department of
15 Public Safety to administer a criminal history record information
16 check required under this section; and

17 (2) authorize the Department of Public Safety to
18 collect from each applicant the costs incurred by the Department of
19 Public Safety in conducting the criminal history record information
20 check.

21 SECTION 22. Section 204.153(a), Occupations Code, is
22 amended to read as follows:

23 (a) To be eligible for a license under this chapter, an
24 applicant must:

25 (1) successfully complete an educational program for
26 physician assistants or surgeon assistants accredited by the
27 Committee on Allied Health Education and Accreditation or by that

1 committee's predecessor or successor entities;

2 (2) pass the Physician Assistant National Certifying
3 Examination administered by the National Commission on
4 Certification of Physician Assistants;

5 (3) hold a certificate issued by the National
6 Commission on Certification of Physician Assistants;

7 (4) [~~be of good moral character,~~

8 [~~(5)~~] meet any other requirement established by
9 physician assistant board rule; and

10 (5) [~~(6)~~] pass a jurisprudence examination approved
11 by the physician assistant board as provided by Subsection (a-1).

12 SECTION 23. Section 204.156, Occupations Code, is amended
13 by amending Subsection (a) and adding Subsection (a-1) to read as
14 follows:

15 (a) A license issued under this chapter is valid for a term
16 of one or two years, as determined by physician assistant board
17 rule.

18 (a-1) On notification from the physician assistant board, a
19 person who holds a license under this chapter may renew the license
20 by:

21 (1) paying the required renewal fee;

22 (2) submitting the appropriate form; and

23 (3) meeting any other requirement established by board
24 rule.

25 SECTION 24. Subchapter D, Chapter 204, Occupations Code, is
26 amended by adding Section 204.1561 to read as follows:

27 Sec. 204.1561. CRIMINAL HISTORY RECORD INFORMATION

1 REQUIREMENT FOR RENEWAL. (a) An applicant for renewal of a license
2 issued under this chapter shall submit a complete and legible set of
3 fingerprints for purposes of performing a criminal history record
4 information check of the applicant as provided by Section 204.1525.

5 (b) The physician assistant board may administratively
6 suspend or refuse to renew the license of a person who does not
7 comply with the requirement of Subsection (a).

8 (c) A license holder is not required to submit fingerprints
9 under this section for the renewal of the license if the holder has
10 previously submitted fingerprints under:

11 (1) Section 204.1525 for the initial issuance of the
12 license; or

13 (2) this section as part of a prior renewal of a
14 license.

15 SECTION 25. Subchapter D, Chapter 204, Occupations Code, is
16 amended by adding Section 204.158 to read as follows:

17 Sec. 204.158. REFUSAL FOR VIOLATION OF BOARD ORDER. The
18 physician assistant board may refuse to renew a license issued
19 under this chapter if the license holder is in violation of a
20 physician assistant board order.

21 SECTION 26. Subchapter E, Chapter 204, Occupations Code, is
22 amended by adding Section 204.210 to read as follows:

23 Sec. 204.210. DUTIES RELATED TO CERTAIN PRESCRIPTIONS. (a)
24 A physician assistant authorized to prescribe a drug may not
25 prescribe a drug listed in Subsection (b) to a patient unless the
26 physician assistant has reviewed the patient's prescription
27 history by accessing the prescription information submitted to the

1 Texas State Board of Pharmacy as authorized by Section
2 481.076(a)(5), Health and Safety Code.

3 (b) Subsection (a) applies only to the prescribing of:

4 (1) opioids;

5 (2) benzodiazepines;

6 (3) barbiturates; or

7 (4) carisoprodol.

8 (c) A physician assistant is not subject to the requirements
9 of Subsection (a) if:

10 (1) the patient has been diagnosed with cancer or the
11 patient is receiving hospice care; and

12 (2) the physician assistant clearly notes in the
13 prescription record that the patient was diagnosed with cancer or
14 is receiving hospice care, as applicable.

15 (d) Failure by a physician assistant to comply with the
16 requirements of this section is grounds for disciplinary action
17 under Section 204.301.

18 SECTION 27. Subchapter G, Chapter 204, Occupations Code, is
19 amended by adding Section 204.305 to read as follows:

20 Sec. 204.305. MONITORING HARMFUL PRESCRIBING PATTERNS. (a)
21 The physician assistant board shall periodically check the
22 prescribing information submitted to the Texas State Board of
23 Pharmacy as authorized by Section 481.076(a)(1), Health and Safety
24 Code, to determine whether a physician assistant licensed under
25 this chapter is engaging in potentially harmful prescribing
26 patterns or practices.

27 (b) The physician assistant board, in coordination with the

1 Texas State Board of Pharmacy, shall determine the conduct that
2 constitutes a potentially harmful prescribing pattern or practice
3 for purposes of Subsection (a). In determining the conduct that
4 constitutes a potentially harmful prescribing pattern or practice,
5 the physician assistant board shall consider:

6 (1) the number of times a physician assistant
7 prescribes a drug listed in Section 204.210(b); and

8 (2) for prescriptions described by Subdivision (1),
9 patterns of prescribing combinations of those drugs and other
10 dangerous combinations of drugs identified by the physician
11 assistant board.

12 (c) If the physician assistant board suspects that a
13 physician assistant may be engaging in potentially harmful
14 prescribing patterns or practices, the physician assistant board
15 may notify the physician assistant of the potentially harmful
16 prescribing pattern or practice.

17 (d) The physician assistant board may initiate a complaint
18 against a physician assistant based on information obtained under
19 this section.

20 SECTION 28. Section 204.313(a), Occupations Code, is
21 amended to read as follows:

22 (a) In an informal meeting under Section 204.312, at least
23 two panelists shall be appointed to determine whether an informal
24 disposition is appropriate. At least one of the panelists must be a
25 licensed physician assistant.

26 SECTION 29. Section 205.057, Occupations Code, is amended
27 by amending Subsection (b) and adding Subsection (d) to read as

1 follows:

2 (b) The training program must provide the person with
3 information regarding:

4 (1) the law governing acupuncture board operations
5 ~~[this chapter];~~

6 (2) the programs, ~~[operated by the acupuncture board,~~
7 ~~[(3) the role and]~~ functions, rules, and budget of the
8 acupuncture board;

9 (3) ~~[(4)]~~ the scope of and limitations on the
10 rulemaking authority ~~[rules]~~ of the acupuncture board;

11 (4) ~~[(5) the current budget for the acupuncture board,~~
12 ~~[(6)]~~ the results of the most recent formal audit of
13 the acupuncture board;

14 (5) ~~[(7)]~~ the requirements of:

15 (A) laws relating to open meetings, public
16 information, administrative procedure, and disclosing conflicts of
17 interest; and

18 (B) other laws applicable to members of the
19 acupuncture board in performing their duties; and

20 (6) ~~[(8)]~~ any applicable ethics policies adopted by
21 the acupuncture board or the Texas Ethics Commission.

22 (d) The executive director shall create a training manual
23 that includes the information required by Subsection (b). The
24 executive director shall distribute a copy of the training manual
25 annually to each acupuncture board member. On receipt of the
26 training manual, each board member shall sign and submit to the
27 executive director a statement acknowledging receipt of the

1 training manual.

2 SECTION 30. Subchapter E, Chapter 205, Occupations Code, is
3 amended by adding Section 205.2025 to read as follows:

4 Sec. 205.2025. CRIMINAL HISTORY RECORD INFORMATION
5 REQUIREMENT FOR LICENSE ISSUANCE. (a) The acupuncture board shall
6 require that an applicant for a license submit a complete and
7 legible set of fingerprints, on a form prescribed by the board, to
8 the board or to the Department of Public Safety for the purpose of
9 obtaining criminal history record information from the Department
10 of Public Safety and the Federal Bureau of Investigation.

11 (b) The acupuncture board may not issue a license to a
12 person who does not comply with the requirement of Subsection (a).

13 (c) The acupuncture board shall conduct a criminal history
14 record information check of each applicant for a license using
15 information:

16 (1) provided by the individual under this section; and

17 (2) made available to the board by the Department of
18 Public Safety, the Federal Bureau of Investigation, and any other
19 criminal justice agency under Chapter 411, Government Code.

20 (d) The acupuncture board may:

21 (1) enter into an agreement with the Department of
22 Public Safety to administer a criminal history record information
23 check required under this section; and

24 (2) authorize the Department of Public Safety to
25 collect from each applicant the costs incurred by the Department of
26 Public Safety in conducting the criminal history record information
27 check.

1 SECTION 31. The heading to Section 205.251, Occupations
2 Code, is amended to read as follows:

3 Sec. 205.251. [~~ANNUAL~~] RENEWAL REQUIRED.

4 SECTION 32. Section 205.251(a), Occupations Code, is
5 amended to read as follows:

6 (a) The medical board by rule shall provide for the annual
7 or biennial renewal of a license to practice acupuncture.

8 SECTION 33. Subchapter F, Chapter 205, Occupations Code, is
9 amended by adding Section 205.2515 to read as follows:

10 Sec. 205.2515. CRIMINAL HISTORY RECORD INFORMATION
11 REQUIREMENT FOR RENEWAL. (a) An applicant for renewal of a license
12 issued under this chapter shall submit a complete and legible set of
13 fingerprints for purposes of performing a criminal history record
14 information check of the applicant as provided by Section 205.2025.

15 (b) The acupuncture board may administratively suspend or
16 refuse to renew the license of a person who does not comply with the
17 requirement of Subsection (a).

18 (c) A license holder is not required to submit fingerprints
19 under this section for the renewal of the license if the holder has
20 previously submitted fingerprints under:

21 (1) Section 205.2025 for the initial issuance of the
22 license; or

23 (2) this section as part of a prior renewal of a
24 license.

25 SECTION 34. Subchapter F, Chapter 205, Occupations Code, is
26 amended by adding Section 205.256 to read as follows:

27 Sec. 205.256. REFUSAL FOR VIOLATION OF BOARD ORDER. The

1 acupuncture board may refuse to renew a license issued under this
2 chapter if the license holder is in violation of an acupuncture
3 board order.

4 SECTION 35. Subchapter E, Chapter 206, Occupations Code, is
5 amended by adding Section 206.2025 to read as follows:

6 Sec. 206.2025. CRIMINAL HISTORY RECORD INFORMATION
7 REQUIREMENT FOR LICENSE ISSUANCE. (a) The medical board shall
8 require that an applicant for a license submit a complete and
9 legible set of fingerprints, on a form prescribed by the board, to
10 the board or to the Department of Public Safety for the purpose of
11 obtaining criminal history record information from the Department
12 of Public Safety and the Federal Bureau of Investigation.

13 (b) The medical board may not issue a license to a person who
14 does not comply with the requirement of Subsection (a).

15 (c) The medical board shall conduct a criminal history
16 record information check of each applicant for a license using
17 information:

18 (1) provided by the individual under this section; and

19 (2) made available to the board by the Department of
20 Public Safety, the Federal Bureau of Investigation, and any other
21 criminal justice agency under Chapter 411, Government Code.

22 (d) The medical board may:

23 (1) enter into an agreement with the Department of
24 Public Safety to administer a criminal history record information
25 check required under this section; and

26 (2) authorize the Department of Public Safety to
27 collect from each applicant the costs incurred by the Department of

1 Public Safety in conducting the criminal history record information
2 check.

3 SECTION 36. Section 206.203(a), Occupations Code, is
4 amended to read as follows:

5 (a) Except as provided by Section 206.206, to be eligible
6 for a license, a person must:

7 (1) [~~be of good moral character,~~
8 [~~2~~] have not been convicted of a felony or a crime
9 involving moral turpitude;

10 (2) [~~3~~] not use drugs or alcohol to an extent that
11 affects the applicant's professional competency;

12 (3) [~~4~~] not have had a license or certification
13 revoked by a licensing agency or by a certifying professional
14 organization; and

15 (4) [~~5~~] not have engaged in fraud or deceit in
16 applying for a license under this chapter.

17 SECTION 37. Subchapter E, Chapter 206, Occupations Code, is
18 amended by adding Section 206.2105 to read as follows:

19 Sec. 206.2105. CRIMINAL HISTORY RECORD INFORMATION
20 REQUIREMENT FOR RENEWAL. (a) An applicant for renewal of a license
21 issued under this chapter shall submit a complete and legible set of
22 fingerprints for purposes of performing a criminal history record
23 information check of the applicant as provided by Section 206.2025.

24 (b) The medical board may administratively suspend or
25 refuse to renew the license of a person who does not comply with the
26 requirement of Subsection (a).

27 (c) A license holder is not required to submit fingerprints

1 under this section for the renewal of the license if the holder has
2 previously submitted fingerprints under:

3 (1) Section 206.2025 for the initial issuance of the
4 license; or

5 (2) this section as part of a prior renewal of a
6 license.

7 SECTION 38. Subchapter E, Chapter 206, Occupations Code, is
8 amended by adding Section 206.215 to read as follows:

9 Sec. 206.215. REFUSAL FOR VIOLATION OF BOARD ORDER. The
10 medical board may refuse to renew a license issued under this
11 chapter if the license holder is in violation of a medical board
12 order.

13 SECTION 39. Section 601.002, Occupations Code, is amended
14 by adding Subdivisions (10-a) and (10-b) to read as follows:

15 (10-a) "Radiologist" means a physician specializing
16 in radiology certified by or board-eligible for the American Board
17 of Radiology, the American Osteopathic Board of Radiology, the
18 Royal College of Radiologists, or the Royal College of Physicians
19 and Surgeons of Canada.

20 (10-b) "Radiologist assistant" means an
21 advanced-level medical radiologic technologist who is certified
22 as:

23 (A) a registered radiologist assistant by the
24 American Registry of Radiologic Technologists; or

25 (B) a radiology practitioner assistant by the
26 Certification Board for Radiology Practitioner Assistants.

27 SECTION 40. Section 601.030, Occupations Code, is amended

1 by amending Subsection (b) and adding Subsection (d) to read as
2 follows:

3 (b) The training program must provide the person with
4 information regarding:

5 (1) the law governing advisory board operations;

6 (2) [~~this chapter and~~] the [~~advisory board's~~]
7 programs, functions, rules, and budget of the advisory board;

8 (3) the scope of and limitations on the rulemaking
9 authority of the advisory board;

10 (4) [~~(2)~~] the results of the most recent formal audit
11 of the advisory board;

12 (5) [~~(3)~~] the requirements of:

13 (A) laws relating to open meetings, public
14 information, administrative procedure, and disclosing conflicts of
15 interest; and

16 (B) other laws applicable to members of the
17 advisory board in performing their duties; and

18 (6) [~~(4)~~] any applicable ethics policies adopted by
19 the advisory board or the Texas Ethics Commission.

20 (d) The executive director of the medical board shall create
21 a training manual that includes the information required by
22 Subsection (b). The executive director shall distribute a copy of
23 the training manual annually to each advisory board member. On
24 receipt of the training manual, each board member shall sign and
25 submit to the executive director a statement acknowledging receipt
26 of the training manual.

27 SECTION 41. Sections 601.102(b) and (c), Occupations Code,

1 are amended to read as follows:

2 (b) The advisory board may issue to a person:

3 (1) a general certificate to perform radiologic
4 procedures; ~~[or]~~

5 (2) a limited certificate that authorizes the person
6 to perform radiologic procedures only on specific parts of the
7 human body; or

8 (3) a radiologist assistant certificate to a person
9 who meets the requirements established under Section 601.1021.

10 (c) The advisory board may issue to a person a temporary
11 general certificate, ~~[or]~~ a temporary limited certificate, or a
12 temporary radiologist assistant certificate that authorizes the
13 person to perform radiologic procedures for a period not to exceed
14 one year.

15 SECTION 42. Subchapter C, Chapter 601, Occupations Code, is
16 amended by adding Section 601.1021 to read as follows:

17 Sec. 601.1021. RADIOLOGIST ASSISTANT CERTIFICATE. (a) The
18 advisory board by rule shall establish the education and training
19 required for a person to obtain a radiologist assistant
20 certificate.

21 (b) A radiologist assistant certificate holder:

22 (1) may perform radiologic procedures only under the
23 supervision of a radiologist; and

24 (2) may not interpret images, make diagnoses, or
25 prescribe any medication or therapy.

26 SECTION 43. Subchapter C, Chapter 601, Occupations Code, is
27 amended by adding Section 601.113 to read as follows:

1 Sec. 601.113. REFUSAL FOR VIOLATION OF BOARD ORDER. The
2 advisory board may refuse to renew a certificate issued under this
3 chapter if the certificate holder is in violation of an advisory
4 board order.

5 SECTION 44. Section 601.155, Occupations Code, is amended
6 to read as follows:

7 Sec. 601.155. STUDENTS. A person is not required to hold a
8 certificate issued under this chapter [~~or to comply with the~~
9 ~~registration requirements adopted under Section 601.252~~] if the
10 person:

11 (1) is a student enrolled in a training program that
12 meets the minimum standards adopted under Section 601.201; and

13 (2) is performing a radiologic procedure in an
14 academic or clinical setting as part of the training program.

15 SECTION 45. Section 601.156, Occupations Code, is amended
16 to read as follows:

17 Sec. 601.156. PROCEDURE PERFORMED AS PART OF CONTINUING
18 EDUCATION PROGRAM. A person is not required to hold a certificate
19 issued under this chapter [~~or to comply with the registration~~
20 ~~requirements adopted under Section 601.252~~] if the person is:

21 (1) licensed or otherwise registered as a medical
22 radiologic technologist by another state, the American Registry of
23 Radiologic Technologists, the American Registry of Clinical
24 Radiography Technologists, or a professional organization or
25 association recognized by the advisory board;

26 (2) enrolled in a continuing education program that
27 meets the requirements adopted under Section 601.108; and

1 (3) performing a radiologic procedure as part of the
2 continuing education program for not more than 10 days.

3 SECTION 46. Section 601.203(b), Occupations Code, is
4 amended to read as follows:

5 (b) The following conditions are considered to be a hardship
6 for the purposes of Subsection (a):

7 (1) that the applicant:

8 (A) reports an inability to attract and retain
9 medical radiologic technologists; and

10 (B) is located in a county with a population of
11 less than 50,000;

12 (2) that the applicant is located at a great distance
13 from a school of medical radiologic technology;

14 (3) that there is a list of qualified persons who have
15 applied to a school of medical radiologic technology whose
16 admissions are pending because of a lack of faculty or space;

17 (4) that the school of medical radiologic technology
18 produces an insufficient number of graduates in medical radiologic
19 technology to meet the needs of the applicant; or

20 (5) any other criteria determined by advisory board
21 rule.

22 SECTION 47. Sections 601.252(c) and (d), Occupations Code,
23 are amended to read as follows:

24 (c) Rules adopted under this section by the State Board of
25 Dental Examiners must:

26 (1) require an authorized person who performs
27 radiologic procedures under the delegation of a dentist, other than

1 a registered nurse, to register with the dental board [~~agency that~~
2 ~~licenses the practitioner under whom the person performs radiologic~~
3 ~~procedures~~];

4 (2) establish reasonable and necessary fees to cover
5 the administrative costs incurred by the dental board [~~agency~~] in
6 administering a registration program created under this
7 subsection;

8 (3) establish grounds for the suspension, revocation,
9 or nonrenewal of a registration issued under this subsection; and

10 (4) establish standards, in addition to those required
11 by this chapter, for training and supervising the operators of the
12 equipment.

13 (d) In adopting rules under Subsection (c), the State Board
14 of Dental Examiners [~~an agency~~] may take into account whether the
15 radiologic procedure will be performed by a registered nurse.

16 SECTION 48. Subchapter E, Chapter 602, Occupations Code, is
17 amended by adding Section 602.214 to read as follows:

18 Sec. 602.214. REFUSAL FOR VIOLATION OF BOARD ORDER. The
19 medical board may refuse to renew a license issued under this
20 chapter if the license holder is in violation of a medical board
21 order.

22 SECTION 49. Section 603.252(a), Occupations Code, is
23 amended to read as follows:

24 (a) An applicant for a perfusionist license must submit an
25 [~~a sworn~~] application accompanied by the application fee.

26 SECTION 50. Subchapter G, Chapter 603, Occupations Code, is
27 amended by adding Section 603.306 to read as follows:

1 Sec. 603.306. REFUSAL FOR VIOLATION OF BOARD ORDER. The
2 medical board may refuse to renew a license issued under this
3 chapter if the license holder is in violation of a medical board
4 order.

5 SECTION 51. Section 604.030, Occupations Code, is amended
6 by amending Subsection (b) and adding Subsection (d) to read as
7 follows:

8 (b) The training program must provide the person with
9 information regarding:

- 10 (1) the law governing advisory board operations;
11 (2) the [~~this chapter and the advisory board's~~]
12 programs, functions, rules, and budget of the advisory board;
13 (3) the scope of and limitations on the rulemaking
14 authority of the advisory board;
15 (4) [~~2~~] the results of the most recent formal audit
16 of the advisory board;
17 (5) [~~3~~] the requirements of:
18 (A) laws relating to open meetings, public
19 information, administrative procedure, and disclosing conflicts of
20 interest; and
21 (B) other laws applicable to members of the
22 advisory board in performing their duties; and
23 (6) [~~4~~] any applicable ethics policies adopted by
24 the advisory board or the Texas Ethics Commission.

25 (d) The executive director of the medical board shall create
26 a training manual that includes the information required by
27 Subsection (b). The executive director shall distribute a copy of

1 the training manual annually to each advisory board member. On
2 receipt of the training manual, each board member shall sign and
3 submit to the executive director a statement acknowledging receipt
4 of the training manual.

5 SECTION 52. Subchapter D, Chapter 604, Occupations Code, is
6 amended by adding Section 604.158 to read as follows:

7 Sec. 604.158. REFUSAL FOR VIOLATION OF BOARD ORDER. The
8 advisory board may refuse to renew a certificate or temporary
9 permit issued under this chapter if the certificate or permit
10 holder is in violation of an advisory board order.

11 SECTION 53. (a) Except as provided by Subsection (b) of this
12 section, Sections 152.010, 204.059, 205.057, 601.030, and 604.030,
13 Occupations Code, as amended by this Act, apply to a member of the
14 applicable board appointed before, on, or after the effective date
15 of this Act.

16 (b) A member of a board who, before the effective date of
17 this Act, completed the training program required by Section
18 152.010, 204.059, 205.057, 601.030, or 604.030, Occupations Code,
19 as the applicable law existed before the effective date of this Act,
20 is only required to complete additional training on the subjects
21 added by this Act to the training program required by Section
22 152.010, 204.059, 205.057, 601.030, or 604.030, Occupations Code,
23 as applicable. A board member described by this subsection may not
24 vote, deliberate, or be counted as a member in attendance at a
25 meeting of the applicable board held on or after December 1, 2017,
26 until the member completes the additional training.

27 SECTION 54. Sections 162.301 and 204.210, Occupations Code,

1 as added by this Act, apply only to a prescription issued on or
2 after September 1, 2018. A prescription issued before September 1,
3 2018, is governed by the law in effect immediately before the
4 effective date of this Act, and the former law is continued in
5 effect for that purpose.

6 SECTION 55. Not later than March 1, 2018, the Texas Medical
7 Board shall adopt rules necessary to implement Section 164.003(b),
8 Occupations Code, as amended by this Act.

9 SECTION 56. Not later than January 1, 2018, the Texas
10 Medical Board and the governing board of the Texas Physician Health
11 Program by rule shall adopt the memorandum of understanding
12 required by Section 167.012, Occupations Code, as added by this
13 Act.

14 SECTION 57. Not later than September 1, 2019, the Texas
15 Physician Assistant Board, the Texas State Board of Acupuncture
16 Examiners, and the Texas Medical Board shall obtain criminal
17 history record information on each person who, on the effective
18 date of this Act, holds a license issued under Chapter 204, 205, or
19 206, Occupations Code, as applicable, and did not undergo a
20 criminal history record information check based on the license
21 holder's fingerprints on the initial application for the license.
22 A board may suspend the license of a license holder who does not
23 provide the criminal history record information as required by the
24 board and this section.

25 SECTION 58. Not later than January 1, 2018, the Texas
26 Medical Board shall approve the rules required by Section 601.1021,
27 Occupations Code, as added by this Act.

1 SECTION 59. This Act takes effect September 1, 2017.