By:  Paddie H.B. No. 1504

A BILL TO BE ENTITLED

AN ACT

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

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

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

Sec. 151.004.  APPLICATION OF SUNSET ACT. The Texas Medical Board is subject to Chapter 325, Government Code (Texas Sunset Act). Unless continued in existence as provided by that chapter, the board is abolished and this subtitle and Chapters 204, 205, 206, 601, 602, 603, and 604 expire September 1, 2031 [~~2019~~].

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

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

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

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

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

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

[~~(5)  the current budget for the board;~~

[~~(6)~~]  the results of the most recent formal audit of the board;

(5) [~~(7)~~]  the requirements of:

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

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

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

(d)  The executive director of the board shall create a training manual that includes the information required by Subsection (b). The executive director shall distribute a copy of the training manual annually to each board member. Each board member shall sign and submit to the executive director a statement acknowledging that the member received the training manual.

SECTION 3.  Section 153.058(a), Occupations Code, is amended to read as follows:

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

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

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

SECTION 4.  Section 154.006, Occupations Code, is amended by amending Subsections (b), (g), (i), (j), and (k) and adding Subsections (b-1), (i-1), and (l) to read as follows:

(b)  Except as otherwise provided by this section, a [~~A~~] profile must contain the following information on each physician:

(1)  the name of each medical school attended and the dates of:

(A)  graduation; or

(B)  Fifth Pathway designation and completion of the Fifth Pathway Program;

(2)  a description of all graduate medical education in the United States or Canada;

(3)  any specialty certification held by the physician and issued by a medical licensing board that is a member of the American Board of Medical Specialties or the Bureau of Osteopathic Specialists;

(4)  the number of years the physician has actively practiced medicine in:

(A)  the United States or Canada; and

(B)  this state;

(5)  the name of each hospital in this state in which the physician has privileges;

(6)  the physician's primary practice location;

(7)  the type of language translating services, including translating services for a person with impairment of hearing, that the physician provides at the physician's primary practice location;

(8)  whether the physician participates in the Medicaid program;

(9)  a description of any conviction for a felony, a Class A or Class B misdemeanor, or a Class C misdemeanor involving moral turpitude;

(10)  a description of any charges reported to the board to which the physician has pleaded no contest, for which the physician is the subject of deferred adjudication or pretrial diversion, or in which sufficient facts of guilt were found and the matter was continued by a court;

(11)  a description of any disciplinary action against the physician by the board;

(12)  a description of any disciplinary action against the physician by a medical licensing board of another state;

(13)  a description of the final resolution taken by the board on medical malpractice claims or complaints required to be opened by the board under Section 164.201;

(14)  whether the physician's patient service areas are accessible to disabled persons, as defined by federal law;

(15)  a description of any formal complaint against the physician initiated and filed under Section 164.005 and the status of the complaint; and

(16)  a description of any medical malpractice claim against the physician, not including a description of any offers by the physician to settle the claim, for which the physician was found liable, a jury awarded monetary damages to the claimant, and the award has been determined to be final and not subject to further appeal.

(b-1)  On or after the fifth anniversary of the date a remedial plan is issued under Section 164.0015, the board may remove from the profile of the physician subject to the plan any information regarding the plan and the complaint resolved by the plan unless:

(1)  the complaint was related to the delivery of health care; or

(2)  more than one remedial plan has been issued to resolve complaints alleging the same violation by the physician, including a complaint not related to the delivery of health care.

(g)  Except as otherwise provided by this section, the [~~The~~] board shall update the information contained in a physician's profile annually[~~, except that information provided under Subsection (i) shall be updated not later than the 10th working day after the date the formal complaint is filed or the board's order is issued~~]. The board shall adopt a form that allows a physician to update information contained in a physician's profile. The form shall be made available on the Internet and in other formats as prescribed by board rule. The board may adopt rules concerning the type and content of additional information that may be included in a physician's profile.

(i)  In addition to the information required by Subsection (b) and except as otherwise provided by this section, a profile must be updated to contain the text of a formal complaint filed under Section 164.005 against the physician or of a board order related to the formal complaint not later than the 10th working day after the date the complaint is filed.

(i-1)  Not later than the 10th working day after the date the board issues a final order related to a formal complaint filed under Section 164.005 against a physician, the board shall:

(1)  remove from the physician's profile any record of the formal complaint or any prior disciplinary action related to the formal complaint; and

(2)  update the physician's profile to contain the board's final order.

(j)  Information included in a physician's profile under Subsections (b), [~~and~~] (i), and (i-1) may not include any patient identifying information.

(k)  Not later than the 10th working day after the date the board dismisses [~~In the annual update of a physician's profile under Subsection (g), the board shall remove any record of~~] a formal complaint against a physician required to be included in the physician's profile under Subsection (b)(15) or (i) [~~if the complaint was dismissed more than five years before the date of the update and the complaint was dismissed~~] as baseless, unfounded, or not supported by sufficient evidence that a violation occurred, or resolves the complaint and takes no action [~~was taken~~] against the physician's license as a result of the complaint, the board shall:

(1)  remove from the physician's profile any record of the formal complaint or any prior disciplinary action related to the formal complaint; and

(2)  update the physician's profile to contain the board's final order dismissing or resolving the complaint.

(l)  If no action is taken against a physician's license as a result of an [~~The board shall also remove any record of the~~] investigation of medical malpractice claims or complaints required to be investigated by the board under Section 164.201, the board shall, not later than the 10th working day after the date the board resolves the investigation, remove any record of the investigation from the physician's profile [~~if the investigation was resolved more than five years before the date of the update and no action was taken against the physician's license as a result of the investigation~~].

SECTION 5.  Section 154.057, Occupations Code, is amended by amending Subsection (b) and adding Subsection (b-1) to read as follows:

(b)  Except as provided by Subsection (b-1), the [~~The~~] board shall complete a preliminary investigation of the complaint not later than the 45th day after the date of receiving the complaint. The board shall first determine whether the physician constitutes a continuing threat to the public welfare. On completion of the preliminary investigation, the board shall determine whether to officially proceed on the complaint. If the board fails to complete the preliminary investigation in the time required by this subsection, the board's official investigation of the complaint is considered to commence on that date.

(b-1)  The board, for good cause, may extend a preliminary investigation under Subsection (b) for not more than 15 days after the date required for completion under that subsection.

SECTION 6.  Subchapter A, Chapter 155, Occupations Code, is amended by adding Section 155.011 to read as follows:

Sec. 155.011.  EXPEDITED LICENSING PROCESS FOR CERTAIN OUT-OF-STATE APPLICANTS. The board by rule shall develop and implement an expedited licensing process for an applicant who is considered to have satisfied the examination requirements of this chapter under Section 155.0561(d).

SECTION 7.  Section 155.056(a), Occupations Code, is amended to read as follows:

(a)  Except as otherwise provided by Subsection (a-1) and Section 155.0561, an applicant must pass each part of an examination within three attempts.

SECTION 8.  Subchapter B, Chapter 155, Occupations Code, is amended by adding Section 155.0561 to read as follows:

Sec. 155.0561.  EXCEPTIONS TO EXAMINATION ATTEMPT LIMITS FOR CERTAIN OUT-OF-STATE APPLICANTS. (a) In this section:

(1)  "Active practice" means the practice of medicine by a person after successful completion of a residency, fellowship, or other supervised training program.

(2)  "Full license" means a license to practice medicine that is not a training license, a permit, or any other form of authority to practice medicine issued to a person while the person is completing or enrolled in a residency, fellowship, or other supervised training program.

(b)  This section applies only to an applicant who:

(1)  has successfully completed a graduate medical education program approved by the board;

(2)  holds a full license and is in good standing as a physician in another state or Canada;

(3)  does not hold and has never held a medical license subject to any restriction, disciplinary order, or probation;

(4)  is not and has never been the subject of a peer review that has resulted or may result in limitation, restriction, suspension, or other adverse impact on the applicant's hospital or other medical facility privileges; and

(5)  is not under investigation by any licensing or law enforcement agency.

(c)  An applicant described by Subsection (b) who has held a full license and been in active practice for at least one year but less than five years and has passed within three attempts all but one part of the examination approved by the board is considered to have satisfied the examination requirements of this chapter if the applicant passed the remaining part of the examination within:

(1)  one additional attempt; or

(2)  three additional attempts, if the applicant is specialty board certified by a specialty board that is:

(A)  a member of the American Board of Medical Specialties; or

(B)  approved by the American Osteopathic Association.

(d)  An applicant described by Subsection (b) who has held a full license and been in active practice for at least five years is considered to have satisfied the examination requirements of this chapter regardless of the type of examination the applicant passed or the number of attempts within which the applicant passed the examination or any part of the examination.

SECTION 9.  Section 162.106, Occupations Code, is amended to read as follows:

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

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

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

(2)  the physician submitted to inspection.

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

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

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

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

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

SECTION 10.  Section 164.0015(d), Occupations Code, is amended to read as follows:

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

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

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

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

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

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

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

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

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

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

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

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

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

(a)  In this section, "formal complaint" means a written statement made by a credible person [~~under oath~~] that is filed and presented by a board representative charging a person with having committed an act that, if proven, could affect the legal rights or privileges of a license holder or other person under the board's jurisdiction.

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

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

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

SECTION 13.  Sections 164.006(a) and (b), Occupations Code, are amended to read as follows:

(a)  Notice [~~Service of process~~] to [~~notify~~] the respondent of a hearing about the charges against the person must be served:

(1)  in accordance with Chapter 2001, Government Code; and

(2)  by certified mail.

(b)  If notice [~~service~~] described by Subsection (a) is impossible or cannot be effected, the board shall publish once a week for two successive weeks a notice of the hearing in a newspaper published in the county of the last known place of practice in this state of the person, if known.

SECTION 14.  Sections 164.007(a) and (a-1), Occupations Code, are amended to read as follows:

(a)  The board by rule shall adopt procedures governing formal disposition of a contested case under Chapter 2001, Government Code. A formal hearing shall be conducted by an administrative law judge employed by the State Office of Administrative Hearings. After receiving the administrative law judge's findings of fact and conclusions of law, the board shall:

(1)  dispose of the contested case by issuing a final order based on the administrative law judge's findings of fact and conclusions of law; or

(2)  appeal the administrative law judge's findings of fact and conclusions of law in the manner provided by Section 164.0072.

(a-1)  Notwithstanding Section 2001.058(e), Government Code, the board may not change a finding of fact or conclusion of law or vacate or modify an order of the administrative law judge. [~~The board may obtain judicial review of any finding of fact or conclusion of law issued by the administrative law judge as provided by Section 2001.058(f)(5), Government Code.~~] For each case, the board has the sole authority and discretion to determine the appropriate action or sanction. The [~~, and the~~] administrative law judge may not make any recommendation regarding the appropriate action or sanction.

SECTION 15.  Subchapter A, Chapter 164, Occupations Code, is amended by adding Section 164.0072 to read as follows:

Sec. 164.0072.  BOARD APPEAL OF FINDINGS OF FACT AND CONCLUSIONS OF LAW. (a) The board may, before disposing of a contested case by issuing a final order, obtain judicial review of any finding of fact or conclusion of law issued by the administrative law judge by filing suit in a Travis County district court not later than the 30th day after the date the findings of fact and conclusions of law are issued.

(b)  The board shall join in a suit filed under this section the respondent in the contested case for which the board seeks to obtain judicial review.

(c)  The scope of judicial review under this section is the same as the scope of judicial review provided for an appeal under Section 164.009.

(d)  After the court issues a final order in a suit filed under this section, the board shall dispose of the contested case by issuing a final order based on the court's final order. The respondent may not appeal a sanction ordered by the board unless the sanction exceeds the board's published sanctions guidelines.

SECTION 16.  Section 164.052(a), Occupations Code, is amended to read as follows:

(a)  A physician or an applicant for a license to practice medicine commits a prohibited practice if that person:

(1)  submits to the board a false or misleading statement, document, or certificate in an application for a license;

(2)  presents to the board a license, certificate, or diploma that was illegally or fraudulently obtained;

(3)  commits fraud or deception in taking or passing an examination;

(4)  uses alcohol or drugs in an intemperate manner that, in the board's opinion, could endanger a patient's life;

(5)  commits unprofessional or dishonorable conduct that is likely to deceive or defraud the public, as provided by Section 164.053, or injure the public;

(6)  uses an advertising statement that is false, misleading, or deceptive;

(7)  advertises professional superiority or the performance of professional service in a superior manner if that advertising is not readily subject to verification;

(8)  purchases, sells, barters, or uses, or offers to purchase, sell, barter, or use, a medical degree, license, certificate, or diploma, or a transcript of a license, certificate, or diploma in or incident to an application to the board for a license to practice medicine;

(9)  alters, with fraudulent intent, a medical license, certificate, or diploma, or a transcript of a medical license, certificate, or diploma;

(10)  uses a medical license, certificate, or diploma, or a transcript of a medical license, certificate, or diploma that has been:

(A)  fraudulently purchased or issued;

(B)  counterfeited; or

(C)  materially altered;

(11)  impersonates or acts as proxy for another person in an examination required by this subtitle for a medical license;

(12)  engages in conduct that subverts or attempts to subvert an examination process required by this subtitle for a medical license;

(13)  impersonates a physician or permits another to use the person's license or certificate to practice medicine in this state;

(14)  directly or indirectly employs a person whose license to practice medicine has been suspended, canceled, or revoked;

(15)  associates in the practice of medicine with a person:

(A)  whose license to practice medicine has been suspended, canceled, or revoked; or

(B)  who has been convicted of the unlawful practice of medicine in this state or elsewhere;

(16)  performs or procures a criminal abortion, aids or abets in the procuring of a criminal abortion, attempts to perform or procure a criminal abortion, or attempts to aid or abet the performance or procurement of a criminal abortion;

(17)  directly or indirectly aids or abets the practice of medicine by a person, partnership, association, or corporation that is not licensed to practice medicine by the board;

(18)  performs an abortion on a woman who is pregnant with a viable unborn child during the third trimester of the pregnancy unless:

(A)  the abortion is necessary to prevent the death of the woman;

(B)  the viable unborn child has a severe, irreversible brain impairment; or

(C)  the woman is diagnosed with a significant likelihood of suffering imminent severe, irreversible brain damage or imminent severe, irreversible paralysis;

(19)  performs an abortion on an unemancipated minor without the written consent of the child's parent, managing conservator, or legal guardian or without a court order, as provided by Section 33.003 or 33.004, Family Code, unless the abortion is necessary due to a medical emergency, as defined by Section 171.002, Health and Safety Code;

(20)  otherwise performs an abortion on an unemancipated minor in violation of Chapter 33, Family Code; [~~or~~]

(21)  performs or induces or attempts to perform or induce an abortion in violation of Subchapter C, F, or G, Chapter 171, Health and Safety Code; or

(22)  in complying with the procedures outlined in Sections 166.045 and 166.046, Health and Safety Code, wilfully fails to make a reasonable effort to transfer a patient to a physician who is willing to comply with a directive.

SECTION 17.  Chapter 167, Occupations Code, is amended by adding Sections 167.012 and 167.013 to read as follows:

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

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

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

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

Sec. 167.013.  GIFTS, GRANTS, AND DONATIONS. In addition to any fees paid to the board or money appropriated to the board for the program, the governing board may receive and accept a gift, grant, donation, or other thing of value from any source, including the United States or a private source, for the program.

SECTION 18.  Section 205.057, Occupations Code, is amended by amending Subsection (b) and adding Subsection (d) to read as follows:

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

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

(2)  the programs, [~~operated by the acupuncture board;~~

[~~(3)  the role and~~] functions, rules, and budget of the acupuncture board;

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

(4) [~~(5)  the current budget for the acupuncture board;~~

[~~(6)~~]  the results of the most recent formal audit of the acupuncture board;

(5) [~~(7)~~]  the requirements of:

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

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

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

(d)  The executive director shall create a training manual that includes the information required by Subsection (b). The executive director shall distribute a copy of the training manual annually to each acupuncture board member. Each board member shall sign and submit to the executive director a statement acknowledging that the member received the training manual.

SECTION 19.  Subchapter E, Chapter 205, Occupations Code, is amended by adding Section 205.2025 to read as follows:

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

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

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

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

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

(d)  The acupuncture board may:

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

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

SECTION 20.  Subchapter F, Chapter 205, Occupations Code, is amended by adding Section 205.2515 to read as follows:

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

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

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

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

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

SECTION 21.  Subchapter E, Chapter 206, Occupations Code, is amended by adding Section 206.2025 to read as follows:

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

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

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

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

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

(d)  The medical board may:

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

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

SECTION 22.  Section 206.203(a), Occupations Code, is amended to read as follows:

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

(1)  [~~be of good moral character;~~

[~~(2)~~]  have not been convicted of a felony or a crime involving moral turpitude;

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

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

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

SECTION 23.  Subchapter E, Chapter 206, Occupations Code, is amended by adding Section 206.2105 to read as follows:

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

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

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

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

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

SECTION 24.  Section 601.002, Occupations Code, is amended by adding Subdivisions (10-a) and (10-b) to read as follows:

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

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

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

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

SECTION 25.  Section 601.030, Occupations Code, is amended by amending Subsection (b) and adding Subsection (d) to read as follows:

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

(1)  the law governing advisory board operations;

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

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

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

(5) [~~(3)~~]  the requirements of:

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

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

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

(d)  The executive director of the medical board shall create a training manual that includes the information required by Subsection (b). The executive director shall distribute a copy of the training manual annually to each advisory board member. Each board member shall sign and submit to the executive director a statement acknowledging that the member received the training manual.

SECTION 26.  Sections 601.102(b) and (c), Occupations Code, are amended to read as follows:

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

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

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

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

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

SECTION 27.  Subchapter C, Chapter 601, Occupations Code, is amended by adding Section 601.1021 to read as follows:

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

(b)  A radiologist assistant certificate holder:

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

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

SECTION 28.  Section 604.030, Occupations Code, is amended by amending Subsection (b) and adding Subsection (d) to read as follows:

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

(1)  the law governing advisory board operations;

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

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

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

(5) [~~(3)~~]  the requirements of:

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

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

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

(d)  The executive director of the medical board shall create a training manual that includes the information required by Subsection (b). The executive director shall distribute a copy of the training manual annually to each advisory board member. Each board member shall sign and submit to the executive director a statement acknowledging that the member received the training manual.

SECTION 29.  Sections 155.056(c) and (d), Occupations Code, are repealed.

SECTION 30.  (a) Except as provided by Subsection (b) of this section, Sections 152.010, 205.057, 601.030, and 604.030, Occupations Code, as amended by this Act, apply to a member of the applicable board appointed before, on, or after the effective date of this Act.

(b)  A member of a board who, before the effective date of this Act, completed the training program required by Section 152.010, 205.057, 601.030, or 604.030, Occupations Code, as the applicable law existed before the effective date of this Act, is only required to complete additional training on subjects added by this Act to the training program required by, as applicable, Section 152.010, 205.057, 601.030, or 604.030, Occupations Code, as amended by this Act. A board member described by this subsection may not vote, deliberate, or be counted as a member in attendance at a meeting of the applicable board held on or after December 1, 2019, until the member completes the additional training.

SECTION 31.  Not later than March 1, 2020, the Texas Medical Board shall adopt rules necessary to implement Section 164.003(b), Occupations Code, as amended by this Act.

SECTION 32.  Not later than January 1, 2020, the Texas Medical Board and the governing board of the Texas Physician Health Program by rule shall adopt the memorandum of understanding required by Section 167.012, Occupations Code, as added by this Act.

SECTION 33.  Not later than September 1, 2021, the Texas State Board of Acupuncture Examiners and the Texas Medical Board shall obtain criminal history record information on each person who, on the effective date of this Act, holds a license issued under Chapter 205 or 206, Occupations Code, as applicable, and did not undergo a criminal history record information check based on the license holder's fingerprints on the initial application for the license. A board may suspend the license of a license holder who does not provide the criminal history record information as required by the board and this section.

SECTION 34.  Not later than January 1, 2020, the Texas Medical Board shall approve the rules required by Section 601.1021, Occupations Code, as added by this Act.

SECTION 35.  This Act takes effect September 1, 2019.