



# North Carolina Medical Board

Timothy E. Lietz, MD: President | Barbara E. Walker, DO: President-Elect | Bryant A. Murphy, MD: Secretary/Treasurer

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Dear North Carolina Physician:

We are glad that you are considering applying for a position on the North Carolina Medical Board. We welcome your interest.

The North Carolina Medical Board was established in 1859, and has the distinction of being the oldest continually operating medical board in the country. By statute, the Medical Board's mandate is: "to regulate the practice of medicine and surgery for the benefit and protection of the people of North Carolina." The Board's main responsibilities are licensing and regulating the practice of more than 40,000 physicians, Physician Assistants, and several other allied health providers. There are 13 Board members consisting of eight physicians, one physician assistant, one nurse practitioner, and three public members. This affords licensees the privilege of professionally led regulation, something which is not the case in every state.

Serving on the Board is both a responsibility and an honor. Many former Board members recall the importance of the work, the pride they felt in being part of it, and how serving on the Board made them better practitioners. While many Board members come to it as leaders of the profession, many North Carolina Medical Board members have gone on to leadership at the national level of medical regulation. With the ever-changing face of medicine in this country, it is good for our state to be represented in the national discussion on health care.

Here are some of specifics of serving on the North Carolina Medical Board.

- Time commitment:

The Board meets six times per year in the odd-numbered months, in Raleigh. Depending on various factors, the meetings can last from 1.5 - 2.5 days and occur during the third week of the month.

Also, three or four times a year you will be assigned to an eight-member panel of the Board that holds disciplinary hearings for one - two days during the even-numbered months. The Board retains an independent counsel (a former trial judge) to participate in hearings and assist with procedural matters.

In addition, there is Board work at other times, off site. Those tasks include reviewing meeting materials (15- 20 hours per meeting or hearing), reviewing license applications, conducting license interviews, and participating in task forces, committees and legislative efforts. Some, but not all, Board members write articles for The Forum, or speak to civic organizations and professional groups.

Finally, some Board members attend the annual meeting of the Federation of State Medical Boards. The FSMB meeting is a three-day meeting, usually held in late April, and can be very

helpful as most state medical and osteopathic boards are grappling with similar issues.

- Expenses:

Board members are reimbursed \$50 per hour (up to a maximum of \$200 per day) for Board work including preparation and attending hearings and meetings. The Board has a professional staff which posts reading material to a secure website about two weeks before each Board meeting.

Board members stay at a local hotel and are reimbursed for meals, lodging and travel expenses.

Board members may not offer to or serve as expert reviewers in potential medical malpractice cases, or offer to or serve as voluntary expert witnesses in medical malpractice cases during their tenure on the Board. This helps avoid actual or apparent conflicts of interest and other proscriptions of the North Carolina State Ethics Act.

Although most Board members find that service on the Board means a financial loss, the rewards from serving the public and the profession make it worthwhile.

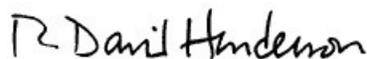
- Miscellaneous:

To be productive, it is essential that Board members be proficient users of computer hardware and software. While Board staff is available to provide some training and assistance, each Board member must be able to use a keyboard, use basic Microsoft software products, and be willing and able to check Board e-mail regularly. The Board provides each member with a laptop computer for use while on the Board.

Licensing and discipline are the two main functions of the Board, but many other issues present themselves. Administrative rules are constantly in flux. Health care policy issues are endless: the opioid crisis, physician wellness, and new modes of healthcare delivery are examples of the current topics which confront the NCMB. You are encouraged to go to the Board's website [www.ncmedboard.org](http://www.ncmedboard.org) to learn more about the Board's work.

Please feel free to contact me or one of the current or former Board members to ask them about their experience. I can be reached at 919-326-1109, ext. 218 or [david.henderson@ncmedboard.org](mailto:david.henderson@ncmedboard.org). You can find the list of current Board members on our website, <http://www.ncmedboard.org/about-the-board/board-members>.

Sincerely,



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