

Sixty-ninth
Legislative Assembly
of North Dakota

FIRST ENROSSMENT

ENGROSSED SENATE BILL NO. 2401

Introduced by

Legislative Management
(Joint Policy Committee)

1 A BILL for an Act to create and enact a new subdivision to subsection 2 of section 12-60-24 of
2 the North Dakota Century Code, relating to criminal history record checks by the board of
3 occupational therapy practice; to amend and reenact section 43-17-27.1 of the North Dakota
4 Century Code, relating to physician continuing education requirements; to provide a statement
5 of legislative intent; and to provide an effective date.

6 BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

7 **SECTION 1.** A new subdivision to subsection 2 of section 12-60-24 of the North Dakota
8 Century Code is created and enacted as follows:

9 The board of occupational therapy practice for applicants, licensees, or
10 investigations under chapters 43-40 and 43-40.1.

11 **SECTION 2. AMENDMENT.** Section 43-17-27.1 of the North Dakota Century Code is
12 amended and reenacted as follows:

13 **43-17-27.1. Physician continuing education requirements.**

14 1. The board shall promote a high degree of competence in the practice of medicine by
15 establishing rules requiring every physician licensed in the state to fulfill continuing
16 education requirements. Compliance with these rules must be documented at such
17 times and in such manner as is required by the board. Physicians failing to comply
18 with continuing education requirements in the time and manner specified by rule of the
19 board will be assessed a fee up to three times the licensure fee, in addition to such
20 other penalties as are authorized by law.

21 2. The board shall require physicians to complete a minimum of one hour of continuing
22 education on nutrition and metabolic health each renewal cycle.

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3 3. Before a license may be renewed, the physician shall submit evidence to the board
4 establishing that all continuing education requirements prescribed by the rules
5 adopted by the board have been met.

6 3.4. The board may accept current certification, maintenance of certification, or
7 recertification by a member of the American board of medical specialties, the American
8 osteopathic association, or the royal college of physician and surgeons of Canada in
9 lieu of compliance with continuing education requirements.

10 4.5. The board may exempt a physician from the requirements of this section in
11 accordance with rules adopted by the board.

12 5.6. Notwithstanding subsection 1, if an individual fails to file a timely response, the board
13 may determine whether the individual's failure to file a timely response to an audit
14 constitutes an admission of noncompliance with this section and whether the
15 individual's license should be subject to action by the board. If the board determines
16 that the individual's failure to file a timely response is an admission of noncompliance
17 and that the individual's license should be subject to action by the board, the board
18 shall hold a hearing in accordance with chapter 28-32 to take any appropriate action.

19 6.7. The board shall provide access on the board's website to an instructional course on
20 chapters 12.1-19.1, 14-02.1, and 14-02.6 as the chapters relate to the practice of
21 medicine. The instructional course must be developed by contract through the office of
22 management and budget, in consultation with and with final approval from the attorney
23 general. This section does not create a right of action against the board by a physician
24 acting upon reliance of the instructional course. The instructional course must be
25 updated periodically to accurately reflect state law.

26 **SECTION 3. LEGISLATIVE INTENT - HEALTH OCCUPATION BOARDS TO CONSIDER**

27 **REQUIRING COMPLETION OF NUTRITION-RELATED CONTINUING EDUCATION.** It is the
28 intent of the sixty-ninth legislative assembly that health-related occupation boards under title 43
29 consider requiring licensees to complete nutrition-related continuing education for the
30 prevention and reduction of chronic disease.

26 **SECTION 4. EFFECTIVE DATE.** This Act becomes effective upon its filing with the

27 secretary of state.