An Act relating to opioid drugs; amending 59 O.S. 2011, Section 145.1, as amended by Section 4, Chapter 185, O.S.L. 2013 (59 O.S. Supp. 2018, Section 145.1), which relates to continuing education requirements for podiatrists; requiring certain continuing education; providing exception; amending 59 O.S. 2011, Section 148, which relates to violations of the Podiatric Medicine Practice Act; adding certain grounds for penalties; amending 59 O.S. 2011, Section 328.32, as last amended by Section 4, Chapter 113, O.S.L. 2016 (59 O.S. Supp. 2018, Section 328.32), which relates to grounds for penalties for dentists; modifying certain grounds for penalties; clarifying language; amending 59 O.S. 2011, Section 328.41, as last amended by Section 11, Chapter 151, O.S.L. 2018 (59 O.S. Supp. 2018, Section 328.41), which relates to continuing education requirements for dentists; requiring certain continuing education; providing exception; amending Section 3, Chapter 234, O.S.L. 2017, as amended by Section 1 of Enrolled Senate Bill No. 1019 of the 1st Session of the 57th Oklahoma Legislature (59 O.S. Supp. 2018, Section 353.20.2), which relates to pharmacist discretion; requiring pharmacist to fill certain prescriptions to specified dose; specifying certain right; amending 59 O.S. 2011, Section 509, as amended by Section 2, Chapter 175, O.S.L. 2018 (59 O.S. Supp. 2018, Section 509), which relates to definition of unprofessional conduct by allopathic physicians; clarifying language; amending 59 O.S. 2011, Section 519.8, which relates
to license renewal for physician assistants; requiring certain continuing medical education; amending 59 O.S. 2011, Section 567.4a, as last amended by Section 1 of Enrolled Senate Bill No. 81 of the 1st Session of the 57th Oklahoma Legislature (59 O.S. Supp. 2018, Section 567.4a), which relates to prescriptive authority for Advanced Practice Registered Nurses; requiring certain education; providing exception; amending 59 O.S. 2011, Section 567.8, as last amended by Section 2 of Enrolled Senate Bill No. 81 of the 1st Session of the 57th Legislature (59 O.S. Supp. 2018, Section 567.8), which relates to denial, revocation or suspension of license or certification; modifying certain grounds for disciplinary action; amending 59 O.S. 2011, Section 585, which relates to definition of unprofessional and unethical conduct by optometric physicians; modifying definition; updating and clarifying language; amending 59 O.S. 2011, Section 604, which relates to required attendance on educational or postgraduate programs for optometrists; requiring certain education; providing exception; updating statutory language; amending 59 O.S. 2011, Section 637, which relates to refusal to issue or reinstate, suspension or revocation of license for osteopathic physicians; adding certain grounds for disciplinary action; amending 59 O.S. 2011, Section 641, which relates to educational programs for osteopathic physicians; requiring licensees to receive certain education; providing exception; amending 59 O.S. 2011, Section 698.7, which relates to powers and duties of State Board of Veterinary Medical Examiners; requiring certain continuing education; providing exception; amending 59 O.S. 2011, Section 698.14a, which relates to sanctions for veterinarians; adding certain grounds for disciplinary actions; amending 63 O.S. 2011, Section 2-101, as last amended by Section 3, Chapter 175, O.S.L. 2018 (63 O.S. Supp. 2018, Section 2-101), which relates to definitions used in the Uniform Controlled Dangerous Substances Act; modifying certain definitions; amending 63 O.S. 2011, Section
2-302, as amended by Section 1, Chapter 251, O.S.L. 2018 (63 O.S. Supp. 2018, Section 2-302), which relates to registration requirements for certain persons; deleting obsolete language; modifying reporting requirements; amending 63 O.S. 2011, Section 2-309D, as last amended by Section 4, Chapter 175, O.S.L. 2018 (63 O.S. Supp. 2018, Section 2-309D), which relates to central repository; deleting termination date of certain requirements; modifying certain grounds for disciplinary action; amending Section 5, Chapter 175, O.S.L. 2018, as amended by Section 1 of Enrolled House Bill No. 1155 of the 1st Session of the 57th Oklahoma Legislature (63 O.S. Supp. 2018, Section 2-309I), which relates to prescription limits and rules for opioid drugs; modifying applicability; clarifying language; establishing procedure for prescribing opioids; modifying required assessment; requiring notated information on certain prescriptions; updating statutory language; clarifying language; defining term; requiring Insurance Department to make certain evaluation and submit report by date certain; requiring the Oklahoma State Bureau of Narcotics and Dangerous Drugs Control to submit report to the Legislature; providing for report requirements; updating statutory references; repealing Section 6, Chapter 175, O.S.L. 2018, which relates to Insurance Department's prescription limits evaluations; updating statutory references; providing for codification; and declaring an emergency.

SUBJECT: Opioid drugs

BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

SECTION 1. AMENDATORY 59 O.S. 2011, Section 145.1, as amended by Section 4, Chapter 185, O.S.L. 2013 (59 O.S. Supp. 2018, Section 145.1), is amended to read as follows:
Section 145.1. A. Sixty (60) hours of continuing education shall be required for renewal of an individual license to practice podiatric medicine in this state. This must be obtained in the two-year period immediately preceding the two-year period for which the license is to be issued. Such continuing education shall include not less than two (2) hours of education in pain management or two (2) hours of education in opioid use or addiction, unless the licensee has demonstrated to the satisfaction of the Board of Podiatric Medical Examiners that the licensee does not currently hold a valid federal Drug Enforcement Administration registration number. The continuing education required by this section shall be any of the following:

1. Education presented by an organization approved by the Council on Continuing Education of the American Podiatric Medical Association;

2. A national, state or county podiatric medical association meeting approved by the Board of Podiatric Medical Examiners;

3. Hospital-sponsored scientific programs approved by the Board; or

4. Six (6) hours of continuing education credit may be obtained by attending meetings and hearings of the Board.

At least thirty (30) hours of the required sixty (60) hours must be obtained in this state.

B. Any practitioner not so satisfying the Board of the fulfillment of the continuing education requirements required by subsection A of this section shall cease to be entitled to have such license renewed.

C. Any practitioner fully retired from the practice of podiatric medicine shall be exempt from compliance with the requirements imposed by subsection A of this section. However, upon resuming the practice of podiatric medicine, the individual shall fulfill such requirements which have accrued from the effective date of this act October 1, 1979, to the time of resumption of practice.
SECTION 2. AMENDATORY 59 O.S. 2011, Section 148, is amended to read as follows:

Section 148. A. The following acts or occurrences by a podiatric physician shall constitute grounds for which the penalties specified in Section 147 of this title may be imposed by order of the Board of Podiatric Medical Examiners:

1. Willfully making a false and material statement to the Board, either before or after the issuance of a license;

2. Pleading guilty or nolo contendere to, or being convicted of, a felony, a misdemeanor involving moral turpitude, or a violation of federal or state controlled dangerous substances laws;

3. Using alcohol, any drug, or any other substance which impairs the licensee to a degree that the licensee is unable to practice podiatric medicine with safety and benefit to the public;

4. Being mentally or physically incapacitated to a degree that the licensee is unable to practice podiatric medicine with safety and benefit to the public;

5. Making any advertisement, statement, or representation which is untrue or improbable and calculated by the licensee to deceive, defraud or mislead the public or patients;

6. Practicing fraud by omission or commission in the examination given by the Board, or in obtaining a license, or in obtaining renewal or reinstatement of a license;

7. Failing to pay or cause to be paid promptly when due any fee required by the Podiatric Medicine Practice Act or the rules of the Board;

8. Practicing podiatric medicine in an unsafe or unsanitary manner or place;

9. Performing, or attempting to perform, any surgery for which the licensee has not had reasonable training;
10. Gross and willful neglect of duty as a member or officer of the Board;

11. Dividing with any person, firm, corporation, or other legal entity any fee or other compensation for services as a podiatric physician, except with:

   a. another podiatric physician,
   
   b. an applicant for a license who is observing or assisting the licensee as an intern, preceptee or resident, as authorized by the rules of the Board, or
   
   c. a practitioner of another branch of the healing arts who is duly licensed under the laws of this state or another state, district or territory of the United States,

who has actually provided services, directly or indirectly, to the patient from or for whom the fee or other compensation is received, or at the time of the services is an active associate of the licensee in the lawful practice of podiatric medicine in this state; and

12. Violating or attempting to violate the provisions of the Podiatric Medicine Practice Act, the Code of Ethics, or the rules of the Board; and

13. Prescribing, dispensing or administering opioid drugs in excess of the maximum limits authorized in Section 2-309I of Title 63 of the Oklahoma Statutes.

B. Commitment of a licensee to an institution for the mentally ill shall constitute prima facie evidence that the licensee is mentally incapacitated to a degree that the licensee is unable to practice podiatric medicine with safety and benefit to the public.

SECTION 3. AMENDATORY 59 O.S. 2011, Section 328.32, as last amended by Section 4, Chapter 113, O.S.L. 2016 (59 O.S. Supp. 2018, Section 328.32), is amended to read as follows:
Section 328.32. A. The following acts or occurrences by a dentist shall constitute grounds for which the penalties specified in Section 328.44a of this title may be imposed by order of the Board of Dentistry or be the basis for denying a new applicant any license or permit issued by the Board:

1. Pleading guilty or nolo contendere to, or being convicted of, a felony, a misdemeanor involving moral turpitude, Medicaid fraud or a violation of federal or state controlled dangerous substances laws;

2. Presenting to the Board a false diploma, license, or certificate, or one obtained by fraud or illegal means, or providing other false information on an application or renewal;

3. Being, by reason of persistent inebriety or addiction to drugs, incompetent to continue the practice of dentistry;

4. Publishing a false, fraudulent, or misleading advertisement or statement;

5. Authorizing or aiding an unlicensed person to practice dentistry, to practice dental hygiene, or to perform a function for which a permit from the Board is required;

6. Authorizing or aiding a dental hygienist to perform any procedure prohibited by the State Dental Act or the rules of the Board;

7. Authorizing or aiding a dental assistant or oral maxillofacial surgery assistant to perform any procedure prohibited by the State Dental Act or the rules of the Board;

8. Failing to pay fees as required by the State Dental Act or the rules of the Board;

9. Failing to complete continuing education requirements;

10. Representing himself or herself to the public as a specialist in a dental specialty without holding a dental specialty license therefor;
11. Representing himself or herself to the public as a specialist whose practice is limited to a dental specialty, when such representation is false, fraudulent, or misleading;

12. Endangering the health of patients by reason of having a highly communicable disease and continuing to practice dentistry without taking appropriate safeguards;

13. Practicing dentistry in an unsafe or unsanitary manner or place, including but not limited to repeated failures to follow Centers for Disease Control and Prevention (CDC) or Occupational Health Safety and Health Administration (OSHA) guidelines;

14. Being shown to be mentally unsound;

15. Being shown to be grossly immoral and that such condition represents a threat to patient care or treatment;

16. Being incompetent to practice dentistry while delivering care to a patient;

17. Committing gross negligence in the practice of dentistry;

18. Committing repeated acts of negligence in the practice of dentistry;

19. Offering to effect or effecting a division of fees, or agreeing to split or divide a fee for dental services with any person, in exchange for the person bringing or referring a patient;

20. Being involuntarily committed to an institution for treatment for substance abuse, until recovery or remission;

21. Using or attempting to use the services of a dental laboratory or dental laboratory technician without issuing a laboratory prescription, except as provided in subsection C of Section 328.36 of this title;

22. Aiding, abetting, or encouraging a dental hygienist employed by the dentist to make use of an oral prophylaxis list, or the calling by telephone or by use of letters transmitted through
the mails to solicit patronage from patients formerly served in the office of any dentist formerly employing such hygienist;

23. Having more than the equivalent of three full-time dental hygienists for each dentist actively practicing in the same dental office;

24. Allowing a person not holding a permit or license issued by the Board to assist in the treatment of a patient without having a license or permit issued by the Board;

25. Knowingly patronizing or using the services of a dental laboratory or dental laboratory technician who has not complied with the provisions of the State Dental Act and the rules of the Board;

26. Authorizing or aiding a dental hygienist, dental assistant, oral maxillofacial surgery assistant, dental laboratory technician, or holder of a permit to operate a dental laboratory to violate any provision of the State Dental Act or the rules of the Board;

27. Willfully disclosing information protected by the Health Information Portability and Accountability Act, P.L. 104-191;

28. Writing a false, unnecessary, or excessive prescription for any drug or narcotic which is a controlled dangerous substance under either federal or state law, or prescribing, dispensing or administering opioid drugs in excess of the maximum limits authorized in Section 2-309I of Title 63 of the Oklahoma Statutes;

29. Prescribing or administering any drug or treatment without having established a valid dentist-patient relationship;

30. Using or administering nitrous oxide gas in a dental office in an inappropriate or unauthorized manner;

31. Engaging in nonconsensual physical contact with a patient which is sexual in nature, or engaging in a verbal communication which is intended to be sexually demeaning to a patient;

32. Practicing dentistry without displaying, at the dentist's primary place of practice, the license issued to the dentist by the Board to practice dentistry and the current renewal certificate;
33. Being dishonest in a material way with a patient;

34. Failing to retain all patient records for at least seven (7) years from the date of the last treatment, except that the failure to retain records shall not be a violation of the State Dental Act if the dentist shows that the records were lost, destroyed, or removed by another, without the consent of the dentist;

35. Failing to retain the dentist's copy of any laboratory prescription for at least three (3) years, except that the failure to retain records shall not be a violation of the State Dental Act if the dentist shows that the records were lost, destroyed, or removed by another, without the consent of the dentist;

36. Allowing any corporation, organization, group, person, or other legal entity, except another dentist or a professional entity that is in compliance with the registration requirements of subsection B of Section 328.31 of this title, to direct, control, or interfere with the dentist's clinical judgment. Clinical judgment shall include, but not be limited to, such matters as selection of a course of treatment, control of patient records, policies and decisions relating to pricing, credit, refunds, warranties and advertising, and decisions relating to office personnel and hours of practice. Nothing in this paragraph shall be construed to:

   a. limit a patient's right of informed consent, or

   b. prohibit insurers, preferred provider organizations and managed care plans from operating pursuant to the applicable provisions of the Oklahoma Insurance Code and the Public Health Code;

37. Violating the state dental act of another state resulting in a plea of guilty or nolo contendere, conviction or suspension or revocation or other sanction by another state board, of the license of the dentist under the laws of that state;

38. Violating or attempting to violate the provisions of the State Dental Act or the rules of the Board, as a principal, accessory or accomplice;
39. Failing to comply with the terms and conditions of an order imposing suspension of a license or placement on probation issued pursuant to Section 328.44a of this title;

40. Failing to cooperate during an investigation or providing false information, verbally or in writing, to the Board, the Board's investigator or an agent of the Board; or

41. Having multiple administrative or civil actions reported to the National Practitioner Databank.

B. The provisions of the State Dental Act shall not be construed to prohibit any dentist from displaying or otherwise advertising that the dentist is also currently licensed, registered, certified, or otherwise credentialed pursuant to the laws of this state or a nationally recognized credentialing board, if authorized by the laws of the state or credentialing board to display or otherwise advertise as a licensed, registered, certified, or credentialed dentist.

SECTION 4. AMENDATORY 59 O.S. 2011, Section 328.41, as last amended by Section 11, Chapter 151, O.S.L. 2018 (59 O.S. Supp. 2018, Section 328.41), is amended to read as follows:

Section 328.41. A. 1. On or before the last day of December of each year, every dentist, dental hygienist, dental assistant, oral maxillofacial surgery assistant and other licensee or permit holders previously licensed or permitted by the Board to practice in this state, with the exception of those listed in paragraph 2 of this subsection, shall submit a completed renewal application with information as may be required by the Board, together with an annual renewal fee established by the rules of the Board. Upon receipt of the annual renewal fee, the Board shall issue a renewal certificate authorizing the dentist, dental hygienist, dental assistant, or oral maxillofacial surgery assistant to continue the practice of dentistry or dental hygiene, respectively, in this state for a period of one (1) year. Every license or permit issued by the Board shall begin on January 1 and expire on December 31 of each year.

2. Beginning July 1, 2017, resident and fellowship permits shall be valid from July 1 through June 30 of each year and dental
student intern permits shall be valid from August 1 through July 31 of each year.

B. Continuing education requirements shall be due at the end of each three-year period ending in 2019 as follows:

1. Dentists shall complete sixty (60) hours. Such continuing education shall include not less than three (3) hours of education in pain management or three (3) hours of education in opioid use or addiction, unless the licensee has demonstrated to the satisfaction of the Board of Dentistry that the licensee does not currently hold a valid federal Drug Enforcement Administration registration number;

2. Hygienists shall complete thirty (30) hours;

3. Oral maxillofacial surgery assistants shall complete twelve (12) hours; and

4. Beginning in 2020, continuing education requirements shall be due at the end of each two-year period as follows:
   a. dentists shall complete forty (40) hours,
   b. hygienists shall complete twenty (20) hours,
   c. OMS assistants shall complete eight (8) hours, and
   d. dental assistants shall have two (2) hours of infection control.

C. Upon failure of a dentist, dental hygienist, dental assistant, or oral maxillofacial surgery assistant to pay the annual renewal fee within two (2) months after January 1, the Board shall notify the dentist, dental hygienist, dental assistant, or oral maxillofacial surgery assistant in writing by certified mail to the last-known mailing address of the dentist, dental hygienist, dental assistant, or oral maxillofacial surgery assistant as reflected in the records of the Board.

D. Any dentist, dental hygienist, dental assistant, or oral maxillofacial surgery assistant whose license or permit is automatically canceled by reason of failure, neglect or refusal to
secure the renewal certificate may be reinstated by the Board at any
time within one (1) year from the date of the expiration of the
license, upon payment of the annual renewal fee and a penalty fee
established by the rules of the Board. If the dentist, dental
hygienist, dental assistant, or oral maxillofacial surgery assistant
does not apply for renewal of the license or permit and pay the
required fees within one (1) year after the license has expired,
then the dentist, dental hygienist, dental assistant, or oral
maxillofacial surgery assistant shall be required to file an
application for and take the examination or other requirements
provided for in the State Dental Act or the rules promulgated by the
Board before again commencing practice.

E. The Board, by rule, shall provide for the remittance of fees
otherwise required by the State Dental Act while a dentist or dental
hygienist is on active duty with any of the Armed Forces of the
United States.

F. In case of a lost or destroyed license or renewal
certificate and upon satisfactory proof of the loss or destruction
thereof, the Board may issue a duplicate, charging therefor a fee
established by the rules of the Board.

G. A dentist, dental hygienist, oral maxillofacial surgery
assistant or dental assistant that is in good standing and not under
investigation that notifies the Board in writing of a voluntary
nonrenewal of license or requests retirement status shall have a
right to renew or reinstate his or her license within five (5) years
from the date of notice. The Board may require any training or
continuing education requirements to be met prior to reinstatement.

H. A dentist, dental hygienist, oral maxillofacial dental
assistant or dental assistant that has not had an active license or
permit in excess of five (5) years shall be required to apply as a
new applicant.

I. Any application for a license or permit that has remained
inactive for more than one (1) year shall be closed.

SECTION 5. AMENDATORY Section 3, Chapter 234, O.S.L.
2017, as amended by Section 1 of Enrolled Senate Bill No. 1019 of
the 1st Session of the 57th Oklahoma Legislature (59 O.S. Supp. 2018, Section 353.20.2), is amended to read as follows:

Section 353.20.2. A. Except as provided in subsection C of this section, unless the prescriber has specified on the prescription that dispensing a prescription for a maintenance medication in an initial amount followed by periodic refills is medically necessary, a pharmacist may exercise his or her professional judgment to dispense varying quantities of medication per fill-up to the total number of dosage units as authorized by the prescriber on the original prescription including any refills.

B. Subsection A of this section shall not apply to scheduled medications or any medications for which a report is required under the controlled substance database. Dispensing of medication based on refills authorized by the physician on the prescription shall be limited to no more than a ninety-day supply of the medication.

C. 1. A pharmacist may dispense without a prescription one or more devices or medications as medically necessary to prevent the death of or serious harm to the health of a patient if the following conditions are met:

a. the pharmacy which the pharmacist owns or at which the pharmacist is employed has a current record of a prescription for the medication or device prescribed in the name of the patient who is requesting it, but the prescription has expired and a refill requires authorization from the licensed practitioner who issued the prescription and neither the patient nor the pharmacist was able to obtain the refill after reasonable attempts were made to obtain such refill and the pharmacist documents such attempts on a form prescribed by the State Board of Pharmacy,

b. the failure of the pharmacist to dispense the medication or device reasonably could result in the death of or serious harm to the health of the patient,

c. the device or medication is listed on the formulary described in paragraph 4 of this subsection,
d. the patient has been on a consistent medication therapy as demonstrated by records maintained by the pharmacy, and

e. the amount of the medication or device dispensed is for a reasonable amount of time; provided, if the patient or pharmacist is unable to obtain a refill prescription from the patient's licensed practitioner before the amount prescribed to prevent death or serious harm to the health of the patient is depleted, the pharmacist may dispense an additional amount of the medication or device not more than once in an amount consistent with past prescriptions of the patient.

2. The standard of care required of a pharmacist licensed in this state who is acting in accordance with the provisions of this subsection shall be the level and type of care, skill and diligence that a reasonably competent and skilled pharmacist with a similar background and in the same or similar locality would have provided under the circumstance.

3. Any pharmacist licensed in this state who in good faith dispenses one or more medications or devices to a patient pursuant to the provisions of this subsection shall not be liable for any civil damages or subject to criminal prosecution as a result of any acts or omissions except for committing gross negligence or willful or wanton acts committed in dispensing or failure to dispense the medication or device.

4. The State Board of Pharmacy shall develop and update as necessary an inclusionary formulary of potentially life-saving prescription medications and devices, not to include controlled dangerous substances, for the purposes of this subsection. Such medications and devices shall include but not be limited to:

a. insulin and any devices or supplies necessary for the administration of insulin,

b. glucometers and any devices or supplies necessary for the operation of the glucometer, and
c. rescue inhalers.

5. Dispensing in accordance with this subsection shall be deemed dispensing under a legal prescription for purposes of the Pharmacy Audit Integrity Act, Section 356 et seq. of this title.

D. Upon receipt of a valid Schedule II opioid prescription issued pursuant to the provisions of Section 2-309I of Title 63 of the Oklahoma Statutes, a pharmacist shall fill the prescription to the specified dose, and shall not be permitted to fill a different dosage than what is prescribed. However, the pharmacist maintains the right not to fill the valid opioid prescription.

SECTION 6. AMENDATORY 59 O.S. 2011, Section 509, as amended by Section 2, Chapter 175, O.S.L. 2018 (59 O.S. Supp. 2018, Section 509), is amended to read as follows:

Section 509. The words "unprofessional conduct" as used in Sections 481 through 518.1 of this title are hereby declared to include, but shall not be limited to, the following:

1. Procuring, aiding or abetting a criminal operation;

2. The obtaining of any fee or offering to accept any fee, present or other form of remuneration whatsoever, on the assurance or promise that a manifestly incurable disease can or will be cured;

3. Willfully betraying a professional secret to the detriment of the patient;

4. Habitual intemperance or the habitual use of habit-forming drugs;

5. Conviction of a felony or of any offense involving moral turpitude;

6. All advertising of medical business in which statements are made which are grossly untrue or improbable and calculated to mislead the public;

7. Conviction or confession of a crime involving violation of:
a. the antinarcotic or prohibition laws and regulations of the federal government,

b. the laws of this state, or

c. State Board of Health rules;

8. Dishonorable or immoral conduct which is likely to deceive, defraud, or harm the public;

9. The commission of any act which is a violation of the criminal laws of any state when such act is connected with the physician's practice of medicine. A complaint, indictment or confession of a criminal violation shall not be necessary for the enforcement of this provision. Proof of the commission of the act while in the practice of medicine or under the guise of the practice of medicine shall be unprofessional conduct;

10. Failure to keep complete and accurate records of purchase and disposal of controlled drugs or of narcotic drugs;

11. The writing of false or fictitious prescriptions for any drugs or narcotics declared by the laws of this state to be controlled or narcotic drugs;

12. Prescribing or administering a drug or treatment without sufficient examination and the establishment of a valid physician-patient relationship;

13. The violation, or attempted violation, direct or indirect, of any of the provisions of the Oklahoma Allopathic Medical and Surgical Licensure and Supervision Act, either as a principal, accessory or accomplice;

14. Aiding or abetting, directly or indirectly, the practice of medicine by any person not duly authorized under the laws of this state;

15. The inability to practice medicine with reasonable skill and safety to patients by reason of age, illness, drunkenness, excessive use of drugs, narcotics, chemicals, or any other type of material or as a result of any mental or physical condition. In
enforcing this subsection the State Board of Medical Licensure and Supervision may, upon probable cause, request a physician to submit to a mental or physical examination by physicians designated by it. If the physician refuses to submit to the examination, the Board shall issue an order requiring the physician to show cause why the physician will not submit to the examination and shall schedule a hearing on the order within thirty (30) days after notice is served on the physician. The physician shall be notified by either personal service or by certified mail with return receipt requested. At the hearing, the physician and the physician's attorney are entitled to present any testimony and other evidence to show why the physician should not be required to submit to the examination. After a complete hearing, the Board shall issue an order either requiring the physician to submit to the examination or withdrawing the request for examination. The medical license of a physician ordered to submit for examination may be suspended until the results of the examination are received and reviewed by the Board;

16. a. Prescribing, dispensing or administering of controlled substances or narcotic drugs in excess of the amount considered good medical practice,

b. prescribing, dispensing or administering controlled substances or narcotic drugs without medical need in accordance with pertinent licensing board standards, or

c. prescribing, dispensing or administering opioid drugs in excess of the maximum dosage authorized under Section 5 of this act; limits authorized in Section 2-309I of Title 63 of the Oklahoma Statutes;

17. Engaging in physical conduct with a patient which is sexual in nature, or in any verbal behavior which is seductive or sexually demeaning to a patient;

18. Failure to maintain an office record for each patient which accurately reflects the evaluation, treatment, and medical necessity of treatment of the patient;

19. Failure to provide necessary ongoing medical treatment when a doctor-patient relationship has been established, which
relationship can be severed by either party providing a reasonable period of time is granted; or

20. Failure to provide a proper and safe medical facility setting and qualified assistive personnel for a recognized medical act, including but not limited to an initial in-person patient examination, office surgery, diagnostic service or any other medical procedure or treatment. Adequate medical records to support diagnosis, procedure, treatment or prescribed medications must be produced and maintained.

SECTION 7. AMENDATORY 59 O.S. 2011, Section 519.8, is amended to read as follows:

Section 519.8. A. Licenses issued to physician assistants shall be renewed annually on a date determined by the State Board of Medical Licensure and Supervision. Each application for renewal shall document that the physician assistant has earned at least twenty (20) hours of continuing medical education during the preceding calendar year. Such continuing medical education shall include not less than one (1) hour of education in pain management or one (1) hour of education in opioid use or addiction.

B. The Board shall promulgate, in the manner established by its rules, fees for the following:

1. Initial licensure;
2. License renewal;
3. Late license renewal;
4. Application to practice; and
5. Disciplinary hearing.

SECTION 8. AMENDATORY 59 O.S. 2011, Section 567.4a, as last amended by Section 1 of Enrolled Senate Bill No. 81 of the 1st Session of the 57th Oklahoma Legislature (59 O.S. Supp. 2018, Section 567.4a), is amended to read as follows:
Section 567.4a. The rules regarding prescriptive authority recognition promulgated by the Oklahoma Board of Nursing pursuant to paragraphs 6 through 9, 11 and 12 of Section 567.3a of this title shall:

1. Define the procedure for documenting supervision by a physician licensed in Oklahoma to practice by the State Board of Medical Licensure and Supervision or the State Board of Osteopathic Examiners. Such procedure shall include a written statement that defines appropriate referral, consultation, and collaboration between the Advanced Practice Registered Nurse, recognized to prescribe as defined in paragraphs 6 through 9, 11 and 12 of Section 567.3a of this title, and the supervising physician. The written statement shall include a method of assuring availability of the supervising physician through direct contact, telecommunications or other appropriate electronic means for consultation, assistance with medical emergencies, or patient referral. The written statement shall be part of the initial application and the renewal application submitted to the Board for recognition for prescriptive authority for the Advanced Practice Registered Nurse. Changes to the written statement shall be filed with the Board within thirty (30) days of the change and shall be effective on filing;

2. Define minimal requirements for initial application for prescriptive authority which shall include, but not be limited to, evidence of completion of a minimum of forty-five (45) contact hours or three (3) academic credit hours of education in pharmacotherapeutics, clinical application, and use of pharmacological agents in the prevention of illness, and in the restoration and maintenance of health in a program beyond basic registered nurse preparation, approved by the Board. Such contact hours or academic credits shall be obtained within a time period of three (3) years immediately preceding the date of application for prescriptive authority;

3. Define minimal requirements for application for renewal of prescriptive authority which shall include, but not be limited to, documentation of a minimum of:

   a. fifteen (15) contact hours or one (1) academic credit hour of education in pharmacotherapeutics, clinical application, and use of pharmacological agents in the
prevention of illness, and in the restoration and maintenance of health in a program beyond basic registered nurse preparation, and

b. two (2) hours of education in pain management or two (2) hours of education in opioid use or addiction, unless the Advanced Practice Registered Nurse has demonstrated to the satisfaction of the Board that the Advanced Practice Registered Nurse does not currently hold a valid federal Drug Enforcement Administration registration number, approved by the Board, within the two-year period immediately preceding the effective date of application for renewal of prescriptive authority;

4. Require that beginning July 1, 2002, an Advanced Practice Registered Nurse shall demonstrate successful completion of a master's degree or higher in a clinical nurse specialty in order to be eligible for initial application for prescriptive authority under the provisions of the Oklahoma Nursing Practice Act;

5. Define the method for communicating authority to prescribe or termination of same, and the formulary to the Board of Pharmacy, all pharmacies, and all registered pharmacists;

6. Define terminology used in such rules;

7. Define the parameters for the prescribing practices of the Advanced Practice Registered Nurse;

8. Define the methods for termination of prescriptive authority for the Advanced Practice Registered Nurse; and

9. a. Establish a Formulary Advisory Council that shall develop and submit to the Board recommendations for an exclusionary formulary that shall list drugs or categories of drugs that shall not be prescribed by Advanced Practice Registered Nurse recognized to prescribe by the Oklahoma Board of Nursing. The Formulary Advisory Council shall also develop and submit to the Board recommendations for practice-
specific prescriptive standards for each category of Advanced Practice Registered Nurse recognized to prescribe by the Oklahoma Board of Nursing pursuant to the provisions of the Oklahoma Nursing Practice Act. The Board shall either accept or reject the recommendations made by the Council. No amendments to the recommended exclusionary formulary may be made by the Board without the approval of the Formulary Advisory Council.

b. The Formulary Advisory Council shall be composed of twelve (12) members as follows:

(1) four members, to include a pediatrician, an obstetrician-gynecological physician, a general internist, and a family practice physician; provided that three of such members shall be appointed by the Oklahoma State Medical Association, and one shall be appointed by the Oklahoma Osteopathic Association,

(2) four members who are registered pharmacists, appointed by the Oklahoma Pharmaceutical Association, and

(3) four members, one of whom shall be a Certified Nurse Practitioner, one of whom shall be a Clinical Nurse Specialist, one of whom shall be a Certified Nurse-Midwife, and one of whom shall be a current member of the Oklahoma Board of Nursing, all of whom shall be appointed by the Oklahoma Board of Nursing.

c. All professional members of the Formulary Advisory Council shall be in active clinical practice, at least fifty percent (50%) of the time, within their defined area of specialty. The members of the Formulary Advisory Council shall serve at the pleasure of the appointing authority for a term of three (3) years. The terms of the members shall be staggered. Members of the Council may serve beyond the expiration of their term of office until a successor is appointed by
the original appointing authority. A vacancy on the Council shall be filled for the balance of the unexpired term by the original appointing authority.

d. Members of the Council shall elect a chair and a vice-chair from among the membership of the Council. For the transaction of business, at least seven members, with a minimum of two members present from each of the identified categories of physicians, pharmacists and advanced practice registered nurses, shall constitute a quorum. The Council shall recommend and the Board shall approve and implement an initial exclusionary formulary on or before January 1, 1997. The Council and the Board shall annually review the approved exclusionary formulary and shall make any necessary revisions utilizing the same procedures used to develop the initial exclusionary formulary.

SECTION 9. AMENDATORY 59 O.S. 2011, Section 567.8, as last amended by Section 2 of Enrolled Senate Bill No. 81 of the 1st Session of the 57th Legislature (59 O.S. Supp. 2018, Section 567.8), is amended to read as follows:

Section 567.8. A. The Oklahoma Board of Nursing shall have the power to take any or all of the following actions:

1. To deny, revoke or suspend any:

   a. licensure to practice as a Licensed Practical Nurse, single-state or multistate,

   b. licensure to practice as a Registered Nurse, single-state or multistate,

   c. multistate privilege to practice in Oklahoma,

   d. licensure to practice as an Advanced Practice Registered Nurse,

   e. certification to practice as an Advanced Unlicensed Assistant,
f. authorization for prescriptive authority, or

g. authority to order, select, obtain and administer drugs;

2. To assess administrative penalties; and

3. To otherwise discipline applicants, licensees or Advanced Unlicensed Assistants.

B. The Board shall impose a disciplinary action against the person pursuant to the provisions of subsection A of this section upon proof that the person:

1. Is guilty of deceit or material misrepresentation in procuring or attempting to procure:

   a. a license to practice registered nursing, licensed practical nursing, and/or or a license to practice advanced practice registered nursing with or without either prescriptive authority recognition or authorization to order, select, obtain and administer drugs, or

   b. certification as an Advanced Unlicensed Assistant;

2. Is guilty of a felony, or any offense reasonably related to the qualifications, functions or duties of any licensee or Advanced Unlicensed Assistant, or any offense an essential element of which is fraud, dishonesty, or an act of violence, or for any offense involving moral turpitude, whether or not sentence is imposed, or any conduct resulting in the revocation of a deferred or suspended sentence or probation imposed pursuant to such conviction;

3. Fails to adequately care for patients or to conform to the minimum standards of acceptable nursing or Advanced Unlicensed Assistant practice that, in the opinion of the Board, unnecessarily exposes a patient or other person to risk of harm;

4. Is intemperate in the use of alcohol or drugs, which use the Board determines endangers or could endanger patients;
5. Exhibits through a pattern of practice or other behavior actual or potential inability to practice nursing with sufficient knowledge or reasonable skills and safety due to impairment caused by illness, use of alcohol, drugs, chemicals or any other substance, or as a result of any mental or physical condition, including deterioration through the aging process or loss of motor skills, mental illness, or disability that results in inability to practice with reasonable judgment, skill or safety; provided, however, the provisions of this paragraph shall not be utilized in a manner that conflicts with the provisions of the Americans with Disabilities Act;

6. Has been adjudicated as mentally incompetent, mentally ill, chemically dependent or dangerous to the public or has been committed by a court of competent jurisdiction, within or without this state;

7. Is guilty of unprofessional conduct as defined in the rules of the Board;

8. Is guilty of any act that jeopardizes a patient's life, health or safety as defined in the rules of the Board;

9. Violated a rule promulgated by the Board, an order of the Board, or a state or federal law relating to the practice of registered, practical or advanced practice registered nursing or advanced unlicensed assisting, or a state or federal narcotics or controlled dangerous substance law including, but not limited to prescribing, dispensing or administering opioid drugs in excess of the maximum limits authorized in Section 2-309I of Title 63 of the Oklahoma Statutes;

10. Has had disciplinary actions taken against the individual's registered or practical nursing license, advanced unlicensed assistive certification, or any professional or occupational license, registration or certification in this or any state, territory or country;

11. Has defaulted and/or or been terminated from the peer assistance program for any reason;
12. Fails to maintain professional boundaries with patients, as defined in the Board rules; and/or or

13. Engages in sexual misconduct, as defined in Board rules, with a current or former patient or key party, inside or outside the health care setting.

C. Any person who supplies the Board information in good faith shall not be liable in any way for damages with respect to giving such information.

D. The Board may cause to be investigated all reported violations of the Oklahoma Nursing Practice Act. Information obtained during an investigation into possible violations of the Oklahoma Nursing Practice Act shall be kept confidential, but may be introduced by the state in administrative proceedings before the Board, whereupon the information admitted becomes a public record. Public records maintained by the agency are administrative records, not public civil or criminal records.

Confidential investigative records shall not be subject to discovery or subpoena in any civil or criminal proceeding, except that the Board may give such information to law enforcement and other state agencies as necessary and appropriate in the discharge of the duties of that agency and only under circumstances that ensure against unauthorized access to the information.

E. The Board may authorize the Executive Director to issue a confidential letter of concern to a licensee when evidence does not warrant formal proceedings, but the Executive Director has noted indications of possible errant conduct that could lead to serious consequences and formal action.

F. All individual proceedings before the Board shall be conducted in accordance with the Administrative Procedures Act.

G. At a hearing the accused shall have the right to appear either personally or by counsel, or both, to produce witnesses and evidence on behalf of the accused, to cross-examine witnesses and to have subpoenas issued by the designated Board staff. If the accused is found guilty of the charges the Board may refuse to issue a
renewal of license to the applicant, revoke or suspend a license, or otherwise discipline a licensee.

H. A person whose license is revoked may not apply for reinstatement during the time period set by the Board. The Board on its own motion may at any time reconsider its action.

I. Any person whose license is revoked or who applies for renewal of registration and who is rejected by the Board shall have the right to appeal from such action pursuant to the Administrative Procedures Act.

J. 1. Any person who has been determined by the Board to have violated any provisions of the Oklahoma Nursing Practice Act or any rule or order issued pursuant thereto shall be liable for an administrative penalty not to exceed Five Hundred Dollars ($500.00) for each count for which any holder of a certificate or license has been determined to be in violation of the Oklahoma Nursing Practice Act or any rule promulgated or order issued pursuant thereto.

2. The amount of the penalty shall be assessed by the Board pursuant to the provisions of this section, after notice and an opportunity for hearing is given to the accused. In determining the amount of the penalty, the Board shall include, but not be limited to, consideration of the nature, circumstances, and gravity of the violation and, with respect to the person found to have committed the violation, the degree of culpability, the effect on ability of the person to continue to practice, and any show of good faith in attempting to achieve compliance with the provisions of the Oklahoma Nursing Practice Act.

K. The Board shall retain jurisdiction over any person issued a license, certificate or temporary license pursuant to the Oklahoma Nursing Practice Act, regardless of whether the license, certificate or temporary license has expired, lapsed or been relinquished during or after the alleged occurrence or conduct prescribed by the Oklahoma Nursing Practice Act.

L. In the event disciplinary action is imposed, any person so disciplined shall be responsible for any and all costs associated with satisfaction of the discipline imposed.
M. In the event disciplinary action is imposed in an administrative proceeding, the Board shall have the authority to recover the monies expended by the Board in pursuing any disciplinary action, including but not limited to costs of investigation, probation or monitoring fees, administrative costs, witness fees, attorney fees and court costs. This authority shall be in addition to the Board's authority to impose discipline as set out in subsection A of this section.

N. The Executive Director shall immediately suspend the license of any person upon proof that the person has been sentenced to a period of continuous incarceration serving a penal sentence for commission of a misdemeanor or felony. The suspension shall remain in effect until the Board acts upon the licensee's written application for reinstatement of the license.

O. When a majority of the officers of the Board, which constitutes the President, Vice President and Secretary/Treasurer, find that preservation of the public health, safety or welfare requires immediate action, summary suspension of licensure or certification may be ordered before the filing of a sworn complaint or at any other time before the outcome of an individual proceeding. The summary suspension of licensure or certification may be ordered without compliance with the requirements of the Oklahoma Open Meeting Act. Within seven (7) days after the summary suspension, the licensee shall be notified by letter that summary suspension has occurred. The summary suspension letter shall include notice of the date of the proposed hearing to be held in accordance with Oklahoma Administrative Code 485:10-11-2 and the Administrative Procedures Act, within ninety (90) days of the date of the summary suspension letter, and shall be signed by one of the Board officers.

P. In any proceeding in which the Board is required to serve an order on an individual, the Board may send such material to the individual's address of record with the Board. If the order is returned with a notation by the United States Postal Service indicating that it is undeliverable for any reason, and the records of the Board indicate that the Board has not received any change of address since the order was sent, as required by the rules of the Board, the order and any subsequent material relating to the same matter sent to the most recent address on file with the Board shall
be deemed by the court as having been legally served for all purposes.

SECTION 10. AMENDATORY 59 O.S. 2011, Section 585, is amended to read as follows:

Section 585. A. The Board of Examiners in Optometry shall have the power to revoke or suspend any certificate granted by it pursuant to the provisions of this chapter, for fraud, conviction of crime, unprofessional and unethical conduct, habitual drunkenness, exorbitant charges, false representation of goods, gross incompetency, contagious disease, any violation of any rule or regulation promulgated by the Board pursuant to the provisions of this chapter or any violation of this chapter. The following acts shall be deemed by the Board as unprofessional and unethical conduct:

1. Employment by a licensed optometrist of any person to solicit from house to house the sale of lenses, frames, spectacles, or optometric services or examinations; and

2. Selling, advertising, or soliciting the sale of spectacles, eyeglasses, lenses, frames, mountings, eye examinations, or optometric services by house-to-house canvassing either in person or through solicitors; and

3. Acceptance of employment, either directly or indirectly, by a licensed optometrist from an unlicensed optometrist or person engaged in any profession or business or owning or operating any profession or business to assist it, him or her, or them in practicing optometry in this state; and

4. Publishing or displaying, or knowingly causing or permitting to be published or displayed by newspaper, radio, television, window display, poster, sign, billboard, or any other advertising media any statement or advertisement of any price or fee offered or charged by an optometrist for any optometric services or materials including lenses, frames, eyeglasses, or spectacles or parts thereof, including statements or advertisements of discount, premium, or gifts, if said statements or advertisements are fraudulent, deceitful, misleading or in any manner whatsoever tend to create a misleading impression or are likely to mislead or deceive because in
context said statements or advertisements make only a partial
disclosure of relevant facts; and

5. No person shall practice Practicing optometry under any name
other than the proper name of said person and it, which shall be the
same name as used in the license issued by the Board of Examiners to
said the person; and

6. Prescribing, dispensing or administering opioid drugs in
excess of the maximum limits authorized in Section 2-309I of Title
63 of the Oklahoma Statutes.

B. Before any certificate is revoked or suspended, the holder
thereof shall be provided with notice and hearing as provided for in
the Administrative Procedures Act, Sections 301 through 326 of Title
75 of the Oklahoma Statutes. The Board, after the expiration of
the period of three (3) months after the date of said the revocation,
may entertain application for the reissuance of said the revoked
certificate and may reissue said the certificate upon payment of a
reinstatement fee not to exceed three times the annual renewal fee.
The Board shall have the right to promulgate such rules and
regulations as may be necessary to put into effect the provisions of
this chapter. Said Such rules may prescribe which acts are
detrimental to the general public health or welfare and may
prescribe a minimum standard of sanitation, hygiene, and
professional surroundings, and which acts constitute unprofessional
or unethical conduct. Said Such conduct shall be grounds for
revocation or suspension of the license or certificate issued
pursuant to the provisions of Section 584 of this title.

B- C. If an out-of-state license or certificate of an
optometrist who also holds an Oklahoma license or certificate is
suspended or revoked for any reason, his the optometrist's Oklahoma
license may come under review by the Board. Should the out-of-state
suspension or revocation be on grounds the same or similar to
grounds for suspension or revocation in Oklahoma, the Board, after
notice and hearing pursuant to the provisions of this section, may
suspend or revoke the certificate of said the optometrist to
practice in Oklahoma.

SECTION 11. AMENDATORY 59 O.S. 2011, Section 604, is
amended to read as follows:
Section 604. Every person holding a license to practice optometry in this state shall be required to present to the Board of Examiners in Optometry, not later than the thirtieth day of June of each year, satisfactory evidence that during the preceding twelve (12) months said the person attended not less than two (2) days of a total of at least twelve (12) hours of educational or postgraduate programs approved by said the Board, or that said the person was prevented, because of sickness or any other reason acceptable to the Board, from attending said the educational or postgraduate program. Such education shall include not less than one (1) hour of education in pain management or one (1) hour of education in opioid use or addiction, unless the person has demonstrated to the satisfaction of the Board that the person does not currently hold a valid federal Drug Enforcement Administration registration number.

The filing of proof of attendance at educational programs or clinics shall be a condition precedent to the issuance of a renewal license. The Board may reinstate the license of said the licensee to practice optometry upon presentation of satisfactory proof of postgraduate study of a standard approved by said the examiners and payment of all fees due including a late reinstatement fee not to exceed three times the annual renewal fee.

SECTION 12. AMENDATORY 59 O.S. 2011, Section 637, is amended to read as follows:

Section 637. A. The State Board of Osteopathic Examiners may refuse to admit a person to an examination or may refuse to issue or reinstate or may suspend or revoke any license issued or reinstated by the Board upon proof that the applicant or holder of such a license:

1. Has obtained a license, license renewal or authorization to sit for an examination, as the case may be, through fraud, deception, misrepresentation or bribery; or has been granted a license, license renewal or authorization to sit for an examination based upon a material mistake of fact;

2. Has engaged in the use or employment of dishonesty, fraud, misrepresentation, false promise, false pretense, unethical conduct or unprofessional conduct, as may be determined by the Board, in the
performance of the functions or duties of an osteopathic physician, including but not limited to the following:

a. obtaining or attempting to obtain any fee, charge, tuition or other compensation by fraud, deception or misrepresentation; willfully and continually overcharging or overtreating patients; or charging for visits to the physician's office which did not occur or for services which were not rendered,

b. using intimidation, coercion or deception to obtain or retain a patient or discourage the use of a second opinion or consultation,

c. willfully performing inappropriate or unnecessary treatment, diagnostic tests or osteopathic medical or surgical services,

d. delegating professional responsibilities to a person who is not qualified by training, skill, competency, age, experience or licensure to perform them, noting that delegation may only occur within an appropriate doctor-patient relationship, wherein a proper patient record is maintained including, but not limited to, at the minimum, a current history and physical,

e. misrepresenting that any disease, ailment, or infirmity can be cured by a method, procedure, treatment, medicine or device,

f. acting in a manner which results in final disciplinary action by any professional society or association or hospital or medical staff of such hospital in this or any other state, whether agreed to voluntarily or not, if the action was in any way related to professional conduct, professional competence, malpractice or any other violation of the Oklahoma Osteopathic Medicine Act,

g. signing a blank prescription form; or dispensing, prescribing, administering or otherwise distributing
any drug, controlled substance or other treatment without sufficient examination or the establishment of a physician/patient physician-patient relationship, or for other than medically accepted therapeutic or experimental or investigational purpose duly authorized by a state or federal agency, or not in good faith to relieve pain and suffering, or not to treat an ailment, physical infirmity or disease, or violating any state or federal law on controlled dangerous substances including, but not limited to, prescribing, dispensing or administering opioid drugs in excess of the maximum limits authorized in Section 2-3091 of Title 63 of the Oklahoma Statutes,

h. engaging in any sexual activity within a physician/patient physician-patient relationship,

i. terminating the care of a patient without adequate notice or without making other arrangements for the continued care of the patient,

j. failing to furnish a copy of a patient's medical records upon a proper request from the patient or legal agent of the patient or another physician; or failing to comply with any other law relating to medical records,

k. failing to comply with any subpoena issued by the Board,

l. violating a probation agreement or order with this Board or any other agency, and

m. failing to keep complete and accurate records of purchase and disposal of controlled drugs or narcotic drugs;

3. Has engaged in gross negligence, gross malpractice or gross incompetence;

4. Has engaged in repeated acts of negligence, malpractice or incompetence;
5. Has been finally adjudicated and found guilty, or entered a plea of guilty or nolo contendere in a criminal prosecution, for any offense reasonably related to the qualifications, functions or duties of an osteopathic physician, or for any offense involving moral turpitude, whether or not sentence is imposed, and regardless of the pendency of an appeal;

6. Has had the authority to engage in the activities regulated by the Board revoked, suspended, restricted, modified or limited, or has been reprimanded, warned or censured, probated or otherwise disciplined by any other state or federal agency whether or not voluntarily agreed to by the physician including, but not limited to, the denial of licensure, surrender of the license, permit or authority, allowing the license, permit or authority to expire or lapse, or discontinuing or limiting the practice of osteopathic medicine pending disposition of a complaint or completion of an investigation;

7. Has violated, or failed to comply with provisions of any act or regulation administered by the Board;

8. Is incapable, for medical or psychiatric or any other good cause, of discharging the functions of an osteopathic physician in a manner consistent with the public's health, safety and welfare;

9. Has been guilty of advertising by means of knowingly false or deceptive statements;

10. Has been guilty of advertising, practicing, or attempting to practice under a name other than one's own;

11. Has violated or refused to comply with a lawful order of the Board;

12. Has been guilty of habitual drunkenness, or habitual addiction to the use of morphine, cocaine or other habit-forming drugs;

13. Has been guilty of personal offensive behavior, which would include, but not be limited to obscenity, lewdness, molestation and other acts of moral turpitude; and
14. Has been adjudicated to be insane, or incompetent, or admitted to an institution for the treatment of psychiatric disorders.

B. The State Board of Osteopathic Examiners shall neither refuse to renew, nor suspend, nor revoke any license, however, for any of these causes, unless the person accused has been given at least twenty (20) days' notice in writing of the charge against him or her and a public hearing by the State Board provided, three-fourths (3/4) of a quorum present at a meeting may vote to suspend a license in an emergency situation if the licensee affected is provided a public hearing within thirty (30) days of the emergency suspension.

C. The State Board of Osteopathic Examiners shall have the power to order or subpoena the attendance of witnesses, the inspection of records and premises and the production of relevant books and papers for the investigation of matters that may come before them. The presiding officer of said the Board shall have the authority to compel the giving of testimony as is conferred on courts of justice.

D. Any osteopathic physician in the State of Oklahoma whose license to practice osteopathic medicine is revoked or suspended under the previous paragraphs of this section shall have the right to seek judicial review of a ruling of the Board pursuant to the Administrative Procedures Act.

E. The Board may enact rules and regulations pursuant to the Administrative Procedures Act setting out additional acts of unprofessional conduct; which acts shall be grounds for refusal to issue or reinstate, or for action to condition, suspend or revoke a license.

SECTION 13. AMENDATORY 59 O.S. 2011, Section 641, is amended to read as follows:

Section 641. A. All persons legally licensed to practice osteopathic medicine in this state, on or before the first day of July of each year, shall apply to the secretary-treasurer of the Board, on forms furnished thereby, for a renewal certificate of