



October 2025 News Blast

North Dakota Board of Medicine

4204 Boulder Ridge Rd Ste 260

Bismarck, ND 58503

(701) 450-4060

2026 Meeting Schedule

January 30, 2026

April 24, 2026

July 31, 2026

October 30, 2026

A MESSAGE FROM THE CHAIR

As we enter the final stretch of 2025, I'd like to take a moment to reflect on the mission of the North Dakota Board of Medicine (NDBOM) and the work we do to support healthcare professionals across our state.

The Board's mission is rooted in public protection through the regulation of medicine, naturopathy, and genetic counseling. But our work goes beyond licensure and discipline—we strive to foster a professional environment where clinicians can focus on patient care without being burdened by unnecessary administrative hurdles. We believe that thoughtful regulation should empower, not encumber, those who dedicate their lives to healing others.

In addition to our regulatory responsibilities, the Board plays a role in shaping healthcare policy in North Dakota to fulfill its mission of protecting the health, safety, and welfare of the citizens in North Dakota. We work closely with legislators, professional associations, and other regulatory bodies to ensure that proposed changes to healthcare law are practical, evidence-based, and aligned with the needs of both patients and providers.

A special legislative session is being planned for January 2026, with a focus on the [Rural Health Transformation \(RHT\) Program](#), which was a part of H.R.1 - [One Big Beautiful Bill Act](#), a recently passed U.S. federal statute passed by the 119th United States Congress. Among the proposed bills in North Dakota being considered are:

- [CME requirements focused on nutrition for all physicians](#)
- [Prescriptive authority of pharmacists and therapeutic substitution](#)
- [North Dakota's participation in the PA Compact](#)

These proposals, while well-intentioned, carry implications that deserve careful consideration. We encourage all licensees to stay informed as the bills are finalized and to actively engage in the legislative process—whether through their professional associations, conversations with colleagues, or direct outreach to lawmakers. Your voice matters, and your insight is essential to shaping policies that truly support the practice of medicine, naturopathy, and genetic counseling in North Dakota.

The NDBOM has been working collaboratively with the North Dakota Medical Association, the Board of Pharmacy, and legislators to ensure that all perspectives are heard and that any changes serve the best interests of North Dakota.

As November arrives and the holiday season approaches, I want to extend my warmest wishes to all of you. May the final months of 2025 bring peace, health, and time well spent with loved ones.

Jay Metzger, PA-C

Chair, North Dakota Board of Medicine

OCTOBER MEETING HIGHLIGHTS

At the meeting on October 24, 2025, the North Dakota Board of Medicine approved 116 Physician licenses which included 2 licenses granted after an interview, 28 Physician Assistant licenses, 9 Genetic Counselor licenses, and 1 Naturopathic Doctor endorsement. There were 21 Letters of Qualification for State of Principal Licensure, and 237 Non-State of Principal licenses issued through the Interstate Medical Licensing Compact (IMLC).

The Board received reports from Investigative Panel A and Investigative Panel B. A total of 60 cases were reviewed, which included 10 summary matters and 23 malpractice cases. Six (6) stipulations were approved for discipline, 5 letters of concern were issued, 6 cases were tabled to obtain additional information; 1 Order was approved; all other cases were dismissed, or no further action taken. During the Board meeting, disciplinary action was taken against 7 physicians.

[Recent Board Actions](#) can be found under the News section of the Board's website.

Updates were given from the IT Committee – and the implementation of Phase II of the API integration for IMLC applications and state of principal licensure redesignation. The PHP Committee provided an update on policies and procedures implemented by NDPHP, updated Board policies involving the PHP, and a draft contract for approval. Members attending the Board's Working Group on Alternative Pathways to Licensure of International Medical Physicians provided an update from the kickoff meeting that was held September 17, 2025, with numerous participants representing constituents from the state, health care facilities, and IMPs themselves.

The Board also discussed four bills being put forth by the Legislator's Rural Health Transformation Committee as it submits its application for funding under the federal Rural Health Transformation Program grant. The Legislators are looking to convene a special session January 2026 and will consider the bills at that time.

The Board discussed its position on the physician CME bill, PA Compact, and pharmacists ordering/prescribing bill.

After discussion, the Board chose to remain neutral on the CME and PA Compact bills – to provide information but not take a position. However, the Board engaged in a lengthy discussion on the bill allowing pharmacists to test, establish a prescriber-patient relationship, diagnose, prescribe, and being able to “substitute a drug for a therapeutically equivalent drug.” The Board chose to oppose the bill as written and attempt to work with legislators on reforming the bill to address its concerns.

Finally, the Board discussed a potential contract to obtain secure AI services in the Board office – for aid in investigating and processing complaints – that would be secure and HIPAA compliant. The Board authorized the IT Committee to move forward with such discussions and options.

PHYSICIAN ASSISTANT CORNER

Five Years In: North Dakota's PA Autonomy Reform Shows Decline in Disciplinary Actions

In 2019, North Dakota became the first state in the nation to enact legislation (HB 1175) granting physician assistants (PAs) the ability to practice without a state-mandated supervisory agreement. This landmark reform shifted the regulatory model from supervision to collaboration, empowering PAs to practice to the full extent of their education and training within defined practice settings.

As the first jurisdiction to implement such sweeping changes, North Dakota has served as a bellwether for the national conversation on PA autonomy. Now, with five years of post-reform data available, we are in a position to evaluate the impact of these changes on patient safety and professional accountability.

Key Findings: A Decline in Formal Disciplinary Actions

A comparative analysis of the five years before (2014–2019) and after (2020–2024) the reform reveals a compelling trend: while the number of practicing PAs in North Dakota increased by nearly 25% (from an average of 318 to 397 annually), the number of formal disciplinary actions taken by the Board decreased.

- Formal actions per 100 PAs dropped from 0.250 to 0.047.
- Total formal actions fell from four in the pre-reform period to just one post-reform.
- Notably, no care-related actions were recorded after the reform; the sole post-reform action was related to professionalism.

These findings suggest that increased autonomy has not led to a rise in serious disciplinary issues. On the contrary, the data indicate that PAs have continued to provide safe, competent care under the new collaborative model.

Complaints: A Modest Increase, But Fewer Escalations

While the total number of complaints rose from 26 to 43 over the two periods, this increase is proportional to the growth in the PA workforce. When adjusted for the number of practicing PAs, the complaint rate rose modestly from 1.623 to 2.179 per 100 PAs—a 34.3% increase. However, the dismissal rate of complaints also improved, rising from 84.6% to 95.3%, indicating that most concerns did not warrant formal action.

Malpractice: No Cases Post-Reform

Perhaps most striking is the absence of any malpractice cases involving PAs in the five years following the reform. This aligns with national data showing that PAs have consistently low malpractice payment rates, even as their scope of practice expands.

Conclusion: Autonomy with Accountability — A Promising Start

North Dakota's 2019 PA autonomy reforms have coincided with a notable decline in formal disciplinary actions, even as the PA workforce has grown by nearly 25%. While complaint rates have seen a modest increase, the vast majority were dismissed without formal action, and no malpractice cases were reported in the five years following the reform. These findings suggest that expanded autonomy for PAs can be implemented without compromising patient safety.

However, this analysis represents just one dimension of a broader and more complex picture. Disciplinary data alone cannot fully capture the quality of care or patient outcomes. Further research is needed to explore how increased autonomy affects clinical outcomes, interprofessional collaboration, and patient satisfaction.

Still, these early indicators are encouraging. They support the idea that well-structured autonomy, grounded in accountability and collaborative practice, can be a viable path forward for modernizing healthcare delivery.

Note: I was honored to present this research at the International Association of Medical Regulatory Authorities Conference in Dublin, Ireland, this fall. I was graciously awarded a scholarship from the Federation of State Medical Boards (FSMB) Foundation that covered my travel expenses. Thank you to the FSMB Foundation.

Sincerely,

Jay R. Metzger, PA-C
ND Board of Medicine

NATUROPATHIC DOCTOR CORNER

Good news to naturopaths looking for closer testing sites! Beginning in August 2026, NABNE will be offering nationwide testing at Prometric testing centers. This will hopefully alleviate many travel costs for licensees looking to take the pharmacology specialty test for prescribing practices. For more information, please see NABNE's [Press Release](#).

Sincerely,

Lezlie Scott, ND

Naturopathic Doctor representative on the North Dakota Board of Medicine

A LETTER FROM THE NDPHP

The holiday season can be a time of joy—but also a time of increased stress, emotional strain, and burnout, especially for those in caregiving or high-demand roles. As providers, it's essential to care for your own mental health while supporting others.

If you're a healthcare professional in North Dakota, know that you're not alone. The North Dakota Professional Health Program (NDPHP) is here to support you. NDPHP offers confidential assistance to licensees of the ND Board of Medicine who may be experiencing mental health challenges, substance use disorders, burnout, or stress-related conditions. Their mission is to promote well-being and patient safety by helping providers recover and thrive.

During the holiday season here are a few strategies to help manage stress and promote balance:

Stress Management Techniques

1. **Set Boundaries:** Protect your time and energy by saying no when needed and setting limits on work and social obligations.
2. **Practice Mindfulness:** Even 5–10 minutes of deep breathing, meditation, or grounding exercises can reduce anxiety and improve focus.
3. **Stay Active:** Movement—whether a walk, yoga, or dancing—boosts mood and reduces stress hormones.
4. **Limit Stimulants:** Reduce caffeine, alcohol, and sugar, which can exacerbate anxiety and disrupt sleep.

Wellness & Balance Tips

1. **Stick to a Routine:** Consistency in sleep, meals, and movement helps regulate your body and mind.
2. **Connect Intentionally:** Reach out to supportive friends, family, or colleagues. Social connection is a powerful buffer against stress.
3. **Reflect & Reset:** Take time to journal, set intentions, or simply pause and breathe. Small moments of reflection can bring clarity and calm.
4. **Seek Support:** Don't hesitate to reach out to a mental health professional—or contact NDPHP if you're a healthcare provider in need of confidential support.

Remember: You can't pour from an empty cup. Taking care of yourself is not a luxury — it's a necessity.

Wishing you peace, balance, and wellness this season.

Sincerely,

The Team at the NDPHP

Website: ndphp.org

Phone: 701-751-5090

Email: info@ndphp.org

A LETTER FROM THE PDMP

PDMP Account Re-Verification Process: What You Need to Know From the North Dakota Prescription Drug Monitoring Program (PDMP) Updated October 29, 2025

The North Dakota Prescription Drug Monitoring Program (PDMP) works closely with state licensing boards to ensure that every registered user maintains an active and verified professional license. This ongoing **re-verification process** protects patient information, supports data integrity, and ensures compliance with state and federal access standards. Through licensing integration, the PDMP can automatically validate user accounts against official records from the **North Dakota Board of Medicine** and other state licensing boards. Users whose license data does not align with official records may experience temporary interruptions in PDMP access until their information is corrected and verified.

Why Re-Verification Is Important

The PDMP re-verification process:

- Confirms that only actively licensed professionals can access controlled substance data.
- Helps prevent unauthorized access and identity errors.
- Keeps North Dakota in compliance with evolving national data security and interoperability requirements.
- Ensures prescribers and delegates experience fewer manual account delays over time.

Recent Validation Results

As of **October 29, 2025**, several users did not pass the most recent automatic license verification checks. These mismatches are primarily due to **name differences, outdated license types, or missing information** within the PDMP account.

Board of Medicine – Physicians

- **Total users failing validation: 776**
 - License Not Found – 577 *inactive*
 - Missing User Data – 15 *inactive*
 - Data Mismatch – 170
 - Last Name: 146
 - Professional License Type: 31

Board of Medicine – Physician Assistants

- **Total users failing validation: 412**
 - License Not Found – 57 *inactive*
 - Missing User Data – 2 *inactive*
 - Data Mismatch – 352
 - Last Name: 47
 - Professional License Type: 352

Most issues occur when PDMP account information (such as a middle name, suffix, or license designation) does not match the licensing record exactly.

How to Stay Verified

To ensure uninterrupted access to PDMP data:

1. **Log in** to your account at northdakota.pmpaware.net.
 2. **Review your profile** for accuracy, including:
 - First and last name (as listed on your Board of Medicine record)
 - Date of birth
 - License number and license type
 3. **Update outdated information** in AWARE before your next login period.
 4. **Respond promptly** to any reverification or deactivation notifications from PDMP.
Users whose accounts are placed on hold or deactivated during reverification will receive an email notice with instructions for resolution. Once information is corrected, access can typically be restored quickly.
-

Automated Account Features

The PDMP's Licensing Integration enhancement includes:

- **Shell Account Creation:** Eligible users may be pre-registered and invited to complete setup via email.
- **Auto-Approval of New Registrations:** If all license data matches, new accounts are approved instantly.
- **Auto-Reverification:** Active accounts are automatically reviewed and re-verified to ensure continued access.
- **Auto-Deactivation:** If license data fails validation, accounts are temporarily deactivated until updated information is received.

These tools reduce manual review time and ensure that PDMP access remains compliant, accurate, and efficient.

Need Assistance?

If you experience access issues or have questions about your license status:

Website: <https://www.northdakota.pmpaware.net>

Phone: 701-877-2410

Email: pdmp@ndboard.pharmacy

The ND PDMP team is happy to help verify your information or guide you through account updates.

In Summary

Maintaining accurate licensing data in your PDMP account helps prevent disruptions and supports safer, more coordinated care for North Dakotans.

A few minutes spent reviewing your profile ensures uninterrupted access to a tool that protects both prescribers and patients across our state.

Sincerely,

Kathy R. Zahn, RPhT, CPhT

PDMP Program Administrator

NEWS

Chair Metzger Presentation at IAMRA Conference

Chair Metzger was a chosen speaker at the International Association of Medical Regulator Conference in Dublin, Ireland last month. His topic focused on the regulation of physician assistants before and after implementation of expanded autonomy in North Dakota. Countries from around the world are looking to implement PA professions into their healthcare systems and are looking to learn from proven models and regulations. Congratulations Chair Metzger on being chosen to present on this important topic and highlighting the great work our PAs do in North Dakota!



NDBOM RECOGNIZED AS 2025 WELLBEING FIRST CHAMPION

The Board is proud to announce it has been recognized as a Wellbeing First Champion for the third year in a row by ALL IN: Wellbeing First for Healthcare! This annual distinction means that NDBOM's licensing applications are free from intrusive and stigmatizing language around mental health care and treatment. The Board has taken this step to ensure that our workforce can seek needed care without fear of losing their license or job.



This accomplishment has been independently verified by ALL IN: Wellbeing First for Healthcare, a national coalition of leading healthcare organizations that works to remove barriers for health workers to access mental health care.

The Board recognizes that supporting and protecting the mental health of our workers is paramount to their wellbeing and to the wellbeing of our entire community. We encourage you to share this information with your colleagues, so they know that it is safe to seek mental health care and that we support you. To learn more about how the Board supports workers, please visit the [North Dakota Professional Health Program](#).

Free Professional Boundary Course

FSMB Launches Professional Boundaries Educational Series

The Federation of State Medical Boards published a professional boundaries educational series that counts for **.50 AMA PRA Category 1 Credit**. The content includes prescribing to family members/friends, maintaining professional relationships and appropriate behavior for intimate examinations.



To view the course, visit [Professional Boundaries Educational Series](#).

Scam Calls Targeting Licensees

The Board is aware of numerous scam calls to licensees posing as law enforcement officers, agents of the Federal Bureau of Investigation (FBI) and [U.S. Drug Enforcement Administration \(DEA\)](#), or Board staff. The scammers attempt a myriad of tactics in an attempt to extort money from licensees. For example, scammers, posing as law enforcement will

attempt to say there is a warrant for your arrest. Scammers posing as DEA agents or Board staff attempt to say that your license or authority to prescribe controlled substances is suspended. The scammers then provide an “Agreement” that if a bond of \$25,000.00 is paid, the license would be reinstated.

The scammers’ phone number may show up as the Board’s number (701) 450-4060, or, if posing as law enforcement, they may impersonate actual law enforcement officers using their real names.

Please note, law enforcement officers, DEA agents, and Board staff will never contact licensees by telephone to demand money or any other form of payment. If you receive one of these calls, refuse the demand for payment, and hang up. If the caller insists that they speak with you, tell them you will call them back directly. Do not call back a different number provided by the scammers, instead, call the Board office directly at (701) 450-4060.

If the caller is stating they are from the DEA, consider reporting the threat using the [DEA’s Extortion Scam Online Reporting form](#).

If the phone number of the caller appears to be the Board’s number, you may submit an online complaint with the Federal Communications Commission (FCC) using the [FCC’s Consumer Complaint form](#).

Refer a Child to with Make-A-Wish® North Dakota

At Make-A-Wish North Dakota, we create life changing wishes for children ages 2 ½ to 18 years old who have a critical illness that puts their life in jeopardy. Medical professionals are one of our main referral sources to connect children with their wish come true. If you know a child with a critical illness, we invite you to refer them today by visiting md.wish.org. In addition to our referral form, you will also find our medical guidance sheets regarding eligibility within sub-specialty departments. Thank you!

NDBOM Collaboration with ACCME

Physicians can now have CME providers report CME credit for North Dakota licensees directly to the ACCME Program and Activity Reporting System (PARS). All that is required of physicians is to request your CME provider to report your attendance. A report is then submitted to the Board certifying attendance. This will streamline CME audits, allowing physicians to utilize the ACCME database instead of self-reporting individual CME during an audit. Physicians may also create their own account at the ACCME’s CME Passport: <https://www.cmepassport.org> which will allow you to find available CME, track what CME credits have been reported by providers, and generate a transcript of your credit that can be sent directly to the Board. To learn more, please access the ACCME website at <https://www.accme.org/state-medical-licensing-boards-collaboration>. For more information on the CME Passport, please access: <https://accme.org/about-cmepassport>.

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