

REQUEST FOR TECHNICAL CHANGE

AGENCY: N.C. Midwifery Joint Committee

RULE CITATION: 21 NCAC 33 .0110

DEADLINE FOR RECEIPT: April 6, 2016

NOTE WELL: This request when viewed on computer extends several pages. Please be sure you have reached the end of the document.

The Rules Review Commission staff has completed its review of this rule prior to the Commission's next meeting. The Commission has not yet reviewed this rule and therefore there has not been a determination as to whether the rule will be approved. You may call this office to inquire concerning the staff recommendation.

In reviewing these rules, the staff determined that the following technical changes need to be made. Approval of any rule is contingent upon making technical changes as set forth in G.S. 150B-21.10.

Lines 4-5 – replace “North Carolina Midwifery Joint Committee (“MJC”)” with “Committee” because this term is already defined in 21 NCAC 33 .0101(a).

Lines 5-6 – replace “Certified Nurse Midwives” with “midwives” because this term is already defined in 21 NCAC 33 .0101(a).

Line 12 – replace “MJC” with “Committee”

Line 12 – replace “prescribers” with “midwives”

Line 16 – replace “MJC” with “Committee”

Line 19 – replace “April 1, 2016” with “May 1, 2016”

Please retype the rule accordingly and resubmit it to our office at 1711 New Hope Church Road, Raleigh, North Carolina 27609.

Jason S. Thomas
Commission Counsel
Date submitted to agency: March 22, 2016

1 21 NCAC 33. 0110 is adopted as published in NCR 30:13, page 1406-1407, as follows:

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3 **21 NCAC 33 .0110** **REPORTING CRITERIA**

4 (a) The Department of Health and Human Services (“Department”) may report to the North Carolina
5 Midwifery Joint Committee (“MJC”) information regarding the prescribing practices of those Certified
6 Nurse Midwives (“prescribers”) whose prescribing:

7 (1) falls within the top one percent of those prescribing 100 milligrams of morphine
8 equivalents (“MME”) per patient per day; or

9 (2) falls within the top one percent of those prescribing 100 MME’s per patient
10 per day in combination with any benzodiazepine and who are within the top one percent
11 of all controlled substance prescribers by volume.

12 (b) In addition, the Department may report to the MJC information regarding prescribers who have had
13 two or more patient deaths in the preceding 12 months due to opioid poisoning.

14 (c) The Department may submit these reports to the MJC upon request and may include the information
15 described in G.S. 90-113.73(b).

16 (d) The reports and communications between the Department and the MJC shall remain confidential
17 pursuant to G.S. 90-113.74.

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19 *History Note: Authority G.S. 90-113.74;*

20 *Eff. April 1, 2016.*