Rules of
Department of Insurance, Financial Institutions and Professional Registration
Division 2150—State Board of Registration for the Healing Arts
Chapter 1—Organization

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PURPOSE: This rule establishes a procedure for the handling of complaints, reports of claims for medical malpractice, and reports for disciplinary actions and voluntary resignations.

(1) Complaints concerning alleged violations of Chapter 334, RSMo, shall be handled as follows:
   (A) Any member of the public or the profession, or any federal, state, or local official, may make and file a complaint with the board based upon personal knowledge or upon information received from other sources. The complaint may be against any licensee, permit holder, registrant of the board, or unlicensed individual or entity and may allege acts or practices which may constitute a violation of any provision of Chapter 334, RSMo. No member of the board shall file a complaint with this board while holding office unless that member is excused from further board deliberations or activity concerning the matters alleged within that complaint. The executive director or any administrative staff member of the board may file a complaint in the same manner as any member of the public;
   (B) Each complaint must be typewritten or hand written and signed by the complainant. Oral, telephone, and/or unsigned written communications will be considered at the discretion of the board. Complaints shall fully identify the nature of the complaint; list the name, address, and telephone number of the complainant; and be mailed or delivered to the following address: Missouri State Board of Registration for the Healing Arts, P.O. Box 4, Jefferson City, MO 65102;
   (C) Each complaint received under this section shall be logged in and maintained by the board. The log shall contain, if known by the board—
      1. A record of each complainant’s name and address;
      2. The name and address of the subject of the complaint;
      3. The date each complaint is received by the board;
      4. A brief statement of the acts complained of, including the name of any person injured, aggrieved, or victimized by the alleged acts or practices;
      5. A notation indicating whether the complaint resulted in its dismissal by the board, whether formal charges have been or will be filed with the Administrative Hearing Commission, or what the ultimate disposition of the complaint was; and
      6. Further information as the board may direct;
   (D) Each complaint made in accordance with this rule shall be acknowledged in writing and may be investigated by the board. If a complaint is investigated, the complainant shall be informed in writing after the investigation is completed as to the ultimate disposition of the complaint. The provisions of this subsection shall not apply to complaints filed by staff members of the board based on information and belief, acting in reliance on third-party information received by the board; and
   (E) Each complaint investigated shall be reviewed and pursued as provided in section (4) of this rule.

(2) Reports of claims for medical malpractice received from the Department of Insurance, Financial Institutions and Professional Registration (DIFP) or from the licensee shall be handled as follows:
   (A) Each medical malpractice report received from the DIFP or from the licensee shall be logged in and maintained by the board. The log shall include:
      1. Name and address of the subject of the report;
      2. Date each report is received by the board;
      3. Brief statement of the acts, including the name of any person injured, aggrieved, or victimized by the alleged acts or practices;
      4. Ultimate disposition of the complaint; and
      5. Further information as the board may direct; and
   (B) Supporting files or records, or both, shall be established and maintained as deemed necessary.

(3) Reports of disciplinary actions and voluntary resignations received from executive officers of hospitals, ambulatory surgical centers, nursing facilities, or entities that employ or contract with licensed health care professionals shall be handled as follows:
   (A) Each report received shall be logged in and maintained by the board. The log shall include:
      1. Name and address of the subject of the report;
2. Date each report is received by the board;  
3. Brief statement of the acts, including the name of any person injured, aggrieved, or victimized by the alleged acts or practices;  
4. Ultimate disposition of the complaint; and  
5. Further information as the board may direct; and (B) Supporting files or records, or both, shall be established and maintained as deemed necessary.

(4) Complaints, reports of claims for medical malpractice, and disciplinary actions, and voluntary resignations received from chief executive officers of any hospital, ambulatory surgical center, nursing facility, or entity that employs or contracts with licensed health care professionals shall be processed and pursued as follows:  
(A) After logging in each complaint or report, each complaint or report shall be reviewed by the board’s complaint review committee or a medical staff officer. The complaint review committee or medical staff officer shall review the complaint or report and either issue a request to the investigative manager for investigation and records, forward a copy of the complaint to the licensee for a response, request records, or forward the complaint to the board for their review and decision;  
(B) If the complaint or report is forwarded to the investigative manager, he/she shall establish an investigation file and assign it to an investigator with such direction as he/she deems appropriate. Upon receipt of an investigation assignment, the investigator shall conduct the investigation as he/she deems appropriate or as directed by the investigative manager;  
(C) Upon completion of the investigation, the investigator shall submit a written report to the investigative manager for a report review. The investigative manager shall review the report and either direct further investigation or deliver the report to the medical staff officer for review;  
(D) Upon receipt of a report from the investigative manager, the medical staff officer shall review the report and either return the report to the investigative manager for further investigation or deliver the report to the board;  
(E) Upon receipt of a report, the board shall review the report and either return the report to the medical staff officer or investigative manager for further review or investigation, return the report to the investigative manager for closing, forward the report to the board’s attorney for legal proceedings, or take or direct such further actions as the board deems appropriate;  
(F) The medical staff officer, investigative manager, investigator, or board may contact the board’s attorneys for assistance in obtaining records or subpoenaas, or for assistance or direction during the course of the review or investigation; and  
(G) The executive director of the board may alter the procedure set forth in this section for investigating and reviewing any complaint or report as he/she deems appropriate.

(5) The board’s investigation and subsequent litigation is not limited to or by the scope of the complaints, reports of claims for medical malpractice, or reports of disciplinary action or voluntary resignation received from hospitals, ambulatory surgical centers, nursing facilities, and entities that employ or contract with licensed health care professionals.

AUTHORITY: section 334.125, RSMo 2000. * This rule originally filed as 4 CSR 150-1.011. 

20 CSR 2150-1.015 Public Records

PURPOSE: This rule establishes standards for compliance with Chapter 610, RSMo as it relates to public records of the State Board of Registration for the Healing Arts.

(1) All public records of the State Board of Registration for the Healing Arts shall be open for inspection and copying by the general public at the board’s office during normal business hours, holidays excepted, except for those records closed pursuant to section 610.021, RSMo. All public meetings of the State Board of Registration for the Healing Arts, not closed pursuant to the provisions of section 610.021, RSMo will be open to the public.

(2) The State Board of Registration for the Healing Arts establishes the executive director of the board as the custodian of its records as required by section 610.023, RSMo. The executive director is responsible for maintaining the board’s records and for responding to requests for access to public records and may appoint deputy custodians as necessary for the efficient operation of the board.

(3) When a party requests copies of the records, the board may collect the appropriate fee for costs for inspecting and copying the records and may require payment of the fee prior to making the records available (see 20 CSR 2150-3.080).