CHAPTER 16
IMPAIRED PRACTITIONER REVIEW COMMITTEE

Pursuant to the authority of Iowa Code section 272C.3(1) “k,” the department of public health establishes the impaired practitioner review committee.

645—16.1(272C) Definitions.

“Board” means a health professional licensing board established pursuant to Iowa Code chapter 147, 154A, 154E, or 155.

“Contract” means the written document executed by a practitioner and the impaired practitioner review committee which establishes the terms for participation in the impaired practitioner program.

“Impairment” means an inability to practice with reasonable safety and skill as a result of alcohol or drug abuse, dependency, or addiction, or any neuropsychological or physical disorder or disability. For the purposes of the program, “impairment” does not include gambling addiction, sexual addiction, sexual compulsivity, paraphilia or other sexual disorders.

“IPRC” or “committee” means the impaired practitioner review committee.

“Practitioner” or “licensee” means a person licensed under Iowa Code chapter 147, 154A, 154E, or 155.

“Self-report” means written or oral notification provided by the licensee to the board or impaired practitioner review committee that the licensee has been, is, or may be impaired prior to the board’s receiving a complaint or report from a third party alleging the same. Information relative to impairment or a potential impairment which is provided on a license application or a renewal form may be considered a self-report.

645—16.2(272C) Purpose. The impaired practitioner review committee evaluates, assists, and monitors the recovery or rehabilitation of practitioners in the impaired practitioner program and makes reports to the board in the event of noncompliance. The impaired practitioner program is both an advocate for licensee health and a means to protect the health and safety of the public.

645—16.3(272C) Composition of the committee. The committee is composed of, but not limited to, members with the following qualifications:

16.3(1) A licensed practitioner who has expertise in the area of substance abuse and addiction treatment.

16.3(2) A licensed practitioner who has expertise in the diagnosis and treatment of psychological disorders and disabilities.

16.3(3) A specialty board-certified psychiatrist who holds a current, active Iowa license as defined in 653—9.1(147,148,150,150A).

16.3(4) A licensee who has remained free of addiction for a period of no less than two years since successfully completing a board-approved recovery program; board-ordered probation for drug or alcohol dependency, addiction or abuse; or an impaired practitioner review committee contract.

16.3(5) A physician, a physician assistant or an advanced registered nurse practitioner (ARNP) whose specialty area is family practice or who has expertise in neurological disorders.

a. If the member is a physician, the physician shall be a person licensed to practice medicine and surgery, osteopathic medicine and surgery or osteopathy as defined in 653—1.1(17A,147).

b. If the member is a physician assistant, the physician assistant shall be a person licensed as a physician assistant as defined in 645—326.1(148C).

c. If the member is an ARNP, the ARNP shall be licensed as a registered nurse as defined in Iowa Code chapter 152 or 152E and registered to practice as an ARNP in Iowa as defined in 655—7.2(152).

16.3(6) An at-large public member.

16.3(7) The board administrator assigned to the impaired practitioner review committee for professional licensure.
645—16.4(272C) Organization of the committee.
   16.4(1) The division shall appoint the committee members designated in subrules 16.3(1) to 16.3(6).
   16.4(2) Upon request of the committee, the board chairperson or other licensed designee of the board under which the licensee is regulated may join the committee to provide consultation when a licensee of that board is being reviewed.
   16.4(3) The IPRC shall elect a chairperson and vice chairperson from committee members specified in subrules 16.3(1) to 16.3(5) at the first meeting of each calendar year. The officers shall serve one-year terms, which will commence following the election.
   16.4(4) Committee members, except the board administrator, shall be appointed for a three-year term, and may serve for a maximum of three terms. Each term shall expire on December 31 of the third year of the term. Initial terms of committee members shall be for a period of not less than one year nor more than three years as designated by the division to provide continuity to the committee.

645—16.5(272) Eligibility. To be eligible for participation in the impaired practitioner program, a licensee must meet all the following criteria:
   16.5(1) The licensee must self-report an impairment or suspected impairment directly to the IPRC or be referred to the committee by the board.
   16.5(2) The licensee must undergo an evaluation at an impaired practitioner committee-approved provider if requested to do so by the committee.
   16.5(3) The licensee must not have engaged in the unlawful diversion or distribution of controlled or illegal substances to a third party or for personal financial gain.
   16.5(4) At the time of the self-report or referral, the licensee must not already be under any Iowa board order related to an impairment.
   16.5(5) The licensee shall not have caused harm or injury to a client.
   16.5(6) The licensee shall provide truthful information and fully cooperate with the board or committee.
   16.5(7) The licensee must consent to the conditions proposed by the committee in the contract.

645—16.6(272C) Meetings.
   16.6(1) The committee shall meet as necessary in order to review licensee compliance, develop contracts for new referrals, and determine eligibility for continued monitoring.
   16.6(2) The committee may hold a closed session if the committee votes to do so in a public roll-call vote with an affirmative vote of at least two-thirds of the total committee or a unanimous vote of those present. The committee will recognize the appropriate statute allowing for a closed session when voting to go into closed session. The impaired practitioner review committee shall keep minutes of all discussion, persons present, and action occurring at a closed session and shall tape-record the proceedings. The records shall be stored securely in the board office and shall not be made available for public inspection.

645—16.7(272C) Terms of participation. A licensee shall agree to comply with the terms for participation in the impaired practitioner program established in a contract. The impaired practitioner review committee shall file a confidential report on board-referred cases with the board upon the licensee’s successful completion of the program.

645—16.8(272C) Noncompliance. A licensee’s failure to comply with the provisions of the contract may require the committee to make referral of the matter to the licensee’s board for possible disciplinary action. The impaired practitioner review committee may provide to the board the licensee’s impaired practitioner program file in the event the participant does not comply with the terms of the contract.

645—16.9(272C) Practice restrictions. As a term of the contract, the committee may impose restrictions on the licensee’s practice until such time as the committee receives a report from an approved evaluator that the licensee is capable of practicing with reasonable safety and skill. As a condition of participation in the program, a licensee is required to agree to restricted practice in
accordance with the terms specified in the contract. In the event that the licensee refuses to agree to or comply with the restrictions established in the contract, the committee shall refer the licensee to the board for appropriate action.

645—16.10(272C) Limitations. The committee shall establish the terms and monitor a licensee’s compliance with the program specified in the contract. The committee is not responsible for participants who fail to comply with the terms of or successfully complete the impaired practitioner program. Participation in the program under the auspices of the committee shall not relieve the licensee’s board of any duties and shall not divest the board of any authority or jurisdiction otherwise provided. Any violation of the statutes or rules governing the practice of the licensee’s profession by a participant shall be referred to the board for appropriate action.

645—16.11(272C) Confidentiality. The committee is subject to the provisions governing confidentiality established in Iowa Code section 272C.6. Accordingly, information in the possession of the board or the committee about licensees in the program shall not be disclosed to the public. Participation in the impaired practitioner program under the auspices of the committee is not a matter of public record. Information about applicants or licensees in the program shall not be disclosed except as provided in this rule.

16.11(1) The impaired practitioner review committee may communicate information about a licensee in the program to licensing authorities and impaired practitioner programs of any jurisdiction of the United States or foreign nations in which the participant is currently licensed to practice or in which the participant may seek licensure.

16.11(2) The impaired practitioner review committee may communicate information about a licensee in the program to any person assisting in the participant’s treatment, recovery, rehabilitation, monitoring, or maintenance.

16.11(3) The impaired practitioner review committee may communicate information about a licensee in the program to the licensee’s board in the event the participant does not comply with the terms of the contract as specified in rule 16.8(272C) or 16.9(272C).

16.11(4) The impaired practitioner review committee shall maintain a participant’s complete IPRC file for the ten-year period after a participant’s contract has expired or is terminated. After that period, only the contract shall be retained.

These rules are intended to implement Iowa Code chapter 272C.

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