

**ADMINISTRATIVE AFFAIRS COMMITTEE
DECEMBER 9, 2015 5 P.M.
BOARD OFFICE/WORKING DINNER**

MINUTES - AAC

MEMBERS PRESENT:

George Koval, MD, Chair
Katherine Fisher, DO
Michael Mastrangelo Jr., MD - Teleconferencing
Terry Smith, Public Member

CONSULTANT:

Jeffery Young, MD (5:00pm – 6:05pm)

STAFF PRESENT:

Kathleen Haley, JD, Executive Director
Joseph Thaler, MD, Medical Director
Nicole Krishnaswami, JD, Operations and Policy Analyst
Netia N. Miles, Licensing Manager
Jenette Ramsey, Physician Licensing Specialist
Carol Brandt, Business Manager (5:00pm – 6:05pm)

GUESTS:

Mark Bonnano, JD, MPH, Oregon Medical Association (6:10pm - 7:02 pm)

Meeting commenced: 5:00 pm

Meeting adjourned: 7:02 pm

Dr. Koval to announce that pursuant to ORS 192.660(2)(f) and ORS 192.660(2)(L), the Administrative Affairs Committee of the Oregon Medical Board (OMB) may convene in Executive Session to consider information or records that are exempt by law from public inspection. Or, information obtained as part of an investigation, including information received in confidence by the Board and Administrative Affairs, information of a personal nature the disclosure of which would constitute an invasion of privacy, and records which are otherwise confidential under Oregon law. The Administrative Affairs Committee will reconvene in Public Session prior to taking any final action. Members of the news media may remain in the room during the Executive Session, but are directed not to report on the specific information discussed during the Executive Session.

PUBLIC SESSION**TIME CERTAIN: 5 P.M.**

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| 1 | Oregon Medical Board (OMB) 2015 Board Best Practices Assessment Carol Brandt, Business Manager | 5 | GK |
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The Business Manager informed the Committee that the survey would be disseminated to the full Board in January. Forward to the full Board for review.

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| 2 | Oregon Medical Board (OMB) 2015 Key Performance Measures Improvement Proposal, Carol Brandt, Business Manager | 7 | GK |
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The Business Manager presented a proposal to improve the description of the Key Performance Measure (KPM) regarding licensee recidivism. Amendments to the description will provide an easier understanding of the process without affecting results. The words "Disciplined" and "Probationer" will be replaced with "Board orders or Corrective Action Agreements" to allow for a description which is inclusive of all licensees with orders. Forward to the full Board for review.

EXECUTIVE SESSION - LICENSEE REVIEW

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| 3 | Exec Session ORS 192.502 (2) | Entity ID 1031668 | 9 | TS |
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RECOMMENDATION: The Committee recommends issuing a Civil Penalty fine of \$195.00 for omission of information on the application for licensure. The Committee further recommends granting an unlimited license. Forward to the full Board for approval.

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| 4 | Exec Session ORS 192.502 (2) | Entity ID 34534 | 41 | MM |
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RECOMMENDATION: The Committee recommends the Board review the applicant's informal request for licensure. However, the former licensee should be notified that although there is an option to submit a formal application for licensure, the indication for approval is not positive. Forward to the full Board for review.

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| 5 | Exec Session ORS 192.502 (2) | Entity ID 1029141 | 166 | MM |
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RECOMMENDATION: The Committee recommends forwarding the applicant's request for licensure to the Investigative Committee for additional review. Forward to the full Board for review.

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| 6 | Exec Session ORS 192.502 (2) | Entity ID 1030991 | 270 | TS |
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RECOMMENDATION: The Committee recommends forwarding the applicant's request for licensure to the Investigative Committee for additional review. Forward to the full Board for review.

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| 7 | Exec Session ORS 192.502 (2) | Entity ID 4202 | 314 | GK |
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RECOMMENDATION: The Committee recommends granting an unlimited license. In addition, the Medical Director will contact the applicant to reinforce the value of continued healthcare. Forward to the full Board for review.

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| 8 | Exec Session ORS 192.502 (2) | Entity ID 11169 | 346 | KF |
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RECOMMENDATION: The Committee recommends placing the licensee under a Consent Agreement, which will allow practice under an approved re-entry plan. The re-entry plan would include chart review with a Board-approved mentor and 50 additional hours of continuing medical education with a focus on non-procedural pain management. Forward to the full Board for review.

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| 9 | Exec Session ORS 192.502 (2) | Entity ID 1031142 | 394 | KF |
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RECOMMENDATION: The Committee recommends offering the applicant the opportunity to withdraw the license request with report to the Federation of State Medical Boards. However, if the applicant wishes to continue with the licensure process, the file will be forwarded to the Investigative Committee for additional review. Forward to the full Board for review.

OREGON ADMINISTRATIVE RULES (OAR)

PUBLIC SESSION

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| 10 | OAR 847-008-0070; 847-017-0003; 847-017-0015; 847-017-0020; 847-080-0010; 847-080-0018; 847-080-0021; 847-080-0022; 847-080-0035: Podiatric Surgery Certifying Board | <i>FIRST REVIEW</i> | 439 | MM |
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RECOMMENDATION: The Committee recommends forwarding the rule as written. Forward to the full Board for review.

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| 11 | OAR 847-023-0005: Qualifications for Volunteer Emeritus Licensure Informational memo from Nicole Krishnaswami, JD, Operations and Policy Analyst | <i>FIRST REVIEW</i> | 450 | MM |
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RECOMMENDATION: The Committee recommends forwarding the rule as written. Forward to the full Board for review.

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| 12 | OAR 847-005-0005: Fees | <i>FINAL REVIEW</i> | 454 | TS |
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RECOMMENDATION: The Committee recommends approving the rule as amended. Forward to the full Board for approval.

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| 13 | OAR 847-008-0020; 847-008-0022; 847-008-0023; 847-008-0025; 847-008-0030; 847-008-0035; 847-008-0037; 847-008-0050; 847-008-0055; 847-008-0056; 847-050-0043; 847-070-0045; Reactivations | FINAL REVIEW | 458 | MM |
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RECOMMENDATION: The Committee recommends approving the rule as written. Forward to the full Board for approval.

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| 14 | OAR 847-010-0073: Reporting Requirements | FINAL REVIEW | 468 | KF |
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RECOMMENDATION: Dr. Koval notes the importance of reporting requirements. He states that regardless of the potential controversy of this rule, the Board must thoroughly make clear to licensees its expectation that they be appropriate in all settings where potential patient harm could be caused by engaging in inappropriate communication. The Committee recommends approving the rule as written. Forward to the full Board for approval.

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| 15 | OAR 847-001-0015: Delegation of Authority and Issuance of Final Order | FINAL REVIEW | 475 | GK |
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RECOMMENDATION: The Committee reviewed a memorandum from the Oregon Medical Association, which proposes that there be a limit to the period that the Oregon Medical Board has exemption from the requirements of OAR 137-003-0655(7). Amendments regarding limitation parameters in acknowledgement of the Oregon Medical Association's request may require future consideration. The Committee recommends approving the rule as written Forward to the full Board for approval.

DISCUSSION ITEMS

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| 16 | Oregon Medical Board (OMB) 2015 – Statement of Philosophy: Social Media | | 478 | GK |
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The Committee discussed the proposed statement of philosophy on social media. Amendments were suggested to reflect the appropriate use of social media rather than discouragement or prohibition. Ms. Smith requested the definition of social media be added as a way to distinguish between professional and personal social networking. The Committee recommends forwarding an amended version to the full Board for further discussion.

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| 17 | OAR 847-050-0010; 847-050-0027; 847-050-0036; 847-050-0037; 847-050-0040: Supervising Physician Organizations | | 481 | TS |
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The Committee reviewed the public comments offered as feedback to the rules regarding Supervising Physician Organizations. Dr. Koval notes that the Board has previously included public feedback in the drafting of these rules. Dr. Koval states that it will be helpful to resolve the Supervising Physician Organization (SPO) issue as it is very important to the licensing concept. This topic is to be deliberated in the next Physician Assistant Committee meeting, the Committee recommended incorporating this discussion, and any new public comments, to the full Board for further deliberation.

10 MINUTES

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| 18 | Public Comment | 503 | GK |
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Mark Bonnano, JD, MPH of the Oregon Medical Association stated his intent to reserve his comments on OAR 847-050-0010; 847-050-0027; 847-050-0036; 847-050-0037; 847-050-0040, regarding Supervising Physician Organizations (SPOs) for the Physician Assistant Committee meeting scheduled the following morning.

INFORMATIONAL ITEMS

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| 19 | OAR 847-050-0025; 847-050-0063; 847-050-0065: Physician Assistant Committee | 504 | GK |
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The Committee acknowledged the adopted amendments, which permanently repeals and abolishes the Physician Assistant Committee effective January 1, 2016 by designating a new physician assistant Board member. Dr. Koval expresses his enjoyment in working with the Physician Assistant Committee. He notes physician assistants provide great value to the medical community and the state of Oregon and should continue to be utilized optimally. He states that it has been a great honor to have been a participant and he has found the Physician Assistant Committee to have been very effective. No action taken by the Committee as this was informational only.

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| 20 | Review of New Rules Adopted in 2011: OAR 847-001-0022; 847-002-0000 through 847-002-0045; and 847-065-0010 through 847-065-0070 | 508 | MM |
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The Committee reviewed the intended effects and the fiscal impact of rules adopted in 2011 and whether or not they have been successfully implemented. No action taken by the Committee as this was informational only. Forward to the full Board for review.

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| 21 | Oregon Medical Board (OMB) 2015 License Demographics | 513 | TS |
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The Committee reviewed the 2015 License Demographics. Dr. Koval comments that based on the demographic information provided, it appears that more than 25% of Oregon physicians exceed the age of 60. He believes that with the evolution of Electronic Medical Records there will be an acceleration in the trend of those physicians who decide not to continue practicing, but rather retire instead of facing the complex issue of adapting to this methodology of record keeping. No action taken by the Committee as this was informational only. Forward to the full Board for review.