COMMITTEE ON ADMINISTRATIVE AFFAIRS
JUNE 7, 2017
BOARD OFFICE, 5:00 PM
WORKING DINNER MEETING
MINUTES - AAC

MEMBERS PRESENT:
Lisa Lipe, DPM Chair
Robert M. Cahn, MD
James Lace, MD (via GoToMeeting)
Michael Mastrangelo, MD (via GoToMeeting)
Melissa Peng, PA-C

STAFF PRESENT:
Kathleen Haley, JD, Executive Director
Joseph Thaler, MD, Medical Director
Nicole Krishnaswami, JD, Operations and Policy Analyst
Carol Brandt, Business Manager (5:00 pm – 5:05 pm)
Netia N. Miles, Licensing Manager (5:00 pm – 6:05 pm)
Frank Clore, Licensing Assistant

GUESTS:
Jeffrey Young, MD – OMB Consultant (5:00 pm – 6:05 pm)
Kathleen Harder, MD, Board Member (5:00 pm – 8:10 pm)
Glenn Forister, PA-C, Oregon Health Sciences University (6:10 pm – 8:10 pm)
Lucile Gauger, PA, Kaiser Permanente (6:10 pm – 8:10 pm)
Ben Johnson, PA, Oregon Society of Physician Assistants (6:10 pm – 8:10 pm)
Barbara Martin, PA, Central City Concern (6:10 pm – 8:10 pm)
A. Rachel Stappler, PA, North Bend Medical Center (6:10 pm – 8:10 pm)

Meeting opened: 5:00 pm

Meeting adjourned: 8:10 pm
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.

1 Business Continuity Planning Update, Carol Brandt, Business Manager LL

Carol Brandt provided the Committee with an overview of the agency’s Business Continuity Plan (BCP). The BCP consists of a thoroughly structured plan that is reviewed by Board staff on a regular basis in order to identify and update policies. This plan has been put in place to ensure the execution of the Board’s essential functions in the event of an interruption of everyday business processes.

RECOMMENDATION: Informational item only; no action taken. Forward to the full Board for review.

2 Health Professionals’ Services Program Update, Carol Brandt, Business Manager LL

Carol Brandt provided an update regarding House Bill 4016, which removed the Oregon Health Authority’s responsibility to provide the Health Professional Services Program (HPSP) administration. As a result, the Oregon Medical Board, the Oregon State Board of Nursing, the Oregon Board of Dentistry, and the Oregon Board of Pharmacy have established a Work Group to facilitate the continuation of HPSP by July 1, 2017. Activities under the new contract will be monitored by a contract administrative team consisting of one representative from each board, and through an advisory committee of board representatives. All of the boards involved have worked together to ensure a smooth transition for program participants.

RECOMMENDATION: Informational item only; no action taken. Forward to the full Board for review.

3 Oregon Medical Board Licensure Count MP

The Committee reviewed information regarding the number of licensure approvals between February 17, 2017 and May 30, 2017.

RECOMMENDATION: Informational item only; no action taken. Forward to the full Board for review.
EXECUTIVE SESSION - APPLICANT REVIEW

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<tr>
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<th>Entity #</th>
<th>Recommendation</th>
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<tr>
<td>4</td>
<td>Exec Session ORS 192.502(2)</td>
<td>RECOMMENDATION: The Committee recommended not waiving the Special Purpose Examination. In addition, it is recommended that the applicant be offered the opportunity to withdraw the application with report to the Federation of State Medical Boards (FSMB). 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.</td>
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<td>5</td>
<td>Exec Session ORS 192.502(2)</td>
<td>RECOMMENDATION: The Committee recommended issuance of a civil penalty for the applicant’s failure to affirmatively answer personal history question number two on the application for Oregon licensure. In addition, it is recommended that the applicant be offered the opportunity to withdraw the application with report to the Federation of State Medical Boards (FSMB). 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.</td>
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<tr>
<td>6</td>
<td>Exec Session ORS 192.502(2)</td>
<td>RECOMMENDATION: The Committee recommended issuance of a one-year, active license. Forward to the full Board for approval.</td>
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<td>7</td>
<td>Exec Session ORS 192.502(2)</td>
<td>RECOMMENDATION: The Committee recommended not to approve the applicant’s request for waiver of OAR 847-020-0170(4)(a)(A) and 847-020-0170(4)(b). In addition, issuance of a civil penalty for the applicant’s failure to answer affirmatively to personal history question number two on the application for Oregon licensure is recommended. Finally, the Committee recommended allowing the applicant to withdraw the application request with report to the Federation of State Medical Boards (FSMB). 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.</td>
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<tr>
<td>8</td>
<td>Exec Session ORS 192.502(2)</td>
<td>RECOMMENDATION: The Committee recommended the applicant undergo an interview with the Board’s Executive Director and Medical Director. Upon successful completion, the Committee recommended issuance of an unlimited, active license. Forward to the full Board for approval.</td>
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RECOMMENDATION: The Committee recommended issuance of a civil penalty for the applicant’s failure to answer affirmatively to personal history question number 14 on the application for Oregon licensure. In addition, the Committee recommended allowing the applicant to withdraw the application request with report to the Federation of State Medical Boards (FSMB). 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.

RECOMMENDATION: The Committee recommended forwarding the file to the Investigative Committee for additional review. Forward to the full Board for review.

OREGON ADMINISTRATIVE RULES (OAR)

Please review the Fiscal Impact memo prior to conducting a First Review of rules.

The Committee stated there would be no Fiscal Impact initiated from the First Review Rules.

PUBLIC SESSION

TIME CERTAIN: 6 P.M.

RECOMMENDATION: The Committee recommended moving the rule forward as written. Forward to the full Board for review.

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Glenn Forister, PA-C, Director of the Physician Assistant Program at Oregon Health Sciences University (OHSU), stated that their facility notifies the Board and also directs out-of-state programs to notify the Board regarding their PA students. He stated that OHSU is fine whether the Board continues to require notification or eliminates this requirement.

RECOMMENDATION: The Committee recommended moving the rule forward as written. Forward to the full Board for review.

RECOMMENDATION: The Committee recommended approval of the rule as written. Forward to the full Board for approval.
Nicole Krishnaswami, JD, Operations and Policy Analyst, explained that the federal government now allows physician assistants (PA) and nurse practitioners (NP) to prescribe buprenorphine for medication assisted treatment (MAT) for opioid dependency. As a result, the OMB received several inquiries from PAs wanting to know when they could start prescribing, and whether or not the Board had rules in place to allow them to do so. The rule amendment is intended as one succinct reference for how to include buprenorphine in a PA’s practice; it is not meant to create new requirements for PAs.

The public comment period highlighted that many MAT practices prescribe buprenorphine but do not dispense it in the office. As a result, the proposed rule was revised to clarify that dispensing authority is only required if the PA will be dispensing as a part of their practice.

Regarding dispensing, Ms. Krishnaswami clarified that the Board does not impose a fee for registering as a dispensing provider. In addition, Senate Bill 423 is awaiting the Governor’s signature and will allow PAs to request authority to dispense Schedule III-IV controlled drugs regardless of their practice location.

*A. Rachel Stappler, PA, North Bend Medical Center, reserve officer in the community, and Oregon Society of Physician Assistants (OSPA) President, thanked the OMB and stated that this change will have a huge impact in her community and in her practice.

*Ben Johnson, PA, OSPA, stated that the revision changed his planned testimony. He stated that requiring supervising physicians to share the same scope of practice may limit PAs if the supervising physician doesn’t want to prescribe buprenorphine.

*Lucile Gauger, PA, Kaiser Permanente NW, summarized her background with clinical trials for opiate dependency. She expressed concern about numerical limits on the number of patients each provider may treat, but she is glad that PAs are finally able to prescribe buprenorphine.

*Barbara Martin, PA, Central City Concern, stated that she appreciated the work put into the rule change. She hoped there could be an option in the future for PAs in rural communities to prescribe buprenorphine without a supervising physician who also prescribes buprenorphine.

*John Tardiff, PA, Virginia Garcia Beaverton Clinic, thanked the Committee for fixing what he believed was the most important part of the rule. He would like the Board to consider writing a rule that would allow PAs to utilize buprenorphine even if they work in an organization that doesn’t prescribe it.

**RECOMMENDATION:** The Committee recommended approval of the rule as revised. Forward to the full Board for approval.
All public comment was given during other agenda topics specific to those discussions.

DISCUSSION ITEMS

18 Physician Assistant Schedule II Prescribing Memo from Nicole Krishnaswami, JD, Operations and Policy Analyst

Melissa Peng, PA-C, gave a brief overview regarding the historical statutory requirement regarding Schedule II prescribing privileges for physician assistants. Per ORS 677.545(3), a physician assistant must be certified by the NCCPA in order to prescribe Schedule II controlled substances. However, in 2015, Senate Bill 905 added a physician assistant member to the Board, and disbanded the former Physician Assistant Committee. As a result, the substantive requirement that PAs hold current NCCPA certification for Schedule II prescribing was repealed from statute. However, the requirement remains in rule, OAR 847-05-0041(3).

The Committee discussed whether or not NCCPA certification should remain a requirement for Schedule II prescriptive authority. Ms. Peng, along with PA public members, stated that the recertification exam for NCCPA this year only asked one question pertaining to Schedule II drugs. She stated that she would like to see a requirement for an educational component such as continuing medical education instead of NCCPA certification. The Committee inquired if there was any evidence that those who were Board certified were any safer in practice than those that were not. In addition, there was a question of how many PAs in Oregon are maintaining certification versus those who are not.

RECOMMENDATION: The Committee requested Board staff gather data regarding licensees who have current NCCPA certification. This information will be forwarded to the full Board for continued discussion at the meeting in July 2017. Forward to the full Board for discussion.

19 Physician Assistant Supervision

Dr. Lipe introduced the topic of physician assistant supervision by stating the importance of examining the Board’s supervision requirements to ensure that they are current and pertinent to today’s practice. She asked whether there are other ways to address concerns without compromising patient safety or provider access.

RECOMMENDATION: Forward to the full Board for discussion.
The Committee reviewed the request for waiver of the 8-hour requirement. However, it was unclear if the physician assistant had obtained an Oregon supervising physician. In addition, it was unclear if the facility was currently up and running.

**RECOMMENDATION:** The Committee recommended obtaining additional information from the inquirer for review by the full Board in July. Forward to the full Board for review.

*Upon further review, it was discovered that the rule cited by the inquirer was an Oregon Health Authority (OHA) rule. Therefore, the inquirer was instructed to contact OHA.*

**RECOMMENDATION:** The Committee recommended working on a draft statement of philosophy for Stem Cell Therapy. Forward for discussion.

*OMB medical director provided an update to the topic for review at the full Board. In addition, the Federation of State Medical Boards has formed a workgroup on the topic of Stem Cell Therapy.*

**RECOMMENDATION:** The Committee recommended the following:

- If the applicant fails to disclose remediation of one course or exam during training then Board staff should issue a warning letter.
- If the applicant fails to disclose remediation of a course or exam during training that has caused an extension of training beyond the anticipated original time frame for completion then Board staff should issue a civil penalty.
- If the applicant fails to disclose remediation of a course or examination which has caused the applicant to repeat an entire semester or year of training then Board staff should issue a civil penalty.

Forward to the full Board for approval.
INFORMATIONAL ITEMS

23 Legislative Update Memo from Nicole Krishnaswami, JD, Operations and Policy Analyst

Nicole Krishnaswami, JD, Operations and Policy Analyst, gave a brief overview of legislative bills that were either brought forward by the Board or may have an effect on the Board’s practices.

RECOMMENDATION: No action taken. Informational item only.

24 Federation of State Medical Boards 105th Annual Meeting Update, Michael Mastrangelo, MD

Dr. Mastrangelo gave an update about the annual Federation of State Medical Boards (FSMB) meeting and commented that his participation gave additional insight into how organized and far ahead of the field the Oregon Medical Board is in comparison to other Boards. He further commented that the FSMB, as well as several other boards, look to Kathleen Haley for guidance on many issues.

RECOMMENDATION: No action taken. Informational item only.

25 2017 Governor’s State Employees Food Drive Update

The Committee congratulated Board staff for raising 16,187 lbs. of food for the 2017 Governor’s State Employees Food Drive.

RECOMMENDATION: No action taken. Informational item only.

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