COMMITTEE ON ADMINISTRATIVE AFFAIRS
DECEMBER 13, 2017, 2017
BOARD OFFICE, 5:00 PM
WORKING DINNER MEETING

MINUTES - AAC

MEMBERS PRESENT:
Melissa Peng, PA-C, Chair
Katherine Fisher, DO
James Lace, MD (GoToMeeting)
Michael Mastrangelo, Jr., MD (GoToMeeting) (5:16 pm – 7:24 pm)

STAFF PRESENT:
Kathleen Haley, JD, Executive Director
Joseph Thaler, MD, Medical Director
Netia N. Miles, Licensing Manager
Frank Clore, Licensing Assistant
Carol Brandt, Business Manager (5:00 pm – 5:15 pm)
Mark Levy, Senior Software and Systems Administrator (5:00 pm – 5:31 pm)

ABSENT BY PRIOR NOTIFICATION:
Rebecca Hernandez, PhD

GUESTS:
Joyce Brake, JD, Oregon Health Science University (5:46 pm – 6:52 pm)
Mark Bonanno, JD, Oregon Medical Association (5:46 pm – 6:52 pm)
Sage Davis-Risen, PA-C, Oregon Society of Physician Assistants (5:46 – 7:09 pm)
Glenn Forister, PA-C, Oregon Health Science University (5:46 pm – 6:52 pm)
Claire Hull, PA, Oregon Health Science University (5:46 pm – 6:52 pm)
Ben Johnson, PA, Oregon Society of Physician Assistants (5:46 pm – 6:52 pm)
George Mejicano, MD, Oregon Health Science University (5:46 – 7:09 pm)
Elizabeth Remley, Oregon Society of Physician Assistants (5:46 pm – 6:52 pm)
Jon Tardiff, PA-C, Virginia Garcia Clinic (5:46 – 7:24 pm)
Mary Von, PA-C, Pacific University (5:46 pm – 6:52 pm)

Meeting opened: 5:00 pm
Meeting adjourned: 7:24 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 OMB Information Technology Update, Mark Levy, Senior Software and Systems Administrator

Mark Levy, Senior Software and Systems Administrator provided an update regarding the Board’s managed technologies, current considerations, and projects completed. In addition, he provided useful security reminders.

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

2 Board Best Practices Introduction, Carol Brandt, Business Manager

Carol Brandt, Business Manager provided an overview of the legislatively mandated self-evaluation survey that is completed by Board members on an annual basis. The self-assessment contains 15 survey questions about the Executive Director selection, expectations, strategic management, strategic policy development, fiscal oversight, and Board management. The survey will be provided to the Board members during the full Board meeting in January 2018.

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

EXECUTIVE SESSION – APPLICANT REVIEW

3 Exec Session ORS 192.502(2)

RECOMMENDATION: The Committee recommended the applicant be offered the opportunity to withdraw the application with a report to the Federation of State Medical Boards. If the applicant wishes to continue with the licensure process, the file will be forwarded to the full Board for review with intent to deny licensure. Additionally, it is recommended that the applicant be issued a civil penalty for omission of information on the application for licensure. Forward to the full Board for review.

4 Exec Session ORS 192.502(2)

RECOMMENDATION: The Committee recommended issuance of an unlimited license. Forward to the full Board for approval.

5 Exec Session ORS 192.502(2)

RECOMMENDATION: The Committee recommended the applicant be offered the opportunity to withdraw the application with a report to the Federation of State Medical Boards. If the applicant wishes to continue with the licensure process, the file will be forwarded to the Investigative Committee for additional review. Additionally, it is recommended that the applicant be issued a civil penalty for omission of information on the application for licensure. Forward to the full Board for review.
RECOMMENDATION: The Committee recommended the applicant be offered the opportunity to withdraw the application with a report to the Federation of State Medical Boards. 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)

Please review the Fiscal Impact memo prior to conducting a First Review of rules. The Committee noted that there may be an impact to the supervising physicians who wish to become preceptors due to the cost of the examination.

PUBLIC SESSION

Melissa Peng, PA-C, introduced OAR 847-050-0060, and noted receipt of previously submitted public comments. Feedback received reflected opposition to Section 2(c), which requires a Board-approved supervisor as a preceptor for each physician assistant student who is participating in the diagnosis and treatment of patients. In addition, she noted concern regarding the cost of the supervising physician examination, to which the Committee agreed that the fee could be waived.

After providing overview of the rule, Ms. Peng noted that the intent of the rule was not to limit or restrict the availability of preceptors, rather it is to ensure that required knowledge of supervision responsibilities are followed. She requested the public to weigh-in on how schools are vetting preceptors and reviewing sites, as she has experienced two physician assistant students being sent from two different in-state programs to work with a physician whose license was previously revoked by the Board. She stated there was a lot of confusion, as no one had visited their site, nor had there been previous knowledge of a preceptor relationship. With that, she opened the floor for public comment.

*Comments from the public are reflected under item number 13 below.

RECOMMENDATION: The Committee recommended removing Section 2(c) from the rule. The Board may consider clarifying the requirement to have Board-approved supervising physicians over each physician assistant program only. The Committee requested the physician assistant programs provide copies of materials regarding their process for vetting preceptors. The Board may consider removing the entire rule. Forward to the full Board for discussion.

RECOMMENDATION: The Committee recommended the rule move forward as written. Forward to the full Board for approval.
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10 OAR 847-017-0003; 847-017-0005; 847-017-0010; 847-017-0015; 847-017-0020: In-Office Anesthesia

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

11 OAR 847-050-0005; 847-050-0010: Supervising Physicians to include Podiatric Physicians (SB 831)

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

12 OAR 847-050-0041: Physician Assistant Prescribing and Dispensing Privileges (SB 423)

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

PUBLIC SESSION – 10 MINUTES

Elizabeth Remley, Oregon Society of Physician Assistants, thanked the Committee for the opportunity to provide testimony. She noted that a letter was sent to the Board from their president, and she reiterated their view that the rule isn’t necessary. While they understand having a rule regarding the need for a preceptorship relationship, they are requesting that the Board remove Section 2(c). It’s the Society’s perception that a physician assistant student is not practicing medicine, as they are not treating or diagnosing patients. She stated that students only observe under a licensed practitioner. She stated there is too much focus on the perception that the students are practicing medicine. While the physician assistant student may meet the patient and assist the supervising physician, this is not the practice medicine according to their perspective. She requested the Board let the schools determine how a physician assistant is supervised, as there is a lot of education provided by the schools during the course of their training. As a result, she stated that what is being learned in school does not need to be supervised.

Mary Von, PA, Director of Pacific University, provided input regarding how preceptors are vetted at their school. She stated their accreditation manual gives specific directives to include tracking of all preceptors, which indicates their background, board certification status, licensure status, and malpractice insurance information. Their preceptor clinical manual includes site supervision requirements, a preceptor orientation handbook, the Oregon Medical Board’s guide for supervising physician assistants, as well good information regarding the supervisory relationship for the clinically practicing physician assistant. In addition, the physician assistant student receives a student clinical manual with the same goals and objectives as the preceptor manual. This manual also provides...
information to the physician assistant on how to discuss the appropriateness of their role in being supervised. She pointed out their students begin their participation in the program with a visit from the Oregon Medical Board, and they end their education with another visit from the Board, as the school feels it is imperative to the student’s success. She noted that both Oregon Health Science University’s Physician Assistant Program and Pacific University recently went through well received site visits. In addition, she stated that Pacific University has a 98% and 99% first time, five year Board pass rate, compared to the national average of 95%. As a result of the information provided, it is their strong recommendation to strike Section 2(c) from the rule.

Glen Forister, PA, director of physician assistant program at Oregon Health Science University, asked George Mejicano, MD, Senior Associate of Education for the School of Medicine at Oregon Health Science University, to provide information about the difficulty of finding preceptors. Dr. Mejicano stated that is increasingly difficult to find preceptors for all of the health professional students in Oregon, as well as the nation. From his perspective, the proposed rule will make the challenge worse. Mr. Forister, stated that they are bound by ARC-PA standards, which states that majority of the preceptor relationships have to occur between a physician and physician assistant, but that under subsection 306(C) of ARC-PA’s standards, other licensed healthcare providers experienced in their area of instruction may participate in some area of instruction. As a result, he states that the rule language the Board is proposing is already provided under the standards they must follow.

Claire Hull, Clinical Coordinator with Oregon Health Science University’s Physician Assistant program provided information about the process used to onboard and recruit preceptors. She stated that they verify the preceptor’s good standing with the Oregon Medical Board; verify that the preceptor is either Board certified or Board eligible; require submission of the preceptor’s curriculum vitae; and orient the preceptor on the program’s standards, which includes what the student may or may not perform. She pointed out that in most cases, students are being educated by multiple people at one site. While there is a designated preceptor on record who is primarily responsible for students, several providers may be involved with the supervision. She noted that the program performs regular site visits in a systematic way, by utilizing forms to document when a visit has been performed, to include whether or not an issue was noted. She expressed confidence in how the program, as well as Pacific University’s program, places students throughout the state. However, she had some concerns about out of state students who may not be following program requirements. Mr. Forister noted that a letter was received from the program’s Dean, and reiterated that they oppose the proposed rule language.

George Mejicano, MD, provided additional testimony by noting he takes issue with a governmental organization governing an educational institutions’ responsibility in vetting preceptors, supervisors and any faculty involved with the education of health professional students. He further stated that in the current environment of team-based practice, the idea of restricting practitioners with other skills and talents is shortsighted. He noted that licensed practitioners in all health care professions have a lot to offer students, and he would like to see the supervision umbrella broadened for each profession. He opined that interns are currently supervising health professional students at Oregon Health Science University, yet no one is vetting their supervising skills because they’re still learning. He believes there are many people who have authority to supervise, yet have not gone through the kind of burden that the current and proposed rule is imposing. He is strongly opposing the entire rule, not just Section 2(c).

Ben Johnson, President-Elect of Oregon Society of Physician Assistants, stated that a Board-approved supervising physician will not proctor a student any differently than another licensed provider. He further stated they have been advised by the American Academy of Physician Assistants that no other state has a rule of this nature regarding the proctoring of physician assistant students.
Sage Davis-Risen, President of Oregon Society of Physician Assistants, noted there is a current physician assistant practitioner shortage in Oregon. She stated that recruitment for physician assistants relies on preceptorship and anything which may impede the process will continue to impact the shortage. As a result, they strongly oppose the rule, which if passed, may put Oregon schools at a disadvantage in comparison to other schools around the country. She asked Kathleen Haley, JD, Executive Director, if her interpretation of other sections of the rule required a Board-approved physician is required to be over the program, and Kathleen confirmed. While the Society of Physician Assistants would like to see Section 2(c) stricken from the language, they don’t feel the rest of language is prohibitive. She made it clear that their opposition is towards the rule as proposed.

Jon Tardiff, PA, Virginia Garcia Clinic, stated that he is a preceptor for Oregon Health Science University’s Physician Assistant program, as well as Pacific University. He provided a background on his ability to participate in out of state programs during his time as a student, and commented on the knowledge he learned. He is concerned that Section 2(c) will prohibit participation in out of state preceptorships by requiring Oregon supervising physicians to be Board-approved.

**DISCUSSION ITEMS**

| 14 | Workgroup on Supervision of Physician Assistants | 318 | MP |

Ms. Peng provided an update regarding the Workgroup on Supervision of Physician Assistants, which consists of former Board member, George Koval, MD, Jon Gietzen, PA-C, Fran Biagioli, MD, and Ms. Peng. It was decided that a matrix would be created as a way for PAs to apply for a waiver of the 8 hour requirement at this time.

**RECOMMENDATION:** No action taken. Forward to full Board for discussion.

| 15 | State Emergency Registry of Volunteers in Oregon (SERV-OR) Enrollment: A Request from OHA to Collaborate for Disaster Preparedness, Memo from Nicole Krishnaswami, JD, Operations and Policy Analyst | 320 | JKL |

Dr. Lace provided overview of SERV-OR’s duties and encouraged providers to participate. Ms. Peng inquired about Physician Assistants who wished to volunteer, and requested clarity regarding the 8 hours of supervision requirement. Ms. Haley clarified that the Board has the authority to waive the 8 hour requirement, and during an emergency it would be recommended that those who are volunteering through SERV-OR have that requirement waived.

**RECOMMENDATION:** The Committee recommended adding an option for practitioners to sign-up for SERV-OR enrollment during the initial application process. Forward to full Board for discussion.

| 16 | OMB Board Member Retreat 2018 | 322 | MP |

**RECOMMENDATION:** No action taken. Forward to the full Board for discussion.
Dr. Mastrangelo encouraged participation at the Federation of State Medical Boards annual meeting. The Federation pays for the voting delegate, which is typically the Board Chair, and the Board pays for one additional member to attend.

**RECOMMENDATION:** No action taken. Forward to the full Board for discussion.

Dr. Mastrangelo provided an overview of the Federation of State Medical Boards and the National Board of Medical Examiners collaborative research initiative. The goal of the project is to obtain investigative complaint information in an effort to review physician performance. The Boards’ are requesting data from medical boards across the country. While Dr. Mastrangelo applauded the effort, he noted concerns regarding the OMB’s participation due to issues surrounding confidentiality.

**RECOMMENDATION:** The Committee recommended obtaining legal advice to determine if the Board’s participation is appropriate. Forward to the full Board for discussion.

**INFORMATIONAL ITEMS**

Dr. Mastrangelo provided an overview of the Federation of State Medical Boards draft report on physician wellness and burnout. The Federation provided recommendations for boards to address, such as differentiating between a physician’s illness and actual impairment, only addressing active issues, and maintaining relationships with the state’s physician health program. Dr. Mastrangelo noted that the OMB is ahead of the curve in having already addressed key points discussed in the report.

**RECOMMENDATION:** No action taken. Forward to the full Board for review.

Dr. Mastrangelo provided an update regarding the physician wellness program and noted Dr. Girard’s accomplishments in spearheading the program. As a result of his leadership, Dr. Girard was recognized by the Oregon Medical Association as Doctor-Citizen of the Year at their annual conference on October 28, 2017.

**RECOMMENDATION:** No action taken. Forward to the full Board for review.

**RECOMMENDATION:** No action taken. Forward to the full Board for review.
Nicole Krishnaswami, JD, has been collaborating with the Department of Health Services in an effort to provide a revised report prior to the full Board in 2018. As a result, the current report was not reviewed.

RECOMMENDATION: No action taken. Forward to the full Board for review.