Statement of Purpose:
The OMB Report is published to help promote medical excellence by providing current information about laws and issues affecting medical licensure and practice in Oregon.
OMB Statement of Philosophy:
Confidential Program for Substance Abuse and Mental Health Disorders

In the interest of the health, safety and welfare of the people of Oregon, the Oregon Medical Board, “OMB” or “Board,” is charged with protecting the public from the practice of medicine by unqualified, incompetent or impaired physicians and other licensees. With this principle foremost in mind, the Board has adopted a policy of rehabilitating impaired physicians and other licensees whenever possible.

The Board participates in the Health Professionals’ Services Program. The HPSP was established in July 2010 as a statewide confidential referral resource for rehabilitation and monitoring. Prior to the development of HPSP, the Board maintained its own successful Health Professionals Program “HPP,” for the past 20 years.

Licensees experiencing substance abuse or mental health problems who entered HPP’s treatment and monitoring program experienced significant success in being able to return to practice and overcome their addiction. The typical participant spent five years in the program. Experience, in Oregon and nationally, indicates that anything short of this standard of comprehensive monitoring leads to a markedly increased failure rate.

Within health care delivery systems, there is acute awareness of the need to identify substance abuse and mental health issues. Nearly all hospitals and other delivery systems require physicians and other licensees to answer personal history questions, which include questions regarding substance use and mental health questions. In addition to system practices, state law requires that all impaired licensees be reported to the Board (ORS 676.150).

Licensees with substance abuse and/or mental health issues are encouraged by the Board to seek comprehensive treatment before becoming impaired. The Board has adopted the following policy for addressing physicians and other licensees with substance abuse and/or mental health issues:

**Self-referral:** Licensees will be considered “true volunteers” when they have sought affiliation with HPSP on their own or through
Annual Renewal Fees
The Board is proposing a fee increase, which will raise annual renewal fees by $66 for MD, DO, and DPM licenses. License renewal fees for Physician Assistants will increase $50 per year, and Acupuncturists will increase $42 per year.

Fees were last raised in 1999. This increase would be effective in 2011 and is proposed to last for six years. Fee increases will be based on the actual costs of Board programs and the rate of inflation. The Board does not receive revenue from the state General Fund.

Application Fees
The base fee for processing an application is not increasing. However, the Board is proposing to pass on the cost of fingerprint criminal background checks that are now required. Currently, this fee is $47.25. This would be a one-time fee due when a new application is submitted.

Licensees under Monitoring or Investigation
Licensees enrolled in the Health Professionals Services Program (HPSP) pay for their own treatment and related costs. Licensees who are disciplined after investigation are often required to pay fines and hearing costs. While all licensees pay the costs of investigations and compliance monitoring, these are part of the Board’s regulatory activities that help keep Oregon’s medical profession healthy and the public safe.

Managing the Budget
The Board follows stringent state accounting and budgeting law. Its budget and accounting practices are carefully monitored by three separate and independent review bodies—Governor’s Office analysts, the Legislature, and Secretary of State auditors.

Fees Support OMB Services
Fees cover license processing and background checks, license verifications, educational outreach, public information services, investigations, legal expenses, medical consultants, HPSP, OHSU medical library, office space, computers, equipment, supplies, and staffing to support agency functions. Current fees no longer cover the costs of these services.

Alternatives
If the Board does not receive a fee increase, it is very likely that staff and services would be eliminated or reduced. The Board has no revenue sources other than fees charged to its licensees. Unlike many other state agencies, there is no revenue from state taxes, federal grants, or lottery funds.

<table>
<thead>
<tr>
<th>License Type</th>
<th>Oregon Proposed</th>
<th>Washington</th>
<th>California</th>
<th>Idaho</th>
<th>Nevada</th>
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<td>$150</td>
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<td>$90</td>
<td>$162.50</td>
<td>$125</td>
<td>$700</td>
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</tbody>
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E-mail Safety
by Jim Peck, MD
Medical Director, Oregon Medical Board

E-mail is becoming an increasingly used modality for patient communication in medical practice. Mobile access to e-mail (through BlackBerry, iPhone, etc.) and text messaging leave many unanswered questions about information security. The Health Information Technology for Economic and Clinical Health (HITECH) Act 2009 is designed to strengthen the privacy and security protections for health information and encourages encryption when sending sensitive patient health information electronically. Unless you need a written record or are communicating across the globe, consider whether a simple phone call rather than an e-mail would be a better option.

If you receive an emotionally charged e-mail, walk away from the computer. Make sure you are not reading anything into the e-mail that simply isn't there. It is probably best to wait until the next morning to respond. In general, it is wise to be formal and succinct. It reflects respect and courtesy. Type in complete sentences and avoid phrases or cryptic thoughts. Keep your office e-mails brief and to the point. Reread your e-mail before you click “send,” and make sure you are communicating what you intend to say. When there is a misunderstanding by e-mail, pick up the phone to work it out.

We have all sent an embarrassing or unfortunate e-mail and then sighed in relief when it is finally deleted. Think again. Although the sender and recipient both deleted the e-mail, it may not be gone forever. Deleted messages still exist in back-up folders and remote servers and can be retrieved years later. Start believing that what you write in an e-mail is a permanent document, so that it doesn’t come back to haunt you.

Rules Regarding Telemedicine

The practice of medicine across state lines, or “telemedicine,” is a direct rendering of a medical opinion or medical treatment to a person located within Oregon by a physician located outside Oregon through transmission of patient data by electronic or other means. A physician practicing medicine across state lines has the same duties and responsibilities and is subject to the same penalties and sanctions as any other licensed physician in Oregon.

Oregon has been one of the first states to have statutes and rules regarding telemedicine. Our regulations reflect the most current position on this evolving area of medicine.

An out-of-state physician wishing to engage in telemedicine within Oregon must hold a full, unrestricted license to practice medicine in another state and must not be the subject of a pending investigation or a previous disciplinary action by another state that indicates the physician is a potential threat to the public interest, health, welfare, or safety. The physician must apply to the Board by submitting an application, fees, documentation, and a description of the applicant’s intended practice of medicine in the state.

Oregon law does not restrict physicians from consulting across state lines or practicing medicine in the state in an emergency.

Please see Oregon Administrative Rules, Division 025, for more information on the rules for licensure to practice medicine across state lines.
Q&A: Electronic Health Records (EHR)

Q: My practice is transitioning to Electronic Health Record (EHR) technology. Where can I find information on the federal incentive programs?
A: The Centers for Medicare & Medicaid Services (CMS) EHR Incentive Program website is www.cms.gov/EHRIncentivePrograms. Here you will find program and registration information as well as frequently asked questions and fact sheets for eligible professionals and hospitals. Any additional questions can be e-mailed to the CMS Seattle Regional Office at ROSEA_DFMFFSO2@cms.hhs.gov, or call (206) 615-2331.

Q: Are there any special incentives for rural providers in the Medicare and Medicaid EHR Incentive Programs?
A: Under the Medicare EHR Incentive Program, the annual incentive payment limit for each payment year will be increased by 10% for eligible professionals who predominantly furnish services in a Health Professional Shortage Area (HPSA) and meet the maximum allowed charge threshold. Under Medicaid, there are no additional incentives for rural providers.

Q: Where can I find technical assistance to make sure I have a certified product that meets the incentive program requirements?
A: Regional Extension Centers (RECs) were created in 2009 under the Health Information Technology Economic and Clinical Health (HITECH) Act. RECs offer technical assistance, guidance, and information on best practices to support and accelerate health care providers’ efforts to become meaningful users of EHRs. Oregon’s REC is O-HITEC (www.o-hitec.org).

Q: When do the Medicare and Medicaid EHR Incentive Programs start?
A: The registration process will be the same for the Medicare and Medicaid programs and is expected to begin in January 2011. The Medicare EHR Incentive Program ends in 2016, while the Medicaid program ends in 2021. Eligible providers may enroll in only one of the two programs. Consult the CMS website above for your practice’s best option. ♦

Special thanks to the Centers for Medicare & Medicaid Services for their assistance with this article.

Submit Your Question
Do you have a question you’d like answered in an Oregon Medical Board Report? Send it in for an upcoming Frequently Asked Questions column. Email your question to OMBReport@state.or.us.

One-Year & Emeritus License Renewals

Approximately 700 one-year and emeritus license renewals will be processed between October 1 and December 31, 2010. These license renewals are now being processed online. The hard copy, paper forms are no longer available via the website.

Why the move to online renewals? First, online renewals are more accurate. When a licensee logs in with his or her license number, date of birth, and password, the program will only allow access to those services available to the specific licensee. In addition, the program will not allow a licensee to proceed without completing the required fields. These safeguards reduce errors previously made with paper forms. Second, online renewals are more efficient, with a significantly shorter processing time and lower cost than paper renewals. Online renewals are also cost-saving for licensees, eliminating the expense of printing and mailing.

Continued on page 6
Change of Address?

You are required by law to notify the Board of a change of practice location within 30 days of the change. (See ORS 677.172(1)) Please keep us informed of your practice, residence, mailing address, telephone numbers, and e-mail address. You can do this by going online:

1. Log on to www.oregon.gov/OMB and click on the link for “Online Services” on the right side of the home page. Sign in with your license number, date of birth, and password.

2. If you have forgotten your password, click the “Forgot Password” link. You will be asked to input your license number, date of birth, and social security number. An e-mail will be sent to your home e-mail address on file. The e-mail address where the password was sent will be displayed on the final screen for your review.

3. If you have forgotten your password and the e-mail address on file is no longer current, please e-mail the Licensing Department at appinfo@state.or.us with your first and last name and updated e-mail address along with a request for a new password. Licensing will then send a new password to your updated e-mail address.

Renewals

Continued from page 5

Renewals have been processed primarily online since 2009, when approximately 99% of the 15,000 two-year physician renewals were completed online. At that time, the online system reduced the days to renew a license to only seven days, while it took an average 20 days to process a paper renewal.

You can access the online renewal by logging on to www.oregon.gov/OMB and clicking on the link for “Online Services” on the right side of the home page.

PHYSICIAN ASSISTANT ALERT

Attention all Physician Assistants! Did you know you need to register with the Oregon Department of Consumer and Business Services (DCBS) before seeing any workers’ compensation patients?

Log on to www.wcd.oregon.gov or call the Workers’ Compensation Division at 800-452-0288 for more information.

HPSP

Continued from page 1

confirming the non-compliance and then opening an investigation if the report is substantiated. The Board will not automatically suspend a licensee based on a non-compliance report.

“The goal of the new program is to ensure public safety and the licensee’s ability to practice.”

Substantial effort is made by the program to protect the confidentiality of program participants. Confidentiality can be limited in some ways by the nature of the program itself. The licensee’s employer, administrator, or supervisor may be an important component of the program. It is critical that the supervisor support the licensee in his or her compliance with the program, and for them to occasionally allow time away from the worksite to comply with random toxicology screenings, which provide very little flexibility in location or time for testing.

Call HPSP administrator Reliant Behavioral Health at 888-802-2843 for more information, to make a self-referral, or for a list of Board-approved independent third-party evaluators.
Board Actions

July 16 to October 15, 2010

Complaint and Notice of Proposed Disciplinary Actions

This action is not reportable to the National Data Bank (NPDB). This is a preliminary action by the Board. Final actions in these matters have not been taken.

GAMBEE, John Edwin, MD; MD09526
Junction City, OR
An Amended Complaint and Notice of Proposed Disciplinary Action was issued on September 20, 2010. This document alleges violations of the Medical Practice Act (state law) regarding allegations of unprofessional or dishonorable conduct; gross or repeated acts of negligence; and willfully disobeying a board order.

MCCLUSKEY, Edward Alan, MD; MD18356
Gresham, OR
The Board issued a Complaint and Notice of Proposed Disciplinary Action on October 5, 2010. This document alleges violations of the Medical Practice Act (state law) regarding unprofessional or dishonorable conduct and gross or repeated acts of negligence.

PLISKIN, Leslie Arthur, MD; MD12017
Lebanon, OR
The Board issued a Complaint and Notice of Proposed Disciplinary Action on September 23, 2010. This document alleges violations of the Medical Practice Act (state law) regarding unprofessional conduct, gross or repeated acts of negligence, and incapacity to practice medicine.

Interim Stipulated Orders

Interim Stipulated Orders are disciplinary, but are not reportable to the National Data Bank (NPDB).

PHILLIPS, Richard Harvey, MD; MD06475
Portland, OR
Licensee entered into an Interim Stipulated Order with the Board on August 17, 2010. In this Order, Licensee agreed to practice only administrative medicine and will provide no patient care pending the completion of the Board's investigation. Licensee will not provide advice to executive staff on medical or clinical issues pertaining to individual patients and will not collaborate, consult with, or advise mental health teams or other professionals through formal or informal communication on patient care issues.

POWELL, Diane Hennacy, MD; MD25438
Medford, OR
Licensee entered into an Interim Stipulated Order with the Board on August 17, 2010. In this Order, Licensee agreed to voluntarily and immediately cease accepting any new patients, transfer patients whom she primarily treats by telephone sessions and obtain a practice mentor.

Disciplinary Actions

Reportable to the National Data Bank (NPDB).

BECKMANN, Brooke Robert, DPM; DP00434
Salem, OR
The Board issued an Order of License Suspension on August 25, 2010. This Order immediately suspended Licensee's Oregon podiatry license for failure to pay child support per ORS 25.750.

CAMPBELL, Robert Perry, MD; MD10884
Portland, OR
Licensee entered into a Stipulated Order with the Board on October 7, 2010. In this Order, Licensee was reprimanded, required to obtain an evaluation, and will remain on probation for as long as he holds a medical license in Oregon.

Continued on page 8
Board Actions

Continued from page 7

FETROE, Dale Thayne, MD; MD12255  
Walla Walla, WA
Licensee entered into a Stipulated Order with the Board on October 7, 2010. In this Order, Licensee surrendered his license to practice medicine while under investigation.

GAMBEE, John Edwin, MD; MD09526  
Junction City, OR
The Board voted to issue an Order of Emergency Suspension on September 2, 2010. This motion immediately suspended Licensee’s Oregon medical license.

GOMEZ, Gregory Rodriguez, MD; MD27099  
Lake Oswego, OR
Licensee entered into a Stipulated Order with the Board on September 2, 2010. In this Order, Licensee is reprimanded, placed on probation for a minimum of ten years, assessed a fine of $2,000, and has restrictions on his medical license.

HARDY, John Henry, Jr., MD; MD18862  
Lake Oswego, OR
Licensee entered into a Stipulated Order with the Board on September 2, 2010. This Order replaces the Stipulated Order of July 14, 2006, and terminates the Order Modifying Stipulated Order dated January 10, 2008.

HOFFMAN, Gregory Robert, MD; MD22890  
Sandy, UT
Licensee entered into a Stipulated Order with the Board on October 7, 2010. In this Order, Licensee was reprimanded and placed on probation for a minimum of five years. Licensee currently has an inactive Oregon medical license and resides in another state. Licensee must pay a fine and must complete a boundaries course within 120 days from the date this Order is signed by the Board Chair.

IMPERIA, Paul Steven, MD; MD17163  
Medford, OR
Licensee entered into a Stipulated Order with the Board on August 5, 2010. In this Order, Licensee agreed to the following: reprimand, fine, five years probation, no-notice compliance audits of patient charts, requirement to meet with every surgical patient at least once after surgery for a post-operative evaluation and to follow a pre-surgical verification protocol.

KIMURA, Irene Kimiyo, MD; MD20378  
Moses Lake, OR
Licensee entered into a Stipulated Order with the Board on October 7, 2010. In this Order, Licensee agreed to surrender her Oregon medical license while under investigation.

MCCORMICK, Terence Francis, LAc; AC00810  
Portland, OR
Licensee entered into a Stipulated Order with the Board on August 5, 2010. In this Order, Licensee agreed to surrender his Oregon acupuncture license while under investigation. Licensee may not reapply for licensure for a period of three years from the effective date of this order.

METZGER, Mark Steven, MD; MD23691  
Portland, OR
The Board issued an Order of Suspension of License on September 2, 2010, due to Licensee’s incarceration in a penal institution. This suspension will remain in effect until Licensee presents satisfactory evidence to the Board that Licensee is no longer incarcerated and the Board is satisfied with due regard to the public interest that Licensee’s privilege to practice medicine may be restored.

PIENIAZEK, John Jan, MD; MD25241  
Portland, OR
Licensee entered into a Stipulated Order with the Board on October 7, 2010. In this Order,
Licensee was reprimanded and placed on probation with conditions.

POWELL, Diane Hennacy, MD; MD25438
Medford, OR
The Board issued an Order of Emergency Suspension on October 8, 2010. This Order immediately suspended Licensee's Oregon medical license.

RIPPLINGER, Joseph John, LAc; AC00626
Licensee entered into a Stipulated Order with the Board on October 8, 2010. In this Order, Licensee was reprimanded and surrendered his Oregon acupuncture license while under investigation.

WEISS, Paul Shandor, LAc; AC00114
Ashland, OR
Licensee entered into a Stipulated Order with the Board on October 8, 2010. In this Order, Licensee agreed to permanently surrender his Oregon acupuncture license while under investigation.

Corrective Action Agreements
Corrective Action Agreements are not disciplinary orders. They are public agreements with the goal of remediating problems in licensees' individual practices.

PRESS, Sky Freedom, PA; Applicant
Portland, OR
Licensee entered into a Corrective Action Agreement with the Board on October 7, 2010. In this Agreement, Licensee agreed to complete an ethics course; undergo 100 percent chart review by his supervising physician; create and teach a one-hour ethics course; and practice under direct supervision of a supervising physician for a minimum of one year.

OLSON, Donald Ray, MD; MD14697
Dundee, OR
Licensee entered into a Voluntary Limitation with the Board on October 7, 2010. In this Order, Licensee voluntarily agreed to not perform spinal stimulator implant surgeries and procedures and will not surgically implant pumps, or conduct other non-emergent, non-lifesaving open surgeries or procedures.

Prior Orders Modified or Terminated
BECKMANN, Brooke Robert, DPM; DP00434
Salem, OR
The Board issued an Order Terminating Board Order on September 2, 2010. In this Order, the August 25, 2010, Order of License Suspension is terminated and Licensee’s license is restored.
Board Actions

Continued from page 9

DORDEVICH, Dejan Milorad, MD; MD10741
Portland, OR
The Board issued an Order Terminating Corrective Action Agreement on October 8, 2010. This Order terminated Licensee’s July 9, 2009, Corrective Action Agreement.

HELMAN, Manya Blumberg, MD; MD16906
Salem, OR
The Board issued an Order Terminating Corrective Action Order on October 7, 2010. This Order terminated Licensee’s January 12, 2006, Corrective Action Order.

PHILLIPS, Richard Harvey, MD; MD06475
Portland, OR
The Board issued an Order Terminating Interim Stipulated Order on October 7, 2010. This Order terminated Licensee’s August 17, 2010, Interim Stipulated Order.

SMUCKER, Lonnie Lee, MD; MD17893
Portland, OR
The Board issued an Order Modifying Stipulated Order on September 2, 2010. Licensee must inform the Board’s compliance officer of any work status changes and follow the Board’s recommendations. All other terms of this Order remain in full force and effect.

Note: Copies of most Board Orders issued from 1998 to the present are available for viewing on the OMB website: www.oregon.gov/OMB.

Join the Subscriber’s List
If you are interested in the Medical Board’s latest actions, please join the Oregon Medical Board’s Subscriber’s List. You can sign up at www.oregon.gov/OMB/bdactions.shtml and follow the link.

Oregon Administrative Rules

Rules proposed and adopted by the Oregon Medical Board.

Adopted Rules

Final Review

Physicians (MD)
OAR 847-020-0130, Basic Requirements for Licensure for International Medical School Graduates - Adopted rule removes the use of the California list to approve International Medical Schools and clarifies language to determine acceptable accreditation.

Physicians (MD/DO)
OAR 847-008-0015, Active Registration - Adopted rule adds language to include any licensee employed with the United States Department of Veteran Affairs and the United States Department of State, Foreign Affairs, where the licensee’s official state of residence is Oregon as defined in OAR 847-008-0018.

Physicians (MD/DO)
OAR 847-008-0018, Military/Public Health Active Registration - Adopted rule adds language to include any licensee employed by the United States Department of Veteran Affairs and the United States Department of State, Foreign Service whose official residence is Oregon. Such licensee may maintain an active status by request and by paying the active biennial registration fee.

All Licensees
OAR 847-065-0010, 0015, 0020, 0025, 0030, 0035, 0040, 0045, 0050, 0055, 0060, 0065, Health Professionals Service Program (HPSP) - Adopted rules are filed per House Bill 2345 in relation to the Health Professionals Services Program implemented in July 2010.

Continued on page 11
Confidential Program for Substance Abuse and Mental Health Disorders

Continued from page 2

an intervention of others without prior Board knowledge. The responsibility of individuals and organizations required by law to report impaired physicians and other licensees may be discharged if the impaired licensee voluntarily enters HPSP. Voluntary HPSP participants require no further action relative to licensure, and they will not be reported to the Board so long as they successfully participate in the program.

The Board will not be notified of the identity of voluntary participants in HPSP but will be kept informed of program information and statistics on an on-going basis. HPSP participants will not be reported to the National Practitioners Data Bank as disciplinary cases. There will be, however, a formal agreement between HPSP and the licensee.

Board referral: At the discretion of the Chief Investigator or the Board’s Medical Director, in consultation with the Executive Director, licensees reported to the OMB for investigation and believed to have a substance or mental health related disorder may be offered an opportunity to participate in HPSP. Disciplinary action may be utilized for licensees determined as inappropriate for HPSP or requiring discipline in addition to HPSP monitoring.

Not all licensees with a chemical dependency or mental health problem will avail themselves of HPSP; those who choose not to participate or do not comply with the terms of the agreement with HPSP are subject to denial of license or discipline pursuant to ORS 677.190.

Chemical dependency or a mental health diagnosis does not have to be a condition that destroys a professional’s career, personal life and professional standing. When in remission, chemical dependency does not adversely affect a licensee’s ability to practice medicine. With proper treatment and follow-up, chemically dependent licensees or a licensee with a significant mental health disorder can continue their practice, often virtually uninterrupted.

In situations where a disciplinary action is necessary, it is often appropriate to reinstate a licensee as soon as their condition warrants it. The OMB has found that with proper in-patient treatment and good monitoring, a rehabilitation rate of approximately 90 percent is possible.

As the above policy indicates, self-referral is vastly superior to disciplinary action. By whatever method necessary, the Board strives to assure licensees with chemical dependency and/or mental health issues receive appropriate treatment. In its effort to both protect the public and rehabilitate physicians and other licensees, the Board encourages all licensees and their organizations to promote early intervention.

Adopted 2007. Revised October 2010

OARs

Continued from page 10

For more information on OARs, visit the Oregon Medical Board website at www.oregon.gov/OMB, or call (971) 673-2700.

About OARs

The Oregon Medical Board and other state regulatory agencies operate under a system of administrative rules, in order to ensure fairness and consistency in their procedures and decisions. Periodically, these Oregon Administrative Rules (OAR) must be amended and/or expanded in response to changing standards and circumstances.

OARs are written and amended in accordance with state laws (Oregon Revised Statutes or ORS), which may be enacted, amended or repealed only by the Legislature.
CONTACT THE OMB

www.oregon.gov/OMB

Tel: 971-673-2700
Toll free: 1-877-254-6263

1500 S.W. First Ave., Suite 620
Portland, OR 97201

All meetings are held at the OMB office in Portland, unless otherwise indicated. Meeting schedules are subject to change.

CALENDAR OF MEETINGS

November 4, 8 a.m.
Investigative Committee

November 19, 9 a.m.
EMT Advisory Committee

December 2, 8 a.m.
Investigative Committee

December 8, 5 p.m.
Administrative Affairs Committee

December 9, 9:30 a.m.
Physician Assistant Committee

December 10, Noon
Acupuncture Advisory Committee

January 13 - 14, 8 a.m.
Medical Board