

**VIRGINIA BOARD OF MEDICINE
LEGISLATIVE COMMITTEE MINUTES**

Friday, May 15, 2015

Department of Health Professions

Richmond, VA

CALL TO ORDER: The meeting convened at 8:38 a.m.

ROLL CALL

MEMBERS PRESENT: Kenneth Walker, MD, Vice-President, Chair
Syed Salman Ali, MD
Kamlesh Dave, MD
Maxine Lee, MD
Ray Tuck, DC

MEMBERS ABSENT: Barbara Allison-Bryan, MD, Secretary-Treasurer
Siobhan Dunnivant, MD

STAFF PRESENT: William L. Harp, MD, Executive Director
Jennifer Deschenes, JD, Deputy Director, Discipline
Alan Heaberlin, Deputy Director, Licensure
Barbara Matusiak, MD, Medical Review Coordinator
Colanthia Morton Opher, Operations Manager
David Brown, DC, DHP Agency Director
Elaine Yeatts, DHP Senior Policy Analyst
Erin Barrett, JD, Assistant Attorney General

OTHERS PRESENT: Paul Weeks, MD, American Board of Surgical Assistants
Keith Bump, ACE Surgical Assisting
Tyler Cox, MSV
Michael Jurgensen, MSV
Hunter Jamerson, Macaulay & Burtch, PC
Paul Speidell, Sentara Healthcare
Philippe Carrie, PGY-4 VCU Psychiatry Resident

EMERGENCY EGRESS INSTRUCTIONS

Dr. Tuck provided the emergency egress instructions.

APPROVAL OF MINUTES OF JANUARY 23, 2015

With the correction of Ms. Barrett's name being added to the list of staff present, Dr. Dave moved to approve the minutes of January 23, 2015. The motion was seconded and carried unanimously.

ADOPTION OF AGENDA

Dr. Tuck moved to adopt the agenda as presented. The motion was seconded and carried unanimously.

PUBLIC COMMENT

Dr. Paul Weeks, CEO for the American Board of Surgical Assistants (ABSA), asked the Committee to consider support for the ABSA as a credentialing body acceptable for the purpose of registration as a surgical assistant in the Commonwealth. Dr. Weeks stated that the ABSA has had a presence in the surgical community for 29 years. It administers a written and a practical exam, and the credentials of the ABSA are recognized throughout the United States.

Mr. Heaberlin asked for clarification of the lines of authority for supervision. Dr. Weeks explained that surgical assistants and technicians that are not employed by the hospital are overseen by the medical staff, and those who are employees of the hospital would fall under the supervision of nursing services or surgical specialists.

Hunter Jamerson with Macaulay and Burtch, PC informed the Committee that the ABSA was included in the original draft of the legislation for registration of surgical assistants and surgical technologists. However, the final version only included the National Board of Surgical Technology and Surgical Assisting, the National Surgical Assistant Association, and the National Commission for Certification of Surgical Assistants. He believed the final version was an accurate reflection of the intent of the Legislature.

The floor then closed for public comment.

NEW BUSINESS

Status of Regulatory Actions

Ms. Yeatts gave a verbal summary of the status of the Board's regulatory actions.

This report was for informational purposes only and did not require any action.

Consideration of the American Board of Surgical Assistants for Inclusion in Section 54.1-2956.13 of the Code of Virginia

Ms. Yeatts began by noting the legislation that was passed identified specific credentialing bodies in order to be registered. She stated that the Board did not take a position or advocate for any credentialing body, but the Board must abide by the law as passed. The Board does not have the discretion to add to or change the existing legislation. She also noted that there were no requirements specific to the renewal of registration in the law.

The Committee then engaged in a lengthy discussion with Dr. Weeks about ABSA's history, its relationship with other credentialing bodies, its credentialing mechanisms, its familiarity with foreign medical schools, and whether one of ABSA's representatives was present to address legislators' questions during the General Assembly.

After discussion, Dr. Tuck moved to recommend that the Board take no action. The motion was seconded and carried by majority, with Dr. Ali opposing and Dr. Lee abstaining.

Review and Discussion of the Interstate Medical Licensure Compact

Mr. Heaberlin shared information regarding the Interstate Medical Licensure Compact gleaned from his attendance at the Federation of State Medical Boards Annual Meeting in April.

He informed the Committee that six states have passed legislation and only one more state is needed in order for the Compact to become active. Mr. Heaberlin noted that FSMB expects that the first medical Compact license will be issued in 2016.

Dr. Ali moved to recommend to the full Board that Virginia enter as part of the Interstate Medical Licensure Compact. The motion failed to garner a second.

The Committee continued its discussion and concerns were voiced over several issues including: 1) the Compact's requirements regarding complaints that conflict with Virginia's existing law, 2) the creation of a new license, 3) impact on the rulemaking process, and 4) the timing of this request to the General Assembly. Ms. Deschenes reminded the Committee that the intent of the Compact was to obviate the need for a national license.

Ms. Barrett told the Committee that the revised nurse Compact is similar in outline to the Interstate Medical Licensure Compact and suggested that the Board follow the progress of the nurse Compact in the 2016 General Assembly prior to making a final decision.

Dr. Harp stated that 80% of practitioners would qualify for a Compact license, which is essentially an expedited licensing process. Existing licensing law would address the other 20% of applicants that did not qualify for a license under the Compact.

Dr. Ali moved to table the issue until the next Legislative Committee. The motion was seconded and carried unanimously. Dr. Ali asked that a roadmap to participation in the Compact, including model legislation and implications of participation, be available for review at the next meeting.

Continuing Education Audits

Mr. Heaberlin provided a summary of the 2014 CME audit. He said that the Board has received 83% positive responses from licensees, and that the biggest issue is outdated contact information.

Mr. Heaberlin asked for guidance regarding the percentage of licensees that should be included in the audit. He stated that historically, the Board has conducted an audit of 1-2% of licensees. A qualified random audit would be approximately 380.

Ms. Yeatts suggested that staff be authorized to prepare a guidance document with a matrix to handle noncompliant continuing education cases in an efficient manner that would keep them out of the disciplinary track.

After discussion, Dr. Ali moved for the Board to use qualified random samples for continuing education audits. The motion was seconded and passed unanimously.

ANNOUNCEMENTS

There were no additional announcements.

Next meeting – September 25, 2015

Adjournment - With no other business to conduct, the meeting adjourned at 10:12 a.m.

Kenneth J. Walker, MD
Chair

William L. Harp, MD
Executive Director

Colanthia M. Opher
Recording Secretary