State Board of Medicine May 25, 2021

BOARD MEMBERS:

 Mark B. Woodland, M.S., M.D., Chair

Theodore Stauffer, Executive Secretary, Bureau of Professional and Occupational Affairs, on behalf of K. Kalonji Johnson, Commissioner - Absent

Ronald E. Domen, M.D., Vice Chair

Gerard F. Dillon, Ph.D., Public Member

Walter A. Eisenhauer, PA-C

Nazanin E. Silver, M.D.

Paul J. Valigorsky II, M.D.- Absent

Donald M. Yealy, M.D.

Denise A. Johnson, M.D., Acting Physician General

BUREAU PERSONNEL:

Dana M. Wucinski, Esquire, Board Counsel Shana M. Walter, Esquire, Board Counsel Dean F. Picarella, Esquire, Senior Board Counsel Cynthia K. Montgomery, Esquire, Deputy Chief Counsel/Regulatory Counsel, Department of State Jason T. Anderson, Esquire, Board Prosecution Liaison

Nathan C. Giunta, Esquire, Board Prosecutor Adam Williams, Esquire, Board Prosecutor Mark R. Zogby, Esquire, Board Prosecutor

Jonelle Harter Eshbach, Esquire, Board Prosecutor Suzanne Zerbe, Board Administrator

Marc Farrell, Deputy Policy Director, Department of State

Andrew LaFratte, MPA, Executive Policy Specialist, Department of State

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ALSO PRESENT:

Susan DeSantis, PA-C, Pennsylvania Society of Physician Assistants

Nicole Sidle, Republican Executive Director, House Professional Licensure Committee

Kerry E. Maloney, Esquire, Post & Shell

Angie Armbrust, Senior Associate, McNees-Winter Group LLC

Andrew C. Harvan, Esquire, Pennsylvania Medical Society

Andrea Wandling, Human Resources Manager, Pennsylvania Association of Community Health Centers

18 | Haley Ast, ND

Tanya Miller, MS, LAT, ATC, Pennsylvania Athletic Trainers' Society

Timothy Stooksberry, M.D., West Virginia University Randy Stevens, Pennsylvania Orthotic & Prosthetic Society

Charles Hartwell, Esquire, Dethlefs-Pykosh Law Group Lisa Claypool Stevenson, Senior Associate Counsel, University of Pittsburgh Medical Center Heather Wright, ND, FABNO, President, Oncology

Association of Naturopathic Physicians

4 State Board of Medicine 1 2 May 25, 2021 * * * 3 4 [Pursuant to Section 708(a)(5) of the Sunshine Act, at 5 9:00 a.m. the Board entered into Executive Session 6 with Dana M. Wucinski, Esquire, Board Counsel, and Shana M. Walter, Esquire, Board Counsel, for the purpose of conducting quasi-judicial deliberations on a number of matters currently pending before the Board 10 and to receive the advice of counsel. The Board 11 returned to open session at 10:30 a.m.] * * * 12 13 [Theodore Stauffer, Executive Assistant, Bureau of Professional and Occupational Affairs, noted the 14 15 meeting was being recorded, and those who remained on the line were giving their consent to be recorded.] 16 * * * 17 18 The regularly scheduled meeting of the State 19 Board of Medicine was held on Tuesday, May 25, 2021. 20 Mark B. Woodland, M.S., M.D., Chair, called the meeting to order at 10:50 a.m. 21 * * * 22 2.3 Introduction of Board Members/Audience 2.4 [Chair Woodland announced everyone in attendance.] 25 * * *

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   Approval of minutes of the April 13, 2021 meeting
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   CHAIR WOODLAND:
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                  The first thing on our agenda is
                  approval of minutes from April 13, 2021.
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                       Do I have a motion for approval?
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   DR. YEALY:
                  So moved.
   CHAIR WOODLAND:
                  Do I have a second?
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   DR. SILVER:
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                  Second.
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   CHAIR WOODLAND:
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                  Any discussion about the minutes?
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                  Hearing no discussion.
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                       All in favor, say yea. Opposed,
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                  say nay. Any abstentions?
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   [The motion carried unanimously.]
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   Report of Prosecution Division
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   [Mark B. Woodland, M.S., M.D., Chair, noted prior
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   discussion during Executive Session and no need for a
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   further report on any of the cases.]
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   MS. WALTER:
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                  Pursuant to Section 708(a)(5) of the
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                  Sunshine Act, the Board entered into
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Executive Session this morning at 9 a.m. 1 for the purpose of conducting quasi-2 3 judicial deliberations on a number of 4 matters that are currently pending 5 before the Board and to receive advice 6 of counsel; specifically, the Board discussed the Consent Agreements that are listed on the agenda, along with 9 agenda items 24 through 39. 10 I believe the Board would entertain 11 a motion to approve the Consent 12 Agreements at agenda items 2 through 6, 8, 10, and 11. 1.3 Number 2 is Case No. 20-49-001737; 14 15 No. 3, Case No. 20-49-002306; No. 4, 16 Case No. 18-49-006452; No. 5, Case No. 21-49-00004; No. 6, Case No. 20-49-17 000878; No. 8, Case No. 19-49-018092; 18 19 No. 10, Case No. 21-49-002386; and No. 20 11, Case No. 21-49-003130. 21 Is there a motion? 22 CHAIR WOODLAND: 2.3 I need a motion. 2.4 DR. YEALY: 25 So moved.

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   CHAIR WOODLAND:
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                  I heard Yealy move. I need a second.
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   MR. EISENHAUER:
                  Second.
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   CHAIR WOODLAND:
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                  Any discussion? Hearing no discussion.
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                       All in favor, say yea. All
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                  opposed, say nay. Any abstentions?
   [The motion carried unanimously. The Respondent's
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   name in number 2 is Constance R. Tambakis-Odum, M.D.;
11
   No. 3, Joseph Nicholas DiCroce, M.D.; No. 4, Peter
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   James Ridella, M.D.; No. 5, David J. Shiling, M.D.;
   No. 6, <a href="Meiss">Kerry Ira</a> Weiss, M.D.; No. 8, Dominique
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   Etienne, PA-C.; No. 10 is VRP Agreement; and No. 11 is
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   a VRP Agreement as well.
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   MS. WALTER:
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                  Item 7 on the agenda is Case No. 20-49-
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                  013668, for which Dr. Valigorsky was
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                  recused.
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                        I believe the Board would entertain
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                  a motion regarding this Consent
2.3
                  Agreement.
2.4
   CHAIR WOODLAND:
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                  Do I have a motion to approve?
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8 1 MR. EISENHAUER: 2 So moved. 3 CHAIR WOODLAND: Second, please? 4 5 MR. DILLON: Second. 6 7 CHAIR WOODLAND: Any discussion on this one? Hearing no 9 discussion. 10 All in favor, say yea. All 11 opposed, say nay. Any abstentions? 12 [The motion carried. Dr. Valigorsky recused himself from deliberations and voting on the motion. Dr. 13 14 Yealy opposed the motion. The Respondent's name is 15 Fred Michael Michalac, LRT.] 16 17 MS. WALTER: 18 We can move on now to number 9 at Case 19 Nos. 20-49-003840 & 20-49-014145. Drs. 2.0 Valigorsky and Domen were recused from 2.1 this matter. I believe the Board would entertain 2.2 2.3 a motion to approve this Consent 24 Agreement. CHAIR WOODLAND: 25

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                  Do I have a motion?
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   DR. YEALY:
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                  So moved.
   CHAIR WOODLAND:
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5
                  Second?
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   DR. SILVER:
7
                  Second.
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   CHAIR WOODLAND:
                  Any further discussion on this case?
10
                  Hearing no discussion.
11
                       All in favor, say yea.
                                                All
12
                  opposed, say nay. Any abstentions?
   [The motion carried. Dr. Valigorsky and Dr. Domen
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14
   recused themselves from deliberations and voting on
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   the motion. The Respondent's name is Matthew Antoni
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   Roman, M.D.]
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   Report of Commissioner - No Report
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   Report of Department of Health
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   [Denise A. Johnson, M.D., Acting Physician General,
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   provided a brief summary of her professional
2.3
   background.
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        Dr. Johnson stated the Department of Health has
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   been focusing on vaccination efforts and Pennsylvania
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has done a great job of getting those over 65 years old vaccinated. She reported decreasing COVID rates of infection with efforts being focused on education and access concerning vaccines. She mentioned transitioning from large vaccination clinics to

6 smaller individual providers as well as mobile

7 clinics.

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Dr. Johnson stated more than 68 percent of adults in Pennsylvania had their first dose of vaccine and anticipated close to 70 percent of adults over 18 getting their vaccinations.

Dr. Johnson commented that the Pfizer vaccine has been approved for those 12 years and older and the Moderna vaccine is pretty close to seeking that approval as well. She reported encouraging vaccinations on that age group and having kids back in school in person. She mentioned all of the difficulty in terms of learning loss and socialization and working diligently to get teachers access to vaccinations.

Dr. Johnson addressed vaccinations and pregnancy, noting OB/GYN colleagues have been advocating vaccinations for their patients and helping to make sure it is available. She noted information was available on the PA Unites Against COVID website and

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the U.S. Department of Health & Human Services (HHS)
1
   and the Centers for Disease Control and Prevention
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3
    (CDC) have information educating people on pregnancy
4
   and fertility. She mentioned that certain women can
5
   get very ill with Covid-19. The vaccines are very
   safe and effective and we recommend vaccinations for
6
   pregnant women as well.
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   Report of Committee on Health-Related Professionals
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   [Walter A. Eisenhauer, PA-C, reported that the
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   committee has not met since the last meeting. He
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   mentioned email correspondence concerning indirect
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   supervision and the role it plays in the telemedicine
14
   envelope of care as people are working through the
15
   pandemic. He noted that item basically was passed
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   through and approved by the subcommittee.]
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   Report of Committee on Legislation/Policy Development
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     and Review - No Report
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   Report of Committee on Licensure Qualifications - No
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     Report
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   Report of Vice Chair - No Report
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- 1 Report of Board Chair
- 2 | [Mark B. Woodland, M.S., M.D., Chair, mentioned
- 3 discussions about the diversity, equity, and inclusion
- 4 (DEI) space to provide a wellness space as well as
- 5 some issues related to implicit bias.
- 6 Chair Woodland addressed the Federation of State
- 7 | Medical Boards Annual Meeting. He noted speakers were
- 8 Dr. Ashish Jha, who is the Dean at Brown University
- 9 | School of Public Health and internationally recognized
- 10 | for health policy. He mentioned discussion concerning
- 11 the pandemic and its impact on medical professionals
- 12 and what that looks like going forward in the realms
- 13 of the state boards of medicine. He noted
- 14 organization of meetings and meeting space may change.
- 15 Chair Woodland noted the former Secretary of the
- 16 Department of Homeland Security, Jeh Charles Johnson,
- 17 discussed emerging threats and why emergency
- 18 preparedness is so important in an increasing complex
- 19 | global environment. He noted discussion regarding
- 20 real issues for the state Board when it becomes more
- 21 of an international relational body and impacts on
- 22 Board licensure and qualifications.
- Dr. Yealy addressed COVID, noting many of the
- 24 processes were generated at a different time and
- 25 different place and could be a lot more efficient if

everyone focused on how things were being practiced today and hoped for more concrete activity from FSMB.

Chair Woodland commented that the state made adjustments to secure the provider base in a way that was responsive as well as comprehensive for the public.

Chair Woodland noted making an announcement at the last meeting about the FSMB Foundation, where the Board could put out something in the DEI space and implicit bias, so the Board could discuss that more in some format outside of the meeting.

Chair Woodland highlighted the importance of the Board trying to make a presence at the FSMB as far as what the Board looks like as the Pennsylvania State Board, noting that he is on the education committee for this coming year, Mr. Dillon is on the editorial board, and Dr. Domen is just coming off of strategic planning.

Chair Woodland noted a discussion with Dr.

Johnson prior to the meeting about an opportunity for

Dr. Randy Litman, himself, and Dr. Johnson to have a

conversation about synergies and where the Board is as

far as joint efforts on the different state boards.]

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25 | Veterans' Licensure Report

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- 1 [Andrew LaFratte, MPA, Executive Policy Specialist,
- 2 Department of State, presented results of the
- 3 Veterans' Licensure Survey conducted over 2019 and
- 4 2020. He stated the Veterans' Licensure Survey is
- 5 part of a \$422,000 three-year grant the Department of
- 6 | State received from the United States Department of
- 7 Labor in 2018 with the goal to reduce occupational
- 8 licensure requirements and explore alternative
- 9 approaches, such as certification and maintaining
- 10 public health and safety.
- Mr. LaFratte stated Pennsylvania has one of the
- 12 largest veteran populations in the United States with
- 13 nearly 1 million veterans and active-duty service
- 14 members, military spouses, and dependents. He noted
- 15 the United States Department of Labor estimates that
- 16 the military trains people in nearly 1,000 civilian
- 17 occupations; however, veterans continue to report
- 18 | finding employment as the most difficult challenge in
- 19 transitioning to civilian life and work.
- 20 Mr. LaFratte addressed military spouses, where
- 21 35-50 percent work in fields that require licensure or
- 22 certification. He commented that the United Service
- 23 Organization (USO) estimates that military families
- 24 move once every three years, resulting in over 70
- 25 percent of military spouses having to renew their

license or get it reissued upon moving. He noted many military spouses are forced with holding multiple state licenses at a time due to the uncertainty of further and future moves, which becomes expensive.

2.0

Mr. LaFratte noted licensure regulations may deter veterans or military spouses from entering licensed professions. He stated the goal is to remove barriers from veterans and military spouses and help them in transitioning from military to civilian employment and to obtain their occupational license.

Mr. LaFratte stated over 200 veterans and military spouses were surveyed who held a license in Pennsylvania or in another state, and follow-up data was obtained identifying issues with the transition process.

Mr. LaFratte addressed marketing and data collection strategies, including the Department of Veterans Affairs, social and traditional media, and Facebook and Twitter posts in terms of getting the word out.

Mr. LaFratte addressed respondent profiles, noting nursing was the most popular license field with medicine in the middle with 13 responses. He stated 77 percent of the respondents were veterans and 25 percent were military spouses, noting most respondents

were from the Army and a good number of responses from the Army National Guard, Air Force, and Navy.

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Mr. LaFratte addressed the GI Bill and the use of that as it pertains to education at 69 percent, noting the most popular major was healthcare and business and real estate second.

Mr. LaFratte provided a transition overview, where civilian employment took under six months with 42 percent at zero to three months. He addressed Pennsylvania's licensure process compared to other states, noting Pennsylvania is in line with the national trend. He mentioned that most respondents received their occupational license within three months of applying, noting initial medical expenses in the \$0 to \$1000 categories.

Mr. LaFratte addressed difficulty in transferring military credentials and experience to satisfy state occupational licensure requirements, which seemed to pose the most significant barrier to veterans. He noted that transferring credentials was the veterans most popular answer, whereas the licensure fees was the most popular answer for military spouses.

Mr. LaFratte stated respondents reported acceptance of military training, education and experience, and licensure fee waivers would be the

most beneficial to veterans and military spouses.

2.0

Mr. LaFratte addressed an open comment section, where respondents provided feedback related to the survey or occupational licensing in general. He stated experience and training received from the military needs to be identified in the civilian sector, creating a portal to match service members' talents to civilian employment requirements, assistance with licensure fees would ease the transition, and the constant moves between states lead to expensive licensure costs.

Mr. LaFratte addressed policy recommendations and hurdles, such as duplicate coursework and unnecessary training. He noted veterans without college degrees are often pushed to low-skilled jobs even though their background translates well into the abilities required to perform the positions. He mentioned the need for uniform recognition of veterans' skills to aid those in transitioning into the civilian workforce and to reduce unfairness.

Mr. LaFratte addressed the legislative approach that would have to be done by the General Assembly by passing a bill or act. He noted the Maryland Veterans' Full Employment Act of 2013, where Maryland licensing boards are required to consider relevant

military experience when calculating their years of practice and requires licensing boards to credit any substantially equivalent military training and education.

Mr. LaFratte stated the Act requires certain health occupation boards to assign advisors to military applicants who would guide veterans through the licensing process and direct them to opportunities where they can build credentials if they do not possess the requisite military experience.

Mr. LaFratte stated the Office of Policy at the Pennsylvania Department of State is developing a military occupational crosswalk to identify civilian career opportunities for veterans using their military experience. He hoped to be able to distribute and promote the crosswalk this summer.

Mr. LaFratte projected the crosswalk will contain over 350 military occupations across all five branches of the armed forces with over two-thirds of occupations residing in the healthcare field. He noted the goal of the crosswalk is to educate the state legislature, licensing boards and commissions, veteran community, and employers on how military training and experience aligns directly with civilian education and work experience.

Mr. LaFratte addressed a policy recommendation to be done legislatively is to expedite an application review for veterans and military spouses by creating an efficient review process minimizing the amount of administrative documents and requirements and even waiving certain licensure prerequisites, including fees and redundant training requirements.

2.0

Mr. LaFratte provided a map of states that allow temporary permits for military spouses and states that offer expedited application review for military spouses. He noted Pennsylvania offers temporary permits for military spouses. He noted this would have to be done legislatively and with the infrastructure on the Bureau of Professional and Occupational Affairs (BPOA) side.

Mr. LaFratte addressed initial licensure fee waivers for military spouses because of the burden in terms of expenses and renewal of multiple state licenses due to the uncertainty of moving from state to state.

Mr. LaFratte addressed increasing the presence of veterans and military spouses on licensing boards to reflect the licensee population by bringing in different perspectives to allow for more inclusive decision-making processes to help govern the

professions and remove the barriers for veterans.

Mr. LaFratte addressed licensure by examination for veterans who have already performed the occupation in the military but may not have the opportunity to apply for a civilian license in the same field due to overbearing licensure statutes requiring completion of a civilian training program before they sit for an examination. He noted competency-based skills and knowledge assessments will give veterans an opportunity to get back to work quickly and prove their extensive training background and competency.

Mr. LaFratte addressed a policy recommendation to work with education providers and the United States

Department of Defense to develop bridge programs to fill gaps in training for returning veterans, so when the overlaps exists between skill set in the military occupations and those with comparable civilian occupations, states should provide direction for bridge training programs for veterans focusing on gaps.

Mr. LaFratte addressed Arizona House Bill 2076 allowing a veteran with healthcare designation to complete bridge coursework based on a gap analysis published from the National Council of State Boards of Nursing. He noted that in order to identify the

bridge coursework that a crosswalk was developed from
Gateway Community College's LPN curriculum, NCSBN's
gap analysis, and Arizona State Board of Nursing
rules. He commented that it resulted in a 12-credit
4-month course that prepares students to sit for the
National Council Licensure Examination (NCLEX) for

practical nurses.

Mr. LaFratte stated the Illinois Department of Veterans Affairs developed a corpsman to practical nurse program, where service members with previous healthcare training were eligible for the program to become certified as an LPN.

Mr. LaFratte mentioned the United States

Department of Defense (DoD) launched a SkillBridge

program in 2014 that started to gain traction in

Pennsylvania and gives service members the opportunity

to gain work experience through specific industry

training, apprenticeships, or internships during the

last 180 days of service. He noted service members

who participate in the SkillBridge program will

receive military compensation and benefits, where all

the industry partner or employer has to provide is the

training and work experience.

Mr. LaFratte provided resources, including the Pennsylvania Veterans Registry in partnership with the

- Department of Military and Veterans Affairs. He noted valuable information on state benefit programs and other services offered to veterans and military
- 4 spouses. He also noted the Department of State
- 5 Professional Licensing pages for the latest updates
- 6 and any new information related to occupational
- 7 | licensure in Pennsylvania. He provided a summary of
- 8 | the survey questions and a list of the Department of
- 9 Defense SkillBridge participants.
- Mr. LaFratte noted the link to the full report
 was on the Department of State website under the
 professional licensing pages.
- Chair Woodland thanked Mr. LaFratte for his
 presentation and mentioned being pleased that
 Pennsylvania already offers expedited application
 review of veterans and military spouses but perhaps
- 17 there is something that could be done to expand that.
- 18 He noted initial licensure fee waivers for military
- 19 personnel and spouses may be something the Board could
- 20 | consider.
- Chair Woodland recognized that the Board puts
 veterans in a bucket of their own and should
 capitalize more on the demographics of the individuals
 and what provider makeup looks like in the state. He
- 25 requested Dr. Yealy and the Licensure and

Qualifications Committee look at the recommendations and suggestions and report back to the Board at the

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next meeting with some of the ideas.]

Report of Board Counsel - Regulatory Status Report

[Cynthia K. Montgomery, Esquire, Deputy Chief

Counsel/Regulatory Counsel, Department of State,

addressed proposed rulemaking for 16A-4941 regarding

child abuse reporting requirements as published in the

Pennsylvania Bulletin.

Ms. Montgomery noted no public comments were received. She mentioned receiving comments from the Independent Regulatory Review Commission (IRRC), where the Board is required under the Regulatory Review Act to consider all of those comments and respond to them in final-form rulemaking and presented a summary of the comments and proposed responses. She provided a draft of the final-form regulation with the suggested responses incorporated.

Ms. Montgomery referred to § 16.19 regarding continuing medical education, where IRRC stated the Board amended § 16.19 to incorporate the 2 hours of mandatory continuing education for medical doctors but did not make any amendments to Chapter 17 in §§ 17.1-17.6 regarding initial licensure for medical doctors.

Ms. Montgomery stated the Board originally did not have physician assistants and certified nurse midwives because in all of those sections there is a cross reference to § 16.12, which is the general qualifications for licenses and certificates that applies to everyone and was put in § 16.12. She noted adding the requirement at § 16.12(3.1), where the applicant has completed at least 3 hours of approved training in child abuse recognition and reporting in accordance with § 16.108(a).

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Ms. Montgomery noted the section does apply to all applicants regardless of whether there is a cross reference or not in various sections. She mentioned that when the Board noted that it was not in for physician assistants and nurse midwives, the Board asked that she add the cross reference, which she did at that time, but the Board did not consider that it was not also in the section on licensure.

Ms. Montgomery provided the Board with options, where the Board could explain to IRRC that § 16.12 applies to everyone, so it is not necessary to provide cross references in Chapter 17. She noted another option would be that there is one section in § 17.2 related to a license without restriction by endorsement that does not have the cross reference to

\$ 16.12 and could add the cross reference to \$ 16.12

to clarify that. She also noted the Board could amend

\$\$ 17.1-17.6 to add the cross reference to the 3 hours

of child abuse recognition and reporting training that

is required as a condition of licensure for medical

doctors to make it very clear, that not only do they

have to comply with everything in \$ 16.12 but would

include the 3 hours of continuing education in child

abuse recognition and reporting.

Mr. Dillon commented that having as many cross references as possible was recommended.

Chair Woodland mentioned that much of Board discussion concerning legislative issues was spent on the unintended consequences of statutes, especially when it comes to training and training requirements and to make them meaningful and anything that streamlines it would be good.

Chair Woodland commented that it affects many individuals and osteopathic medicine colleagues as well and questioned whether there were any comments for the State Board of Osteopathic Medicine.

Ms. Montgomery noted not receiving any IRRC comments on the State Board of Osteopathic Medicine version at this point. She mentioned that the State Board of Medicine received the most comments because

1 of so many different categories of licensees, and many

2 of the changes proposed for the Board were also

3 proposed for other boards so they remain consistent.

4 She noted many changes were for clarity and to

5 incorporate other statutory provisions.

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Ms. Montgomery will take the Board's input and present the draft of the final-form rulemaking at the next Board meeting for a vote. She noted that the vast majority were responded by adding what IRRC asked or explaining what they questioned. She referred to the current draft of the final-form rulemaking annex that has all of the changes suggested with the exception of the amendments to §§ 17.1-17.6, because she was not sure of the direction of the Board.

Chair Woodland commented that the work Ms.

Montgomery had done was fairly comprehensive for the input received and thanked her for her efforts.]

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19 For the Board's Information/Discussion

20 [Mark B. Woodland, M.S., M.D., Chair, mentioned the

21 items have already been looked at over the last two

22 meetings and are more informational. He noted the

23 remaining 2021 Board meeting dates and the approval of

24 the 2022 Board meeting dates at a prior meeting.]

1 For the Board's Information/Discussion - Old/New
2 Business

3 [Dana M. Wucinski, Esquire, Board Counsel, addressed 4 House Bill 1094 regarding the Professional Licensees 5 Illegal Employment Act, requiring any department or administrative board under the Bureau of Professional 6 and Occupational Affairs (BPOA) to revoke the license of any individual or business who knowingly hires an unauthorized alien in connection with the profession 10 in which the licensee is licensed. She stated it was 11 last referred to the Professional Licensure Committee 12 on April 5, 2021.

Ms. Wucinski noted House Bill 1176 regarding resolving implicit bias in health care. She stated the legislation would ensure health care providers are providing inclusive care and requires all health-related boards under the Department of State to complete implicit bias training as part of each professions continuing education requirements.

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Ms. Wucinski referred to House Bill 1186 regarding acupuncture. She noted the bill overlaps with Board regulations for practitioner of oriental medicine regulations that are pending right now. She mentioned it would add the definition of herbal therapy and practitioner of oriental medicine. She

stated it also has an emergency clause and updates the exemption from licensure, which clarifies that dentists, podiatrists, and veterinarians are exempt but also licensees from other states.

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Ms. Wucinski addressed House Bill 1236 regarding genetic counselors, which amends the Medical Practice Act to allow genetic counselors to order genetic laboratory tests.

Chair Woodland commented that House Bill 1176 would add an implicit bias training mandate. He mentioned that a lot of institutions are also requiring training for each one of their providers within their institutions.

Mr. Eisenhauer questioned how new graduates would be dealt with when it is a component part of their accreditation requirements that the training be done. He questioned whether they will be required to do it before they obtain licensure and whether a mechanism could be put in place or would the Board accept that their competency has been evaluated in implicit bias and grant them a waiver at least initially.

Chair Woodland suggesting providing feedback to Representative Cephas on those issues. He noted that the intent of the bill is good in making implicit bias training mandatory, but the details are a little rough

and would have to be orchestrated differently.

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Chair Woodland commented that House Bill 1094 also may have some unintended consequences, where it may affect people who unknowingly employ different people in different realms of their life.

Chair Woodland stated House Bill 1186 and House Bill 1236 seem fairly straightforward in clarifying and expanding some of the current definitions within the realm.

Ms. Walter addressed House Bill 958 regarding the Immunization Freedom Act, which sets forth different requirements for health care practitioners as related to individuals who choose not to follow the Centers for Disease Control and Prevention (CDC) vaccination schedule.

Ms. Walter referred to Senate Bill 554 regarding notices of agency business. She stated the bill discusses posting on the website agendas and new requirements for changes to agendas in emergency situations that would arise prior to or during a Board meeting.

Ms. Walter addressed Executive Order 2021-03 requiring the Department of State, as well as other departments, to review waivers and suspensions issued during the disaster declaration and submit a report

with recommendations by each department. She noted the report was prepared and submitted, and any further action would be up to legislature at this time.

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Ms. Walter addressed House Bill 1440 that would create a new license class for medical imaging, radiation therapy, and radiologist assistants.

Chair Woodland expressed concern with House Bill 958, especially Section 3(a)2 under pediatric patients where a health care provider cannot charge for a meeting with a parent. He stated parental meetings could go on for hours, and he has a problem when legislation says what someone can and cannot bill.

Chair Woodland referred to Section 4(b) regarding the insurers aspect but not unsure whether that should be legislative.

Mr. Yealy stated a patient-physician relation, whether it is an adult, the child, or the parent is no longer able to move forward, whether it is from either side. He did not see this as prohibiting the ability to transition to a different provider who is more competent. He noted safeguards are already in place about timely transitions. He commented that he did not see what purpose it is serving.

Mr. Dillon mentioned reviewing the memo that often accompanies legislation showing the argument as

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to why the legislation is important. He mentioned the
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   text talks about incidents where physicians
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   demonstrated irrational anger towards patients, and
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   incidents where the patients felt like they were
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   financially stigmatized, but he is not sure this a
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   widespread problem. He noted the legislation seems
   like it has a lot of unintended consequences.
        Chair Woodland commented that the other bills
   just enhance the Medical Practice Act and make some
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   clarification on educational purviews of different
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   members of licensees.]
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   MOTIONS
   MS. WUCINSKI:
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                  At agenda items 24 and 25, I believe the
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                  Board would entertain a motion to adopt
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                  as final the proposed Adjudications and
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                  Orders for the following: Dilipkumar J.
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                  Joshi, M.D., Case No. 20-49-14418;
2.0
                  Joseph D. Ponsi, M.D., Case No. 21-49-
21
                  002815.
2.2
   CHAIR WOODLAND:
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                  Do I have a motion?
2.4
   DR. YEALY:
25
                  So moved.
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32 1 DR. SILVER: 2 Second. 3 CHAIR WOODLAND: 4 Any discussion on these two? Hearing no further discussion, we will have a vote. 5 All those in favor, say yea. All those 6 7 opposed, say nay. Any abstentions? [The motion carried unanimously.] 9 10 MS. WUCINSKI: 11 At agenda item 26, I believe the Board would entertain a motion to direct Board 12 counsel to draft an Adjudication and 1.3 14 Order addressing exceptions consistent 15 with discussions in Executive Session 16 for Nihar Bhavesh Gala, M.D., Case No. 19-49-007344. 17 MR. EISENHAUER: 18 19 So moved. 2.0 MR. DILLON: 21 Second. CHAIR WOODLAND: 2.2 2.3 Any further discussion? All those in 2.4 favor, say yea. Any opposed, say nay. 25 Any abstentions?

33 1 [The motion carried unanimously.] 2 3 MS. WUCINSKI: I believe the Board would entertain a 4 5 motion to adopt as final the Draft Adjudication and Order for Tolulope 6 Akinyemi, M.D., Case No. 18-49-03624, 8 noting Dr. Valigorsky is recused. 9 CHAIR WOODLAND: 10 Do I have a motion? 11 MR. DILLON: 12 So moved. CHAIR WOODLAND: 13 14 Second? 15 DR. YEALY: 16 Second. CHAIR WOODLAND: 17 Any further discussion? All those in 18 19 favor, say yea. All those opposed, say 20 nay. Any abstentions? 21 [The motion carried. Dr. Valigorsky recused himself 22 from deliberations and voting on the motion.] 23 2.4 MS. WUCINSKI: 25 At agenda items 28 and 29, I would note

34 that the Board has directed the Board 1 2 administrator to invite Simon Clifford, 3 M.D. and Shirly Shohat, M.D. to apply for an institutional license. 4 * * * 5 MS. WUCINSKI: 6 Moving on to agenda item 30, I believe the Board would entertain a motion to 8 grant the Application Initial License to 10 Practice as a Physician and Surgeon by 11 Endorsement to Antoine Wadih, M.D., 12 noting that Dr. Yealy is recused. CHAIR WOODLAND: 13 Do I have a motion? 14 15 MR. DILLON: 16 So moved. 17 MR. EISENHAUER: Second. 18 19 CHAIR WOODLAND: 2.0 Any further discussion? All those in 2.1 favor, say yea. Any opposed, say nay. 22 Any abstentions? 23 [The motion carried. Dr. Yealy recused himself from 24 deliberations and voting on the motion.] 25

35 1 MS. WUCINSKI: 2 At agenda items 31 and 32, I believe the 3 Board would entertain a motion to 4 approve the Initial Supervising 5 Agreement between Kristin Bresnan, M.D. 6 and Bridgett Brown, PA-C and between Aseem Shukla, M.D. and Monica Fraatz, 8 PA-C. 9 DR. DOMEN: 10 So moved. 11 DR. YEALY: 12 Second. CHAIR WOODLAND: 1.3 Any further discussion on these two? 14 15 Hearing none. All those in favor, say 16 yea. All those opposed, say nay. 17 abstentions? 18 [The motion carried unanimously.] * * * 19 2.0 MS. WUCINSKI: 2.1 At agenda items 33 through 39, I believe 2.2 the Board would entertain a motion to 2.3 direct the Board administrator to send a 2.4 standard reentry letter to the 25 following: Jordan Bigio, M.D.; Paul

36 1 Marc Paris, M.D.; Roger Hershliine, 2 M.D.; Allison Kunkel, LAT; Beth Bond, 3 LAT; Jennifer Young, LAT; Ryan Brewer, 4 LAT, noting Dr. Yealy is recused from 5 agenda item 34 for Paul Marc Paris, M.D. CHAIR WOODLAND: 6 Do we have a motion to approve? DR. SILVER: 9 I move. 10 CHAIR WOODLAND: 11 Do we have a second? 12 DR. DOMEN: Second. 13 CHAIR WOODLAND: 14 15 Any further discussion? All those in 16 favor of everybody except item 34, say 17 yea. Anybody opposed? Any abstentions? 18 19 Let's take item 34 separately. All 20 those in favor, say yea. Any opposed, 21 say nay. Any abstentions? 22 [The motion carried. Dr. Yealy recused himself from 23 deliberations and voting on item 34.] * * * 24 25 Public Session

- 1 [Mark B. Woodland, M.S., M.D., Chair, addressed a
- 2 question received from Susan DeSantis, PA-C,
- 3 Pennsylvania Society of Physician Assistants, asking
- 4 | whether any online written agreements had been
- 5 approved for health systems. She questioned whether
- 6 | health-care waivers would simply expire and go away if
- 7 | legislature did not act. She noted Senate Bill 671
- 8 recently moved out of committee maintaining waivers
- 9 for a year, but complete passage of that bill will
- 10 take time.
- 11 Ms. Walter stated that changes to any waivers is
- 12 | in the hands of legislature at this point. She noted
- 13 that any specific things that would be pursuant to the
- 14 | Board's regulations is certainly something that the
- 15 | Board could look at as long as there is statutory
- 16 authority to pursue that regulation change or
- 17 additions.
- 18 Chair Woodland stated that one of the health
- 19 systems in southeastern Pennsylvania made it mandatory
- 20 for all of their providers to get vaccinated for
- 21 COVID.
- 22 Dr. Johnson commented that several businesses,
- 23 colleges, and medical facilities have made the
- 24 decision of requiring vaccination. She mentioned
- 25 there were no plans for the state to do any

requirements but believed many businesses and organizations would make that choice.

Chair Woodland informed everyone that there is not a State Board of Medicine licensure requirement for vaccination of any sort right now in the application process.

Chair Woodland Heather Wright, ND, FABNO,
President, Oncology Association of Naturopathic
Physicians, questioned when 16A-4953 will return to
the Board of Medicine for final rulemaking.

Ms. Walter noted being very close to the final rulemaking. She stated the annex and preamble concerning naturopathic doctors (NDs) was on the agenda in possibly April and will be on the agenda in the next few months.]

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[Mark B. Woodland, M.S., M.D., Chair, noted the next Board meeting is June 22. He mentioned there will be a presentation about the health equity platform for the state as well as areas of innovation on DEI.]

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22 Adjournment

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23 CHAIR WOODLAND:

Wished everyone a great Memorial Day
weekend and thanked them for their

participation. [There being no other business, the State Board of Medicine Meeting adjourned at 12:40 p.m.] * * * CERTIFICATE I hereby certify that the foregoing summary minutes of the State Board of Medicine meeting, was reduced to writing by me or under my supervision, and that the minutes accurately summarize the substance of the State Board of Medicine meeting. Samantha Sabatini, Minute Clerk Sargent's Court Reporting Service, Inc.

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1 2 3		STATE BOARD OF MEDICINE REFERENCE INDEX
4		May 25, 2021
5 6 7	TIME	AGENDA
8 9 10 11	9:00 10:30	Executive Session Return to Open Session
12 13	10:50	Official Call to Order
14	10:50	Introduction of Board Members/Audience
15 16	10:54	Approval of Minutes
17 18	10:54	Report of Prosecution Division
19 20	11:00	Report of Department of Health
21 22	11:07	Report of Committees
23 24	11:08	Report of Board Chair
25 26 27 28	11:15	Appointment - Andrew LaFratte, MPA, Executive Policy Specialist
29	11:58	Report of Board Counsel
31 32	12:02	For the Board's Information/Discussion
33	12:27	Motions
34 35 36	12:33	Public Session
37	12:40	Adjournment
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44 45		
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48 49 50		