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COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE  
BUREAU OF PROFESSIONAL AND OCCUPATIONAL AFFAIRS

**F I N A L M I N U T E S**

MEETING OF:

**STATE BOARD OF OSTEOPATHIC MEDICINE**

TIME: 10:30 A.M.

Held at

**PENNSYLVANIA DEPARTMENT OF STATE**

2601 North Third Street

One Penn Center, Board Room C

Harrisburg, Pennsylvania 17110

as well as

**VIA MICROSOFT TEAMS**

Wednesday, April 12, 2023

State Board of Osteopathic Medicine  
April 12, 2023

BOARD MEMBERS:

Arion R. Claggett, Acting Commissioner, Bureau of  
Professional and Occupational Affairs  
Sirisha Reddy, Public Health Program Manager,  
on behalf Debra L. Bogen, M.D., FAAP, FABM, Acting  
Secretary of Health  
William B. Swallow, D.O., Chairman  
John B. Bulger, D.O., Vice Chairman  
Bette A. Grey, BA, RRT, CPFT, Secretary  
Thomas S. Dardarian, D.O.  
George J. Wolters, D.O. - Absent  
Joseph M. Zawisza, D.O.  
Hillary D. Snyder, MSPAS, PA-C

BUREAU PERSONNEL:

Dean F. Picarella, Esquire, Senior Board Counsel  
Shana M. Walter, Esquire, Board Counsel  
Dana M. Wucinski, Esquire, Board Counsel  
Heather J. McCarthy, Esquire, Senior Board Prosecutor  
and Prosecution Liaison  
Jason T. Anderson, Esquire, Board Prosecutor  
Mark R. Zogby, Esquire, Board Prosecutor  
Keith E. Bashore, Esquire, Board Prosecutor  
Jonelle Harter Eshbach, Esquire, Board Prosecutor  
Adam J. Williams, Esquire, Board Prosecutor  
Kelsey Ashworth, Esquire, Board Prosecutor  
Nichole Wray, Division Chief  
Priscilla Turek, Board Administrator  
Carolyn A. DeLaurentis, Esquire, Executive Deputy  
Chief Counsel, Department of State  
Ryan Dumbroff, Student Paralegal, Office of General  
Counsel  
Marc Farrell, Esquire, Regulatory Counsel

ALSO PRESENT:

John Gimpel, D.O., President/CEO, National Board of  
Osteopathic Medical Examiners  
Douglas Murray, Esquire, General Counsel, National  
Board of Osteopathic Medical Examiners  
Laura Humphrey, Deputy Communications Director,  
Pennsylvania Department of Human Services

State Board of Osteopathic Medicine  
April 12, 2023

ALSO PRESENT: (cont.)

- Charles (Chachi) Angelo, Director of External Affairs,
- Pennie
- Andy Sandusky, Executive Vice President, Public Policy and Association Affairs, Pennsylvania Osteopathic Medical Association
- Lisa A. Witherite-Rieg, DO, FACOFP, Pennsylvania Osteopathic Medical Association
- Stuart Lewis
- Charles I. Artz, Esquire, Artz McCarrie Health Law
- Allison Walker
- Susan DeSantis
- Carlton Smith
- Andrew LaFratte
- Kari L. Orchard
- Jennifer Smeltz
- Danie Bendesky

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2 State Board of Osteopathic Medicine

3 April 12, 2023

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5 [Pursuant to Section 708(a)(5) of the Sunshine Act,  
6 at 9:30 a.m. the Board entered into Executive Session  
7 with Dana M. Wucinski, Esquire, Board Counsel, and  
8 Shana M. Walter, Esquire, Board Counsel, for the  
9 purpose of conducting quasi-judicial deliberations on  
10 a number of matters that are currently pending before  
11 the Board and to receive the advice of counsel. The  
12 Board returned to open session at 10:30 a.m.]

13 \*\*\*

14 The regularly scheduled meeting of the State  
15 Board of Osteopathic Medicine was held on Wednesday,  
16 April 12, 2023. William B. Swallow, D.O., Chairman,  
17 called the meeting to order at 10:30 a.m.

18 \*\*\*

19 Introduction of Board Members/Attendees  
20 [Nichole Wray, Division Chief, provided an  
21 introduction of the Board members, staff, and  
22 audience in attendance.

23 Ms. Wray informed everyone that the Board meeting  
24 was being recorded, and their voluntary participation  
25 constituted consent to be recorded.]

1 \*\*\*

2 Approval of minutes of the February 8, 2023 meeting

3 CHAIRMAN SWALLOW:

4 You have received the minutes.

5 Are there any additions or  
6 corrections? Hearing none.

7 Is there a motion to accept?

8 DR. DARDARIAN:

9 So moved.

10 DR. BULGER:

11 Second.

12 CHAIRMAN SWALLOW:

13 Any discussion? Hearing none. Nikki,  
14 call the vote.

15  
16 Mr. Claggett, aye; Ms. Reddy, abstain;  
17 Dr. Swallow, aye; Dr. Bulger, aye; Ms.  
18 Grey, aye; Dr. Dardarian, aye; Dr.  
19 Zawisza, aye; Ms. Snyder, aye.

20 [The motion carried. Sirisha Reddy abstained from  
21 voting on the motion.]

22 \*\*\*

23 Appointment - National Board of Osteopathic Medical  
24 Examiners (NBOME) Updates

25 [John Gimpel, D.O., President/CEO of the National

1 Board of Osteopathic Medical Examiners, saluted the  
2 Board for their incredible work on behalf of patients  
3 and citizens of Pennsylvania in helping to assure  
4 those who receive licenses have demonstrated their  
5 competencies for the practice of osteopathic  
6 medicine. He mentioned that NBOME would be giving an  
7 update at the Federation of State Medical Boards  
8 Annual Meeting and the American Association of  
9 Osteopathic Examiners (AAOE) Meeting, along with  
10 providing updates about the Comprehensive Osteopathic  
11 Medical Licensing Examination (COMLEX) and clinical  
12 skills testing.

13 Douglas Murray, Esquire, General Counsel,  
14 National Board of Osteopathic Medical Examiners,  
15 informed Board members that NBOME's mission is to  
16 protect the public by providing the means to assess  
17 competencies for osteopathic medicine and related  
18 health care professions.

19 Mr. Murray provided an overview of NBOME's  
20 assessment portfolio, including WelCOM and the  
21 Comprehensive Osteopathic Medical Self-Assessment  
22 Examination (COMSAE), which helps prepare for COMLEX-  
23 USA. He noted the Comprehensive Osteopathic Medical  
24 Variable-Purpose Examination (COMVEX) is also  
25 available for individuals who are already licensed

1 but may have been out of practice or otherwise  
2 requested by a state board to demonstrate current  
3 osteopathic knowledge and skill.

4 Mr. Murray noted NBOME has also partnered with  
5 the American Osteopathic Association on their  
6 osteopathic continuous certification (OCC) and  
7 continuing medical education (CME) requirements for  
8 their board programs as well.

9 Mr. Murray stated COMLEX-USA is a licensure exam  
10 accepted by all licensing boards in the United States  
11 and used by state boards in making licensure  
12 decisions. He noted COMLEX Level 1 and Level 2-  
13 Cognitive Evaluation (CE) are required in order for  
14 an individual to obtain a degree from a college of  
15 osteopathic medicine.

16 Mr. Murray explained that COMLEX Level 1 and  
17 Level 2-CE are 1-day exams with 352 multiple choice  
18 test questions and Level 3 is a 2-day exam with 420  
19 multiple choice questions and clinical decision-  
20 making cases. He noted all exams are offered in  
21 testing centers with Pearson VUE.

22 Mr. Murray stated Level 2-Performance Evaluation  
23 (PE) was discontinued and replaced, where in order to  
24 take Level 3, individuals must demonstrate they met  
25 certain clinical skills, noting NBOME has a Colleges

1 of Osteopathic Medicine (COM) dean attest that the  
2 student has demonstrated the requisite clinical  
3 skills. He mentioned the Board approved the use of  
4 the clinical skills attestation of the dean as a  
5 substitute for the Level 2-PE Exam last year.

6 Mr. Murray addressed scoring and reporting,  
7 noting Level 1 is now a pass/fail exam with a passing  
8 threshold of 400 and passing threshold on Level 2-CE  
9 at 400 and Level 3 at 350.

10 Mr. Murray informed Board members that NBOME  
11 transitioned all computer-based exams from Prometic  
12 to Pearson VUE, noting the Level 3 exam has been  
13 completely transitioned over with Level 1 being  
14 transitioned over in May and Level 2-CE in June. He  
15 explained that Pearson VUE would be providing NBOME  
16 with a larger network of testing centers, greater  
17 testing availability, and enhanced security  
18 procedures.

19 Mr. Murray again noted NBOME is now utilizing COM  
20 dean attestation for satisfying the clinical skills  
21 requirement for licensure in Pennsylvania. He noted  
22 being aware of pending formal changes to licensing  
23 regulations and rules and asked Ms. Wray to keep  
24 NBOME apprised of any changes.

25 Mr. Murray reminded the Board that NBOME put



1 together a Special Commission for Osteopathic Medical  
2 Licensure comprised of a variety of individuals from  
3 educational and licensure fields who recommended  
4 NBOME explore future options for assessing clinical  
5 skills. He noted NBOME put some resources toward  
6 developing a new clinical skills assessment method  
7 called the Core Competency Capstone for DOs, which  
8 has similarities to the Level 2-PE but a few key  
9 distinctions.

10 Mr. Murray stated the exam still intends to  
11 assess patient-physician communication skills and is  
12 a hands-on physical exam and medical interview and is  
13 intended to assess osteopathic manipulative treatment  
14 (OMT) skills. He mentioned that the design would be  
15 similar to Level 2-PE with the use of standardized  
16 patients and a multi-station objective structured  
17 clinical exam that is designed to assess individuals  
18 going into a residency.

19 Mr. Murray addressed the key distinction, where  
20 the exam would be graded by NBOME but delivered by  
21 COMs at COMs to minimize travel effort and costs from  
22 attending a test center. He noted NBOME is running a  
23 pilot project with Rocky Vista University in  
24 Colorado, Marion University in Indiana, Campbell  
25 University in North Carolina, and Midwestern

1 University in Arizona to deliver the clinical skills  
2 exam this spring.

3 Mr. Murray noted NBOME is hoping to get  
4 additional COMs interested in a future pilot project  
5 based on the feedback with the goal of determining  
6 the feasibility and interest of COMs to adopt the  
7 assessment as part of their program and to determine  
8 the value to boards in terms of a future inclusion in  
9 any state licensure requirements.

10 Chairman Swallow asked whether Mr. Murray had any  
11 opinion or comment regarding the increased use of  
12 simulators and the entry of an artificial  
13 intelligence training platform.

14 Mr. Murray noted artificial intelligence (AI) is  
15 being discussed in assessments and being looked at by  
16 their team in terms of development of the exam but  
17 could not speak to whether it would be part of the  
18 current clinical skills exam. He noted AI is  
19 something to consider but would fully investigate any  
20 new technology before including it in an assessment.

21 He recognized Chairman Swallow's involvement with  
22 the commission and thanked him for his time and  
23 support.

24 Mr. Murray addressed the Interstate Medical  
25 Licensure Compact, noting Pennsylvania has not

1 implemented it because of discrepancies with the  
2 Federal Bureau of Investigation (FBI) background  
3 check requirements. He noted NBOME is supportive of  
4 the compact and its laudable goals to improve  
5 accessibility of medical care but also has concerns  
6 with the way the compact is written that could have  
7 some unintended consequences.

8 Mr. Murray referred to where it is written that  
9 an applicant applies using a state of principal  
10 license but already have their license and then apply  
11 to get license in another compact state. He noted  
12 the state where they are seeking the new license from  
13 is not technically permitted under the compact rules  
14 to ask the individual applicant for additional  
15 information.

16 Mr. Murray mentioned that a state like  
17 Pennsylvania may have different requirements than the  
18 state of principal license, where Pennsylvania  
19 requires COMLEX-USA but not all states require  
20 COMLEX. He noted NBOME believed Pennsylvania should  
21 be entitled to ask someone if they can show they have  
22 passed and met the statutory requirements for  
23 Pennsylvania when applying for a license in  
24 Pennsylvania under the compact but has not completed  
25 COMLEX-USA.

1           Mr. Murray stated the compact would seemingly say  
2 Pennsylvania should not do that and just issue a  
3 license. He mentioned there are other situations  
4 where it impinges upon the state's sovereignty in  
5 order to do its own due diligence in assessing  
6 individual applicants. He addressed communications  
7 with other state boards that expressed concerns with  
8 the way it is being implemented.

9           Mr. Murray addressed Interstate Medical Licensure  
10 Compact Commission pushback from a rule that said, if  
11 an individual is disciplined in the state of  
12 principal license, any other state in which they  
13 obtained a license through the compact would also  
14 have to take that same disciplinary action, whether  
15 it is suspension or revocation of their license.

16           Mr. Murray noted quite a few states pushed back  
17 and believed a state board should have the ability to  
18 do its own due diligence and make its own decision  
19 based on a disciplinary action. He also noted they  
20 were concerned about due process rights for  
21 individual licensees.

22           Mr. Murray noted the commission made a change,  
23 where individual states could reinstate the license  
24 or choose to do their own investigation based on the  
25 allegations. He mentioned the commission has

1 flexibility to revise their roles and recommended the  
2 commission adopt a similar rule that recognizes that  
3 if individual states have different requirements than  
4 the state of principal license that they are allowed  
5 to follow up on that and do their own due diligence  
6 to ensure that their particular requirements in their  
7 state are being met.

8 Mr. Murray mentioned receiving positive feedback  
9 from other state boards and that NBOME would be  
10 discussing this matter at the Federation of State  
11 Medical Boards (FSMB) Meeting and with  
12 representatives from AAOE. He welcomed any feedback  
13 to be shared with AAOE at the FSMB Meeting in May.

14 Dr. Dardarian asked whether there were another  
15 licensing exam applicants would take other than the  
16 United States Medical Licensing Examination (USMLE).

17 Mr. Murray stated the exam is typically USMLE.  
18 He noted the Federation Licensing Examination (FLEX)  
19 was offered in the early 1990s and before, so if  
20 someone took that exam and was licensed quite a long  
21 time ago, that could be another exam. He mentioned  
22 that there are only about seven states that require  
23 COMLEX-USA as the only method to obtain a license,  
24 and the other states would allow an individual to  
25 obtain a license if they took all three levels of

1 USMLE. He stated Pennsylvania has a specific  
2 requirement for COMLEX and an assessment of  
3 osteopathic skills, which would not have been  
4 demonstrated.

5 Chair Swallow commented that the concerns  
6 regarding the compact have been duly noted and the  
7 Board would pursue the matter as needed. He thanked  
8 Dr. Gimpel and Mr. Murray for their presentation.]

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10 Appointment - Department of Human Services - Pennie  
11 Presentation

12 [Laura Humphrey, Deputy Communications Director,  
13 Pennsylvania Department of Human Services, presented  
14 to the Board to discuss Medicaid renewals and provide  
15 a background on what the Department of Human Services  
16 (DHS) and Pennie are doing to make sure  
17 Pennsylvanians remain covered. She noted that  
18 states, Pennsylvania included, could receive enhanced  
19 federal Medicaid funding if they maintained coverage  
20 for the individuals who were on Medicaid.

21 Ms. Humphrey explained that starting in March  
22 2020, when individuals were on Medicaid, they were  
23 able to keep them on Medicaid even if their  
24 eligibility otherwise would have changed. She stated  
25 DHS continued to process renewals for individuals who

1 responded but generally did not take any action if  
2 people did not respond or became ineligible during  
3 the past three years.

4 Ms. Humphrey stated approximately 3.6 million  
5 Pennsylvanians were enrolled in Medicaid as of March  
6 2023 and approximately 632,000 are ineligible based  
7 on their most recent renewal. She explained that the  
8 continuous coverage allowing people to remain on  
9 Medicaid and CHIP ended March 31 by federal law.

10 Ms. Humphrey stated DHS now has to resume the  
11 pre-pandemic renewal processing as of April 1, 2023,  
12 and take action when someone submits their annual  
13 renewal as far as moving to another avenue for their  
14 health coverage, or if individuals do not complete  
15 their annual renewal, they would need to either have  
16 an appeal ready or continue communications so they do  
17 get in their renewal.

18 Ms. Humphrey stated the renewal takes a period of  
19 12 months and would be wrapped up around April 2024.  
20 She noted that everyone would have the opportunity to  
21 renew their coverage and no one is immediately or  
22 automatically losing coverage without an opportunity  
23 to renew. She mentioned that the goal of DHS and  
24 Pennie is to ensure people stay covered, where  
25 coverage may be renewed automatically if they have

1 updated information but action would need to be taken  
2 for other individuals.

3 Ms. Humphrey addressed the renewal process,  
4 noting DHS sends individuals a renewal packet, noting  
5 it could also be done online. She mentioned that DHS  
6 starts communicating with individuals about 90 days  
7 before their renewal is due requesting updated  
8 contact information that can be sent online via  
9 COMPASS, their local county assistance office, or by  
10 phone.

11 Ms. Humphrey noted all communication examples  
12 could be found online at [dhs.pa.gov/staycovered](https://dhs.pa.gov/staycovered) in  
13 Spanish and five other languages as preferences among  
14 Medicaid speakers. She stated individuals would  
15 receive a notice that their Medicaid coverage is  
16 continuing and encouraged everyone to renew even if  
17 they believe they are no longer eligible so DHS could  
18 provide a warm handoff to Pennie to transition them  
19 to another source of health coverage.

20 Ms. Humphrey addressed late renewals, where  
21 someone has 90 days from the renewal deadline to  
22 submit their renewal but would remain covered during  
23 that time. She noted that anyone who believed their  
24 Medicaid has been closed in error can appeal and  
25 continue to be covered until the appeal is decided.



1 Charles (Chachi) Angelo, Director of External  
2 Affairs at Pennie, informed everyone that Pennie is  
3 now the official marketplace after transitioning from  
4 HealthCare.gov and that there are enhanced subsidies  
5 from the American Rescue Plan and the Inflation  
6 Reduction Act. He stated Pennie was formed by  
7 bipartisan unanimous legislation, Act 42 of 2019, to  
8 move away from HealthCare.gov and increase premium  
9 savings for Pennsylvanians.

10 Mr. Angelo noted the goals were to set up the  
11 exchange, take over operations, improve customer  
12 service at a lower cost from HealthCare.gov, and then  
13 to launch a reinsurance program to increase premium  
14 savings for middle income individuals. He noted  
15 Pennie wanted to maximize the number of  
16 Pennsylvanians with quality health coverage and does  
17 not only deal with hospitalizations but other health  
18 care as well.

19 Mr. Angelo stated Pennie is the official health  
20 insurance marketplace, home for high quality health  
21 coverage, and the only source for financial savings,  
22 also known as the subsidy or a tax credit to reduce  
23 the cost of coverage and care. He explained that  
24 Pennie helps individuals and families who do not  
25 receive health insurance from their employer,

1 Medicaid, Medicare, or Veterans Affairs. He noted it  
2 also helps lawfully present immigrants not yet  
3 eligible for Medicaid. He mentioned Pennie operates  
4 a no wrong door policy to ensure individuals are  
5 accessing coverage through medical assistance (MA) or  
6 Pennie.

7 Mr. Angelo stated 9 out of 10 Pennie customers  
8 qualify for financial assistance with either an  
9 advanced premium tax credit, which is an immediate  
10 subsidy as opposed to waiting until tax time and  
11 cost-sharing reductions to help with copays and  
12 deductibles. He noted open enrollment runs from  
13 November 1 to January 15, along with having special  
14 enrollment periods throughout the year for a  
15 qualifying life event.

16 Mr. Angelo addressed the Path to Penny Program  
17 that connects uninsured Pennsylvania tax filers,  
18 where they can check the box and receive more  
19 information from Pennie to enroll in coverage after  
20 open enrollment. He also addressed a new qualifying  
21 life event concerning individuals below or at 150  
22 percent of the federal poverty level.

23 Mr. Angelo also encouraged MA individuals to  
24 reply to the renewal packet, so DHS could hand things  
25 over to Pennie and provided an overview of the

1 process for those who replied and those who did not  
2 reply. He mentioned that all of the organizations  
3 work tightly together and that Medicaid, Marketplace,  
4 and Medicare are all kind of interconnected when it  
5 comes to health coverage.

6 Mr. Angelo stated Pennie recognizes readability  
7 issues and language and technology barriers and that  
8 Pennie can help in person, over the phone, or  
9 virtually with a simple call to customer service. He  
10 noted having individuals in each county willing to  
11 help with a one-on-one sit down with Pennie certified  
12 brokers and assisters easily found at  
13 pennie.com/connect, along with customer support at  
14 pennie.com with FAQs, video tutorials, and more.

15 Mr. Angelo addressed outreach, noting Pennie and  
16 DHS have a media buy ensuring advertising is co-  
17 branded and showing they are all working together to  
18 keep Pennsylvanians covered, along with setting up  
19 events in the community.

20 Ms. Humphrey informed everyone that DHS would  
21 soon have a data tracker on their website showing how  
22 renewals are going and where individuals are  
23 concentrated in the state who still need to complete  
24 their renewals. She again mentioned their website to  
25 help those who may receive Medicaid or be looking for

1 resources and webinars at [dhs.pa.gov/staycovered](https://dhs.pa.gov/staycovered).

2 Ms. Humphrey addressed the DHS communication  
3 toolkit, which contains information that could be  
4 included in a newsletter or handed, along with having  
5 a press office email address for any feedback. She  
6 also gave a shout-out to their helper portal  
7 consisting of legislators and their staff, community  
8 organizations, healthcare providers, community  
9 members, or anyone who wants to sign up to help  
10 people.

11 Chairman Swallow thanked Ms. Humphrey and Mr.  
12 Angelo for the presentation.]

13 \*\*\*

14 Report of Prosecuting Attorneys

15 [Jason T. Anderson, Esquire, Board Prosecutor,  
16 presented the Consent Agreement for Case Nos. 19-53-  
17 006187 & 21-53-018571.]

18 \*\*\*

19 [Keith E. Bashore, Esquire, Board Prosecutor,  
20 presented the Consent Agreements for Case No. 22-53-  
21 018110 and Case No. 21-53-003321.]

22 Charles I. Artz, Esquire, Artz McCarrie Health  
23 Law, counsel for the respondent, was present and  
24 participated in the discussion regarding Case No. 21-  
25 53-003321.]

1 \*\*\*

2 [Mark R. Zogby, Esquire, Board Prosecutor, presented  
3 the Consent Agreement for Case No. 23-53-003267.]

4 MS. WALTER:

5 Pursuant to Section 708(a)(5) of the  
6 Sunshine Act, the Board entered into  
7 Executive Session this morning at  
8 9:30 a.m. to discuss items 5 through 10  
9 on the agenda and to receive advice of  
10 counsel and to engage in quasi-judicial  
11 deliberations.

12 I believe the Board would entertain  
13 a motion to accept the Consent  
14 Agreements at items 5 through 8.  
15 Agenda item 5 is Case No. 19-53-006187  
16 & 21-53-018571; item 6, Case No. 22-53-  
17 018110; item 7, Case No. 21-53-003321;  
18 and item 8, Case No. 23-53-003267.

19 CHAIRMAN SWALLOW:

20 May I have a motion?

21 DR. DARDARIAN:

22 So moved.

23 DR. BULGER:

24 Second.

25 CHAIRMAN SWALLOW:

1 Any discussion? Hearing none. Ms.  
2 Wray, call for the vote.

3  
4 Mr. Claggett, aye; Ms. Reddy, aye; Dr.  
5 Swallow, aye; Dr. Bulger, aye; Ms.  
6 Grey, aye; Dr. Dardarian, aye; Dr.  
7 Zawisza, aye; Ms. Snyder, aye.

8 [The motion carried unanimously. The Respondent's  
9 name at item 5 is Richard Alan Kondan, D.O.; item 6,  
10 Avinash Kambhampati, D.O.; item 7, Steven J.  
11 Valentino, D.O.; and item 8, Jessie Kunkel, D.O.]

12 \*\*\*

13 Report of Board Counsel - Proposed Reports from the  
14 Hearing Examiner

15 MS. WUCINSKI:

16 Moving down to agenda item 9. I  
17 believe the Board would entertain a  
18 motion to adopt the hearing examiner's  
19 Proposed Adjudication and substitute  
20 Final Board Order for Joseph T. Acri,  
21 D.O., Case No. 22-53-016450.

22 CHAIRMAN SWALLOW:

23 May I have a motion?

24 DR. DARDARIAN:

25 So moved.

1 DR. BULGER:

2 Second.

3 CHAIRMAN SWALLOW:

4 Any discussion? Hearing none. Ms.  
5 Wray, call for the vote.

6  
7 Mr. Claggett, aye; Ms. Reddy, aye; Dr.  
8 Swallow, aye; Dr. Bulger, aye; Ms.  
9 Grey, aye; Dr. Dardarian, aye; Dr.  
10 Zawisza, aye; Ms. Snyder, aye.

11 [The motion carried unanimously.]

12 \*\*\*

13 MS. WUCINSKI:

14 At agenda item 10, I believe the Board  
15 would entertain a motion to adopt the  
16 hearing examiner's Proposed  
17 Adjudication and Order for Nilay  
18 Thaker, D.O., Case No. 22-53-012409.

19 CHAIRMAN SWALLOW:

20 May I have a motion?

21 DR. DARDARIAN:

22 So moved.

23 DR. BULGER:

24 Second.

25 CHAIRMAN SWALLOW:

1 Any discussion? Hearing none. Ms.  
2 Wray, roll, please.

3  
4 Mr. Claggett, aye; Ms. Reddy, aye; Dr.  
5 Swallow, aye; Dr. Bulger, aye; Ms.  
6 Grey, aye; Dr. Dardarian, aye; Dr.  
7 Zawisza, aye; Ms. Snyder, aye.

8 [The motion carried unanimously.]

9 \*\*\*

10 Report of Board Counsel - Other

11 [Shana M. Walter, Esquire, Board Counsel, referred to  
12 Act 147 of 2022 regarding the Expedited Partner  
13 Therapy Act, which allows a health care practitioner  
14 to prescribe medication to the partner of a patient  
15 when a patient has been diagnosed with a sexually  
16 transmitted infection for the Board's information.

17 Ms. Wucinski referred to House Bill 758 of 2023  
18 regarding public employees and licensee training in  
19 social bias and cultural competence for the Board's  
20 information. She stated the act requires the  
21 Pennsylvania Human Relations Commission develop a  
22 training to include the understanding of social bias,  
23 including practical techniques to mitigate social  
24 bias and improve cultural competence.

25 Ms. Wucinski noted that commonwealth employees,



1 higher education and trade school employees, and  
2 professional licensees would have to complete the  
3 training every two years. She informed Board members  
4 that House Bill 758 was referred to the Department of  
5 Human Services on March 30, 2023.]

6

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7 Miscellaneous

8 MS. WUCINSKI:

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13

I believe the Board would entertain a  
motion to Ratify the Committee's  
Approval for the Exception to COMLEX-  
USA Attempt Limit Policy for Tejash  
Patel and Breanna Thomas.

14 CHAIRMAN SWALLOW:

15

16

Questions? Hearing none. May I have a  
motion?

17 DR. DARDARIAN:

18

So moved.

19 DR. BULGER:

20

Second.

21 CHAIRMAN SWALLOW:

22

23

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25

Any discussion? Hearing none. Ms.  
Wray, call the vote.

Mr. Claggett, aye; Ms. Reddy, aye; Dr.

1 Swallow, aye; Dr. Bulger, aye; Ms.  
2 Grey, aye; Dr. Dardarian, aye; Dr.  
3 Zawisza, aye; Ms. Snyder, aye.

4 [The motion carried unanimously.]

5 \*\*\*

6 Report of Board Chair - No Report

7 \*\*\*

8 Report of Vice Chair - No Report

9 \*\*\*

10 Report of Acting Commissioner - No Report

11 \*\*\*

12 Report of Department of Health

13 [Sirisha Reddy, Public Health Program Manager,  
14 Department of Health, on behalf of Debra L. Bogen,  
15 M.D., FAAP, FABM, Acting Secretary of Health,  
16 announced the Department of Health released the State  
17 Health Improvement Plan 2023-2028 last week. She  
18 noted the plan was developed in collaboration with  
19 Healthy Pennsylvania Partnership with support from  
20 Harrisburg University.

21 Ms. Reddy stated the Department of Health's  
22 vision is to create a healthy Pennsylvania for  
23 everyone and is essentially a roadmap to improve  
24 health outcomes and eliminate health disparities by  
25 focusing on health equity, chronic disease

1 prevention, and whole person care.

2 Ms. Reddy reported COVID-19 cases, including  
3 hospitalizations and deaths, have been trending  
4 downward. She mentioned free testing is available  
5 from the Department of Health and vaccines are  
6 readily available across the Commonwealth of  
7 Pennsylvania.

8 Ms. Reddy reported low seasonal influenza  
9 activity in Pennsylvania, but there has been 159  
10 influenza associated deaths, including two children,  
11 and cannot confirm the end of flu season. She noted  
12 the influenza vaccine is still available at most  
13 commercial pharmacies.

14 Ms. Reddy addressed the public health emergency  
15 (PHE), noting the Department of Health continues to  
16 assess the impact of PHE ending, especially in COVID  
17 vaccination and testing and would continue to provide  
18 updates. She noted the Department of Health  
19 anticipates receiving more information from the  
20 federal government in the coming weeks and months,  
21 but there still would be free and accessible COVID-19  
22 over-the-counter tests and vaccines available at  
23 state health centers despite any changes at the  
24 federal level.

25 Ms. Reddy noted the House budget hearing for the

1 Department of Health was done March 28 and the Senate  
2 budget hearing is scheduled for April 13. She  
3 mentioned April 11-17 is Black Maternal Health Week  
4 and that improving maternal and infant health  
5 outcomes is a priority of the Department of Health.

6 Chairman Swallow thanked Ms. Reddy for the  
7 report.]

8 \*\*\*

9 Report of Board Administrator

10 [Nichole Wray, Board Administrator, reminded Board  
11 members of the deadline for filing the Financial  
12 Disclosure Statement for the State Ethics Commission  
13 and Code of Conduct for the Office of Administration  
14 is May 1. She noted it is being advised that Board  
15 members file online through Employee Self-Service and  
16 provided a reminder email with links.]

17 \*\*\*

18 For the Board's Information/Discussion - Board  
19 Meeting

20 Dates

21 [William B. Swallow, D.O., Chairman, noted 2023 and  
22 2024 Board meeting dates.]

23 \*\*\*

24 Public Comment

25 [Lisa A. Witherite-Rieg, DO, FACOFP, Pennsylvania

1 Osteopathic Medical Association, requested the status  
2 of the rotating internship requirements discussed at  
3 the February meeting.

4 Ms. Walter explained that she is working with  
5 regulatory counsel to get the proposed rulemaking out  
6 to Board members and then there would be a 30-day  
7 comment period. She noted discussion at the February  
8 meeting concerning the definition of approved  
9 residency program. She also invited anyone with  
10 questions to reach out to her.]

11 \*\*\*

12 Adjournment

13 CHAIRMAN SWALLOW:

14 Motion to adjourn.

15 DR. DARDARIAN:

16 So moved.

17 DR. BULGER:

18 Second.

19 CHAIRMAN SWALLOW:

20 Thank you. We'll see you in June.

21 \*\*\*

22 [There being no further business, the State Board of  
23 Osteopathic Medicine Meeting adjourned at 11:53 a.m.]

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CERTIFICATE

I hereby certify that the foregoing summary minutes of the State Board of Osteopathic 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 Osteopathic Medicine meeting.



Allison Walker,  
Minute Clerk  
Sargent's Court Reporting  
Service, Inc.

STATE BOARD OF OSTEOPATHIC MEDICINE  
REFERENCE INDEX

April 12, 2023

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| TIME  | AGENDA  |
|-------|---|
| 9:30  | Executive Session   |
| 10:30 | Return to Open Session  |
| 10:30 | Official Call to Order  |
| 10:33 | Introduction of Board Members/Attendees                             |
| 10:32 | Approval of Minutes   |
| 10:33 | Appointment - National Board of<br>Osteopathic Medical Examiners    |
| 11:03 | Appointment - Department of Human<br>Services - Pennie Presentation |
| 11:26 | Report of Prosecuting Attorneys                                     |
| 11:43 | Report of Board Counsel   |
| 11:46 | Miscellaneous   |
| 11:47 | Report of Department of Health                                      |
| 11:50 | Report of Board Administrator                                       |
| 11:50 | For the Board's Information/Discussion                              |
| 11:51 | Public Comment  |
| 11:53 | Adjournment   |