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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 PODIATRY  
VIA TELECONFERENCE**

TIME: 10:32 A.M.

Wednesday, October 21, 2020



1 \*\*\*

2 State Board of Podiatry

3 October 21, 2020

4 \*\*\*

5 [Pursuant to Section 708(a)(5) of the Sunshine Act, at  
6 9:45 a.m. the Board entered into Executive Session  
7 with Kenneth J. Suter, Esquire, Board Counsel, for the  
8 purpose of discussing items 3, 4, and 8 on the agenda.  
9 The Board returned to open session at 10:30 a.m.]

10 \*\*\*

11 [Theodore Stauffer, Executive Secretary, Bureau of  
12 Professional and Occupational Affairs, noted the  
13 meeting was being recorded, and those who remained on  
14 the line were giving their consent to being recorded.]

15 \*\*\*

16 The regularly scheduled meeting of the State  
17 Board of Podiatry was held on Wednesday, October 21,  
18 2020. Robert B. Weber, D.P.M., Chairman, called the  
19 meeting to order at 10:32 a.m.

20 \*\*\*

21 Approval of minutes of the August 19, 2020 meeting

22 CHAIRMAN WEBER:

23 Could I have a motion for approval of  
24 minutes?

25 MS. HALUSZCZAK:

1 I approve the minutes from the August 19  
2 meeting.

3 DR. PARIS:

4 I will second that motion.

5 CHAIRMAN WEBER:

6 All in favor?

7 [The motion carried. Commissioner Johnson abstained  
8 from voting on the motion.]

9 \*\*\*

10 [Introduction of Board Members]

11 \*\*\*

12 Report of Prosecutorial Division

13 [Paul J. Jarabeck, Esquire, Board Prosecutor, reported  
14 he and Mr. McNally had nothing on the agenda for  
15 presentation. He noted prosecution continues to  
16 conduct investigations, receive complaints, and work  
17 through regular courts to prosecute or close matters  
18 through remote settings.]

19 Chairman Weber questioned whether training was  
20 being continued remotely for the prosecution division.

21 Mr. Jarabeck reported two continuing education  
22 sessions through the Department of State as well as  
23 training through the Office of General Counsel through  
24 an OGC University event.]

25 \*\*\*



1           Commissioner Johnson stated Act 53 was signed in  
2 June 2020 and is one of the most comprehensive forms  
3 related to the use of criminal history since the  
4 inception of the Criminal History Records Information  
5 Act (CHRIA). He commented that the Board has the  
6 discretion to review and make determinations upon an  
7 individual's suitability for licensure based on  
8 criminal history.

9           Commissioner Johnson explained that Act 53  
10 amended the Criminal History Records Information Act  
11 to provide boards under the Department of State to use  
12 criminal history that directly relates to a profession  
13 to determine suitability for the licensure and noted  
14 being tasked with developing lists.

15           Commissioner Johnson stated Board Counsel, under  
16 the direction of Deputy Chief Counsel Montgomery,  
17 curated that list from the language in the State Board  
18 of Podiatry Practice Act, existing criminal statutes  
19 as well as existing Board regulations, and thoroughly  
20 exhaustive review of disciplinary history of the  
21 Board.

22           Commissioner Johnson requested the Board approve  
23 the list for publication so Board Counsel may continue  
24 the work and begin promulgating regulations based on  
25 Act 53.

1           Cynthia K. Montgomery, Esquire, Deputy Chief  
2 Counsel, Department of State, referred to § 3117 of  
3 Act 53, where the Commissioner must develop a schedule  
4 of criminal convictions that may constitute grounds to  
5 refuse to issue; suspend; or revoke a license,  
6 certificate, registration, or permit for each  
7 occupation or profession under the respective practice  
8 act.

9           Deputy Chief Montgomery stated Act 53 has  
10 specific provisions making certain crimes potentially  
11 an impediment to licensure. She noted drug  
12 trafficking offenses and a provision in § 3113(f),  
13 where the Podiatry Practice Act that provides for  
14 automatic suspensions for felony drug convictions  
15 limits that to only drug trafficking offenses. She  
16 referred to § 3113(d) regarding sexual offenses  
17 applying to boards licensing health care  
18 practitioners.

19           Ms. Montgomery referred to § 3113(e) regarding  
20 acts of violence, where an individual could receive a  
21 license if it had been at least 3 years from  
22 incarceration or 3 years from imposition of the  
23 sentence, the individual has remained conviction-free,  
24 and demonstrates significant rehabilitation. She  
25 stated the Board must be convinced the individual does

1 not pose a substantial risk to the health and safety  
2 of patients, clients, or the public or a substantial  
3 risk of further conviction.

4 Ms. Montgomery stated the remaining offenses are  
5 identified as "directly related" and provided a  
6 definition, where offenses have a direct bearing. She  
7 stated the list will become part of a best practices  
8 guide explaining the process to applicants and how  
9 boards are going to evaluate criminal history record  
10 information, which would allow individuals to learn  
11 upfront what they need to receive a license.

12 Ms. Montgomery referred to § 3115 regarding  
13 preliminary determination, where an individual would  
14 have their criminal history reviewed in advance and a  
15 preliminary determination made as to whether a crime  
16 may be an impediment to licensure.

17 Ms. Montgomery noted this would allow individuals  
18 to demonstrate to the Board that they do not pose a  
19 significant risk to patients or the public or a  
20 significant risk of further criminal offenses. She  
21 noted this will also to be used in evaluating  
22 applicants and disciplinary actions.

23 Ms. Montgomery addressed rebuttable presumption,  
24 where individuals convicted of one of these crimes  
25 would pose a significant risk to the patients or

1 public or a risk of further criminal violations. She  
2 stated the burden shifts to the applicant to  
3 demonstrate they do not pose such a risk. She  
4 referred to the list of criteria in § 3113(c) that the  
5 Board would need to consider.

6 Ms. Montgomery addressed criminal convictions not  
7 on the list, where the prosecution division would have  
8 to prove the individual does pose a substantial risk  
9 to the public. She commented that offenses not on the  
10 list did not mean the Board will not see those cases.

11 Chairman Weber noted no problems with the list,  
12 stating it will be a case-by-case assessment of the  
13 individual and not a rubberstamp-type decision. He  
14 stated the Board has never seen any negative issues  
15 with the prosecutors or malice, acknowledging the  
16 difficulty for them to present issues and show that  
17 these prosecutors can reveal empathy.

18 Chairman Weber thanked the legal department on  
19 behalf of the Board and expressed his appreciation for  
20 all of their guidance given to the Board.

21 Commissioner Johnson explained the exercise as  
22 creating transparency and making it more equitable by  
23 providing parity in the process but does not  
24 substantively change the duties and responsibilities  
25 of the Board. He stated that creating the list and

1 publishing the best practices guide would allow any  
2 individuals who were interested in the profession to  
3 be fully educated and informed about how criminal  
4 history may or may not impact their decision to join  
5 the profession.

6 Ms. Montgomery explained the process going  
7 forward if the Board approves the list today, where  
8 schedules will be published within 180 days from the  
9 effective date of the act and then the Commissioner  
10 has a duty to promulgate them as a regulation. She  
11 stated the act requires the proposed rulemaking to be  
12 completed with 120 days from that point and the final  
13 rulemaking within 2 years. She noted another  
14 opportunity for public comment when it is published as  
15 proposed rulemaking.]

16

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17 CHAIRMAN WEBER:

18 I would like to ask someone from our  
19 Board to entertain a motion whereby we  
20 can proceed with this process, just  
21 asking a member on the Board, please?

22 DR. GREENBERG:

23 I make the motion.

24 CHAIRMAN WEBER:

25 Thank you Eric. May I have a second?

1 DR. PARIS:

2 I'll second the motion.

3 CHAIRMAN WEBER:

4 All in favor?

5 [The motion carried unanimously.]

6 \*\*\*

7 Report of Board Counsel

8 MR. SUTER:

9 Item 3 on the agenda is the Petition for  
10 Reinstatement of William T. Ainsley,  
11 D.P.M., Case No. 20-44-011657. The Board  
12 discussed this in Executive Session.

13 As a result of Executive Session, I  
14 understand the Board will entertain a  
15 motion to delegate this matter to a  
16 hearing examiner for a proposed  
17 Adjudication and Order.

18 DR. GREENBERG:

19 I'll make the motion to delegate it to a  
20 hearing examiner.

21 CHAIRMAN WEBER:

22 Do I have a second?

23 DR. PARIS:

24 Second.

25 CHAIRMAN WEBER:

1 All in favor?

2 [The motion carried. Ms. Haluszczak recused herself  
3 from deliberations and voting on the motion.]

4 \*\*\*

5 MR. SUTER:

6 Number 4 on the agenda. This is an  
7 Immediate Temporary Suspension Blanket  
8 Delegation Order from the Board. In  
9 other words, all immediate temporary  
10 suspensions will be delegated to a  
11 hearing examiner for a Final Adjudication  
12 and Order.

13 I understand there will be a motion  
14 to approve the Immediate Temporary  
15 Suspension Blanket Delegation Order.

16 COMMISSIONER JOHNSON:

17 So moved.

18 DR. PARIS:

19 Second.

20 \*\*\*

21 VICE CHAIRMAN PARIS ASSUMED THE CHAIR

22 \*\*\*

23 VICE CHAIRMAN PARIS:

24 All in favor? Any abstentions?

25 [The motion carried unanimously.]

1 \*\*\*

2 CHAIRMAN WEBER RESUMED THE CHAIR

3 \*\*\*

4 [Robert B. Weber, D.P.M., Chairman, requested Mr.  
5 Suter bring him up to date due to technical  
6 difficulty.]

7 \*\*\*

8 Report of Regulatory Counsel

9 [Kenneth J. Suter, Esquire, Board Counsel, noted  
10 Senate Bill 1277 regarding informed consent for the  
11 Board's information.]

12 \*\*\*

13 VICE CHAIRMAN PARIS ASSUMED THE CHAIR

14 \*\*\*

15 [Kenneth J. Suter, Esquire, Board Counsel, addressed  
16 the proposed annex for Act 41 regarding licensure by  
17 endorsement. He noted prior discussion with one  
18 remaining issue concerning competency, where the  
19 individual has either practiced a minimum of 2 of the  
20 last 5 years preceding the application or have  
21 successfully completed the National Board Examination.

22 Mr. Suter questioned whether the Board wanted to  
23 include a limited period of time to pass the National  
24 Board exam, noting that someone could have passed the  
25 National Board Examination 20 years ago and would

1 qualify for a license through reciprocity. He  
2 suggested the Board might want the language to read,  
3 successfully passed the National Board Examination  
4 within the last 5 years prior to application.

5 Vice Chairman Paris suggested starting with 5  
6 years for the exam if the Board is using the 5-year  
7 window to look at whether they practiced podiatry  
8 within 2 of those years.

9 Chairman Weber requested Vice Chairman Paris  
10 continue his role due to technical issues.

11 Mr. Suter also noted language, where the Board  
12 could require the person appear before the Board for  
13 an interview. He mentioned a provision in the  
14 proposal allowing a person to receive a provisional  
15 license for those who have not dotted their I's or  
16 crossed their T's and would have to do some relatively  
17 minor things but would be granted a license for a year  
18 to complete the requirements.

19 Vice Chairman Paris stated the hope was that the  
20 person had been practicing during the last 2 years,  
21 but if they had not, the Board was giving them an  
22 alternative and believes 5 years or less would be more  
23 than fair.]

24

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25 MR. SUTER:

1           What we are going to need is a motion to  
2           approve the Act 41 Annex as drafted with  
3           the proviso that language be added, that  
4           successfully passing all parts of the  
5           National Board Examination has occurred  
6           within 5 years prior to the application.

7                     If somebody wants to make that motion  
8           and second it?

9   COMMISSIONER JOHNSON:

10                    So moved.

11   VICE CHAIRMAN PARIS:

12                    Do we have a second?

13   MS. HALUSZCZAK:

14                    Second.

15   VICE CHAIRMAN PARIS:

16                    All in favor? Abstentions?

17   [The motion carried unanimously.]

18                                 \*\*\*

19   Report of Board Administrator

20   MR. SUTER:

21                    We will move on to Item No. 8, and my  
22                    understanding in Executive Session was  
23                    that Melissa would have a motion  
24                    regarding this.

25                                 This is a CE Waiver Request by John



1 Dates

2 [Aaron Hollinger, Board Administrator, noted the  
3 remaining Board meeting date for 2020 and meeting  
4 dates through 2021.

5 Vice Chairman Paris questioned whether opioid and  
6 pain management training is automatically reported to  
7 the Board.

8 Mr. Hollinger explained that child abuse CE is  
9 the only CE reported to the Board, and licensees need  
10 to maintain copies of certificates of completion  
11 concerning opioid CE. He further explained that  
12 licensees need to answer yes to the question on the  
13 renewal if it was completed, but it does not get  
14 reported and licensees do not need to submit it.

15 Mr. Hollinger stated the only time licensees  
16 would need to submit the opioid CE and all of the  
17 other CE credits would be if they were chosen as part  
18 of the random CE audit after the renewal period ended.

19 Vice Chairman Paris questioned whether a risk  
20 management CE exercise regarding opioids and pain  
21 management offered by the Podiatry Insurance Company  
22 of America (PICA) would count toward the requirements  
23 for licensure.

24 Mr. Hollinger noted it would be accepted if the  
25 training includes 2 hours in the topics of opioid

1 prescribing, opioid dispensing, pain management, or  
2 the identification of addiction and if they are an  
3 approved provider.]

4 \*\*\*

5 For the Board's Information/Discussion - Old  
6 Business/New Business

7 [Kenneth J. Suter, Esquire, Board Counsel, referred to  
8 the draft to be sent to the commission regarding  
9 recognition of podiatrists as physicians. He  
10 questioned whether the language recognizing  
11 podiatrists as physicians will assist with  
12 administrative and health care billing is accurate.

13 Dr. Greenberg mentioned that it was brought up  
14 independently by the Pennsylvania Podiatric Medical  
15 Association (PPMA) regarding wound care, where it is  
16 not accepted unless it is written by a physician. He  
17 recommended something in the letter stating that  
18 functionally, podiatrists are already serving as  
19 physicians.

20 Mr. Suter suggested the Board approve the letter  
21 with the provision that a sentence is going to be  
22 added by Dr. Greenberg.]

23 \*\*\*

24 MS. HALUSZCZAK:

25 I make a motion to approve the letter

1 subject to the additional sentence by Dr.  
2 Greenberg.

3 COMMISSIONER JOHNSON:

4 Second.

5 VICE CHAIRMAN PARIS:

6 All in favor?

7 [The motion carried unanimously.]

8 \*\*\*

9 [Kenneth J. Suter, Esquire, Board Counsel, addressed  
10 the American Podiatric Medical Licensing Examination  
11 (APMLE) Part II Clinical Skills Patient Encounter,  
12 noting prior Board discussion regarding APMLE changing  
13 their schedule due to COVID-19.

14 Dr. Greenberg noted the issue had been resolved  
15 and mentioned forwarding letters received from a  
16 person at the school to everybody on the Board.]

17 \*\*\*

18 Report of Regulatory Counsel (Continued)

19 [Kenneth J. Suter, Esquire, Board Counsel, addressed  
20 the request for reconsideration of proposed rulemaking  
21 16A-4417 regarding continuing education. He noted  
22 changing the language regarding journal activities,  
23 the Board's decision to not lower the CE requirements  
24 to 45 from 50, and the vote to allow all 50 credits  
25 online.

1 Mr. Suter stated PPMA was requesting  
2 reconsideration of the 50 credits online. He noted  
3 the importance of the Board being on the same page  
4 with the state association and schools to have a  
5 better chance of moving a regulation through the  
6 Independent Regulatory Review Commission (IRRC) and  
7 the Governor's office.

8 Sabrina Minhas, D.P.M., President, Pennsylvania  
9 Podiatric Medical Association, read a letter provided  
10 to the Board concerning their request for  
11 reconsideration of the number of online continuing  
12 medical education (CME) hours.

13 Dr. Minhas stated PPMA is in agreement with the  
14 Governor's March 22, 2020 order, which suspends the  
15 restriction on the number of CME hours that can be  
16 achieved online for the current biennial renewal  
17 period during the COVID-19 pandemic. She stated PPMA  
18 has rejected the Board's proposed regulatory changes  
19 to increase the number of CME hours achieved online  
20 from 10 hours to 50 hours. PPMA has objected to this  
21 proposal. PPMA proposed doubling the current 10 hours  
22 to 20 hours. Dr. Minhas outlined the six reasons for  
23 the request as noted in the letter.

24 Dr. Minhas noted PPMA's request is based on  
25 current CME program structure, which has contributed

1 to stable and predictable medical professional  
2 liability rate. She stated programs supported by  
3 industry-related individuals or corporations,  
4 pharmaceuticals, and device companies do not meet the  
5 § 29.61 requirements of approval by the Council on  
6 Podiatric Medical Education (CPME), National Council,  
7 American Medical Association (AMA), or American  
8 Osteopathic Association (AOA) and are not qualified to  
9 be counted as CME hours required under the  
10 regulations.

11 Dr. Minhas commented that online education allows  
12 licensees free choice of topics, which can narrow the  
13 focus of the licensees' choice to comfortable topics  
14 and eliminate the licensees' exposure to new or  
15 challenging material.

16 Dr. Minhas reported the Goldfarb Foundation has  
17 launched its November program in a virtual format and  
18 is considering the same for its December program,  
19 noting the foundation has also produced a library of  
20 online lectures recognized by CPME. She stated PPMA  
21 believed a mix of face-to-face and online programs  
22 would be appropriate.

23 Dr. Minhas reported an overwhelming number of  
24 Pennsylvania licensees have expressed their opinion  
25 against unlimited sourcing for CME online.

1 Dr. Minhas stated IRRC analysis rested its  
2 conclusions on cost assumptions not supported by  
3 current available cost figures involved in CME face-  
4 to-face learning or internet-based programs. She also  
5 noted no evidentiary or analytical evidence offered  
6 supportive of moving to unlimited internet sourcing  
7 for CME hours.

8 Dr. Minhas noted the purpose of requiring CMEs  
9 was to assure the public that licensees possess  
10 current skills that fulfill the duty licensees have to  
11 the public.

12 Michael Davis, Executive Director, Pennsylvania  
13 Podiatric Medical Association, believed the proposal  
14 to be a middle ground but preserves the face-to-face  
15 portion, which allows for the presentation of more  
16 important topics on a tactile basis.

17 Mr. Suter reported Chairman Weber was still  
18 unable to participate verbally but did send a message  
19 suggesting 25 CMEs online and 25 CMEs in person.

20 Vice Chairman Paris questioned whether PPMA had  
21 any new objective evidence to offer the Board. Dr.  
22 Minhas stated no new information has been presented  
23 and reiterated the six reasons in the letter. Vice  
24 Chairman Paris also questioned whether PPMA would  
25 support continuation of disciplinary action against

1 Pennsylvania podiatrists who are unable to meet their  
2 CME requirements without using approved distance  
3 learning. Dr. Minhas responded by stating, yes, every  
4 Pennsylvania podiatrist would be required to meet the  
5 CME requirements for the state upon license renewal.

6 Vice Chairman Paris questioned whether PPMA would  
7 be in favor of continuing disciplinary actions when a  
8 podiatrist would have difficulty meeting the  
9 requirements through in-person education. Dr. Minhas  
10 stated PPMA would support whatever the State licensing  
11 Board supports. She questioned Mr. Davis whether the  
12 issue ever arose that a PPMA member could not meet the  
13 credits.

14 Mr. Davis stated PPMA would support circumstances  
15 on an ad hoc basis that the Board considered relevant  
16 to allow an extended period of time. PPMA is in  
17 support of the licensees. He assumed the Board would  
18 make decisions based on the circumstances presented by  
19 the licensee. If an extension were warranted, PPMA  
20 would support the extension. If discipline was  
21 warranted, PPMA would support the discipline.

22 Vice Chairman Paris questioned whether any  
23 problems had been reported from the other 27 states in  
24 the United States that allow 100% online or distance  
25 learning. He also questioned whether doctors of

1 medicine (MDs), doctors of osteopathic medicine (DOs),  
2 and chiropractic colleagues are allowed to get 100% of  
3 their credits through distance in Pennsylvania and has  
4 it caused a risk to citizens of Pennsylvania.

5 Mr. Davis explained that MDs and DOs are required  
6 to have 100 hours in person or online. He noted they  
7 have a face-to-face requirement and recognition of  
8 CPME. He stated they require recognition of the  
9 allopathic equivalent of CPME, which requires a deeper  
10 examination of change in practice patterns to justify  
11 their CME application.

12 Mr. Davis commented that he was not aware of  
13 issues in other states that allow full CMEs online but  
14 is aware that Pennsylvania malpractice rates have  
15 remained stable and lower than those states that have  
16 allowed online.

17 Vice Chairman Paris pointed out that allopathic  
18 doctors need 100 credits but only 20 of them need to  
19 be through an approved accredited provider,  
20 podiatrists need 50 credits every 2 years approved by  
21 an accredited provider in Pennsylvania, and MD  
22 counterparts only need 20.

23 John Mattiacci, D.P.M., Secretary, Pennsylvania  
24 Podiatric Medical Association, commented that each  
25 specialty attends their own special CMEs and do not

1 receive their main material online. He stated  
2 specialty physicians, both osteopathic and allopathic  
3 medicine attend face-to-face meetings in their  
4 specialties because it is more depth, although they  
5 appear to be able to get everything online.

6 Vice Chairman Paris noted the Board is proposing  
7 the same thing by giving licensees a choice to attend  
8 in person or not.

9 Dr. Mattiacci stated Temple University is the  
10 best school in the country right here in Pennsylvania  
11 and could provide a lot of information but had no  
12 input. He suggested 20 hours and revisiting the issue  
13 in 2 years to get factual information.

14 Vice Chairman Paris addressed the quality of  
15 education, where the Board is talking about only using  
16 accredited providers and requiring interactive  
17 components with a skills test or quiz. He stated in  
18 person did not guarantee interactivity or guarantee  
19 people were going to pay attention. He noted not  
20 having a test or quiz at a Goldfarb conference on the  
21 skills or knowledge he obtained at that lecture.

22 Vice Chairman Paris stated it was written into  
23 the amendments to require some kind of skills test or  
24 a knowledge test at the completion to verify people  
25 are actually receiving some level of education through

1 online programs. Dr. Minhas thanked Vice Chairman  
2 Paris for the clarification.

3 Vice Chairman Paris addressed COVID-19 and the  
4 change in the way people think about human contact and  
5 interaction. He stated some people will want to go  
6 back to big groups and meeting rooms with 300 people  
7 and others will not but believed it was important to  
8 give people choices. Dr. Minhas recognized individual  
9 depression and mental issues as a result of being  
10 confined and the inability to socialize. Mr. Davis  
11 reiterated the suggestion to wait the two years to  
12 examine the market for continuing education.

13 Vice Chairman Paris read Dr. Dia McCaughan's  
14 letter, dated October 17, 2020, explaining the way she  
15 voted and noting that after reviewing the request for  
16 reconsideration, she still felt allowing the option of  
17 100% online learning would be beneficial for the  
18 licensees within the Commonwealth.

19 Dr. Minhas requested more time to respond to the  
20 letter since PPMA did not have access. She commented  
21 that the opinion PPMA brought to the Board was based  
22 upon a representative in every division in the state  
23 of Pennsylvania for podiatry and the letter was based  
24 on one person's opinion.

25 Vice Chairman Paris reported that every letter

1 received in support of the PPMA's position and in  
2 objection to the Board's position was written by  
3 either a past or present officer, Board member, or  
4 Board consultant of the PPMA. He noted not receiving  
5 a single objection letter from any other licensee in  
6 Pennsylvania other than those closely affiliated with  
7 PPMA.

8 Dr. Minhas noted the PPMA's position was derived  
9 from a vote from PPMA's House of Delegates, which is a  
10 representative from each division of the Pennsylvania.

11 Dr. Mattiacci commented that he could obtain more  
12 letters in support if there were not enough members  
13 from PPMA, and he disagreed with six people on the  
14 Board making the decision.

15 Mr. Suter provided a summary of the regulatory  
16 process from the exposure draft to the final-form  
17 regulation.

18 Chairman Weber requested Vice Chairman Paris  
19 finish the meeting. He disagreed with both PPMA and  
20 the present Board and was in favor of 25 credits in  
21 person and 25 credits online.

22 Commissioner Johnson commented that the issue  
23 comes down to whether or not the proposed package,  
24 when presented to the commission, is going to present  
25 an implication to public safety such that the

1 commission has issues with this and it raises red  
2 flags to the Legislative Oversight Committee.

3       Commissioner Johnson expected to see some  
4 demonstrative evidence in either direction, where  
5 there is a preponderance of evidence that either it  
6 has created a public implication or these states have  
7 been allowed to move toward a majority online presence  
8 with no public safety implications in the 27 states  
9 that have moved in this direction and did not see the  
10 commission being easily persuaded by the argument.

11       Commissioner Johnson questioned whether PPMA has  
12 any data or demonstrative evidence that moving to the  
13 online platform is going to create a public safety  
14 implication and should not be acted upon.

15       Mr. Davis stated PPMA offered to solicit the  
16 information regarding claims, frequency, or severity  
17 arising out of states that allow online learning but  
18 noted the difficulty because of lead time in medical  
19 malpractice claims of at least 2 years before the  
20 filing and then another 2-3 years before there is a  
21 settlement or a verdict in any type of action.

22       Commissioner Johnson stated the presumption in  
23 the 27 states where they continue the practice of  
24 accepting online CME would be that it does not harm  
25 the public without information to the contrary.



1 \*\*\*

2 MR. SUTER:

3 If we could do a vote that it is 25 on  
4 the internet and 25 in person. The annex  
5 would be amended to have that language.

6 CHAIRMAN WEBER:

7 I want to see a vote that we could  
8 proceed with this and go 25/25.

9 MR. SUTER:

10 Somebody needs to second that motion if  
11 we are going to move forward.

12 The motion is to amend the annex that  
13 25 credits would be required in person  
14 and 25 credits could be done through long  
15 distance or the internet instead of the  
16 existing regulation, 10, and the proposed  
17 regulation where it was decided last  
18 meeting was 50 credits.

19 COMMISSIONER JOHNSON:

20 I would move given that we have opened up  
21 the annex as reasoned by the last vote of  
22 3 to 1. I would so move that we settle  
23 the question of whether online CE would  
24 be 50 hours or 25 hours with a yea or nay  
25 motion. I would move that we resolve the

1 question for the full online options, 50  
2 credits online.

3 VICE CHAIRMAN PARIS:

4 I would like to second that motion. All  
5 in favor? So that is 3 to 1 in favor of  
6 the 50 online.

7 [The motion carried. Dr. Weber opposed the motion.  
8 Dr. Greenberg was recused from voting on the motion]

9 \*\*\*

10 Report of Board Chair - No Report

11 \*\*\*

12 Report of Commissioner

13 [K. Kalonji Johnson, Commissioner, Bureau of  
14 Professional and Occupational Affairs, noted  
15 finalizing preparations for renewals to ensure all  
16 licensees have a secure and efficient experience. He  
17 mentioned having faith and confidence in Mr. Hollinger  
18 and the rest of the team to address any issues from  
19 the regulated community with the best customer service  
20 possible.]

21 \*\*\*

22 [Michael J. Paris, D.P.M., Vice Chairman, clarified  
23 for the record that the vote basically says what the  
24 Board voted on last time has not changed from this  
25 meeting.]



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CERTIFICATE

I hereby certify that the foregoing summary minutes of the State Board of Podiatry meeting, was reduced to writing by me or under my supervision, and that the minutes accurately summarize the substance of the State Board of Podiatry meeting.

Morgan McKendrick  
Morgan McKendrick,  
Minute Clerk  
Sargent's Court Reporting  
Service, Inc.

STATE BOARD OF PODIATRY  
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TIME	AGENDA
9:45	Executive Session
10:30	Return to Open Session
10:32	Official Call to Order
10:33	Approval of Minutes
10:34	Introduction of Board Members
10:35	Report of Prosecutorial Division
10:41	Appointment - K. Kalonji Johnson, Commissioner, Bureau of Professional and Occupational Affairs
11:03	Report of Board Counsel
11:13	Report of Regulatory Counsel
11:38	Report of Board Administrator
11:39	For the Board's Information
11:54	Report of Regulatory Counsel (cont.)
1:31	Report of Commissioner
1:35	Adjournment