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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: 9:31 A.M.

BOARD ROOM C

One Penn Center

2601 North Third Street

Harrisburg, Pennsylvania 17110

Wednesday, December 11, 2019

1 State Board of Osteopathic Medicine
2 December 11, 2019

3
4
5 BOARD MEMBERS:
6

7 Randy G. Litman, D.O., Chairman
8 K. Kalonji Johnson, Acting Commissioner, Bureau of
9 Professional and Occupational Affairs
10 William B. Swallow, D.O., Vice Chairman
11 Burton T. Mark, D.O., Secretary
12 Arlene G. Seid, M.D., M.P.H., Medical Director of
13 Quality Assurance, on behalf of Rachel Levine, M.D.,
14 Physician General/Secretary of Health
15 Bette A. Grey, BA, RRT, CPFT
16 John B. Bulger, D.O.
17 Christopher S. Poggi, D.O.
18 Frank M. Tursi, D.O.
19
20

21 BUREAU PERSONNEL:
22

23 Kenneth J. Suter, Esquire, Board Counsel
24 Shana M. Walter, Esquire, Board Counsel
25 Anita P. Shekletski, Esquire, Board Prosecution
26 Liaison
27 Bridget K. Guilfoyle, Esquire, Board Prosecutor
28 Jason T. Anderson, Esquire, Board Prosecutor
29 Aaron Hollinger, Board Administrator
30 Kimberly Adams, Chief of Fiscal Management, Bureau of
31 Finance and Operations
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1 ***

2 State Board of Osteopathic Medicine

3 December 11, 2019

4 ***

5 The regularly scheduled meeting of the State
6 Board of Osteopathic Medicine was held on Wednesday,
7 December 11, 2019. Randy G. Litman, D.O., Chairman,
8 called the meeting to order at 9:31 a.m.

9 K. Kalonji Johnson, Acting Commissioner, Bureau
10 of Professional and Occupational Affairs, was not
11 present at the commencement of the meeting.

12 ***

13 Approval of minutes of the October 23, 2019 meeting

14 CHAIRMAN LITMAN:

15 May I have a call for approval of the
16 minutes for October 23?

17 DR. MARK:

18 Approve.

19 DR. SEID:

20 Second.

21 CHAIRMAN LITMAN:

22 All in favor?

23 [The motion carried unanimously.]

24 ***

25 Report of Prosecutorial Division

1 [Anita P. Shekletski, Esquire, Board Prosecution
2 Liaison, withdrew Mr. Bashore's Consent Agreement at
3 File No. 19-53-003845.

4 Ms. Shekletski presented the VRP Consent
5 Agreement for File No. 19-53-009796.]

6 ***
7 [Christopher S. Poggi, D.O.; John B. Bulger, D.O.; and
8 Burton T. Mark, D.O., Secretary, exited the meeting at
9 9:32 a.m. for recusal purposes.]

10 ***
11 [Bridget K. Guilfoyle, Esquire, Board Prosecutor,
12 presented the Consent Agreement for File No. 18-53-
13 006938.]

14 ***
15 [Jason T. Anderson, Esquire, Board Prosecutor,
16 presented the Consent Agreement for File No. 19-53-
17 002322.]

18 ***
19 [Christopher S. Poggi, D.O.; John B. Bulger, D.O.; and
20 Burton T. Mark, D.O., Secretary, reentered the meeting
21 at 9:37 a.m.]

22 ***
23 [Jason T. Anderson, Esquire, Board Prosecutor,
24 presented the Consent Agreements for File No. 18-53-
25 010888 and File No. 19-53-012191.]

1 ***

2 [K. Kalonji Johnson, Acting Commissioner, Bureau of
3 Professional and Occupational Affairs, entered the
4 meeting at 9:38 a.m.]

5 ***

6 Appointment - Bureau of Finance and Operations Annual
7 Budget Presentation

8 [Kimberly Adams, Chief of Fiscal Management, Bureau of
9 Finance and Operations, addressed licensee population
10 from a revenue standpoint, mentioning steady growth at
11 a slight pace. She noted FY 2015-2016 at 11,114
12 licensees, which increased by 600 in FY 2017-2018 to
13 11,714 and FY 2019-2020 at 12,437 at the date it was
14 recorded with an additional 51 licensees since the
15 report was prepared at 12,488.

16 Ms. Adams reviewed revenues by source with
17 revenues by applications, noting the biennial total
18 averaging about 95.3 percent. She reviewed the
19 biennial total.

20 Ms. Adams provided a categorical breakdown of
21 expenses for FY 2017-2018 and FY 2018-2019 with the
22 current budget for FY 2019-2020 with expenses as of
23 November 27, 2019. She commented that expenses incur
24 from direct-based charges, timesheet-based charges,
25 and licensee-based charges.

1 Ms. Adams noted an anticipated budget of
2 \$1,732,973.10 for FY 2019-2020 after combining
3 revenues and expenses.

4 Ms. Adams reviewed Board member expenses, noting
5 that the budget for FY 2019-2020 was adequate with the
6 figure as of November 27, 2019. She stated any money
7 not spent will remain in the Board's account for other
8 use. She mentioned Board member expenses had
9 increased slightly.]

10 ***

11 Report of Board/Regulatory Counsel

12 [Kenneth J. Suter, Esquire, Board Counsel, referred to
13 the proposed preamble and annex for 16A-5334 regarding
14 fees. He noted the addition of genetic counselors, in
15 terms of raising their fees, that was not seen in the
16 previous draft from the Bureau of Finance and
17 Operations (BFO). He mentioned a preamble that he
18 drafted was sent to the Office of Policy and Planning
19 and the Office of General Counsel for review and will
20 move once the Board votes on the package.]

21 ***

22 DR. TURSI:

23 I make a motion to accept the proposed
24 preamble and regulatory fee schedule as
25 written.

1 CHAIRMAN LITMAN:

2 Do I have a second?

3 DR. BULGER:

4 Second.

5 CHAIRMAN LITMAN:

6 All in favor?

7 [The motion carried unanimously.]

8 ***

9 [Mr. Suter addressed Senate Bill 572/Act 112 of 2019
10 regarding opioid treatment agreements. He mentioned
11 it consists of definitions and requirements for
12 prescribing. He noted the bill assigned the
13 Department of Health to develop regulations. He
14 pointed out an important provision in the bill for
15 Board purposes that places an obligation on the Board
16 in terms of enforcement of the provisions, which is
17 now law.

18 Dr. Seid commented that it was not clear when the
19 Department of Health's promulgation of regulations
20 would be finished.

21 Dr. Bulger questioned who would promulgate
22 regulations if the Department of Health (DOH) does not
23 because the bill does not suggest monetary penalties
24 for physicians and other things.

25 Dr. Seid suggested having trade organizations

1 submit anything the Board feels should be regulated to
2 the Department of Health.

3 Mr. Suter commented that the statute was very
4 specific in terms of what the requirements are, so
5 there could be a violation of the statutes based upon
6 what it says without a regulation that could be
7 charged by prosecution and brought before the Board to
8 go through the normal process like any other violation
9 of the practice act or regulations.

10 Chairman Litman suggested developing some kind of
11 standard of care defining milestones of when
12 monitoring should be done and protect more providers
13 from being presented before a Board for perhaps
14 improper use of their entitlement to prescribe.

15 Dr. Poggi noted his concerns regarding patients
16 with acute pain who would be unable to receive
17 medication without a drug test that takes two to three
18 days to get the results back from an outpatient
19 office. He commented that insurance companies most
20 likely will not pay for that because of the need for
21 prior authorizations, which would be \$50 to \$100 out
22 of the patient's pocket. He also mentioned his
23 concern with physicians not treating people with acute
24 pain because of this law.

25 Dr. Seid stated the Department of Health leans on

1 the Department of State to help in determining what
2 appropriate care was for individual physicians. She
3 noted that opioid prescribing was a little bit of an
4 art and, as a regulator who was representing her own
5 opinion, would want less regulation to allow more of
6 the art for the individual prescriber. She commented
7 that the terrible practice stuff should be the
8 decision of the Board who are made up of the majority
9 of practicing people in the field and could better
10 determine what would be correct standard of care.

11 Chairman Litman stated he would be looking to see
12 if the provider documented checking the Prescription
13 Drug Monitoring Program (PDMP), obtained a baseline
14 urine drug screen (UDS), and documented that they
15 prescribed for 72 hours to cover the immediate issue,
16 which was consistent with what an emergency department
17 or an urgent care would do, when hearing an acute case
18 before the Board.

19 Dr. Swallow questioned whether there was language
20 in the act that addresses a transfer of a patient from
21 one practice to another and whether they are to be
22 approached as a new patient who would then be subject
23 to a test.

24 Dr. Poggi commented that physicians should be
25 allowed to do the job they were highly trained to do

1 and not be handcuffed by regulations. He suggested
2 going after the pill mill people and noted his concern
3 of the time this takes away from patient care every
4 day.

5 Chairman Litman noted the need for guidelines
6 concerning acute patients and chronic patients who are
7 going across the street to the pill mill and then
8 going to other physicians for acute issues.

9 Dr. Seid stated she will note the Board's
10 concerns regarding a specific monitoring benchmark and
11 the transferring of patients from one practice to
12 another during pain management to DOH.

13 Acting Commissioner Johnson suggested the Board
14 be more specific regarding benchmarks and the transfer
15 of patients to help the folks who are writing this
16 understand the specific area they need to focus on.

17 Dr. Seid questioned what comments the Board would
18 like her to take back to the Department of Health, as
19 they have 90 days to promulgate temporary regulations.

20 Chairman Litman noted the need to define
21 transitions of care and timelines. He stated a
22 patient may see another provider in less than 24
23 hours, which does not show up on the PDMP, so there
24 was the need for a timeline for transitions. He noted
25 the need to have means of documentation for what was

1 adequate for acute and the need for a standard of care
2 for maintenance of care for chronic patients.

3 Mr. Suter referred to Senate Bill 857 regarding
4 telemedicine amendments. He stated genetic counselors
5 were added. He also mentioned that participating
6 network changed, and the definition is now "a health
7 care provider that has a network participation
8 agreement with an insurer," which clarifies that it
9 was not establishing a separate standard from an in-
10 person encounter.

11 Acting Commissioner Johnson mentioned the
12 Telehealth Advisory Committee continues to meet on a
13 quarterly basis and encouraged the Board to review the
14 proposed legislation and put comments on the record.

15 Mr. Suter referred to 16A-5335 regarding the
16 proposed licensure qualifications annex.

17 Ms. Walter mentioned prior discussion at the last
18 meeting concerning the definition of approved
19 internship defined in the annex as a PGY-1 year
20 approved by the American Osteopathic Association (AOA)
21 or PGY-1 year in a designated osteopathic position in
22 a training program accredited by the Accreditation
23 Council for Graduate Medical Education (ACGME) that
24 had received osteopathic recognition or a PGY-1 year
25 in an ACGME-accredited program that includes at least

1 24 weeks of rotations in internal medicine, general
2 surgery, pediatrics, family medicine, emergency
3 medicine, and obstetrics/gynecology.

4 Ms. Walter stated less than 50 percent of
5 osteopathic programs are currently recognized by
6 ACGME. She noted that the merger was supposed to
7 occur on July 1, 2020, and a large chunk of approved
8 internships would be taken out.

9 Dr. Bulger referred to the last sentence under
10 the ACGME residency, commenting that he does not think
11 what was agreed to some years ago nor what was talked
12 about in prior discussions as being applicable. He
13 stated trainees can get licensed in Pennsylvania once
14 they finish their approved residency, which was the
15 recommendation from the Federation of State Medical
16 Boards.

17 Dr. Bulger noted that he would support, under the
18 internship, keeping it the way it is. He commented
19 that the last sentence was not what was agreed to,
20 everything else in there was spot on.

21 Dr. Tursi noted being the one who originally
22 drafted it, where the intention was not to restrict
23 people who come into Pennsylvania. He stated people
24 who wanted to get a license after one year had to show
25 appropriate training in this rotating equivalence-type

1 thing, which was the way it was originally worded.

2 Dr. Tursi stated overall acceptance of DO
3 programs into the ACGME was now approaching 88
4 percent. He commented that DO programs being accepted
5 by ACGME at 50 percent was an inaccurate statement
6 because most programs who have asked to be accepted by
7 ACGME have gotten the acceptance and accreditation by
8 ACGME. He noted that Resolution 42 being approved
9 makes most of this a moot point anyway.

10 Chairman Litman suggested considering looking at
11 two years of completion for graduates as of June 30,
12 2020, and onward to meet the requirements as far as
13 applying for licensure, where more people may apply to
14 Pennsylvania and come back.

15 Dr. Bulger commented that the year was not
16 sacrosanct in what Dr. Tursi originally wrote,
17 referring to what was written in the original
18 guidelines. He suggested rewording some of this so
19 that it was not that you have to do everything in a
20 year.

21 Dr. Bulger suggested deleting "or a PGY-1 year in
22 an the Accreditation Council for Continuing Medical
23 Education (ACCME)" and state "or an ACGME-accredited
24 program that includes at least 24 weeks of rotations
25 in internal medicine, general surgery, pediatrics,

1 family medicine, emergency medicine, and
2 obstetrics/gynecology during the duration of their
3 training.”

4 Dr. Bulger referred to the approved residency
5 definition and § 25.241(4) for clarity regarding
6 requirements for licensure, successfully completed an
7 internship (by the definitions) or successfully
8 completed an approved residency.

9 Ms. Walter questioned whether removing PGY-1
10 year, approved by the AOA or training program
11 accredited by the ACGME was correct.

12 Dr. Bulger noted that to be fine as long as you
13 get rid of the first year because an AOA approved one,
14 if it earned osteopathic recognition, then it had
15 already got the stamp of approval and will not be
16 looked at. He stated individuals who do not have any
17 of those would have to show they did the curriculum,
18 which could be done in a minimum of a year.

19 Dr. Bulger stated all those things, whether it
20 was the AOA approved the PGY-1, got Resolution 42 in
21 2001 and all check the box for that first thing. He
22 noted osteopathic recognition of the internship, which
23 was the 48 percent of DOs going to be in an ACGME
24 residency. He noted that everybody else was going to
25 be there who are not in that 48 percent, and the way

1 they can get a license before finishing their
2 residency was do the curriculum at some point.

3 Chairman Litman stated approved internship would
4 be a one-year graduate of a medical education program
5 that had included those courses or osteopathic
6 recognized. He stated the bottom line was it makes it
7 competitive in the state and will solve some of the
8 communication issues to the applying graduate.

9 Mr. Suter will provide a written document and was
10 hopeful to get this moving after the next meeting.]

11 ***

12 Report of Board Chairman

13 [Randy G. Litman, D.O., Chairman, addressed issues
14 regarding state email accounts.

15 Acting Commissioner Johnson noted problems when
16 assigning temporary passwords to Board members. He
17 will have the IT contractor for the Bureau of
18 Professional and Occupational Affairs (BPOA) give
19 everyone a 60-day password and assist them after the
20 meeting.]

21 ***

22 Report of Vice Chair - No Report

23 ***

24 Report of Acting Commissioner

25 [K. Kalonji Johnson, Acting Commissioner, Bureau of

1 Professional and Occupational Affairs, discussed the
2 expansion of voicemail functionality for the
3 Pennsylvania Licensing System (PALS) with after-hours
4 functionality for applicants, licensees, and members
5 of the general public. He also noted expanding the
6 self-help functionality in the phone system in the
7 first quarter of 2020.]

8

9 Report of Department of Health

10 [Arlene G. Seid, M.D., M.P.H., Medical Director of
11 Quality Assurance, on behalf of Rachel Levine, M.D.,
12 Physician General/Secretary of Health, Department of
13 Health, stated outpatient visits associated with
14 influenza-like illness that have increased and
15 exceeded the state's epidemic threshold with 4,424
16 laboratory-confirmed influenza cases as of December 7,
17 2019. She cited 100 influenza-associated
18 hospitalizations and 6 influenza-associated deaths
19 have been reported to date.

20 Dr. Seid noted the Department of Health offers
21 free influenza vaccinations during the Pennsylvania
22 Farm Show January 4-11, 2020.

23 Dr. Seid addressed the Patient Test Results
24 Information Act/Act 112 of 2018. She stated the act
25 requires within the judgment of the entity performing

1 the diagnostic imaging services a significant
2 abnormality exists. She stated the entity performing
3 the diagnostic services shall directly notify the
4 patient or the patient's designee for providing notice
5 that the entity had completed a review of the test
6 performed on the patient and sent the results to the
7 health care practitioner who ordered the diagnostic
8 imaging test.

9 Dr. Seid noted that enforcement for non-reporting
10 will begin on December 23. She informed the Board
11 that the Department of Health only covers facilities
12 that are covered by the Health Care Facilities Act and
13 the Board may see individual practitioners who violate
14 this act.

15 Dr. Seid mentioned the completion of the
16 statewide Medication-Assisted Treatment (MAT) Summits.
17 She noted the Opioid Command Center, which officially
18 opened in 2008, was continuing to head the opioid
19 activities of the state.

20 Dr. Seid stated the Department of Health was
21 happy with the passage of Senate Bill 473, which
22 increases the sale age of tobacco to 21. She also
23 noted the passing of Senate Bill 314, which allows
24 global funding for health care facilities to allow the
25 time and finances to provide innovative care in an

1 effort to save rural hospitals.]

2 ***

3 Report of Acting Commissioner (Continued)

4 [K. Kalonji Johnson, Acting Commissioner, Bureau of
5 Professional and Occupational Affairs, addressed the
6 retooling to the Pennsylvania Licensing System (PALS)
7 website to make it more user-intuitive and publically
8 accessible. He mentioned the osteopathic medicine
9 navigator was implemented earlier last month. He
10 noted the addition of an FAQ and tips on improving the
11 process for applications and reducing processing
12 times.

13 Acting Commissioner Johnson noted improvements by
14 breaking down the application process into three
15 phases with the hope of eliminating confusion on the
16 front end.]

17 ***

18 Report of Board/Regulatory Counsel (Continued)

19 [Shana M. Walter, Esquire, Board Counsel, provided a
20 definition of internship as "a graduate medical
21 training program consisting of a minimum of one year
22 of training approved by the AOA or an ACGME-designated
23 osteopathic program or a graduate medical training
24 program that includes 24 weeks of rotations in
25 internal medicine, general surgery, pediatrics, family

1 medicine, emergency medicine, and obstetrics
2 gynecology.”

3 Mr. Hollinger clarified that someone who does not
4 do any of those from the internship have to complete
5 an approved residency. He also noted changing the
6 definition to an approved residency by taking out the
7 rotational requirement.]

8

9 [K. Kalonji Johnson, Acting Commissioner, Bureau of
10 Professional and Occupational Affairs, exited the
11 meeting at 11:11 a.m.]

12

13 [Pursuant to Section 708(a)(5) of the Sunshine Act, at
14 11:11 a.m. the Board entered into executive session
15 with Kenneth J. Suter, Esquire, Board Counsel, and
16 Shana M. Walter, Esquire, Board Counsel, for the
17 purpose of conducting quasi-judicial deliberations and
18 to receive legal advice from Board counsel. The Board
19 returned to open session at 11:30 a.m.]

20

21 MOTIONS

22 MR. SUTER:

23

The Board was in executive session. The
24 purpose of the executive session was to
25 discuss items 3, 4, 5, 6, 7, 12, 13, 14,

1 and 15 on the agenda, respectively. I
2 understand as a result of the executive
3 session, the Board will entertain some
4 motions.

5 The first motion is to approve the
6 Consent Agreement at Item No. 3 on the
7 agenda, which is File No. 18-53-006938.

8 DR. TURSI:

9 Move to accept.

10 DR. SWALLOW:

11 Second.

12 CHAIRMAN LITMAN:

13 All in favor?

14 [The motion carried. Dr. Mark, Dr. Poggi, and Dr.
15 Bulger recused themselves from deliberations and
16 voting on the motion. The Respondent's name is Robert
17 Leon Stremmel, D.O.]

18 ***

19 MR. SUTER:

20 The next one is Item No. 4 on the agenda
21 at File No. 19-53-002322.

22 I understand the Board will
23 entertain a motion to approve this.

24 CHAIRMAN LITMAN:

25 Motion to approve?

1 DR. SEID:

2 So moved.

3 DR. TURSI:

4 Second.

5 CHAIRMAN LITMAN:

6 All in favor?

7 [The motion carried. Dr. Mark, Dr. Poggi, and Dr.
8 Bulger recused themselves from deliberations and
9 voting on the motion. The Respondent's name is Edward
10 J. Cunningham.]

11 ***

12 MR. SUTER:

13 The next one is Item No. 5 on the agenda
14 at File No. 18-53-010888.

15 I understand the Board will
16 entertain a motion to approve this
17 consent agreement.

18 DR. TURSI:

19 So moved.

20 DR. SWALLOW:

21 Second.

22 CHAIRMAN LITMAN:

23 All in favor?

24 [The motion carried unanimously. The Respondent's
25 name is Julia B. Coleman, PA-C.]

1 So moved.

2 DR. SWALLOW:

3 Second.

4 CHAIRMAN LITMAN:

5 All in favor?

6 [The motion carried unanimously.]

7 ***

8 MR. SUTER:

9 The next one is Item No. 12 on the
10 agenda. It is the application of Monica
11 Mueller, LAT.

12 I understand the Board will approve
13 this application.

14 DR. TURSI:

15 So moved.

16 DR. SWALLOW:

17 Second.

18 CHAIRMAN LITMAN:

19 All in favor?

20 [The motion carried unanimously.]

21 ***

22 MR. SUTER:

23 Items 13 and 14 are reconsideration for
24 an Application for Registration as a
25 Supervising Physician by John A.

1 Guerriero, D.O.

2 I understand the Board will table
3 both of these reconsiderations once
4 again.

5 CHAIRMAN LITMAN:

6 Motion?

7 DR. SWALLOW:

8 Move to table.

9 DR. POGGI:

10 Second.

11 CHAIRMAN LITMAN:

12 All in favor?

13 [The motion carried unanimously.]

14 ***

15 MR. SUTER:

16 The last motion is for Item No. 15 on
17 the agenda. It is a Petition for
18 Exception of COMLEX Attempt Limit Policy
19 of Kethia Phelizor.

20 I understand the Board will
21 entertain a motion to approve this
22 petition.

23 DR. TURSI:

24 Move to approve.

25 DR. SEID:

1 Second.

2 CHAIRMAN LITMAN:

3 All in favor?

4 [The motion carried unanimously.]

5 ***

6 For The Board's Information/Discussion

7 DR. TURSI:

8 I make a motion for Dr. Litman as Chair,
9 Dr. Swallow as Vice Chair, and Dr. Mark
10 as Secretary.

11 CHAIRMAN LITMAN:

12 Second?

13 DR. POGGI:

14 Second.

15 MR. SUTER:

16 Are there any other nominations?

17 Anybody want to move the nominations be
18 closed?

19 DR. SEID:

20 I move the nominations be closed.

21 MR. SUTER:

22 Is there a second to that?

23 DR. POGGI:

24 Second.

25 MR. SUTER:

1 There is a second to that.

2 [The motion carried unanimously.]

3 ***

4 [Aaron Hollinger, Board Administrator, noted proposed
5 2021 Board meeting dates the second Wednesday of every
6 other month.]

7 ***

8 DR. TURSI:

9 I move we approve the 2021 meeting
10 dates.

11 DR. POGGI:

12 Second.

13 CHAIRMAN LITMAN:

14 All in favor?

15 [The motion carried unanimously.]

16 ***

17 [Randy G. Litman, D.O., Chairman, noted a couple of
18 letters regarding services that would be provided by
19 ACCME about information on continuing medical
20 education (CME). He explained that as an ACCME-
21 approved body, it would invite people of all
22 disciplines to be able to attend their programs and
23 receive CME credits. He referred to the draft report
24 from the Federation of State Medical Boards.

25 Mr. Suter noted the request from FSMB for the

1 Board's input on the report.

2 Dr. Seid questioned whether the cracking open of
3 a peer review session is a violation federal patient
4 safety and the noted the importance of making sure
5 they are not in violation of another federal statute
6 for peer review.

7 Dr. Seid noted that individuals in Pennsylvania
8 would have to report to the Department of Health and
9 suggested putting in a statement talking about
10 coordinating with the state Board or whoever licensed
11 the facility.

12 Mr. Suter referred to the FSMB draft regarding
13 who can report and what state Boards can do, where it
14 reads "state Medical Boards should have the ability to
15 levy fines against institutions for failing to report
16 instances of egregious conduct." He commented that he
17 had never seen that within this state Board where the
18 Board would levy anything against any case that is an
19 individual and it would not be applied.

20 Dr. Seid stated fining and sanctioning health
21 care facilities as outlined in the Health Care
22 Facilities Act is the Department of Health's
23 jurisdiction.

24 Dr. Tursi referred to line 932 of the report,
25 where it notes that state Boards should have a

1 specially trained patient liaison advocate on staff
2 and Dr. Tursi agrees.

3 Ms. Walter explained it as someone to assist the
4 person who complains about a doctor or facility go
5 through the Board complaint process.

6 ***
7 [John B. Bulger, D.O., exited the meeting at
8 11:41 a.m.]

9 ***
10 Mr. Suter noted that when an investigation is
11 done and it gets to the prosecution office, they work
12 cooperatively with the Department of Health who will
13 actually join investigations at that point if they see
14 facility violations. He noted this happens but not
15 from the Board itself.]

16 ***
17 [Randy G. Litman, D.O., Chairman, noted the next Board
18 meeting date is scheduled for February 12, 2020.

19 ***
20 [Christopher S. Poggi, D.O., exited the meeting at
21 11:47 a.m.]

22 ***
23 Adjournment
24 CHAIRMAN LITMAN:
25 Do I have a motion to adjourn?

1 DR. SEID:

2 I'll move.

3 DR. MARK:

4 Second.

5 [The motion carried unanimously.]

6 ***

7 [There being no further business, the State Board of
8 Osteopathic Medicine Meeting adjourned at 11:48 a.m.]

9 ***

10

11 CERTIFICATE

12

13 I hereby certify that the foregoing summary
14 minutes of the State Board of Osteopathic Medicine
15 meeting, was reduced to writing by me or under my
16 supervision, and that the minutes accurately summarize
17 the substance of the State Board of Osteopathic
18 Medicine meeting.

19

20



21

Evan Bingaman,

22

Minute Clerk

23

Sargent's Court Reporting

24

Service, Inc.

25

26

STATE BOARD OF OSTEOPATHIC MEDICINE
REFERENCE INDEX

December 11, 2019

TIME	AGENDA
9:31	Official Call to Order
9:31	Approval of Minutes
9:31	Report of Prosecutorial Division
9:40	Appointment - Kimberly Adams, Chief of Fiscal Management, Bureau of Finance and Operations Annual Budget Presentation
9:47	Report of Board/Regulatory Counsel
10:52	Report of Board Chairman
10:58	Report of Acting Commissioner
10:59	Report of Department of Health
11:08	Report of Acting Commissioner (Continued)
11:09	Report of Board/Regulatory Counsel (Continued)
11:11	Executive Session
11:30	Return to Open Session
11:30	Motions
11:34	For the Board's Information/Discussion
11:48	Adjournment