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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

State Board of Podiatry
October 21, 2020

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BOARD MEMBERS:

- Robert B. Weber, D.P.M., Chairman
- K. Kalonji Johnson, Commissioner, Bureau of Professional and Occupational Affairs
- Michael J. Paris, D.P.M., Vice Chairman
- Eric B. Greenberg, D.P.M., J.D., Secretary
- Melissa Haluszczak, Public Member
- Dia D. McCaughan, D.P.M. - Absent

BUREAU PERSONNEL:

- Kenneth J. Suter, Esquire, Board Counsel
- Christopher K. McNally, Esquire, Board Prosecution Liaison
- Paul J. Jarabeck, Esquire, Board Prosecutor
- Aaron Hollinger, Board Administrator
- Cynthia K. Montgomery, Esquire, Deputy Chief Counsel, Department of State
- Marc Farrell, Deputy Policy Director, Department of State
- Theodore Stauffer, Executive Secretary, Bureau of Professional and Occupational Affairs

ALSO PRESENT:

- Sabrina Minhas, D.P.M., Vice President, Pennsylvania Podiatric Medical Association
- Michael Davis, Executive Director, Pennsylvania Podiatric Medical Association
- John Mattiacci, D.P.M., Secretary, Pennsylvania Podiatric Medical Association

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 CHAIRMAN WEBER:

2 Since there is really no report per se,
3 could I have a motion to accept the
4 report of the prosecutors because there
5 was still a report?

6 DR. GREENBERG:

7 Motion to accept the report of the
8 prosecutors.

9 CHAIRMAN WEBER:

10 Second?

11 COMMISSIONER JOHNSON:

12 Second.

13 CHAIRMAN WEBER:

14 All in favor?

15 [The motion carried unanimously.]

16 ***

17 Appointment - Act 53 of 2020 List of Offenses Directly
18 Related to the Profession

19 [K. Kalonji Johnson, Commissioner, Bureau of
20 Professional and Occupational Affairs, addressed Act
21 53 of 2020 regarding the publication of the list of
22 criminal offenses under Act 53. He reported being
23 directed by state legislature to provide public forums
24 for business members of the regulated communities to
25 which the lists pertain.]

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

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

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 Falconio, D.P.M.

2 MS. HALUSZCZAK:

3 To grant an extension to John Falconio,
4 D.P.M. from December 21, 2020, to
5 midnight March 31, 2021, to complete his
6 CE requirements.

7 VICE CHAIRMAN PARIS:

8 Second. All in favor? Any nays?

9 [The motion carried unanimously.]

10 ***

11 For the Board's Information/Discussion - Board Meeting
12 Dates

13 [Aaron Hollinger, Board Administrator, informed
14 everyone the biennial renewal period has started and
15 can begin to renew their license now through December
16 31. He advised everyone to login to the system and
17 complete the renewal as soon as possible to avoid
18 discrepancies or delays with the application.

19 Mr. Hollinger also recommended everyone complete
20 the child abuse CE as soon as possible, so the
21 provider can forward information to the Board before
22 the license expires. He offered his assistance to
23 anyone with renewal questions, issues, or problems.]

24 ***

25 For the Board's Information/Discussion - Board Meeting

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 Marc Farrell, Deputy Policy Director, Department
2 of State, noted his attendance at the prior meeting
3 and believed the Board has given adequate and due
4 consideration to the stakeholders and the regulated
5 community. He stated there would still be an
6 opportunity in the regulatory process to continue to
7 voice objections, because the regulation must go to
8 the Legislative Oversight Committee and be approved by
9 the Independent Regulatory Review Commission.]

10 ***

11 [Eric B. Greenberg, D.P.M., J.D., Secretary, exited
12 the meeting at 1:27 p.m.]

13 ***

14 CHAIRMAN WEBER:

15 I would like to make a motion for 25/25.

16 MR. SUTER:

17 Is there a second to that motion?

18 COMMISSIONER JOHNSON:

19 Second.

20 VICE CHAIRMAN PARIS:

21 All in favor of the motion? Any nays?

22 [The motion carried. Dr. Paris opposed the motion.

23 Dr. Greenberg was recused from voting on the motion.]

24 ***

25 [The Board discussed the motion.]

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.]

1 Commissioner Johnson commended Board members for
2 allowing stakeholders the opportunity to voice their
3 feedback and concerns.

4 Chairman Weber believed that listening to both
5 sides again and taking a new vote was the right thing
6 to do. He thanked the Board and believed the Board
7 did the proper thing with reanalyzing the issue and
8 the re-vote.]

9 ***

10 Adjournment

11 VICE CHAIRMAN PARIS:

12 Could we have a motion to adjourn the
13 meeting?

14 CHAIRMAN WEBER:

15 I'll make the motion to adjourn.

16 MS. HALUSZCZAK:

17 Second

18 VICE CHAIRMAN PARIS:

19 All in favor?

20 [The motion carried unanimously.]

21 ***

22 [There being no further business, the State Board of
23 Podiatry Meeting adjourned at 1:35 p.m.]

24 ***

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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,

Minute Clerk

Sargent's Court Reporting
Service, Inc.

STATE BOARD OF PODIATRY
REFERENCE INDEX

October 21, 2020

	TIME	AGENDA
1		
2		
3		
4		
5		
6		
7		
8		
9	9:45	Executive Session
10	10:30	Return to Open Session
11		
12	10:32	Official Call to Order
13		
14	10:33	Approval of Minutes
15		
16	10:34	Introduction of Board Members
17		
18	10:35	Report of Prosecutorial Division
19		
20	10:41	Appointment - K. Kalonji Johnson,
21		Commissioner, Bureau of Professional
22		and Occupational Affairs
23		
24	11:03	Report of Board Counsel
25		
26	11:13	Report of Regulatory Counsel
27		
28	11:38	Report of Board Administrator
29		
30	11:39	For the Board's Information
31		
32	11:54	Report of Regulatory Counsel (cont.)
33		
34	1:31	Report of Commissioner
35		
36	1:35	Adjournment
37		
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