

BOARD OF PODIATRIC MEDICAL EXAMINERS

OPEN SESSION MEETING

MINUTES (AMENDED)

July 13, 2017

Room 106

The Public Session Meeting commenced at 1:09 PM, opened by Board President, Dr. Philip Cohen.

Board members attending were: Drs. Chattler, Friedman, and Umezurike. Consumer members present were Ms. Frona Kroopnick and Mr. Jay Boyar. Board member H. David Gottlieb, DPM was absent.

Board staff present: Eva Schwartz, Executive Director, Ari Elbaum, AAG, Board Counsel, Sheri Henderson, Deputy Executive Director, Elizabeth Amspacher, Licensing Coordinator, and Danielle Vallone, Board Investigator.

Representing DOH: Brandon Wright, Assistant Director for Health Care Occupations Board, Kristen Neville, Legislation.

Representing MPMA: Richard Bloch, Esq., Executive Director.

Guests present: Drs. LeBow, and Glazer.

COMAR 10.01.14.02.B:

Except in instances when a public body expressly invites public testimony, questions, comments, or other forms of public participation, or when public participation is otherwise authorized by law, a member of the public attending an open session may not participate in the session.

A. MINUTES:

1. Approval of minutes from June 8, 2017 Meeting

The minutes from the June 8, 2017 meeting were approved unanimously, as submitted.

B. OLD BUSINESS:

**1. Proposed Regulations defining what is required to prove 5 years of Practice for a Full License
COMAR 10.40.01.01**

The Board voted at the May meeting to propose a new regulation requiring an affidavit during the licensing process to prove five years of active practice immediately preceding the application for licensure, to be acceptable in lieu of the residency affidavit, if the applicant so chooses to apply via this route. The Board previously decided to hold the submission of these proposed regulations until after the proposed regulations for COMAR 10.40.01.05- Examination and Post- Graduate Training Qualifications were placed into effect. The Board will now move forward with these proposed regulations.

2. Proposed Regulation addressing Active podiatric practice- COMAR 10.40.01.02

The Board voted at the May meeting to propose a regulation to define active practice to be interpreted as requirement of an average 400 working hours of practicing podiatry per year, for consecutive five years. The Board previously decided to hold the submission of these proposed regulations until after the proposed regulations for COMAR 10.40.01.05- Examination and Post- Graduate Training Qualifications were placed into effect. The Board will now move forward with these proposed regulations.

3. COMAR 10.40.01.05 Examination and Post-Graduate Training- Effective July 3, 2017

The Board was informed that the change in COMAR 10.40.01.05- Examination and Post-Graduate Training requiring “satisfactory completion of two years in a podiatric post graduate medical education program in medicine and surgery” went into effect on July 3, 2017.

4. WORKPLAN - Regulatory Review & Evaluation Act: COMAR 10.37, 10.38, 10.40--10.44 - Subtitle 40 BOARD OF PODIATRIC MEDICAL EXAMINERS- Subcommittee Report

The regulatory review committee consisting of Board President, Phil Cohen, DPM, and Yvonne Umezurike, DPM, reported to the Board their recommendations for the regulations that fell under the current regulatory review and evaluation act. These regulations included COMAR 10.37, 10.38, and 10.40-10.44.

The Committee recommended changing COMAR 10.40.01- Examination and Post-Graduate Training to include the word “Jurisprudence” to identify the Jurisprudence Examination that all license applicants must take. The Board voted and agreed with this change.

The Committee also recommended changing COMAR 10.40.06- Advertising. The current COMAR states that an advertisement can not fail to state that the practitioner is a podiatrist. The Board discussed the possibility of podiatrists using terms like Foot and Ankle Specialist or Foot and Ankle Surgeon as well as podiatrists. The Board voted to amend the current regulations to allow licensees to use podiatrist, foot and ankle specialist or foot and ankle surgeon in advertisements. The vote passed with one Board member opposed.

5. PDMP Registration deadline Mandate update

The Board was made aware that only about 50% of podiatrists are currently registered for the mandatory PDMP program. The deadline to register, as made clear by the Board, was July 1, 2017. There currently are no penalties for not being registered but at a time in the future the Board may be able to start enforcing such.

C. NEW BUSINESS:

1. Federation of Podiatric Medical Boards updates on NC Dental Supreme Court Ruling

SB 517/HB 628, the bills to address the NC Dental Supreme Court decision for the Boards, passed and was signed into law. The bill requires that the Office of Administrative Hearings write regulations to describe how the review of decisions made by the Boards for anti-trust implications will be done. OAH has scheduled two meetings on the regulations, one on July 24 at 1:30p.m. and another in October.

2. Inquiry- Cool Sculpting

The Board reviewed an inquiry regarding performing body contouring and cool sculpting as a podiatrist. After consideration of the inquiry, the Board concluded that these procedures do not fall within the scope of practice for a podiatrist. Consequently, the inquiry does not fall within the statutory authority of the Board as the Board does not regulate cool sculpting or body contouring. The inquirer was referred to a private Healthcare Attorney for guidance on the topic.

3. Consideration for acceptance of email verification of licensure from another State via original source

The Board will accept state licensure affidavits for a license application via email if they are directly from the State Board and in circumstances where the State Board does not offer a hard copy option.

4. NPDB- Is It Reportable?

The Board received a copy of NPDB- Is it Reportable from the National Practitioner Data Bank for informational purposes.

5. FYI- Topics Quarterly Newsletter Volume 32/No. 2 Summer 2017 from Gordon, Feinblatt, Rothman, Hoffberger & Hollander, LLC

The Board received a copy of Topics Quarterly Newsletter Volume 32/No. 2 Summer 2017 from Gordon, Feinblatt, Rothman, Hoffberger & Hollander, LLC for informational purposes.

6. Mandatory open meeting act training, for designated Board member(s), by Board Chair

The Board was made aware that before October 1, 2017, a Board member must take an online training course regarding the Open Meetings Act.

7. Inquiry about the Opioid Prescribing Limits

The Board has been receiving numerous inquiries regarding PDMP prescribing limits. In lieu of this, the Board wanted to make podiatrists aware of the following:

OPIOID PRESCRIBING:

There are no laws in place in Maryland that explicitly limit the quantity, dose, or duration of opioids allowed to be prescribed by a provider in Maryland. However, you may have heard about a 'prescriber limits bill' from last legislative session, and the final law that was passed is found here: http://mgaleg.maryland.gov/2017RS/Chapters_noln/CH_570_hb1432t.pdf

The essence of the bill requires providers prescribing opioids to use the smallest necessary dose, with the smallest necessary quantity, for the shortest necessary duration for treatment of pain and to use evidence based clinical guidelines to drive prescribing practice. In addition, while professional organizations or Boards are free to establish their own policies or guidelines about appropriate prescribing, a good standard to look to is the CDC opioid prescribing guideline: <https://www.cdc.gov/drugoverdose/prescribing/guideline.html>

If you treat Maryland Medical Assistance (Medicaid) patients, you may want to be aware of the following new policies that went into place July 1, 2017 when prescribing opioids to MA

patients: <https://mmcp.dhmh.maryland.gov/healthchoice/opioid-dur-workgroup/Pages/medicaid-opioid-response.aspx>

Please note that none of the above mentioned items are regulated directly by the PDMP and thus defer to Medicaid, the Boards, and other regulatory entities on enforcement measures and policy.

PDMP DATA:

PDMP data are comprised of dispensing records as submitted by dispensers, like pharmacies and providers who dispense CDS from the practice setting. The act of prescribing does not require reporting to the PDMP. Data are populated from the dispensers when they dispense CDS prescriptions in Maryland. All dispensers have been required to report all CDS dispensings to us since 2013.

PDMP USE MANDATE:

Starting July 1, 2018 a PDMP use mandate will go into effect. This legal requirement will require that anyone starting a new course of treatment with an opioid or benzodiazepine medication check the PDMP prior to writing that first prescription and if the course of treatment lasts longer than 90 days, to check the PDMP at least every 90 days thereafter for the duration of the course of treatment. There are exemptions to this requirement for certain clinical or technical situations, and the PDMP will be working to communicate with providers about implementation of the use mandate over the coming year. The PDMP will be able to monitor adherence to this legal requirement by checking PDMP data of opioids / benzodiazepines reported as dispensed against audit logs of providers' checking of the PDMP data.

8. Review for eligibility for FULL License:

a. Tammer Elmarsafi, D.P.M.

The above identified licensure candidate was approved unanimously for the issuance of a full Maryland License.

With no further business, the Board meeting concluded at 2:28 PM.

Respectfully submitted,

Jay H. Boyar, Secretary/Treasurer

