

PHYSICIAN ASSISTANT POLICY COMMITTEE MINUTES
August 13, 2013

The meeting was called to order at approximately 1:45 p.m. on Tuesday, August 13, 2013.

Committee members present: Melissa Bowlby, PA-C; James Fry, P.A.-C; Sean Stiltner, D.O.; Anita Steinbergh, D.O.; Robert Flora, M.D.; Theresa Hoffmann, Pham. D.; and Eric Luckage.

Staff members present: Aaron Haslam, Sallie Debolt, and Cathy Hacker

Guests: Beth Adamson, Executive Director, OAPA.

I. Review of the July 09, 2013 minutes.

Ms. Bowlby began the meeting by requesting the approval of the minutes.

Dr. Steinbergh noted that on page 1 of the minutes under the review of the formulary review that Invokana actually causes the body to secrete glucose through the urine at a higher rate, rather than lower as indicated. She noted that Osymia is actually spelled Qsymia. Under the Special services requests Dr. Steinbergh asked that a sentence be added to reflect that Dr. Rank's application actually has submitted a plan with higher levels of supervision than previously approved by the Board.

Dr. Steinbergh moved to approve the minutes from the June 11, 2013 PAPC meeting with the above amendments. Mr. Luckage seconded the motion. All members voted aye. The motion carried.

II. Formulary Review

Ms. Hoffmann began the meeting with the discussion of the new format of the formulary. She stated that the new version of the formulary includes diabetes and genito urinary drugs with dual indication have been added to all categories that they relate to. She stated that she has removed several medications from the formulary that have been removed from the market and thus she has removed them from the formulary. Ms. Debolt asked Ms. Hoffmann to submit a list of these medications. Ms. Hoffmann stated that she also added medications to the formulary that are new to the market that the committee has not yet reviewed. Those medications show without any indicators as to whether or not they may or may not be prescribed by the physician assistants. The committee requested that for those medications that have not been reviewed that there be an indicator put on those lines to let the public know that they are currently under review.

Dr. Steinbergh requested that medications that are listed as NON PO be changed to other routes of administration. She further requested that diuretics NON PO be changed to parenteral and the language under Schedule II Analgesics the language needed to be restructured to be more legible. Under barbituates it was requested that the language be changed from *When prescribed as anticonvulsants these drugs must be physician initiated. For all other uses that are CTP holder may prescribe for other approved uses to read *When prescribed as anticonvulsants these drugs must be physician initiated. CTP holder may prescribe for all other uses.

Ms. Debolt requested that the language from 4730.411 Ohio Revised code be added to the Schedule II section of the formulary to better clarify the restrictions on prescribing these medications.

Dr. Steinbergh requested that Gadobutrol be moved to its own line of the formulary as it is the only radiopaque agent that is physician initiated.

Dr. Steinbergh moved to approve the formulary as amended. Dr. Flora seconded the motion. All members voted aye. The motion carried.

III. Rules Review

Ms. Debolt stated that the comments were as a result of the final rules review and were for informational purposes only.

Ms. Debolt stated that the Board had received a request to write rules regarding PA's and Do Not Resuscitate (DNR) orders. DNR statutes are through the Ohio Department of Health and it is not within the Medical Board's jurisdiction to write rules to define DNR.

Dr. Steinbergh moved to approve the removal of the appendix, and the prohibition in paragraph A of 4730-2-06 and to refer paragraph H to group 2 for their comments. Dr. Stiltner seconded the motion. All members voted aye. The motion carried.

The committee discussed the OAPA's request to amend the definition of the setting in which the supervising physician practices. They are requesting that the language that states a setting in which a physician routinely practices be changed to say a setting in which the supervising physician has oversight and control. It was noted that this would require a statute change and that there is no legislation currently pending for physician assistants. Dr. Steinbergh stated that PA's are dependent practitioners in the State of Ohio and if a physician does not practice at a site where the PA practices there is no oversight and control and that is independent practice. Mr. Fry stated that the Medical Board places too much focus on the urgent care settings and that this wording is for the physicians in remote areas of practice. He stated that the committee needed to create statutes that would allow PA's to practice in the remote areas of Ohio for primary practice where there is no physician coverage.

Dr. Steinbergh stated that while some states may allow PA's to practice independently, in Ohio they are dependent practitioners and are that way for urgent care and remote settings as well. Mr. Fry stated that when he worked in WV in the family practice specialty in remote areas he was in constant contact with a supervising physician. He further stated that PA's could not practice without physician supervision until after they had 2 years of experience. Physicians were still required to come to the PA's practice location at least twice a month to review charts. Dr. Steinbergh questioned what would happen if the PA was confronted with a case that the PA was not comfortable in handling and the physician was not onsite. Mr. Fry stated that he could contact any physician in the group via phone for assistance with difficult or emergent cases and could call an ambulance if necessary. Dr. Stiltner stated that military PA's and supervising physicians may never practice together at the same post and feels that what the OAPA is asking is appropriate.

Ms. Debolt informed the committee that rule 4730-1-03 has been amended to add paragraph (F). This is the language that allows PA's to provide medical assistant in the event of a disaster or emergency situation and not have to meet the requirements of section 4730. ORC. Instead the medical director of the disaster or emergency may supervise the medical care provided by the physician assistant.

Dr. Stiltner moved to approve the change to 4730-1-03(F). Mr. Fry Seconded the motion. All members voted aye. The motion carried.

The final discussion of the rules was a handout regarding language cleanup regarding the background checks. The language currently reads that we require a BCI&I check and the Attorney General office now refers to them as BCI checks. The current language also requires that the background check for out of state applicants be performed at their local law enforcement agency. Some applicants are finding this difficult as these agencies in other states do not want to perform these services for other states. So the language in the rule was changed to remove the need for them to be performed at the local law enforcement agency. In other states there are agencies other than law enforcement agencies that perform the fingerprinting for the background checks. There was discussion about whether or not other these agencies would require proper identification when someone presents to have their prints done. Mr. Haslam spoke with someone at the BCI during the meeting and was assured that all agencies that do fingerprinting require proper identification.

Dr. Steinbergh moved to approve the new language. Mr. Luckage seconded the motion. All members voted aye. The motion carried.

Dr. Steinbergh asked the committee where we were in eliminating the special services plan applications and beefing up the quality assurance plans for physicians. Ms. Adamson stated that there is legislation to be introduced in the upcoming weeks that would address this problem. Ms. Debolt stated that not having to process special services applications could free up staff and PAPC time to address other matters like increased oversight by the Board. Dr. Steinbergh stated that the investigators could perform office visits to check the quality assurance and that the Board could start auditing practices.

Dr. Steinbergh noted that one of the comments in the rules hearing was regarding the length of time it took to change statutes/rules. Mr. Haslam stated that it was his goal to put a guide to the rules making process on the website in hopes of educating people on the process.

V. *New Business matters*

Dr. Steinbergh informed the committee that Mr. Zedaker had been appointed to the committee and that both he and Mr. Zaayer (another PAPC applicant) would receive letters soon.

The Physician Assistant Policy Committee meeting was adjourned by Ms. Bowlby at approximately 3:21 p.m. on Tuesday, August 13, 2013.

I hereby attest that these are the true and accurate minutes of the Physician Assistant Policy Committee of the State Medical Board of Ohio, meeting on August 13, 2013.

Melissa Bowlby, PA-C
Chair, PAPC

Copies of documents and/or materials referenced in the minutes of the Physician Assistant Policy Committee meeting are available at the Board offices.