# **VIRGINIA BOARD OF MEDICINE**

LEGISLATIVE COMMITTEE MINUTES – Virtual Meeting

Friday, May 21, 2021	Department of Health Professions Henrico, VA
CALL TO ORDER:	Mr. Marchese called the meeting of the Legislative Committee to order at 8:37 a.m.
ROLL CALL:	Ms. Opher called the roll; a quorum was established.
MEMBERS PRESENT:	Blanton Marchese, Vice-President, Chair Lori Conklin, MD, President James Arnold, DPM Amanda Barner, MD Joel Silverman, MD
MEMBERS ABSENT:	Ray Tuck, DC Ryan Williams, MD
STAFF PRESENT:	William L. Harp, MD, Executive Director Jennifer Deschenes, JD, Deputy Director for Discipline Colanthia Morton Opher, Deputy Director for Administration Michael Sobowale, LLM, Deputy Director for Licensing Barbara Matusiak, MD, Medical Review Coordinator David Brown, DHP, Agency Director Elaine Yeatts, DHP Senior Policy Analyst Erin Barrett, JD, Assistant Attorney General
OTHERS PRESENT:	Karin Addison Mark Hickman Cal Whitehead Tierra Langley Galina Varchena Abbot Granoff, MD Kassie Schroth Ali Faruk Jerry Canaan Jamie Lockhart Graham McMahon Michael Keverline Frank Cotter Christopher West Michaela she/her Valentina Vega, MSV Richard Grossman Kimberly Dyke-Harsley Ben Traynham Scott Castro

#### **EMERGENCY EGRESS INSTRUCTIONS**

Mr. Marchese provided the emergency egress instructions.

#### **APPROVAL OF MINUTES OF JANUARY 15, 2021**

Dr. Arnold moved to approve the meeting minutes of January 15, 2021 as presented. The motion was seconded by Dr. Conklin and carried unanimously.

#### ADOPTION OF AGENDA

Dr. Barner moved to accept the agenda as presented. The motion was seconded by Dr. Arnold and carried unanimously.

#### **PUBLIC COMMENT**

Frank Cotter, MD, Chairman, Virginia Ambulatory Surgery Association spoke in favor of the Board establishing an ad hoc committee to study the standard of care for eye surgeries in ambulatory surgery center and physician's offices.

Michael Keverline, MD, President, Virginia Society of Eye Physicians & Surgeons - spoke in favor of the Board establishing an ad hoc committee to study the standard of care for eye surgeries in ambulatory surgery center and physician's offices.

Abbot Granoff, MD – spoke in favor of the Board developing a guidance document on Benzodiazepines

Dora Muhammad, Congregation Engagement Director, Virginia Interfaith Center for Public Policy - spoke in favor of legislation, regulation, or a guidance document to require implicit bias training for all licensees.

Tierra Langley, Member of the Task Force with Virginia Interfaith Center for Public Policy spoke in favor of legislation, regulation, or a guidance document to require implicit bias training for all licensees.

Ali Faruk, Director of Public Policies with Families Forward Virginia spoke in favor of legislation, regulation, or a guidance document to require implicit bias training for all licensees.

Galina Varchena, Policy Director for NARAL Pro-Choice spoke in favor of legislation, regulation, or a guidance document to require implicit bias training for all licensees.

Kimberly Dyke-Harsley spoke in favor of legislation, regulation, or a guidance document to require implicit bias training for all licensees and evaluation after the training.

Graham McMahon, MD, President, Accreditation Council for Continuing Medical Education offered a brief synopsis of the continuing education tracking service ACCME can provide to the Board and the licensees.

The floor was closed for Public Comment at 9:17 a.m.

### DHP DIRECTOR'S REPORT

Dr. Brown provided an update on the efforts to address COVID, vaccine numbers and changes in the mask requirements. He also provided an overview of the work accomplished by the state and the agency on DEI and anticipates this will be on the next in-house board member training.

In response to Dr. Conklin's request to address with the Department of Health the suggestion to wait before reporting a false positive report until the second test results have been received, Dr. Brown asked for a summary addressing the issue and he will forward to the right people.

# EXECUTIVE DIRECTOR'S REPORT

Dr. Harp reminded the Committee of the expectation that Board of Medicine members are to continue serving until their successor has been named. The law governing the Board states that if a member moves from the Congressional District of appointment to another, the seat in the District of appointment becomes vacant. Dr. Walker has moved from the 9<sup>th</sup> to the 5<sup>th</sup>, so the 9<sup>th</sup> District seat is now considered vacant. He will be missed.

#### **NEW BUSINESS**

#### 1. Chart of Regulatory Actions

Ms. Yeatts reviewed the Board's regulatory activity as of January 14, 2021. This report was for informational purposes only and did not require any action.

2. Report of the 2021 General Assembly

Ms. Yeatts reviewed the proposed legislation in the 2021 Session and highlighted those below (active links)

- <u>HB 1737</u> Nurse practitioners; practice without a practice agreement.
- HB 1747 Clinical nurse specialist; licensure of nurse practitioners as specialists, etc.
- HB 1769 Health care providers, certain; licensure or certification by endorsement.
- <u>HB 1795</u> Counseling, Board of; licensure of professional counselors without examination.
- HB 1817 Certified nurse midwives; practice.
- <u>HB 1913</u> Career fatigue and wellness in certain health care providers; programs to address, civil immunity.
- <u>HB 1953</u> Licensed certified midwives; definition of practice, licensure, report.
- <u>HB 1959</u> Medication abandonment and increasing patient medication adherence; options for reducing rates.
- <u>HB 1987</u> Telemedicine.
- <u>HB 1988</u> Board of Pharmacy; pharmaceutical processors; processing and dispensing cannabis oil.

- <u>HB 2005</u> Disposition of the remains of a decedent; persons to make arrangements for funeral and disposition.
- <u>HB 2039</u> Practice as a physician assistant.
- HB 2044 Naturopathic doctors; license required.
- <u>HB 2061</u> Virginia Immunization Information System; health care entities; required participation.
- HB 2079 Pharmacists; initiation of treatment; certain drugs and devices.
- HB 2220 Surgical technologist; certification; use of title.
- <u>HB 2259</u> Professions and occupations; licensure by Governor.
- <u>HB 2272</u> Department of Health Professions; naturopathic doctors.
- <u>HJ 531</u> Study; Joint Commission on Health Care.
- <u>SB 1107</u> Medical malpractice; limitation on recovery.
- <u>SB 1178</u> Genetic counseling; conscience clause.
- **SB 1187** Department of Health Professions; practice of physical therapy.
- <u>SB 1189</u> Licensure of occupational therapists; Occupational Therapy Interjurisdictional Licensure Compact.
- <u>SB 1192</u> Department of Health Professions; naturopathic doctors.

After the presentation, Ms. Yeatts responded to a Committee member who asked the rationale behind the bill to allow the Governor to overrule the Board. Ms. Yeatts stated she is unable to accurately reflect the reason behind this bill.

# 3. Reconsideration of Interstate Medical Licensure Compact

Mr. Marchese noted that the DHP Telemedicine Workgroup that met August 5, 2019 suggested that the Board take a fresh look at the Interstate Medical Licensure Compact (Compact). Mr. Marchese provided some history about the Compact and said there are currently 29 member states plus the District of Columbia and Guam. The Compact originated in response to calls for license portability as well as some issues at the national level. The purpose of the Compact is to facilitate physicians practicing across state lines. The way the Compact is written, licensure is left up to the state. The structure of the Compact is dissimilar to the Nursing Compact which allows nurses to cross state lines to work. The Board of Medicine decided in 2016 to try a licensure by endorsement pathway instead of joining the Compact at that time. There are some components of the Compact that are in conflict with the Code of Virginia, including reporting complaints to the Compact before they have been thoroughly investigated.

Dr. Harp pointed the Committee to page 34 of the agenda packet and stated that the average number of licenses obtained per applicant for 2018 and 2019 was 3%, but in 2020 it dropped to 1.6%. Given the pandemic and the wish to practice telemedicine across state lines, one would think that the average number of licenses per physician would have increased in 2020. He stated that the Compact was designed for the cream of the crop – many years of practice, no disciplinary history, board certified, etc. He noted that the licensure by endorsement pathway has similar requirements and has done what the Board expected it to do, to provide an expeditious pathway and save money for applicants applying to Virginia.

Additionally, Dr. Harp referred to HJ 531 that asks the Joint Commission on Health Care to study the advantages and disadvantages of Virginia participating in the Compact.

Dr. Conklin said that she would support sending a recommendation to the Full Board to again vote "no" on Virginia joining the Compact, since the Board already has a pathway that is expeditious, more economically feasible, and maintains Board oversight.

Dr. Harp asked Ms. Yeatts if, in light of the study to be conducted by the Joint Commission on Health Care this year, would it be necessary to send a letter to the Commission stating that the Board will cooperate and provide information as needed.

Ms. Yeatts advised that she can see both sides of this issue. Communicating to the Commission in 2021, that the Board again affirms its position might be beneficial to the work of the Commission. She also mentioned that there are members of the General Assembly who think that the Board is acting for its own self-preservation by not affirming the Compact.

After discussion about what could serve as a rationale for its decision, Dr. Harp advised that he would draft a document to include history and statistics for review by counsel, appropriate Board members, and staff for presentation to the Full Board.

#### 4. Continuing Education on Human Trafficking.

Dr. Conklin advised that, in order to renew her Texas license, she was required to complete 1 hour of continuing education in human trafficking. She said that human trafficking encompasses not only the sex trade but other occupational endeavors as well. People who come across the border are at higher risk for being exploited. She stated that prior to this training, as a physician who interviews patients prior to surgery, she would not have known how to recognize a victim of human trafficking. She then noted that, according to the Institute for Human Trafficking in Fairfax, over 25 million Americans are victims of human trafficking. Virginia ranks 6<sup>th</sup> in the nation in open cases of trafficking. More incredibly, she said that the human trade business makes more profit each year than Apple, Microsoft, Samsung and Exxon combined.

Dr. Conklin said if the Board is unable to make this training a requirement, can the Board make this information available to the licensees by posting the course information on the website? She added that it would be preferable to require an hour every biennium, but even a one-time requirement would suffice since it is a well-known problem in the Commonwealth.

After discussion, the Committee agreed that it would be acceptable to add it as a one-time requirement, understanding that it would require an action by the General Assembly with an amendment to the regulations.

Ms. Yeatts advised that this Board does not have the authority in the Code to set an annual requirement for continuing education. She agreed that this is a worthy endeavor, but thinks the best alternative is to add educational resources to the Board Briefs and the Board's webpage. Dr. Harp agreed that placing these in the Board Briefs and on the website with a link to the appropriate courses is the best avenue to take.

Ms. Deschenes stated the Board was asked to mandate continuing education (CE) on this topic previously, and it respectfully declined. Many organizations, agencies and entities have

important information to disseminate and occasionally ask the Board to create a CE requirement for Board licensees. Mandatory CE on multiple topics can overwhelm licensees. The Board's stance on continuing education has been that licensees know best which CE will

benefit them in their practice, thereby ensuring that their practice will be safer for the citizens of the Commonwealth. She also agreed that the Board Briefs, which are going directly to practitioners' mailboxes, will make it easier them to access the educational resources.

Mr. Marchese confirmed the consensus of the members that placing an article in the Board Briefs is the action to take with the hope that it gains some attention and that practitioners will take the initiative to read it.

#### ANNOUNCEMENTS

No Announcements.

#### NEXT MEETING

May 21, 2021

#### ADJOURNEMENT

With no other business to conduct, the meeting adjourned at 9:56 a.m.

Blanton Marchese Vice-President, Chair William L. Harp, MD Executive Director

Colanthia Morton Opher Recording Secretary