

Glossary of Terms

A

Active License: Licensee may practice medicine, osteopathic medicine, or podiatry in Virginia.

Administrative Proceeding: Pursuant to the Virginia law, an informal conference or formal hearing in order to adjudicate a matter before the Board. (See §§ 2.2-4019 and 2.2-4020, and Chapter 29 of Title 54 of the Code of Virginia).

Admitting Privileges: The level of privilege that allows the licensee to admit patients under his or her care at that particular hospital.

Assistance: If you have questions or comments, contact us at info@vahealthprovider.com

B

Board Certified: Licensee has met the requirements for certification as defined by the American Board of Medical Specialties (AMBS), the Bureau of Osteopathic Specialists of the American Osteopathic Association (AOA), the American Board of Multiple Specialties in Podiatry (ABMSP), or the Council on Podiatric Medical Education of the American Podiatric Medical Association. Certification status can be checked on medical doctors and doctors of osteopathy through the ABMS website www.abms.org "Who's Certified" or verbal verification is available through the ABMS toll-free telephone service, 1-866-ASK-ABMS. The AOA lists doctors of osteopathy that have attained certification. If you wish to contact the AOA you can visit their website: www.osteopathic.org or call them at 800-621-1773. The Council on Podiatric Medical Education of the American Podiatric Medical Association recognizes board certification from the American Board of Podiatric Surgery and the American Board of Podiatric Orthopedics and Primary Podiatric Medicine. You can contact the American Board of Podiatric Orthopedics and Primary Podiatric Medicine at their website www.abpoppm.org or at 310-891-0100 to find out if a podiatrist is certified. Certification status can be checked on podiatrists through the American Board of Multiple Specialties in Podiatry online at www.abmsp.org or if you wish verbal confirmation, call 1-888-852-1422. The ABMSP offers this service free of charge.

C

Conclusions of Law: A determination by the Board about whether a practitioner violated the law and/or regulation.

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Continuing Education: The additional training the licensee pursues. TYPE I (accredited, sponsored activities) and TYPE II (self-study, teaching, non-approved courses, presentations, conferences). Beginning with 2002 renewals, 60 hours are required. Thirty of those hours must be TYPE I.

D

Data Collection in Progress: This message will appear under sections of recently required information. By regulation, doctors have thirty days to provide requested information.

Data Entry In Progress: This message will appear when a doctor has submitted his information to the Board via a paper questionnaire. Upon completion of data entry, a verification summary is then sent to the doctor to confirm his information was entered correctly. If the doctor does not notify the Board of any revisions within fourteen days, the information will automatically be available on the website.

E

Expired: Status of license when it is no longer valid for use.

F

Feedback: The Virginia Board of Medicine is interested in what you think of the website. Please e-mail your comments to us at info@vahealthprovider.com

Felony: A criminal offense punishable with death or confinement in a state correctional facility.

Fellowship: Medical study program with specific training usually within the doctor's chosen field of specialty.

Findings of Fact: The facts as determined by the Board pursuant to the evidence and testimony presented at the administrative proceeding or as agreed to in a consent order.

Formal Hearing: A "trial-like" proceeding at which the Board receives evidence and testimony regarding allegations of possible violations (See §§ 2.2-4020 and 54.1-2920 of the Code for Virginia). The practitioner may or may not appear at the hearing.

H

Help: For Help with the website - info@vahealthprovider.com

Hospital Affiliations: Any type of relationship a licensee has with a hospital either as an employee, independent contractor, or via type of privilege, not limited to but including Courtesy, Locum tenens, Admitting, Emeritus, Honorary, Temporary, etc. The definition of the various categories of privilege varies from hospital to hospital.

I

Inactive License: Licensee may not practice medicine, osteopathic medicine, or podiatry in Virginia. Licensee pays a reduced renewal fee; however, the licensee is exempt from complying with the Continuing Education requirements

Informal conference: A fact-finding meeting between an Informal Conference Committee of the

Board and a practitioner regarding allegations made by the Board. (See §§ [2.2-4019](#) and 54.1-2400 (10) of the Code of Virginia). The practitioner may or may not actually appear before the Committee.

Insurance Plans/Managed Care Plans: Doctors now have the option of listing up to ten insurance plans/managed care plans they accept or participate in. You may wish to check with your doctor and Insurance Plan/Managed Care Plan to ensure your doctor is a participating provider.

Internship: Former requirement for additional training after the completion of medical school. This additional training is now included as a post-graduate year of training (residency).

J

Judgment: In the context of a malpractice claim, a judgment is an award by a court, with or without a jury, to the plaintiff, in response to a lawsuit.

L

Law: Laws for the Physician Profile System are found in the *Code of Virginia* as follows:

§54.1-2910.1. Certain data required.

A. The Board of Medicine shall require all doctors of medicine, osteopathy and podiatry to report and shall make available the following information:

1. The names of the schools of medicine, osteopathy, or podiatry and the years of graduation;
2. Any graduate medical, osteopathic, or podiatric education at any institution approved by the Accreditation Council for Graduation Medical Education, the American Osteopathic Association or the Council on Podiatric Medical Education;
3. Any specialty board certification as approved by the American Board of Medical Specialties, the Bureau of Osteopathic Specialists of the American Osteopathic Association, the American Board of Multiple Specialties in Podiatry, or the Council on Podiatric Medical Education of the American Podiatric Medical Association;
4. The number of years in active, clinical practice as specified by regulations of the Board;
5. Any hospital affiliations;
6. Any appointments, within the most recent 10-year period, of the doctor to the faculty of a school of medicine, osteopathy or podiatry and any publications in peer-reviewed literature within the most recent five-year period and as specified by regulations of the Board;
7. The location and telephone number of any primary and secondary practice settings and the approximate percentage of the doctor's time spent practicing in each setting. For the sole purpose of expedited dissemination of information about a public health emergency, the doctor shall also provide to the Board any e-mail address or facsimile number; however, such e-mail address or

facsimile number shall not be published on the profile database and shall not be released or made available for any other purpose;

8. The access to any translating service provided to the primary and secondary practice settings of the doctor;

9. The status of the doctor's participation in the Virginia Medicaid Program;

10. Any final disciplinary or other action required to be reported to the Board by health care institutions, other practitioners, insurance companies, health maintenance organizations, and professional organizations pursuant to §§ 54.1-2400.6, 54.1-2908, and 54.1-2909 that results in a suspension or revocation of privileges or the termination of employment or a final order of the Board relating to disciplinary action;

11. Conviction of any felony; and

12. Other information related to the competency of doctors of medicine, osteopathy, and podiatry, as specified in the regulations of the Board.

B. In addition, the Board shall provide for voluntary reporting of insurance plans accepted and managed care plans in which the doctor participates.

C. The Board shall promulgate regulations to implement the provisions of this section, including, but not limited to, the release, upon request from a consumer, of such information relating to a specific doctor. The Board's regulations shall provide for reports to include all medical malpractice judgments and medical malpractice settlements of more than \$10,000 within the most recent 10-year period in categories indicating the level of significance of each award or settlement; however, the specific numeric values of reported paid claims shall not be released in any individually identifiable manner under any circumstances. Notwithstanding this subsection, a licensee shall report a medical malpractice judgment or medical malpractice settlement of less than \$10,000 if any other medical malpractice judgment or medical malpractice settlement has been paid by or for the licensee within the preceding 12 months.

D. This section shall not apply to any person licensed pursuant to §§ 54.1-2928.1, 54.1-2933.1, 54.1-2936, and 54.1-2937 or to any person holding an inactive license to practice medicine, osteopathy, or podiatry.

(1998, c. 744; 1999, c. 573; 2000, c. 199; 2001, c. 199; 2001, Sp. Sess. I, c. 5; 2002, c. 38; 2004, cc. 64, 703; 2007, c. 861; 2008, c. 479.)

Licensee: A person who meets the requirements to have a license in the State of Virginia

M

Medicare Participating Provider: A licensee who contractually accepts the participating provider fee schedule.

N

Notices or Statement of Particulars: A "Notice and/or "Statement of Particulars" contains a statement of charges that have not been proven. The Board will meet with the named practitioner to discuss these charges and make a decision, or settle the charges with a consent order. After the meeting, the Board may decide to exonerate the practitioner or dismiss the charges. Or, the Board may decide that some or all of the charges are proven and a violation of law or regulation occurred. If the evidence supports a violation, the Board may take appropriate action against the license of the practitioner. Until the Board issues a decision (by letter, order or consent order) that contains findings about these charges, they are not proven.

O

Optional Data Elements: Not required by law or regulations however, the physician has the option of including these elements in his profile. These elements include:

- Continuing Education
- Days of Week at Practice Locations
- Email Address
- Fax number at Practice Locations
- Honors and Awards
- Maiden name
- Medicare participation
- Website Address

Order: The document issued by the Board of Medicine indicating the Board's decision that the practitioner, as a matter of past or present fact, is or is not in violation of law or regulation. Typically, an order resolves the allegations in the Notice, and contains findings of fact and conclusions of law. It may impose a sanction or require some action by the practitioner. In some cases, the Board's decision is to dismiss the allegations in the Notice and such a decision is usually stated in a letter. "Order" also applies to "Consent Orders" which are agreed to by the practitioner, often without a meeting with the Board. Orders and letters containing the Board's resolution of allegations are public documents and copies are available.

P

Paid Claim: In the context of malpractice, a paid claim is a payment made to a person in response to a claim. It may be in the form of a "judgment" or "settlement."

Peer-Reviewed Literature: A journal or publication whose articles are reviewed and selected by an editorial board comprised of individuals having attained similar certification, education, training, and experience.

Practice Address: A location where the licensee engages in practice of medicine, osteopathic medicine, or podiatry regardless if patients are seen. Practitioners may designate a primary practice address and additional practice addresses.

Practitioner Has Not Provided Information: This message appears when a doctor has not yet completed his profile. By regulation, doctors have thirty days from the date of request from the Board to provide the requested information.

Probation: A status whereby a practitioner maintains his license but must comply with the terms and conditions required by the Board. The conditions may restrict the practice.

R

Regulation: Rules adopted by the Board to implement the Law. Regulations pertaining to the Physician Profile are:

18VAC85-20-280. Required information.

A. In compliance with requirements of [§54.1-2910.1](#) of the Code of Virginia, a doctor of medicine, osteopathic medicine, or podiatry licensed by the board shall provide, upon initial request or whenever there is a change in the information that has been entered on the profile, the following information within 30 days:

1. The address and telephone number of the primary practice setting and all secondary practice settings with the percentage of time spent at each location;
2. Names of medical, osteopathic or podiatry schools and graduate medical or podiatric education programs attended with dates of graduation or completion of training;
3. Names and dates of specialty board certification, if any, as approved by the American Board of Medical Specialties, the Bureau of Osteopathic Specialists of the American Osteopathic Association or the Council on Podiatric Medical Education of the American Podiatric Medical Association;
4. Number of years in active, clinical practice in the United States or Canada following completion of medical or podiatric training and the number of years, if any, in active, clinical practice outside the United States or Canada;
5. The specialty, if any, in which the physician or podiatrist practices;
6. Names of hospitals with which the physician or podiatrist is affiliated;
7. Appointments within the past 10 years to medical or podiatry school faculties with the years of service and academic rank;
8. Publications, not to exceed 10 in number, in peer-reviewed literature within the most recent five-year period;
9. Whether there is access to translating services for non-English speaking patients at the primary and secondary practice settings and which, if any, foreign languages are spoken in the practice;
10. Whether the physician or podiatrist participates in the Virginia Medicaid Program and whether he is accepting new Medicaid patients;
11. A report on felony convictions including the date of the conviction, the nature of the conviction, the jurisdiction in which the conviction occurred, and the sentence imposed, if any;

12. Final orders of any regulatory board of another jurisdiction that result in the denial, probation, revocation, suspension, or restriction of any license or that results in the reprimand or censure of any license or the voluntary surrender of a license while under investigation in a state other than Virginia while under investigation, as well as any disciplinary action taken by a federal health institution or federal agency; and

13. Any final disciplinary or other action required to be reported to the board by health care institutions, other practitioners, insurance companies, health maintenance organizations, and professional organizations pursuant to §§[54.1-2400.6](#), [54.1-2908](#), and [54.1-2909](#) that results in a suspension or revocation of privileges or the termination of employment.

B. Adjudicated notices and final orders or decision documents, subject to s [54.1-2400.2](#) F of the Code of Virginia, shall be made available on the profile. Information shall be posted indicating the availability of unadjudicated notices and of orders that have not yet become final.

C. For the sole purpose of expediting dissemination of information about a public health emergency, an email address or facsimile number shall be provided, if available. Such addresses or numbers shall not be published on the profile and shall not be released or made available for any other purpose.

18VAC85-20-285. Voluntary information.

A. The doctor may provide names of insurance plans accepted or managed care plans in which he participates.

B. The doctor may provide additional information on hours of continuing education earned, subspecialties obtained, honors or awards received.

18VAC85-20-290. Reporting of malpractice paid claims.

A. In compliance with requirements of §[54.1-2910.1](#) of the Code of Virginia, a doctor of medicine, osteopathic medicine, or podiatry licensed by the board shall report all medical malpractice judgments and settlements of \$10,000 or more in the most recent 10-year period within 30 days of the initial payment. A doctor shall report a medical malpractice judgment or settlement of less than \$10,000 if any other medical malpractice judgment or settlement has been paid by or for the licensee within the preceding 12 months. Each report of a settlement or judgment shall indicate:

1. The year the judgment or settlement was paid.
2. The specialty in which the doctor was practicing at the time the incident occurred that resulted in the judgment or settlement.
3. The total amount of the judgment or settlement in United States dollars.
4. The city, state, and country in which the judgment or settlement occurred.

B. The board shall not release individually identifiable numeric values of reported judgments or settlements but shall use the information provided to determine the relative frequency of judgments or settlements described in terms of the number of doctors in each specialty and the percentage with malpractice judgments and settlements within the most recent 10-year period. The statistical methodology used will include any specialty with more than 10 judgments or settlements. For each specialty with more than 10 judgments or settlements, the top 16% of the judgments or settlements will be displayed as above average payments, the next 68% of the

judgments or settlements will be displayed as average payments, and the last 16% of the judgments or settlements will be displayed as below average payments.

C. For purposes of reporting required under this section, medical malpractice judgment and medical malpractice settlement shall have the meanings ascribed in § [54.1-2900](#) of the Code of Virginia. A medical malpractice judgment or settlement shall include:

1. A lump sum payment or the first payment of multiple payments;
2. A payment made from personal funds;
3. A payment on behalf of a doctor of medicine, osteopathic medicine, or podiatry by a corporation or entity comprised solely of that doctor of medicine, osteopathic medicine, or podiatry; or
4. A payment on behalf of a doctor of medicine, osteopathic medicine or podiatry named in the claim where that doctor is dismissed as a condition of, or in consideration of the settlement, judgment or release. If a doctor is dismissed independently of the settlement, judgment or release, then the payment is not reportable.

18VAC85-20-300. Non-compliance or falsification of profile.

A. The failure to provide the information required by 18 VAC 85-20-280 and by 18 VAC 85-20-290 within 30 days of the request for information by the board or within 30 days of a change in the information on the profile may constitute unprofessional conduct and may subject the licensee to disciplinary action by the board.

B. Intentionally providing false information to the board for the practitioner profile system shall constitute unprofessional conduct and shall subject the licensee to disciplinary action by the board.

Residency: Extended postgraduate training usually in relation to establishing a specialty field of medical practice.

Revocation: The loss of licensure. A practitioner's license is revoked for a minimum of one year before he is eligible to petition for reinstatement (except in the case of a mandatory revocation. See § 54.1-2917 of the Code of Virginia). The practitioner cannot practice during the period of revocation.

S

Self-designated practice area: The practice area in which the licensee declares a special interest; i.e., family practice, pediatrics, urology, etc. Board Certification is not a requirement for selecting a self-designated practice area.

Self-reported: The licensee has reported this information and assumes responsibility for its accuracy and completeness. It has not been verified or confirmed by the Board of Medicine; however the Board reserves the right to audit or investigate.

Settlement: In the context of a paid malpractice claim, a settlement is an agreement between the

parties in which payment is made to the plaintiff to resolve the claim without proceeding to court. A court may approve the settlement, but it is not an award of the court. A settlement does not necessarily mean that the practitioner admits liability for damages sustained by the plaintiff.

Surrendered: By consent order, a practitioner agrees to surrender the license and the Board accepts the surrender in lieu of further proceedings. The practitioner can then no longer lawfully practice. "Surrendered" can also mean the surrender of the privilege to renew the license. This privilege is available to a practitioner whose license has expired for less than two years. Upon acceptance by the Board, the practitioner cannot renew the license without approval of the Board. Permanent surrender of the license or the privilege to renew means the practitioner agrees never to seek to regain the license and the ability to practice in Virginia.

Suspension: A practitioner's license is suspended for a specified period of time. A practitioner cannot practice until the suspension has been stayed, lifted or terminated by the Board.