



**TENNESSEE COMMITTEE OF MEDICAL EXAMINERS'
COMMITTEE ON PHYSICIAN ASSISTANTS
Regular Committee Meeting**

Friday, July 12, 2019

MINUTES

The regular meeting of the Tennessee Committee of Medical Examiners' Committee on Physician Assistants (hereinafter, the Committee") was called to order at 9:00 a.m. in the Poplar Room, Ground Floor, Metro Center Complex, 665 Mainstream Drive, Nashville, Tennessee 37243 by Mr. Bret Reeves.

Members Present:

Bret Reeves PA-C
Greg Cain PA-C
Catherine Patterson PA-C
Barbara Thornton, Consumer Member
Donna Lynch PA-C
Gary Tauxe OPA-C
Christina Free PA-C

Staff Present:

Rene Saunders, MD, Medical Consultant
Angela Lawrence, Executive Director
Stacy Tarr, Administrative Director
Andrea Huddleston, JD, Deputy General Counsel
Orlanda Folston, Committee Administrator

ELECTION OF OFFICERS:

Marie Patterson nominated Brett Reeves for Chair. Barbara Thornton seconded the nomination. Mr. Reeves accepted the nomination. The motion passed.

Barbara Thornton nominated Gregory Cain for Secretary. Christina Free seconded the nomination. Mr. Cain accepted the nomination. The motion passed.

APPROVAL OF MINUTES

The Committee reviewed the minutes from the July 12, 2019 regular meeting. Ms Christina Free made a motion to approve the minutes as presented. Ms. Barbara Thornton seconded the motion. The motion passed.

CONTESTED CASE

State of Tennessee v. Martin, Marlaine, PA

Poplar Room

Administrative Law Judge: Mattielyn Williams

Counsel for State: Tracy Alcock

Counsel for Respondent: None

The Department submitted proof showing that the Respondent fraudulently wrote controlled substance prescriptions for herself (including opioids, benzodiazepines, and stimulants), signing the prescriptions with the signature of Lawrence C. Swan, MD, without Dr. Swan's permission or knowledge, during her employment at Covenant Family Medicine from in or around August, 2017 to approximately December, 2017. The Department also submitted proof that the Respondent engaged in unprofessional conduct including engaging in inappropriate conduct with patients during her employment with Ford Center for Pain Management and Anti-Aging from approximately February, 2018 to approximately March, 2019. After consideration by the Committee, the Respondent's physician assistant license was suspended. The respondent was assessed eight (8) type B civil penalties in the amount of one hundred dollars (\$100.00) each, for each violation of the law, for a total civil penalty of eight hundred dollars (\$800.00). Prior to reinstatement of Respondent's license, she must undergo an evaluation by Tennessee Medical Foundation and comply with any recommendations of said evaluation. If monitoring is recommended, Respondent must sign a TMF monitoring agreement and maintain 100% compliance with its terms for the duration of the agreement and any amendments thereto. After undergoing an evaluation by Tennessee Medical Foundation and complying with the recommendations, Respondent may appear before the Committee to seek removal of the suspension of her license. At the time suspension is lifted, the Committee may impose additional restrictions and/or discipline of Respondent's physician assistant license. Respondent must pay actual and reasonable costs of prosecuting this case to the extent allowed by law up to \$10,000.00. Respondent has one (1) year to pay civil penalties and costs. This is a formal disciplinary action and will be reported to the National Practitioner Databank.

APPLICANT INTERVIEWS

Bethany Buisson, PA – appeared before the Committee without legal representation. Ms. Buisson submitted an application for a state license as a PA. Per the Committee Consultant, Ms. Buisson's application indicated she had practiced without a license from 7/16 to 9/16. Ms. Buisson explained her job duties, which differed from the email previously sent. After discussion, Ms. Patterson motioned to grant the license. Christine Free seconded the motion. The motion passed.

Heather Smith, PA – appeared before the Committee without legal representation. Ms. Smith submitted an application for a state license as a PA. Ms. Smith is not currently NCCPA licensed. Ms. Smith previously appeared before the Committee in July 2018, resulting in a denial of her application. Since her last appearance, the State of California Physician Committee has extended her probation until March 2022 related to previous actions by the applicant. Dr. Michael Baron, Director of Tennessee Medical Foundation, addressed the Committee regarding Ms. Smith’s evaluation. Dr. Baron stated that treatment of any kind is not recommended due to the fact that Ms. Smith does not see a need for it. After consideration by the Committee, Brett Reeves made a motion to deny the application based on concern regarding Ms. Smith’s fitness to practice medicine and for the safety and welfare of the citizens of Tennessee. The motion was seconded by Greg Cain. The motion carried.

CONDUCT NEW BUSINESS

Ratification of PA Licenses

Ms. Patterson motioned to ratify the new and reinstated licenses. Mr. Reeves seconded the motion and it passed unanimously.

Discussion Regarding Rulemaking Language for Reentry Policy

Andrea Huddleston distributed hard copies of the reentry rules draft and requested that the Committee give more detail regarding Reentry Policy

The Committee agreed to the following revisions in the proposed draft:

- Use “preceptorship” instead of “rotation” throughout the policy.
- Research available pharmacology courses in order to define the pharmacology instruction required for reentry. The Committee does not want to defer the decision to the preceptor. Ms. Huddleston, Dr. Saunders, and Mr. Reeves will research available courses prior to the next Committee meeting.
- (3)(b) change ”actively engaged in the education of students in a physician assistant program or other allied health education program” to ”actively engaged in the education of students in a physician assistant program or other program that would lead to a program that would allow the student to become a prescriber” or similar language.

Ms. Huddleston will make the discussed changes and present them at the next meeting.

DEPARTMENTAL REPORTS

Office of Investigations

Ms. Lori Leonard presented the Office of Investigations Report

Currently Monitored Practitioners

On Probation – 4

Suspended – 3

Revoked and/or Surrendered – 8

Reprimand - 1

Investigation Report New Complaints

Action in Another State – 1

Malpractice - 2

Unprofessional Conduct – 3

Drug Diversion – 1

Closed Complaints

Insufficient Evidence – 2

Sent to Office of General Counsel for Formal Discipline – 4

Closed without Action – 10

Letter of Concern (not reportable to NPDB as discipline) 1

Currently Being Reviewed – 22

Managers' Report

Ms. Stacy Tarr presented the Managers' Report

The information provided is for the period of April 1, 2019 through June 30, 2019.

New Applications Received 67

Total New Licenses Issued 45

Total Number of Online Renewals 241

Average Renewals Online 198 (82%)

Total Number of Reinstatements 8

Total number of active licensees as of June 30, 2019 is 2,473.

Total number of active licenses as of June 30, 2019 with a Tennessee mailing address is 2096.

Total number of OPA licenses as of June 30, 2019 is 14.

Legislation

Legislative Update 2019: Physician Assistants Committee

Public Chapter 61

This act states that an entity responsible for an AED program is immune from civil liability for personal injury caused by maintenance or use of an AED if such conduct does not rise to the level of willful or wanton misconduct or gross negligence.

This act took effect on March 28, 2019.

Public Chapter 117

This act adds a definition of “alternative treatments” to 63-1-164 pertaining to the restrictions and limitations on treating patients with opioids.

This act took effect April 9, 2019.

Public Chapter 124

This act makes a variety of small changes and additions to the TN Together opioid initiative put in place in 2018. One addition is allowing access to CSMD data to a healthcare practitioner under review by a quality improvement committee (QIC), as well as to the QIC, if the information is furnished by a healthcare practitioner who is the subject of the review by the QIC.

The requirement for e-prescribing of all schedule II substances by January 1, 2020 has been delayed to January 1, 2021 and is modified to require all schedule II through V prescriptions to be e-prescribed

except under certain circumstances. The law also requires all pharmacy dispensing software vendors operating in the state to update their systems to allow for partial filling of controlled substances. Definitions are given by this act to the terms palliative care, severe burn and major physical trauma. Along with its new definition, palliative care has now joined severe burn and major physical trauma as an exception to the opioid dosage limits otherwise required under TN Together. An unintended consequence of last year's Public Chapter 1039 was on cough syrup. This act establishes that the law does not apply to opioids approved by the FDA to treat upper respiratory symptoms or cough, but limits such cough syrup to a 14 day supply. Also changed from last year's act is the requirement to partial fill. Partial filling of opioids is now permissive. Finally, the opioid limits under have been simplified from the previous year's act. The twenty day supply and morphine milligram equivalent limit has been eliminated. Three day and ten day requirements remain the same. Instances such as more than minimally invasive surgery, which previously fell under the twenty day provision, now can be treated under the limits of the thirty day category. This act took effect on April 9, 2019.

Public Chapter 144

This act amends the Prevention of Youth Access to Tobacco and Vapor Products Act by limiting the places in which one may use vapor products. The act defines vapor products and prohibits the use of such products in a number of locations including child care centers, group care homes, healthcare facilities (excluding nursing homes), residential treatment facilities, school grounds, and several other areas. Several locations have specific exceptions set forth in the statute. This act took effect on April 17, 2019.

Public Chapter 156

This public chapter creates a commemorative certificate of nonviable birth. The licensed healthcare practitioner who attends or diagnoses a nonviable birth, may, based on the practitioner's best medical judgment and knowledge of the patient, advise a patient that experiences a nonviable birth that the patient may obtain a commemorative certificate from the Department of Health. The Department shall provide a form on its website that the practitioner shall execute and provide to the patient. Upon the request of the patient, the Department shall issue the commemorative certificate within 60 days after the request and shall charge a fee not to exceed the actual cost for issuing the certificate. This act took effect April 18, 2019.

Public Chapter 183

This act permits advanced practice registered nurses (APRNs) and physician assistants (PAs) working in a community mental health center to have their chart review done remotely by their collaborating physician. The electronic means by which the transmission occurs must be HIPAA-compliant. This act took effect April 23, 2019.

Public Chapter 195

The majority of this act pertains to Committees governed by the Department of Commerce and Insurance. One small section applies to the health related Committees. Currently, the health related Committees have an expedited licensure process for military members and their spouses. Previously, a spouse of an active military member had to leave active employment to be eligible for this expedited process. This act removes that requirement. This section applies to all health related Committees. The Commissioner of Health is permitted to promulgate rules, but rules are not needed to implement the act. This act takes effect July 1, 2019.

Public Chapter 229

This act allows healthcare professionals to accept goods or services as payment in direct exchange of barter for healthcare services. Bartering is only permissible if the patient to whom services are provided is not covered by health insurance. All barters accepted by a healthcare professional must be submitted to the IRS annually. This act does not apply to healthcare services provided at a pain management clinic. This act took effect April 30, 2019.

Public Chapter 243

This act mandates that an agency that requires a person applying for a license to engage in an occupation, trade, or profession in this state to take an examination must provide appropriate accommodations in accordance with the Americans with Disabilities Act (ADA). Any state agency that administers a required examination for licensure (except for examinations required by federal law) shall promulgate rules in regard to eligibility criteria. This legislation was introduced to assist individuals with dyslexia.

This act took effect May 2, 2019 for the purpose of promulgating rules, and for all other purposes, takes effect July 1, 2020.

Public Chapter 245

This act prohibits any person who is not licensed or certified by the Committee of Nursing from using the title “nurse” or any other title that implies that the person is a practicing nurse. The Committee is empowered to petition any circuit or chancery court having jurisdiction to enjoin: (1) a person attempting to practice or practicing nursing without a valid license; (2) a licensee found guilty of any of the acts listed in 63-7-115; or (3) any person using the title “nurse” who does not possess valid license or certificate from the Committee.

This act took effect May 2, 2019.

Public Chapter 255

The act permits a medical professional who has a current license to practice from another state, commonwealth territory, or the District of Columbia is exempt from the licensure requirements of such Committees if: (1) the medical professional is a member of the armed forces; and (2) the medical professional is engaged in the practice of the medical profession listed in 68-1-101 through a partnership with the federal Innovative Readiness Training. The respective health Committees may promulgate rules for implementation.

This act took effect April 18, 2019 for the purpose of promulgating rules, and for all other purposes, takes effect July 1, 2019.

Public Chapter 264

This act permits the attorney general, reporter, and personnel to access confidential data from the Controlled Substance Monitoring Database upon request for the purposes of investigation or litigation of a civil action. Release of this information to other parties must be accompanied by an appropriate protective order. This bill was brought by the Office of the Attorney General.

This act took effect April 30, 2019.

Public Chapter 268

This act rewrites the criminal offense for female genital mutilation. Those who knowingly mutilate a female, facilitate the mutilation, or knowingly transport or facilitate the transportation of a female for the purposes of mutilation are subject to a class D felony. Such individuals are also liable civilly. Any physician, physician in training, certified nurse or midwife or any other medical professional that performs, participates in, or facilitates a mutilation shall be subject to disciplinary action by the appropriate licensing Committee in addition to criminal penalties. Certain medical procedures listed in the statute are not considered violations.

This act takes effect July 1, 2019.

Public Chapter 307

This act requires the Department of Health to include data related to complications of induced abortions, including the number and type of complications in its annual induced termination of pregnancy (ITOP) data report. The department shall not release any data that could identify individual patients. The department may promulgate rules necessary to implement this act.

This act took effect May 8, 2019 for the purpose of promulgating rules, and for all other purposes will take effect July 7, 2019.

Public Chapter 327

This act requires the Commissioner of Health, by January 1, 2020, to study instances when co-prescribing of naloxone with an opioid is beneficial and publish the results to each prescribing Committee and to the Committee of pharmacy. The findings shall be included in the chronic pain guidelines adopted by the Chronic Pain Guidelines Committee.

This act took effect May 8, 2019.

Public Chapter 447

This act permits law enforcement agencies to subpoena materials and documents pertaining to an investigation conducted by the Department of Health prior to formal disciplinary charges being filed against the provider. This bill was brought by the Tennessee Bureau of Investigation.

This act went into effect May 22, 2019.

Petition for Order of Compliance - Kristen Jensen

Kristen Jensen, PA - Ms. Jensen appeared before the Committee without legal representation.. Ms. Jensen had previously appeared before the Committee at the July 27, 2018 meeting. Ms. Huddleston summarized Ms. Jensen's prior disciplinary action. Ms. Jensen engaged in suspicious behavior at work and was given a drug and alcohol screen in which she tested positive for alcohol. Subsequently, Ms. Jensen completed a course of inpatient treatment for alcohol abuse and agreed to have her license suspended until further evaluation and advocacy was obtained. Ms. Jensen has satisfied those requirements and agreed to have her physician assistant license placed on probation for a period of not less than five (5) years, to run concurrent with her monitoring contract with the Tennessee Medical Foundation and that she maintain 100% compliance with that agreement. After a brief discussion by the Committee, Brett Reeves motioned to accept the Order of Compliance. The motion was seconded by Catherine Patterson. The motion passed.

Catherine Patterson made a motion to adjourn, the motion was seconded by Brett Reeves and the Meeting was adjourned.

