

**Vermont Board of Medical Practice
Minutes of the December 7, 2011 Board Meeting
Gifford Medical Center, Randolph, VT**

Approved

1. Call to Order; Call the Roll; Acknowledge Guests:

Patricia King, MD, Chair, called the meeting to order at 12:23.

Members Present:

William Hoser, PA-C; Margaret F. Martin; Michael Drew, MD; Hon. David A. Jenkins; Sarah McClain; Harvey Reich, MD; Peter Thomashow, MD; Florence Young; John Webber, Esq.; Eileen M. Illuzzi; Janice M. Gallant, MD; Robert Rinaldi, DPM; Toby Sadkin, MD.

Others in Attendance:

David Herlihy, Executive Director; Paula Nenninger, Investigator; Philip Ciotti, Investigator; Karen LaFond, Licensing Administrator; Kurt Kuehl, AAG; Margaret Vincent, AAG.

2. Public Comment:

None

3. Approval of Minutes of the November 2 and November 16, 2011 Board Meetings:

Ms. Martin moved to accept the minutes of the November 2, 2011 meeting. Dr. Reich seconded the motion. The motion passed; opposed: none; recused: none; abstained: none.

Dr. Reich made a motion to accept the minutes of the November 16, 2011 meeting. Ms. McClain seconded the motion. The motion passed; opposed: none; recused: none; abstained: none.

4. Board Issues (Dr. King):

None

5. Administrative Update (Mr. Herlihy):

Mr. Herlihy informed the board that Terry Lovelace, Esq. will not be returning from medical leave and will be replaced by Robert McDougal, Esq. as the full-time Assistant Attorney General for the Board. Until then, Mr. Kuehl will continue to serve in a full-time capacity.

Mr. Herlihy stated that the draft proposal for modification to the language specifying the requirements for a pro-bono licensure has been passed along to the Good Neighbor Health Clinic for their consideration. The draft proposes to establish criteria that determines eligibility for use of a special Pro Bono application process, and is designed to identify those applicants who have unblemished records. Qualifying Pro Bono applicants would then be able to have certified copies of required documents provided by other state licensing boards. Again, this modification would address the complaint that Pro Bono applicants are deterred by the burden of obtaining direct verification of education, residency, examinations, and other state status. He will provide updates as the proposal is vetted through the process.

Mr. Herlihy informed the board that “we are finally live in CAVU” for processing licenses. The licenses that are approved during the meeting will be processed in the new system and applicants are being directed to apply on-line for new applications. The PAs will continue to submit their paper renewals because there are still bugs to be worked out for the renewal process, but new applications are now being processed in the new system. Mr. Herlihy encouraged the board members who are providers to check out the new site and register.

Mr. Herlihy also stated that during the “Other Business” portion of the meeting he would be discussing the proposed opportunity to collaborate on training about opioid prescribing. He reminded members that the Massachusetts Medical Board approached him about the successful program hosted by the Boston University Medical School and asked member to review course materials that would be circulating before the proposal was taken up.

6. Presentation of Applications (12:30 p.m. – 12:45p.m.):

Applications for physician licensure and physician assistant certification were presented and acted upon as detailed in Appendix A, incorporated by reference into these minutes.

7. Presentation to the Board (12:45p.m. – 1:45 p.m.):

None

8. Recess; Convene Hearing to discuss any stipulations or disciplinary matters that are before the Board (1:45 p.m. – 2:15 p.m.): (Mr. Simpson)

None

9. Reconvene Meeting; Executive Session to Discuss:

- a. Investigative cases recommended for closure
- b. Other matters that are confidential by law, if any

Ms. Illuzzi made a motion at 12:37 p.m. to go into Executive Session to discuss confidential matters related to investigations. Mr. Webber seconded the motion. The motion passed; opposed: none; recused: none; abstained: none.

10. Return to Open Session; Board Actions on Matters Discussed in Executive Session:

Mr. Webber made a motion at 1:59 to return to open session. Ms. Illuzzi seconded the motion. The motion passed; opposed: none; recused: none; abstained: none.

11. Board Actions on Committee Recommendations with Regard to any Non-confidential Matters:

Dr. Reich, South Investigative Committee, asked to close:

MPS 115-0911 – Letter #1
MPS 117-0911 – Letter #1: Dr. King recused
MPS 74-0611 – Letter #1
MPS 110-0811 – Letter #1
MPS 124-1011 – Letter #1
MPS 106-0811 – Letter #1

Dr. Gallant made a motion to close the cases presented. Dr. Thomashow seconded the motion. The motion passed, opposed: none; abstained: none; recused: 1.

Hon. Jenkins, Central Investigative Committee, asked to close:

MPC 98-0711 – Stan Burns Letter
MPC 104-0909 – Stan Burns Letter
MPC 113-0911 – Letter #1
MPC 124-1110 – Stan Burns Letter

Dr. Reich made a motion to close the cases presented. Dr. Drew seconded the motion. The motion passed, opposed; none; abstained: none; recused: none.

Dr. Sadkin, North Investigative Committee, asked to close:

MPN 95-0910 – Letter #1
MPN 163-1208 – Letter #1
MPN 123-1011 – Letter #1
MPN 114-0911 – Special Letter #1
MPN 120-0911 – Letter #1

Dr. Rinaldi made a motion to close the cases presented. Dr. Gallant seconded the motion. The motion passed, opposed: none; abstained: none; recused: none.

12. Other Business:

Hon. Jenkins brought up a request for clarification on an issue that was raised during Executive Session. There was discussion about HIPAA training related issues and the Blueprint for Health Community Teams. Dr. King stated that the health teams are employees of the state so they are HIPAA trained, but when a whole team is not in the employ of a particular physician, it makes it difficult to control how sensitive health issues are handled. It would be helpful if there was a way to gather information about how the health teams are incorporating HIPAA training into their processes. Dr. Reich raised the point that there are nuances with the electronic health records because when you pull up a patient's chart, the information is then opened for passers-by to see, even if inadvertently. This brings up a whole other host of issues related to the potentials for HIPAA violations. Ms. Vincent and Mr. Herlihy said they would look into this further and report back information to the Board.

Mr. Herlihy discussed a potential training and collaboration opportunity on Opioid Prescribing. Last month, he told the Board that he was approached by the MA Medical Board and Boston University Medical School, who had partnered to provide a training on this topic. Dr. Drew volunteered to attend and report back to the Board. On December 3 he attended the 5-hour session on opioid prescribing and strategies for treating patients who present challenges. All the presentation panelists were Primary Care Physicians and most of the discussions were oriented toward PCPs and Internist who treat this population. Topics included advocacy and safety, monitoring and exit strategies and Opiate education credentialing requirements. Others on the panel were the MA Director of Substance Abuse Services, Program Manager for the Drug Enforcement Agency (DEA) Northeast, the MA Assistant Attorney General's Office, Chief of Medicaid Fraud USDOJ and the Chief Investigator and Lieutenant of the Diversion Investigations Unit for the MA State Police. Dr. Drew felt it was well worth attending and it could be easily tailored for VT practitioners. Dr. Rinaldi was supportive of this because on 2 separate occasions, Mr. Ciotti has attended Friday CME session at the Gifford Medical Center to discuss and educate the providers about this issue and the room is always packed. It is very well received so there is an interest and a need.

Mr. Herlihy further stated that the board could collaborate with the Vermont Medical Society or Fletcher Allen Health Care or the University of Vermont to host this event and to help get the word out. By offering this course, the Board would be able to meet the need in the community to address this issue and provide CME credits. As noted previously, there was a concern about potential conflicts with pharmaceutical companies endorsing this event, and Dr. Drew reported that the session he attended did not have any indicators that pharmaceutical makers were involved. He said that participants were asked to complete a survey to provide feedback if they detected any commercial content, and the standard of these sessions is to certify there is no commercial content. No brand names were mentioned in any of the presentations and he feels there is no conflict with the pharmaceutical companies. Mr. Herlihy requested the Board make a motion authorizing him to move forward with the organization of this event.

Mr. Webber made a motion granting Mr. Herlihy the authority to move forward with preparing this event and to seek additional sponsors and other organizations to endorse the training. Dr. Rinaldi seconded the motion. The motion passed, opposed: none; abstained: none, recused: none.

Finally, Mr. Herlihy wished to express his gratitude and appreciation from all of the Board members to Mr. Webber and Ms. Martin for their many years of service on the Board. Certificates of appreciation were presented by Mr. Herlihy. Board Chair Dr. King shared some of Mr. Webber's and Ms. Martin's accomplishments outside the Board, expressed gratitude for their service, and presented gifts from the Board members.

13. Upcoming Board meetings, committee meetings, hearings, etc.: (*Locations are subject to change, you will be notified if a changes takes place.*)

- **January 12, 2011, North Investigative Committee Meeting, 12 p.m., Vermont Department of Health, 108 Cherry Street, 3rd Floor, Conference Room 3B, Burlington, VT**
- **January 13, 2011, Board Meeting on pending applications, 12:10 p.m., Board of Medical Practice office 108 Cherry Street, 2nd Floor, Burlington, VT (and via telephone)**
- **January 18, 2011, South Investigative Committee Meeting, 12 p.m., Asa Bloomer State Office Building, 4th Floor, Room #492, Rutland, VT**
- **January 18, 2011, Central Investigative Committee Meeting, 12 p.m., Liquor Control, Conference Room 13, Green Mountain Drive, Montpelier, VT**
- **February 1, 2011, Licensing Committee Meeting 10:30 a.m., Gifford Medical Center, Red Clover Conference Room, Randolph, VT**
- **February 1, 2011, Board Meeting, 12 p.m., Gifford Medical Center, Red Clover Conference Room, Randolph, VT**

14. Adjournment:

Dr. Reich made a motion to adjourn. Mr. Hoser seconded the motion. The motion passed; opposed: none; recused: none; abstained: none.

Meeting adjourned at 2:56 p.m.

Attachments: Appendix A

Respectfully submitted,



Karen LaFond
Licensing Administrator

Appendix A

Presentation of Applications

Dr. King moved for the issuance of licenses/certifications for:

| | | |
|-------------------------|--------------------|--------------------------|
| Sandra Aponte, MD | Aida Avdic, MD | Vivian Chang, MD |
| Marc Ernstoff, MD | Donald Leopold, MD | Lynn Madsen, MD |
| Howard Martin, MD | Isaura Menzies, MD | John Peterson, MD |
| Karen Saal, MD | Arlene Sussman, MD | James Trice, MD |
| Carrie Webber, MD | Carrie Webber, MD | Genevieve Williamson, MD |
| Kimberly Kaufhold, PA-C | Mary Streeter, RA | |

Recommended by Dr. Rinaldi for licenses/certifications. Seconded by Dr. Gallant. The motion passed; opposed: none; recused: none; abstained.

Dr. King moved for the issuance of limited temporary licenses for:

Peter Cronin, MD LTL Katherine Rutherford, MD LTL

Recommended by Dr. Gallant for limited temporary physician licensure. Seconded by Hon. Jenkins. The motion passed; opposed: none; recused: none; abstained: none.