

Tennessee Board of Medical Examiners Regular Board Meeting

Tuesday, November 15, 2016 Wednesday, November 16, 2016

MINUTES

The regular board meeting of the Tennessee Board of Medical Examiners was called to order at 8:40 in the Iris Room, Ground Floor, Metro Center Complex, 665 Mainstream Drive, Nashville, Tennessee 37243 by Dr. Subhi Ali, Board President.

Board Members Present: C. Allen Musil, MD

Neal Beckford, MD Subhi Ali, MD

Reeves Johnson, MD Melanie Blake, MD

Barbara Outhier, Consumer Member

Michael Baron, MD Dennis Higdon, MD Debbie Christiansen, MD

Juliane Cole, Consumer Member

Michael Zanolli, MD

Board Member(s) Absent: Pat Eller, Consumer Member

Staff Present: Andrea Huddleston, JD, Chief Deputy General Counsel

Rene Saunders, MD, Medical Consultant, BME

Maegan Martin, JD< Executive Director Matt Gibbs, JD, Office of General Counsel

Dr. Mitch Mutter, Medical Director Special Projects Dylan Taylor, Administrator for X-Ray Board

I. Presentation by Dr. David Johnson, Senior Vice President Federation for State Medical Boards

Dr. Zanolli introduced a presentation by Dr. David Johnson of the Federation of State Medical Boards (FSMB). The FSMB offers a centralized repository of licensees and their status (including disciplinary actions) which can be sent to a state medical board (SMB) within 24 hours of a change. FSMB's key data elements include license, discipline, USMLE, ABMS and AOA certification. Dr. Johnson provide examples of opportunity for collaboration between the Board and the FSMB including compact-related research, surveys of licensees, collaborative articles/research, assistance with mandated legislative

operational audits and assistance seeking federal grant funding. Dr. Johnson explained the FSMB's educational offerings and communications which are available through multiple channels (examples include the FSMB annual report, journal of Medical Regulation, Newsline and eNews). Dr. Zanolli discussed using the FSMB to get data on licensees without having to go to a hospital or pay someone else for the data. He also reminded the Board that since multiple Tennessee doctors hold licenses in other states working with organizations like the FSMB is important. Dr. Johnson also revealed that the FSMB is supporting an interstate medical licensure compact to get passed in the Tennessee legislature that has already passed in multiple other states. The purpose of the bill is to establish the qualifications for expedited licensure through the Compact and to define the application process for an expedited license.

II. APPLICANT INTERVIEWS

MD X-Ray Operator Applicant(s)

There were no MD X-Ray Operator applicants.

Physician Applicant(s)

Kathryn Evans – was asked to appear before the Board to address her prior impairment and treatment. Dr. Evans is under a five (5) year contract with the Tennessee Medical Foundation. She is currently participating in an internal medicine residency at Vanderbilt and is scheduled to complete her residency in December 2016. After interviewing her, Dr. Johnson made a motion to approve her application for a full and unrestricted medical license. The motion was seconded and passed.

Connie Haley – appeared before the Board to address her recent clinical activities. Dr. Haley's application for reinstatement suggested that she had not recently practiced clinical medicine. She inadvertently allowed her medical license to expire. Dr. Haley is currently board certified in internal medicine and infectious disease and works for the University of Florida. She explained the context in which she exercises her clinical judgment and her extensive work and expertise in tuberculosis cases. She plans to see patients again, as the need for tuberculosis experts in the state and across the country has risen. The Board discussed and considered whether Dr. Haley's recent activities qualified as the practice of clinical medicine and concluded that they did. Dr. Beckford made a motion to grant an unrestricted license. The motion was seconded by Dr. Johnson and passed.

Kent McGinley – appeared before the Board to address the results of his criminal background check and his recovery from a previous addiction. Dr. McGinley is a board certified pathologist who has been in recovery for ten (10) years. Dr. McGinley discussed the nature of his disease and the dismissal of his criminal charges. He has successfully completed five (5) years of required monitoring with the South Carolina physician health program and would like to come back to Tennessee for family reasons. At the conclusion of his interview, Dr. Zanolli made a motion to approve Dr. McGinley's application. Dr. Musil seconded the motion, which passed.

Rao Balakrishna – was asked to appear before the Board because he is unable to produce an official medical transcript as required by Board rules. Dr. Balakrishna attended medical school in India. Despite his repeated attempts, he has been unable to obtain an official medical transcript. He was able, however, to produce a valid ECFMG certificate. The ECFMG does verify graduation from medical school as part of the certification process. The Board discussed whether they would like to see applicants like this in the future or whether they would prefer for Dr. Saunders to accept an ECFMG certificate as appropriate proof of medical school graduation when there are no other issues presented in an application. Dr. Johnson made a motion to approve the application which was seconded by Dr. Blake. The motion passed.

Pamela Talley – was asked to appear before the board because she has been out of clinical practice for more than two (2) years. The board discussed Dr. Talley's recent activities and determined that she has

been engaged in the limited practice of medicine such that the reentry policy was not properly triggered. Dr. Beckford made a motion to approve her application which was seconded by Dr. Johnson. Dr. Zanolli spoke in support of the motion. The motion passed.

Essam Yousef – appeared before the board because he has not completed a US residency and is not board certified. Mr. Yousef applied for a license in 2015 and was denied for failure to appear. Dr. Yousef has practiced as a psychiatrist in New York for the past fifteen years and would like to move to Tennessee to be close to his children and grandchildren. Dr. Yousef has completed a one year US residency and a two year fellowship, which the board considered; however, the statute specifically requires international medical school graduates to complete a three year US residency. In light of this reality, Dr. Ali spoke in support of denying the application but allowed Dr. Yousef the opportunity to withdraw his application, which he elected to do.

The board was asked to consider whether it wanted to interview every applicant who is unable to produce an official medical school transcript, even if the applicant has been awarded an ECFMG certificate. Sometimes applicants attended medical school in countries where records are not reliably kept or worse, where they have been destroyed by war and other disasters. Dr. Beckford and Dr. Ali spoke in favor of authorizing staff to bring in only those individuals whose ability to obtain the document is in question. The Board showed their support for this suggestion with an informal vote by raised hands.

III. Report From the Re-Entry Taskforce

Ms. Martin referred the Board to the taskforce's recommendations regarding implementation of the Board's newly adopted reentry policy and offered the Board an opportunity for questions or comments. Dr. Zanolli and Dr. Johnson discussed the final report and whether the table 2 on page 3 should say that an applicant who hasn't been in practice for more than two (2) years or say 1-2 years. Dr. Beckford argued 1-2 years is fine for a medical specialty but questioned if it's applicable for a surgeon. After thorough discussion, the Board opted to eliminate that row altogether. If an individual has been out of practice for less than two years, the Board has the discretion to require remediation if there is sufficient cause to believe that the physician's intended practice may put patients at risk. The Board reviewed a memorandum prepared by Ms. Martin which summarizes the recommendations regarding implementation of the policy and ultimately determined that they would proceed with the third option. This option will allow Dr. Saunders to work with a board member to determine an appropriate assessment plan and, once the assessment has been completed, a remediation plan. Completion of the remediation plan would result in the production of a document summarizing all steps of the reentry process and the applicant's compliance with the assessment and remediation plans. When the applicant is permitted to work with a preceptor to remediate, Ms. Huddleston will draft an agreement outlining the limitations of the applicant's practice and the objectives of the preceptorship. These documents will be reviewed by the Board, and if approved, a license will be granted. Dr. Zanolli made the motion which was seconded by Dr. Ali. The motion passed.

IV. Report From The Development Committee

Dr. Johnson gave a summary of the meeting of the Development Committee. The development committee suggested creating a task force to examine the topic of physician burnout and perhaps giving recommendations. Dr. Zanolli voiced his belief that creating a task force would probably be redundant since other organizations and agencies have already looked into this at length. Dr. Zanolli took the position that the Board should issue a statement instead of a report. Dr. Beckford agreed and spoke in favor of taking this issue up again once the FSMB's report is complete. Dr. Ali asked Dr. Johnson and Ms. Martin to work on it and bring information back to the Board when the report is released in February.

The Board discussed the difference between contingent and conditionally issued licenses with Dr. Johnson reminding the Board to be careful on using each term. Ms. Huddleston discussed producing an FAQ for Board members so that their intent is clear and the consequences of the licensure action are known. All parties agree a future conversation will have to happen to make it clearer for both sides when and where to use each term. Ms. Huddleston also announced that the NPDB audit was recently conducted for this Board and it was found all the audited boards were in compliance based on the information gathered.

The board discussed updating a policy statement adopted in 2002 which outlines the responsibilities of a physician supervising someone other than a physician assistant or nurse practitioner with a certificate of fitness. Dr. Beckford notes we don't have jurisdiction over these delegates. He is not in favor of promulgating policy and/or rules on a topic that we cannot reasonably expect to regulate. Ms. Martin confirmed that staff routinely get questions about this topic. After thorough discussion, the Board determined that it should return to this topic at the January meeting.

Dr. Johnson presented the development committee's discussion regarding codifying in rule, the development committee's composition and length of terms. Dr. Ali notes the development committee is a standing committee and that membership changes already happen every two years concurrent with the election of officers. Dr. Johnson would like to keep that from happening and notes if you're working on something and have five new people jump in that it can make it difficult to work on properly.

V. Approval of Minutes.

Dr. Zanolli noted that the contested case at the bottom of page twelve (12) needs to be revised. Dr. Baron noted on page five (5) that the wrong member was listed as being a member of the committee. Dr. Zanolli made a motion to approve the minutes as revised which was seconded by Dr. Beckford. The motion passed.

VI. <u>Conduct New Business</u>

The Board considered all files and/or actions by the board consultant concerning new licenses, reinstatements and renewals of the following professions: medical doctors, MD X-ray operators, genetic counselors, physician assistants. Dr. Johnson made a motion to approve which was seconded by Dr. Beckford. The motion passed.

The board discussed electing two new members to the CSMD Committee. Dr. Baron's resignation creates a vacancy. He has been serving as chair which means that a new chair will need to be elected. Additionally, a consumer member will need to be appointed to replace Ms. Eller. The CSMD Committee will meet again on January 31, 2017. Dr. Beckford made a motion to nominate Dr. Musil which was seconded by Dr. Johnson. Dr. Christianson was identified as a backup if Dr. Musil isn't able to serve. Dr. Ali asked for vote supporting Dr. Musil as the BME's physician representative with Dr. Christianson as an alternate. The motion passed. The Board next moved to nominating a consumer member to the CSMD Committee. Dr. Ali nominated Ms. Cole by motion and confirmed with Ms. Cole that she would be willing to serve. The motion passed.

With Dr. Baron leaving the Board Dr. Ali moved to filling his position. His suggestion was to appoint a taskforce, one member each from a different division of the state. Dr. Ali suggests Dr. Higdon from West Tennessee, Dr. Zanolli from Middle Tennessee and Dr. Johnson from East Tennessee. Each member accepted the appointment and the nominating committee will meet to make a selection in the next several weeks.

Ms. Outhier gave an update on PC 942, which is still a work in progress. The group working on implementation of that bill will convene again in December and further updates will be given as they are made available.

VII. Departmental Reports

The Board received a report from the Controlled Substance Monitoring Database (CSMD) Committee Chair Dr. Baron. The CSMD has found that drug prescriptions have started to decrease since 2013 by both in-state residents and out-of-state visitors. Overall drug use is down for all age groups except those over 60 years of age. Dr. Baron showed that prescriptions for all drug types are down except for stimulants which have seen an increase. A map of Tennessee showing Morphine-miligram equivalent (MME) prescriptions by county showed that East Tennessee, which has recently seen an epidemic of MME abuse, recovering significantly. It also showed that the Western section of the State, while dealing with less MME abuse, none the less saw their prescription rate drop as well. It was also revealed that the milligram doses in prescriptions of Teboxone (sp?), a medication used to treat opioid dependence, increased dramatically. Dr. Baron hesitated to suggest whether this is a positive or negative development. Tasked with monitoring that top fifty (50) prescribers in the state the CSMD also found that they had reduced their rate of prescribing medication by 11% in 2014 and 8% in 2015. Hydrocodone remains the most prescribed controlled substance in the State of Tennessee over the past few years according to Dr. Baron. Dr. Musil asked Dr. Baron if there was anything he'd like to see from the CSMD in the future. Dr. Baron suggested a national database so drug users can be more easily tracked or helped. Sharing information to fight drug abuse, specifically across state line, was also mentioned as a possible positive change that could be made.

The Board decided there was no action necessary regarding rule making hearings, rule amendments or policy statements.

The Statistical Licensing Report from September 1st through October 31st showed 308 new applications for medical doctors, 23 reinstatements for doctors, 14 reinstatements for X-Ray. It also showed 190 new licenses for medical doctors with 75 new X-Ray operator licenses. Overall there were 10836 renewals with 10447 renewed online at a 78% renewal rate. There were 129 licenses who were failed to be renewed and 49 retired licenses. There are currently 22073 active licenses in the state of Tennessee with 16594 having a Tennessee mailing address.

After a meeting with some of the directors of other boards and committees Ms. Martin brought up the possibility that the Board is being too strict on CME requirements compared to other departments. Most other agencies allow a grace period after initial audit to become compliant and most doctors become compliant when they become aware of any issues that could jeopardize their license. Ms. Martin points out that her department uses a lot of resources to track and enforce audit standards specifically noting that her staff is usually in contact with a member of the licensee's staff, not the actual doctor themselves. Dr. Ali suggested sending it to the Development and Strategies Committee to further flesh out the issue arguing that the issue doesn't deserve immediate attention. After a brief suggestion Dr. Ali asked the administrative staff to discuss solutions to the problem and bring them back to the board at a later date. Ms. Martin meanwhile will research why this problem is important to the board as well as the resources currently being used. Dr. Beckford asked Ms. Martin to also research how other boards or federations handle this problem.

The Board is asked for an advisory opinion on how doctors prescribe and record prescriptions, specifically in cases where the patient is at risk of an overdose and the doctor gives the prescription to a family member for safety without writing a medical record. Dr. Musil points out that the system is already set up so that a script is placed in the file of the patient and it lists that a script was given to the parent as

well which takes care of writing a medical record. Dr. Baron made a motion to accept the advisory opinion and a second was offered by Dr. Zanolli and Dr. Musil. The Board voted to accept the motion unanimously.

The Board was asked to consider telemedicine FAQs. Ms. Martin note that a strict reading of the board's earlier decisions would require a facilitator in the room with an underage patient and a doctor. The board discussed instances where it's appropriate for a facilitator to leave the room (birth control, substance abuse, physical abuse, etc.). The board argued that the facilitator is necessary to do the bare minimum (confirm identity of minor) but not necessarily more. Ms. Martin announced that no more telemedicine licenses are being issued by the Board. Dr. Zanolli questions why a telemedicine licensee holder needs to visit the remote site every 30 days. Ms. Martin pointed out that telemedicine is still the practice of medicine while Ms. Huddleston notes the Board has already disciplined people for not following the 30 day rule. Ms. Huddleston also noted a rule change would require a joint meeting between multiple boards. Dr. Zanolli motioned for adoption with Dr. Christiansen seconding. The board unanimously approved the FAQ with a voice vote.

The Board was asked to consider a supervision FAQ which had been presented at their last meeting but was now being brought up again with two additions and a clarification. It concerned if you have a PA or an APRN that you're supervising whether you have to review controlled substances prescribed by the provider within 24 hours. Neither Ms. Martin nor Ms. Huddleston found any state or federal laws expressing a view on this issue. Ms. Martin is hopeful FAQs will continue to be written using topics routinely addressed by the administrators in office. Dr. Zanolli asked for a motion to approve the FAQ with Dr. Christiansen seconding. The Board passed on a unanimous voice vote.

The Office of Investigations offered a report on disciplinary actions taken against licensees in the state. There have been 48 new complaints against doctors in October 2015 which makes 859 this year to date. In October 46 cases were closed, three (3) were sent over to the Office of General Council, 23 were closed no violation, four (4) were closed with a letter on concern, 16 were closed with a letter of warning, which leaves 238 open complaints. For X-Ray medical operators there were two (2) complaints in the month of October which makes 14 complaints overall for the year. Two complaints were closed of which one was sent to the Office of General Council to be prosecuted. There are currently six open X-Ray cases. The Office of Investigations also revealed it had audited 32 clinics in October 2016 to make sure their Medical Directors met the definition of pain management specialists.

The Board asks for clarification on who FARB (Federation of Associations of Regulatory Boards) is and why they should spend the resources sending someone to the conference. Ms. Huddleston suggests a board member could go but none volunteer board members volunteer to go. Dr Ali questions what positives sending someone to this conference would have for Tennessee. Ms. Martin wants to attend eventually (though not more than once a year) arguing that she could hear many of ideas. Ali makes motion to send Ms. Martin or a member of her choosing. Dr. Johnson seconded and the board passed the motion with a unanimous voice vote.

The Board was asked to fund the travel expenses associated with Ms. Mary Katherine Bratton's attendance at the National Attorney General Training and Research Institute. The funding request is for approximately \$400. Dr. Baron made a motion to approve which was seconded by Dr. Zanolli. The motion passed.

The Board was reminded that the new telemedicine rules took effect on October 31st 2016. The ten (10) years exception rule and election of officer rules were submitted to the Attorney General's office in August 2016. Addiction specialist rules were submitted to the Attorney General's office in September

2016. Med Spa registry rules, intractable pain treatment act rules, and the fee increase rules are still pending approval and review.

The case of Dr. Sara Bomar was brought before the board asking to remove all restrictions from her medical license. Dr. Bomar was issued a restricted license in 2006 because she suffered from a physical disability. By 2015 she had recovered and decided to try to have the restriction lifted so she could shadow a physician and gain experience to get a full unrestricted license. Multiple physicians spoke in Dr. Bomar's favor. Dr. Christiansen motions to accept with a second from Dr. Musil. The motion passed with unanimous consent from a voice vote.

Ms. Huddleston presented disciplinary business from the Office of General Counsel. The most recent action was Dr. Oni who has brought an appeal to the Tennessee Supreme Court after several appeals courts ruled against him. In the case of Dr. Wyttenbach he lost his appeal to the Tennessee Supreme Court which means the Board will not see that case anymore. There were 137 complaints pending on 90 different respondents. There were no questions from the Board.

Day Two of the Regular Meeting of the Tennessee Board of Medical Examiners Wednesday, November 16, 2016

The second day of the regular board meeting was called to order at 8:49 in the Iris Room, Ground Floor, Metro Center Complex, 665 Mainstream Drive, Nashville, Tennessee, by Board of Medical Examiner's President Dr. Subhi Ali. Members present included: Dr. C. Allen Musil, Dr. Neal Beckford, Dr. Subhi Ali, Dr. Reeves Johnson, Dr. Melanie Blake, Ms. Barbara Outhier, Dr. Michael Baron, Dr. Dennis Higdon, Dr. Deborah Christiansen, Ms. Julianne Cole, Dr. Michael Zanolli. Staff present: Andrea Huddleston, JD; Maegan Martin, JD; Stacy Tarr; Rene Saunders, MD; Dylan Taylor.

Presentation of Disciplinary Orders

Consent Orders

Charles Aldrich Jr., PA – Mr. Aldrich was not present nor did a legal representative appear on his behalf. Mr. Aldrich was convicted of multiple DUIs in 2016, which he self-reported to the Committee on Physician Assistants. He has since completed treatment for alcohol disorder and continues a recovery program. The order states that his license will be reprimanded and that he will obtain an evaluation with the Tennessee Professional Assistance Program (TnPAP), and if recommended, enter into a monitoring agreement and maintain compliance with all terms of that agreement. If monitoring is not required, he must continue attending therapy with his current therapy for a period of one year. Mr. Aldrich must also pay certain costs and penalties. Dr. Christiansen made a motion to approve the order, which Dr. Zanolli seconded. Dr. Baron recused himself. The motion passed.

Odie Battles, Jr., MD - Fran Baca-Chavez, JD, represented the state. Dr. Battles has prescribed Suboxone to patients in violation of federal and state regulation by treating more patients than was legally authorized, by prescribing Suboxone to patients with positive and negative urine drug screens, and for prescribing Suboxone outside the clinic setting. The order proposed to place his license on probation for a period of at least three (3) years and to require the payment of civil penalties. Dr. Baron spoke against the motion and requested that Dr. Battles' X-DEA privileges be restricted. Dr. Baron made a motion to deny the order, which was seconded by Dr. Zanolli. The Board requested that his X-DEA be restricted and voiced some support for restricting his Schedule II prescribing privileges. Dr. Baron recused himself. The motion passed.

William Findley, MD – Thomas Aumann, JD, represented the state. Dr. Findley was represented by Dan Warlick, who made a personal appearance. Dr. Findley is alleged to have improperly prescribed controlled substances without proper documentation and history and physical examination. Although approximately 50% of his patients receive controlled substances, his clinic was not registered as a pain clinic. For these and other related violations of the medical practice act, Dr. Findley has agreed to voluntarily surrender his medical license and pay certain costs and penalties. Dr. Beckford made a motion to approve the consent order, which was seconded by Dr. Blake. The motion passed.

Alfred Jackson Jr., MD – Dr. Jackson was not present nor did a legal representative appear on his behalf. Ms. Baca-Chavez presented the order on behalf of Ms. Paetria Morgan. Dr. Jackson forged the name of another physician on 41 prescriptions to obtain drugs for his own use. He also fraudulently prescribed 22 prescriptions to his son and wife without their knowledge. He has completed a six week rehabilitation program and is in active recovery. An order to put Dr. Jackson on probation as well as pay a \$6300 fine was presented. Dr. Jackson will be required to undergo an evaluation to be performed by the TMF and maintain all terms of his TMF monitoring agreement. He must also complete other relevant coursework. Dr. Jackson may not petition the Board for the lifting of his probation until after the probationary period expires. A motion to approve was made by Dr. Zanolli with Dr. Christiansen seconding. Dr. Baron abstained. The motion passed.

William Kennedy, MD – Dr. Kennedy was not present nor did a legal representative appear on his behalf. Ms. Baca-Chavez presented the order on behalf of Ms. Paetria Morgan. Dr. Kennedy's license is currently retired, although the Board retains authority over retired licenses. Dr. Kennedy is an anesthesiologist who was disciplined for acts and/or omissions occurring during his treatment of a 29 year old in his care. Dr. Kennedy agreed to surrender his Tennessee medical license. Dr. Johnson made a motion to adopt the order which was seconded by Dr. Christiansen. The motion passed.

Charles Moore, MD – Dr. Moore was not present nor did a legal representative appear on his behalf. Ms. Jennifer Putnam represented the state. The Kentucky Board of Medical Licensure has been working with Dr. Moore to resolve some knowledge and skills deficiencies since they were first identified in 2010. In July 2014, Dr. Moore relapsed into alcohol dependency and sought treatment soon thereafter. In November 2014, Dr. Moore entered into an aftercare contract with the Kentucky Physicians Health Foundation and in March 2015 entered into an Agree Order with the Kentucky Board of Medical Licensure whereupon his license was placed on indefinite restriction. Although Dr. has remained compliant with all orders imposed by the Kentucky Board, he failed to report these actions to the Tennessee Board in a timely manner. Dr. Moore currently lives and practices in Kentucky; however, the Board was asked to approve placing Dr. Moore's Tennessee license on a restricted/limited status (reciprocal action to that taken by Kentucky) due to the geographical proximity of his current practice. Dr. Christiansen made a motion to approve the order. Dr. Musil seconded. The motion passed.

Richa Misra, MD – Ms. Fran Baca-Chavez presented a consent order for Richa Misra, MD. Alex Fisher represented Dr. Misra. The order proposed a reprimand plus the payment of costs and penalties. Several members felt this did not rise to the level of discipline. Dr. Zanolli declined the consent order, seconded by Dr. Johnson. The motion passed. Dr. Christensen opposed. Ms. Outhier recused.

Glenn Yank, MD – Dr. Yank was represented by Sam Helmbrecht, Esq. Andrew Coffman represented the state. Dr. Yank treated chronic pain patients improperly, without adequate records and without employing urine drug screens or additional methodologies. In response to this finding, Dr. Yank's medical license was ordered to be reprimanded and he is prohibited from providing treatment, other than indicated psychiatric services, for any patients for non-malignant pain and shall not prescribe any medications other than indicated antidepressants and anticonvulsants for the treatment of non-malignant pain. He must at all times comply with all other terms of his order, including the requirement that he

comply with the recommendations of the practice monitor program and pay certain costs. Dr. Musil made a motion to approve the consent order which Dr. Christiansen seconded. Dr. Baron was recused. Ms. Outhier opposed. The motion carried.

Frederick Hodges, MD – Mr. Marc Guilford presented an Agreed Order on behalf of the state. Drs. Higdon, Beckford and Baron were recused. Dr. Hodges was represented by Frank Scanlon, Esq. Dr. Hodges engaged in sexual relations with patients for whom he also prescribed controlled substances. He has been disciplined by this board in the past. He was disciplined by the Board on a previous occasion in 2013 for unrelated events. The order proposed a five year monitoring agreement with TMF as well as the payment of a civil penalty of \$10,000 and costs of the case. Mr. Todd stated that Dr. Hodge reported to TMF in 2013. At that time, TMF recommended an evaluation with BMI. He has been under monitoring since that time and has at all times maintained compliant. Dr. Johnson made a motion to approve the agreed order for Dr. Frederick Hodges, which was seconded by Dr. Musil. Dr. Zanolli spoke in opposition to the motion and stated that the proposed discipline was repetitive. Dr. Johnson stated that Dr. Frederick has done everything that has been asked of him. After further discussion, Dr. Christiansen, Dr. Johnson, and Dr. Musil voted in support of the motion. Dr. Blake, Dr. Zanolli, Ms. Cole, Ms. Outhier, and Dr.Ali voted against the motion. The motion did not pass.

Clary Foote, MD – Ms. Tracy Alcock presented an order for Clary Foote, MD who was represented by Mr. David Steed. Dr. Foote served as Medical Director in a pain clinic and engaged in the improper prescribing of controlled substances when he prescribed without appropriate history and physical examination. He also prescribed controlled substances for family members. Dr. Foote's order places his license on probation for a period of five years, requires that he surrender of his DEA, X-DEA and revokes his pain management certificate. The order also prohibits the dispensing of controlled substances and imposes a monitoring agreement on his practice. Dr. Foote must pay penalties and costs. Dr. Johnson recused himself. Dr. Christensen made a motion to approve, which was seconded by Dr. Beckford. The motion passed.

Agreed Citations

Grady Bazzell, MD – was not present nor did a legal representative appear on his behalf. Dr. Bazzell has paid \$200 dollars for failure to obtain 2 CME hours.

Levi Benson, MD – was not present nor did a legal representative appear on his behalf. Dr. Benson has agreed to pay \$1.875 for failure to obtain 18.75 CME hours to include the two hour, Tennessee-specific prescribing course.

Thomas Chu, MD – was not present nor did a legal representative appear on his behalf. Dr. Chu has agreed to pay \$250 for failure to obtain 2.5 CME hours.

Timothy Dambro, MD - was not present nor did a legal representative appear on his behalf. Dr. Dambro has agreed to pay \$200 for failure to obtain 2 CME hours, specifically the Tennessee-specific prescribing course.

Van Helms, MD - was not present nor did a legal representative appear on his behalf. Dr. Helms has agreed to pay \$200 for failure to obtain 2 CME hours, specifically the Tennessee-specific prescribing course.

Yunna Jiang, MD - was not present nor did a legal representative appear on his behalf. Dr. Jlang has agreed to pay \$200 for failure to obtain two (2) CME hours, specifically the Tennessee-specific prescribing course.

Gordon Meador Jr., MD - was not present nor did a legal representative appear on his behalf. Dr. Meador has agreed to pay \$200 for failure to obtain two (2) CME hours, specifically the Tennessee-specific prescribing course.

Richard Peek, MD - was not present nor did a legal representative appear on his behalf. Dr. Peek has agreed to pay \$200 for failure to obtain two (2) CME hours, specifically the Tennessee-specific prescribing course.

Dr. Ali made a motion to accept citations en masse with multiple seconds from the Board. Dr. Baron abstained because he was out of the room. The motion passed.

Fred Hardy, MD - was not present nor did a legal representative appear on his behalf. Dr. Hardy failed to timely renew his medical license and is being cited for working on a lapsed license for four (4) months. Dr. Hardy paid his fine in full. Dr. Christiansen made a motion, seconded by Dr. Higdon, to approve the Agreed Citation for Fred Hardy, MD. Dr. Zanolli abstained and Dr. Beckford recused himself. The motion passed.

Order(s) of Compliance

Ms. Huddleston stated the order of compliance for Sidney Moragne stated he needed to be in attendance; however, was not present at the time. Dr. Johnson stated there may be a chance he wasn't aware that he needed to be attendance. Dr. Zanolli made a motion, seconded by Dr. Ali to table this matter until the next meeting.

Financial Report

Ms. Noranda French from the Division's Fiscal Office gave a presentation on the Board's finances for fiscal year ending June 30, 2016. The Board's total expenditures in 2016 are \$2,975,605.68 with the Board's total revenue at \$3,358,557.67. The Board closed with a positive balance of \$382,951.99. The Board is not currently at risk of needing a fee reduction. Most revenue for the Board is generated by license renewals. Dr. Johnson asked if the Board can use carryover money that isn't currently being used for anything. Ms. French explained that statues regulate how money can be spent and that it must be used to implement the medical practice act. A second problem is that the Board must maintain a positive annual balance, even if they're carrying a large reserve. Dr. Ali asked to have this matter added to the Development Committee agenda. Dr. Blake requested that this matter be referred to the Strategic Planning Committee and Dr. Ali agreed.

Department of Health vs. Dr. Corbin

Members of the board present: Dr. Musil, Dr. Ali, Ms. Cole

Marc Guilford, representing the state, informed the board that Dr. Corbin practices as a cardiologist in Jackson Tennessee and had opened a medical spa next to his practice. Dr. Corbin hired a physician on site at the med spa, Tracy Ulford, who isn't a licensed medical doctor. Before the case could get underway the State announced it had talked out a settlement with the defendant. The stipulations were as follows: Ms. Ulford will admit representing herself as a doctor despite not having the proper license and civil penalties totaling 7,000 dollars and costs not to exceed 10,000 dollars are to be imposed on Dr. Corbin. Dr. Ali expressed the settlement as a slap on the wrist while Dr. Musil and Ms. Cole expressed no such reservations. Dr. Musil made a motion to accept settlement as written plus a letter of warning that would be on Dr. Corbin's public file. Second from Dr. Ali and Ms. Cole. Dr. Ali voted no for the settlement with Dr. Musil and Ms. Cole voting to approve. The motion passed.