

Tennessee Board of Medical Examiners' Committee on Physician Assistants



Newsletter



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Bureau of Health Licensure and Regulation • Health Related Boards • 227 French Landing, Suite 300, Heritage Place MetroCenter, Nashville, TN 37243
Phone: (615) 532-4384 - Toll Free: (800) 778-4123 ext. 24384 - Fax: (615) 253-4484 - tennessee.gov/health

CURRENT COMPOSITION OF THE COMMITTEE

The Board of Medical Examiners' Committee on Physician Assistants is currently composed of the following members: Glen Alexaner, PA., Chair; Johnny S. Nowlin, PA.; Johnny W. Presley, PA.; Jonathan Stephen White, PA.; James William Montag, PA; Gary L. Tauxe, OPA; and Anne Arney, JD., Public Member.

COMMITTEE MEETING DATES

January 9, 2009
April 17, 2009
July 10, 2009
October 9, 2009

All committee meetings begin at 9 a.m., Central Time. Committee meetings are held at the Board's office and are open to the public. Dates are subject to change, but are listed on the Committee's Web site. [In the event of an electronic meeting, a conference room is made available to the public and is the location from which the teleconference is conducted.]

ATTENTION PRESCRIBERS

Details on Tamper-Resistant Prescription Pads

Effective April 1, 2008, a prescription written for a Medicaid recipient must contain at least one tamper resistant feature explained as follows.

Effective October 1, 2008, prescriptions are required to have a minimum of one feature from all three CMS categories of tamper resistant features. The statute states that all written prescriptions must be "executed on a tamper-resistant pad." As a result, CMS has determined that features added to the prescription after they are printed do not meet the requirement of the statute (ex. gel ink). Features that would make the prescription tamper-resistant include certain types of paper, as well as certain items that can be preprinted on the paper.

CMS further clarified that computer generated prescriptions printed by a provider on plain paper, including electronic medical record (EMR) computer generated prescriptions, may meet CMS guidelines by containing one or more industry-recognized features designed either to prevent the erasure or modification of information contained on the prescription, or to prevent the use of counterfeit prescription forms. According to CMS, computer generated prescriptions printed by a prescriber on plain paper will not meet the requirement that prescriptions contain one or more industry recognized features designed to prevent unauthorized copying of a completed or blank prescription form. Therefore, effective October 1, 2008, computer generated prescriptions must be printed on paper that meets one of the following requirements:

- 1) One or more industry-recognized features designed to prevent unauthorized copying of a completed or blank prescription form.
 - 2) One or more industry-recognized features designed to prevent the erasure or Modification of information written on the prescription by the prescriber.
 - 3) One or more industry-recognized features designed to prevent the use of counterfeit prescription forms.
- ByEffective October 1, 2008, a prescription pad/paper must contain at least one feature in each of the **three** categories above.

If you would like additional information regarding tamper resistant prescription pad requirements, please visit: <http://www.cms.hhs.gov/center/intergovernmental.asp>

Exceptions:

Exempt from the tamper-resistant requirement are prescriptions that are:

- Faxed to the pharmacy from the provider's office.
- Telephoned to the pharmacy by the provider.
- E-prescribed.
- Refills for which the original prescription was filled before April 1, 2008

REPORT FROM THE BOARD OF PHARMACY THE CONTROLLED SUBSTANCE DATABASE

The Board of Pharmacy houses and provides administrative support for the Controlled Substance Database. Currently the database receives about 1.7 million prescriptions per month. The top five medications reported in order are:

- Hydrocodone/Vicodin®, Lortab®, Tussionex®, etc...
- Zolpidem/Ambien®
- Propoxyphene/Darvocet®, Darvon®
- Oxycodone/Percocet®, Percodan®, Roxicodone®, etc...
- Diazepam/Valium®

Currently, there are 4,600 prescribers and 2,100 pharmacists using the database. The feedback from prescribers and pharmacists indicate that they are using the system and it is having a positive impact on the treatment regimens of their patients. If you would like more information on the Controlled Substance Database, please visit: <http://health.state.tn.us/Boards/ControlledSubstance/index.shtml>

REMINDER TO PHYSICIAN ASSISTANTS

Regarding the Controlled Substance Database Reporting Requirements

ATTENTION PHYSICIAN ASSISTANTS WHO INTEND TO DISPENSE: The Controlled Substance Monitoring Act of 2002 was enacted on July 3, 2002, codified as Tenn. Code Ann. §53-10-301 et. seq. for the creation of the controlled substance database ("database"). Dispensers (**prescribers who dispense** and pharmacists) are required to submit data to the Controlled Substance Database about the controlled substances dispensed, (including strength and quantity) along with the patient's name, twice each month.

IF YOU INTEND TO DISPENSE FROM YOUR OFFICE, it is imperative that you understand the above referenced statute

and adhere to it strictly and understand that should you dispense from your office, you are required to report under this statute. Your failure to submit information to the database is grounds for denial of licensure, renewal of licensure, or other disciplinary action against you before the Board of Medical Examiners including revocation, suspension or other appropriate discipline, including civil penalties.

For more information regarding your statutory obligations as physician dispensers, please visit the Web at <http://health.state.tn.us/Boards/ControlledSubstance/index.shtml>. If you have any questions regarding these reporting requirements, please contact Optimum Technology at (866) 683-9771 or e-mail tnrxreport@otech.com.

PHYSICIAN ASSISTANTS IN TENNESSEE

As of June 30, 2008, there were 1,002 physician assistants licensed by the Board of Medical Examiners' Committee on Physician Assistants. Eight hundred eighty-three **have mailing addresses** in the state while six hundred thirty-two have a **practice address** in Tennessee.

TENNESSEE WEB IMMUNIZATION SYSTEM

Since 2003, the Tennessee Department of Health has offered many providers access to the State Immunization Registry. The Tennessee Web Immunization System (TWIS) allows users to perform a number of operations; to conduct patient searches, verify patient immunization information is accurate and complete, update patient information, print pre-populated school certificates for daycare and school, and initiate new patient records. Users may also get access to the latest links to other web sites as indicated to get more specific information on vaccines, vaccination strategies or current information from the Tennessee Immunization Program.

With over 2,500 users and 900 providers, TWIS users have helped to increase the number of patients in the registry to 1.4 million patients and 12 million vaccinations. With its simple, easy-to-use screens and sources for credible and secure information, TWIS can effectively reduce wasted time by reducing the number of calls to the local health department for immunization records and increase office productivity.

To register for TWIS online, go to <https://twis.tn.gov>. For more information please contact us through e-mail at healthimm@state.tn.us or by phone at 1-888-894-7435.

CONSUMER RIGHT-TO-KNOW

The Health Care Consumer Right-to-Know Act of 1998, Tennessee Code Annotated, § 63-51-101 et seq, requires physicians **who have submitted information to update that information in writing by notifying the Department of Health, Healthcare Provider Information Unit, within 30 days after the occurrence of an event or an attainment of a status that is required to be reported by the law. Failure to comply with the requirement to update profiling information constitutes a ground for disciplinary action against your license.**

Visit the web site at: <http://health.state.tn.us/Downloads/g6019027.pdf> for information on updating your practitioner profile.

CHANGE OF ADDRESS

Must be reported (in writing or by e-mail) to the Committee's Office within 30 days! Please include the following:

- Your name and license number;
- Your profession;
- Your old address and phone number;
- Your new address and phone number, e-mail address, and/or your fax number;
- Your SIGNATURE!

Keeping the Committee's administrative staff up to date on your location facilitates the timely notification to you of important information such as your application for licensure renewal and important statutory and rule changes. You may fax your change to the Committee's administrative office at (615) 253-4484 or by mail at: 227 French Landing, Heritage Place MetroCenter, Suite 300, Nashville, TN 37243. Of course you can e-mail the Committee at: TN.Health@state.tn.us.

POLYSOMNOGRAPHY PROFESSIONAL STANDARDS COMMITTEE

The Polysomnography Practice Act established the Polysomnography Professional Standards Committee of the Board of Medical Examiners which will license and regulate those who assist physicians in diagnosis and treatment of patients with sleep disorders. The Act was effective July 1, 2007. The Committee has now met and authorized for rulemaking hearing a chapter of rules. After the rules become effective, Polysomnographers will be required to be licensed by the Committee and the Board in order to perform polysomnography procedures. The Board's administrative office will update the internet when rules are effective.

REMINDER REGARDING CONTINUING MEDICAL EDUCATION

All persons licensed as a physician assistant must comply with Rule 0880-3-.12 regarding continuing medical education as a prerequisite to licensure renewal. That rule provides that:

(a) All physician assistants must, within a two (2) year period prior to the application for license renewal, complete one hundred (100) hours of continuing medical education satisfactory to the Committee.

1. At least one (1) Category I hour of the required continuing education hours shall address prescribing practices.
2. The division of hours between Category I and Category II continuing medical education must be consistent with the requirements of the N.C.C.P.A. as described on the most current N.C.C.P.A. "Continuing Medical Education Logging Form."

(b) The Committee approves a course for only the number of hours contained in the course. The approved hours of any individual course will not be counted more than once in a calendar year toward the required hourly total, regardless of the number of times the course is attended or completed by any individual.

(c) The committee may waive or otherwise modify the requirements of this rule in cases where there is retirement or an illness, disability, or other undue hardship which prevents a physician assistant from obtaining the requisite number of continuing education hours required for renewal. Requests for waivers or modification must be sent in writing to the Committee prior to the expiration of the renewal period in which the continuing education is due.

The Committee's administrative office randomly audits licensees to assure compliance. If you have affirmed on your renewal that you have complied with the Committee's continuing medical education requirements and the audit shows otherwise, you could be subject to disciplinary action.

STATUTORY CHANGES OF INTEREST TO TENNESSEE PHYSICIAN ASSISTANTS

The 2008 Legislative Session has ended, and the Committee's administrative staff has monitored several bills that are of interest to physicians in the state of Tennessee. Below is a brief summary of those bills. If you wish to review any of these Public Chapters in their entirety, please visit: <http://www.tennessee.gov/sos/acts/index.htm>.

Public Chapter 768

HEARING SCREENING OF NEWBORNS

Every newborn infant shall be screened for hearing loss in order to prevent the consequences of unidentified hearing loss unless the parent or parents of the child object on the grounds that the test would conflict with the parent or parents' religious tenets or practices. The complete text of the Public Chapter is available on the web site at: <http://state.tn.us/sos/acts/105/pub/pc0768.pdf>

This Public Chapter became effective on July 1, 2008.

Public Chapter 874

DEPARTMENT TO CONSULT WITH PEDIATRIC GROUPS

This new Public Chapter requires the Department of Health to consult with organizations representing Tennessee pediatricians to develop standards for dissemination of information regarding conditions and diseases which commonly affect newborns, including respiratory syncytial virus (RSV).

The complete text of the Public Chapter is available on the web site at: <http://state.tn.us/sos/acts/105/pub/pc0874.pdf>

This Public Chapter became effective on July 1, 2008.



DISCIPLINARY ACTION 2008

The Committee took action against the following physician assistants during 2008:

Rondal L. Brock, P.A. – Date of Action: 1/22/08. License Revoked; and assessed costs. Unprofessional, dishonorable or unethical conduct; violation or attempted violation, directly or indirectly, or assisting in or abetting the violation of, or conspiring to violate, any provision of the Physicians Assistants Act or any lawful order of the Committee and Board issued pursuant thereto, or any criminal statute of the State of Tennessee; and conviction of a felony, conviction of any offense under state or federal drug laws, or conviction of any offense involving moral turpitude.

Ronald L. Flowers, P.A. – Date of Action 1/22/08. License Revoked for a period not less than one (1) year; must immediately surrender DEA certificate and not write prescriptions for the duration of the revocation period must meet certain terms and conditions; and assessed costs. Unprofessional, dishonorable or unethical conduct; Violation or attempted violation of, or conspiring to violate, any provision of the Physicians Assistants Act or any lawful order of the Committee and Board issued pursuant thereto, or any criminal statute of the State of Tennessee; habitual intoxication or personal misuse of any drugs or the use of

intoxicating liquors, narcotics, controlled substances, or other drugs or stimulants in such a manner as to adversely affect the person's ability to practice as a physician assistant; habitual intoxication or personal misuse of drugs or the use of intoxicating liquors, narcotics, controlled substances or other drugs or stimulants in such a manner as to adversely affect the person's ability to practice as a physician assistant; conviction of a felony, conviction of any offense under state or federal drug laws or conviction of any offense involving moral turpitude; ; dispensing, prescribing, or otherwise distributing any controlled substance to any person in violation of any law of the state or of the United States of America or any rule of the Board or Committee; and dispensing, prescribing, or otherwise distributing any controlled substance to any person in violation of any law of the state or of the United States of America or any rule of the Board or Committee.

James G. King, P.A. – Date of Action: 5/13/08. License Revoked for at least two (2) years; must meet certain terms and conditions; and assessed costs. Unprofessional, dishonorable, or unethical conduct; violation or attempted violation, directly or indirectly, or assisting in or abetting the violation of, or conspiring to violate, any provision of the Physician Assistants Act or any lawful order or the Committee and Board issued pursuant thereto, or any criminal statute of the state of Tennessee; conviction of a felony, conviction of any offense under state or federal drug laws, or convictions of any offense involving moral turpitude; dispensing, prescribing, or otherwise distributing any controlled substance or any other drug not in the course of professional practice, or not in good faith to relieve pain and suffering, or not to cure an ailment, physical infirmity or disease; and dispensing, prescribing, or otherwise distributing any controlled substance to any person in violation of any law of the state or of the United States of America or any rule of the Board or Committee.

Carl E. Dean, P.A. – Date of Action: 7/22/08. License placed on Probation for not less than two (2) years; must surrender DEA certificate and shall not obtain a new certificate prior to the expiration of the probation period; must meet certain terms and conditions; and assessed costs. Unprofessional, dishonorable or unethical conduct; dispensing, prescribing or otherwise distributing any controlled substance or any other drug not in the course of professional practice, or not in good faith to relieve pain and suffering, or not to cure an ailment, physical infirmity or disease; dispensing, prescribing, or otherwise distributing any controlled substance to any person in violation of any law of the state or of the United States of America or any rule of the Board or Committee; and in violation of T.C.A 63-19-107(2) and O.C.R.R.S.T. 0880-3-.10 and 0880-3-.21.



Tennessee Board of Medical Examiners'
Committee on Physician Assistants
Committee Members

Glen Alexander, PA
Clarksville, TN

James William Montag, PA
Telford, TN

Johnny S. Nowlin, PA
Soddy-Daisy, TN

Johnny W. Presley, PA
Crossville, TN

Jonathan Stephen White, PA
Tullahoma, TN 37388

Gary L. Tauxe, OPA
Cordova, TN 38018

Anne Arney, JD
Public Member

Board Staff

Larry Arnold, M.D.
Medical Director

Rolanda Stewart
Licensing Technician

Rosemarie Otto
Executive Director

LaTonya Shelton
Board Administrator

Marsha Arnold
Unit Manager

Carolyn Jones
Licensing Technician