

Tennessee Board of Medical Examiners Development Committee

Tuesday, July 30, 2024

MINUTES

The Development Committee meeting of the Tennessee Board of Medical Examiners was called to order at 8:05 a.m. in the Nashville Room, Third Floor, William R. Snodgrass Tennessee Towers, 312 Rosa Parks Avenue, Nashville, Tennessee 37203 by Dr. Stephen Loyd.

Committee members present: Stephen Loyd, MD Committee Chair

Melanie Blake, MD

Ricky Shelton, Consumer Member

John McGraw, MD

Staff present: Francine Baca-Chavez, JD, Office of General Counsel

Stacy Tarr, BME Executive Director Brandi Allocco, Administrative Director Samantha Green, Board Administrator

The meeting was called to order by Dr. Stephen Loyd with a roll call of members and staff present. Having determined a quorum with four members present, Dr. Loyd opened the meeting with a moment of silence.

I. APPROVAL OF MAY 28, 2024, DEVELOPMENT COMMITTEE MEETING MINUTES

Having reviewed the minutes in advance of the July 2024 Development Committee meeting, Dr. John McGraw motions to approve the meeting minutes for the May 28, 2024 Development Committee meeting. Dr. Melanie Blake seconds the motion and the motion passes.

II. DISCUSS AND TAKE ACTION AS NEEDED REGARDING ADVISORY RULING

Zahara Shariff, MD, requested guidance in following the in-person site requirement when there is not a physical location to visit because Dr. Shariff's company provides telehealth services. It is the understanding of the Committee from the information provided that all nurse practitioners work from home seeing patients virtually. The supervisory relationship must be in accordance with all applicable rules governing a physician's supervision of a nurse practitioner. Regarding supervision, Board Rule 0880-06-.02 requires a supervising physician to visit any remote sites of their supervisees every thirty (30) days. This is true even if the nurse practitioner is practicing telemedicine and whether or not they are practicing in a location geographically distant from their supervising physician. While this rule has not been amended, on April 29, 2022, recent statutory changes made to both the Nursing and Physician

Assistant Practice Acts became effective which permit APRNs and physician assistants, (hereinafter "PAs") to arrange for the required personal review of the APRN's or PA's charts by a collaborating physician either to arrange for the required personal review of the APRN'S or PA's charts by a collaborating physician either via HIPAA-compliant electronic means or in person. The term, "HIPAAcompliant" as used in the statutes mean that the entity has implemented technical policies and procedures for electronic information systems that meet the requirements of 45 CFR § 164.312. The new statutes further provide that the number of required annual remote site visits by a collaborating physician by HIPAA compliant electronic means rather than at the site of the clinic is capped at ten (10). The term, "annual" as used in the statute means a rolling twelve-month period. In accordance with the statutes, all other of the required site visits by a collaborating physician to a remote site must take place in person at the site of the clinic. A copy of the statutory changes is attached for your review. This advisory ruling is not intended to supersede or replace any other guidance, policy, rule, or statute of the Board. It should be noted that, pursuant to T.C.A. § 63-6-101(a)(4), private letter rulings shall only affect the licensee making the inquiry and shall have no precedential value for any other inquiry or future contested case to come before the Board. Dr. McGraw motions to accept the draft letter as written. Dr. Blake seconds the motion, and the motion passes.

III. DISCUSS AND TAKE ACTION AS NEEDED REGARDING NPP COLLABORATION REQUIREMENTS

Under current statute and rules, site visits must be conducted once every thirty (30) days on a rolling twelve-month period. Of the site visits ten (10) may be conducted under HIPAA compliant electronic means, and at least two (2) must be conducted in person at the site of the clinic. Ms. Francine Baca-Chavez briefly went over Public Chapter 1042, which creates a taskforce comprised of a member from the Board of Medical Examiners, a member from the Board of Osteopathic Examination, a member from the Board of Podiatric Examiners, and three members from the Board of Physician Assistants. Under the new public chapter, if a Physician Assistant works solely via telehealth, site visits may be conducted by their collaborating physician solely via HIPAA compliant electronic means. This public chapter does not go into effect until rules have been promulgated. This public chapter only applies to physician assistants, although earlier versions of the bill contained nurse practitioners. In order for the Board of Medical Examiners to modify existing supervision rules, a taskforce must be formed with members from the interested boards. Dr. Loyd nominates Dr. Deborah Christiansen to sit on the Development Committee for the purpose of developing nurse practitioner supervision rules. Dr. McGraw seconds the motion and the motion passes.

IV. <u>DISCUSS AND TAKE ACTION AS NEEDED REGARDING COLLABORATION EDUCATION FOR LICENSEES (SVIMC AND TMA)</u>

Dr. Loyd requested this topic be added to the agenda to address concerns on the education of supervision and collaboration for licensees prior to disciplinary action. Dr. Blake suggests representatives from the Board be available at Tennessee Medical Association meetings and other professional meetings to discuss the requirements for supervision as well as where to find further resources once the supervision rules have been revised. Dr. Loyd proposes having representatives from the Board speak during "Capstone month" at the Tennessee medical schools, as well as highlighting the revisions on the Board's website and sending an email blast to all licensees.

V. DISCUSS AND TAKE ACTION AS NEEDED REGARDING MEDICAL SPA REVIEW

Dr. Kavita Vankineni, Board Consultant, requested this be added to the agenda as there has been an increase in complaints against medical spas. The complaints are generally concerning the non-registration of a medical spa. The statute does not allow for the promulgation of many rules for medical spas, and as a

result the medical spa rules mirror the statute. The frequently asked questions are in need of revision to further guide those looking to register a medical spa with the state. Ms. Francine Baca-Chavez went over the revisions to the frequently asked questions. Dr. McGraw motions to accept the changes to the frequently asked questions. Dr. Blake seconds the motion with the caveat that this may be revisited to look into further additions to the frequently asked questions at a future Development Committee meeting. The motion passes.

VI. <u>DISCUSS AND TAKE ACTION AS NEEDED REGARDING SPECIAL TRAINING LICENSE T.C.A. 63-6-207(d)</u>

This matter will be taken up by the full Board during the regularly scheduled meeting.

VII. <u>DISCUSS AND TAKE ACTION AS NEEDED REGARDING OUT-OF-PRACTICE TRIGGER GENETIC COUNSELORS, XRAY OPERATORS, AND SURGICAL ASSISTANTS</u>

Shaxper McCarver, legal intern from the Office of General Counsel, created a reentry license report for the Committee's consideration. Mr. McCarver looked at the licensure requirements for each of the listed professions in neighboring states and compiled a list of their out-of-practice policies. The Board's current policy mirrors that for medical doctors where reentry is required after two (2) years out of practice. Dr. Todd Tillmanns briefly discussed requirements for surgical assistants working in a hospital setting. Dr. Loyd motions to require two hundred fifty (250) hours of continuing education for genetic counselors, Xray operators, and surgical assistants who have been out of practice for a duration of up to five years. Those who have been out of practice for a duration of greater than five years, the medical consultant can make the determination for reentry pathways. Dr. Mcgraw seconds the motion and the motion passes.

VIII. <u>DISCUSS AND TAKE ACTION AS NEEDED REGARDING AMENDING LAPSED LICENSE POLICY TO</u> INCLUDE XRAY OPERATORS AND GENETIC COUNSELORS

Ms. Stacy Tarr, Executive Director for the Board of Medical Examiners, presented proposed policy changes to the current lapsed license policy for Xray Operators and Genetic Counselors. The Board's current policy does not address the professions separately. The proposed changes also include reducing the fines for Xray Operators and Genetic Counselors to one hundred dollars (\$100.00) for each month practiced while the license was lapsed. Dr. Blake motions to approve the lapsed license policy amendments as proposed. Dr. McGraw seconds the motion and the motion passes.

IX. <u>DISCUSS AND TAKE ACTION AS NEEDED REGARDING GENETIC COUNSELORS RULE 0880-13-.05(2)(D) – LENGTH OF TIME FOR A TEMPORARY LICENSE</u>

Ms. Tarr presented the current rule which does not give guidance on how long the temporary license should last. Under the current rules and statute, the license expires on the date listed on the license. Ms. Baca-Chavez states that while the rule should be updated to include a timeline, in the interim the Board may give guidance to the Board's administrative office for the licensure expiration date to be listed on the license. Dr. Blake motions to set the expiration date in the licensure system as one (1) year from the time the license is issued. Dr. McGraw seconds the motion and the motion passes. Further rule changes to define the temporary license timeline will be taken up at a future meeting.

X. PUBLIC COMMENT

There was no public comment.

The meeting adjourned at 9:12 am.