



**TENNESSEE BOARD OF OSTEOPATHIC EXAMINATIONS
Regular Board Meeting**

August 12, 2015

MINUTES

A regular meeting of the Tennessee Board of Osteopathic Examination was held in the Poplar Conference Room, at 665 Mainstream Drive, Nashville, TN 37243 on August 12, 2015.

Members Present: Jan Day Zieren, DO
Donald H. Polk, DO
Jeffrey L. Hamre, DO
Shant H. Garabedian, DO
R. Fletcher Lance, Consumer Member

Members Absent: J. Michael Wieting, DO

Staff Present: Candyce Waszmer, Administrator
Stacy Tarr, Administrative Director
Maegan Carr Martin, Executive Director
Francine Baca-Chavez, Deputy General Counsel

The necessary number of Board members joined the meeting and a quorum was established. Board of Osteopathic Examination Chair, Donald Polk, DO, called the meeting to order at 9:05 a.m.

Applicant Interview(s):

No applicant interviews were held.

Solicitor General Office presentation on North Carolina Dental Board v FTC

Andrée Sophia Blumstein, Solicitor General for the State of Tennessee, presented a discussion, on the anti-trust law, in regards to the United States Supreme Court decision on the North Carolina Dental Board v The Federal Trade Commission. Per Ms. Blumstein, prior to this case it was assumed that each Board was considered a state agency in which granted automatic immunity for actions taken.

A summary of the aforementioned case as presented by Ms. Blumstein: There had been a surge of teeth whitening shops opening and offering teeth whitening services at a lower cost than Dentist's, in the North Carolina marketplace. Dentists in North Carolina approached the North Carolina Dental Board (hereafter NC Dental Board) because the teeth whitening shops were cutting into their profits. The NC Dental Board took action by issuing about 50 cease and desist letters, to those teeth whitening shops, and claimed that they were engaging in criminal activity by practicing dentistry without a license. The NC Dental Board also approached the North Carolina Cosmetology Board and informed them to not provide teeth whitening because then those individuals providing the service will be practicing dentistry without a license. Also, the NC Dental Board threatened mall operators and owners to close teeth whitening kiosks under similar premises as the other efforts to cease this service. All despite, providing teeth whitening was not substantiated as the practice of dentistry according to North Carolina's legal definition of dentistry at this time.

The Federal Trade Commission then charged the NC Dental Board with anti-competitive and unfair trade practices in violation of the Federal Anti-Trust laws. The NC Board claimed they were immune from suit under the anti-trust laws due to acting as a state agency and state agencies being generally immune from anti-trust laws. It was determined that because the NC Dental Board was controlled by active participants in the market, of which the Dental Board was regulating, the anti-trust immunity that would otherwise exist could only be available if the Board was subject to active state supervision.

The impact on TN Boards is to determine what active state supervision is and how to ensure the regulatory boards receive active state supervision to preserve anti-trust laws immunity. When one engages in licensing activity there is an element of anti-competitiveness because when you do not license someone you are excluding that person from the market and when you promulgate rules and regulations that make it more difficult for somebody to enter the market you are creating a barrier to entry.

Ms. Blumstein declared that one way to preserve immunity for its members is to not be controlled, in majority, by active participants in the marketplace and for those members of the profession participating to not hold leadership roles. She followed by recognizing that this would not happen because it is overall agreed that the Boards should be compromised of active marketplace members who are knowledgeable about the profession of which they are regulating. The other option would be to ensure state supervision is applied when engaging in activities that could potentially be considered anti-competitive.

She advised that reasonable constraints on competition are not in violation of anti-trust laws. Per a litigated case in the US Supreme Court; you can safely prohibit members of your profession from engaging in fraudulent business practices. An example Ms. Blumstein provided included prohibiting an Osteopathic Physician, through rules and regulations, from falsely advertising expertise and/or services foreign to their scope of practice. However, prohibiting an Osteopathic Physician from advertising the services they truthfully offer cannot be limited through rules and regulations by the Board. She stated overall it does not matter if your intentions are true to protect the public or a population, if it is otherwise considered an anti-trust violation you are not protected by immunity just for doing a good thing.

A rule of thumb in thinking about whether you are contemplating doing something that could be an anti-trust violation is to consider if the action will benefit you, the Board members, directly or indirectly as a professional. If the answer is yes or maybe, then the Board should consider receiving

state supervision to ensure that what they are contemplating is consistent with state policy. She stated moving forward with licensing professionals based on announced standards that are reasonable and reasonably related to holding the practice at a high standard level and safety of the public will not be an issue of with anti-trust violations. However, price fixing is a clear anti-trust violation. As an example, Ms. Blumstein reported that the Nashville lawyers association promulgated a fee schedule to standardize fees for all attorneys to use and demanded that all members of the BAR utilize the price list. However, the price list did not allow consumers a choice in price values for service.

Per Ms. Blumstein, the Supreme Court did not offer specifics on the definition on state supervision but did regard that active state supervision is flexible and context dependent. Also, that active state supervision must come from a politically accountable branch of the state; i.e. the legislature, the executive branch, and the judicial branch (by an elected appellate judge). Active state supervision does not include daily micro-management but the state supervisor must review the substance of the potentially anti-competitive decision and cannot be an active participant in the market. Also, the supervisor must have the power to modify or veto the decision. She advised that the first place the Board would seek assistance on state supervision would be by requesting help from the Board's legal counsel, who would then seek appropriate oversight.

Ms. Blumstein spoke to current review processes already in place and reported that the Attorney General's office reviews all rules and regulations but they do not review for compliance with state policy nor ensure they do not have anti-competitive effects. However, the Governors' office reviews rules and regulations and ensures consistency with state policy, to include anti-competitive issues. The Governors' office has been doing this all along and will be completing this process more strongly now.

Dr. Shant Garabedian raised a question about how to determine if you are acting within the Board's regulatory authority and protecting the public from unsafe practices from individuals who may not fully be trained or educated compared to another profession. Examples proposed by Dr. Garabedian are 1) pharmacists prescribing medication and; 2) teeth whitening could have long term negative side effects and preventing such practice outside of the profession of dentistry could be seen as protecting the public. Ms. Blumstein stated that if what the Board wishes to regulate is not within the definition of their profession's scope of practice then choosing to seek legislative support in adjusting the definition would be a better avenue opposed to addressing the individuals engaging the practice and setting limitations without proper state supervision or authority.

Dr. Polk spoke to Dr. Garabedian's mentioning of pharmacist's desire to prescribe medication. Dr. Polk stated that this issue was first passed by the legislature and signed by the Governor. Also, that the Bill included a provision requiring collaboration among the Board of Medical Examiners, Board of Osteopathic Examination and the Board of Pharmacy to promulgate rules. Dr. Polk states that this example redefines Ms. Blumstein's suggestion that the Board could choose to seek legislative support prior to taking action on a potentially anti-competitive violation. Also, Dr. Polk stated and Ms. Martin confirmed that the two hours of continuing medical education in regards to prescribing practices, to include instruction on the Tennessee Department's Chronic Pain Guidelines, originated with the legislature before the Board enforced this statute through rule changes.

Dr. Jeffery Hamre asked for clarification on how the members of the NC Dental Board joined the Board and how that reflected in the Supreme Court case. Ms. Blumstein stated one of the NC Dental Board's defenses was that they are appointed by the Governor and that makes them a state agency. The Supreme Court ruled that how you get on the Board is immaterial and that what matters is what

self-interest the member has and how action, they take on the Board, affects their self-interest in the profession. She stated that how members are constituted on the Board does vary by State but the Supreme Court did rule that this was not sufficient enough to claim state immunity.

Dr. Polk questioned an earlier statement of Ms. Blumstein in regards to state supervision not being someone who is of the same profession. Ms. Blumstein clarified that the supervisor cannot be an active market participant in the profession. Therefore, a retired individual who does not have a financial interest to consider or an individual not actively practicing in the profession for which it is supervising during the time of supervision could provide supervision.

Dr. Polk asked Ms. Blumstein if she feels that the Tennessee Osteopathic Board is presently in compliance with the Supreme Court's decision and she reported yes. Ms. Blumstein indicated that the Attorney General's office will keep the Board apprised of any additional and/or useful information.

Minutes

Dr. Hamre made a motion to approve the minutes from the May 6, 2015 meeting of the Board and Dr. Jan Zieren seconded the motion. The motion carried unanimously.

Review and Ratification of Licenses

Dr. Garabedian made a motion to ratify all new and reinstatement applications. Dr. Hamre seconded the motion. The motion carried unanimously.

DOX Re-entry Option

Ms. Maegan Martin directed the Board members to Osteopathic Rule 1050-03-.09 (3) (c), which provides in relevant part:

If requested, after review by the Board, a designated Board member, or the Board's consultant appear before either the Board, a Board member, or the Board Designee for an interview regarding continued competence in the event of certification retirement, certification expiration or other practice inactivity in excess of two (2) years and meet such other requirements the Board feels necessary to establish current levels of competency.

Ms. Martin informed the Board that the Board of Medical Examiners' (hereinafter "BME") rules and regulations contain the same language. Because the BME has had a number of recent applicants who have been out of practice for two (2) or more years, the BME's development committee is considering the development of a reentry policy. She acknowledged that the Board only has about fifteen (15) certified x-ray operators in Tennessee, so this issue will not appear before this Board with the frequency it appears before the BME. She added that this information is being offered for information only, no action is necessary, but that the development committee will be meeting in the following week, most likely to be scheduled for Tuesday August 18th or Wednesday August 19th, 2015.

Dr. Polk suggested that it may be permissible for a member of the Board to join in on the development committee call, and asked Ms. Martin if she would circulate the meeting date and time

of the development committee. Updates on this issue will be brought before the Board as they are available.

Unauthorized X-Ray Operation

Recently, the administrative staff became aware of an individual employed at an osteopathic physician's office that was operating x-ray equipment without the appropriate certification. In the process of addressing this issue, administrative staff learned that while the BME has a policy addressing the unauthorized operation of x-ray equipment, the Board has no such policy. In an effort to bring uniformity to the BME and this Board and the administrative processes, Ms. Martin provided a draft policy for Unauthorized X-ray use specific to the Osteopathic Board. She stated that the Board is free to modify, decline, or create their own policy to address unauthorized x-ray equipment use.

Ms. Martin added that in this particular circumstance, the issue was resolved without action, since Board R.1050-03-.03 (6) permits anyone who holds medical doctor x-ray certification to practice in an osteopathic physician's office using the same certification. Dr. Polk inquired if the BME has the same rule. Ms. Martin responded that the BME does not have a similar provision. She also informed the Board that the BME x-ray rules are currently being discussed and a meeting is to follow to determine necessary adjustments in the rules. Dr. Polk and Ms. Martin agreed that consistency between the BME and BOE x-ray rules and policies is important. Dr. Hamre agreed and suggested that the BME be asked to consider revising their rule accordingly. He asked how urgent of a matter it is to make a decision on the presented policy. Ms. Martin stated that it is not urgent. Dr. Polk requested this policy be brought back for action at the Board's next regularly scheduled meeting, which is November 4, 2015.

Radiology Education Seminars

Ms. Martin summarized BOE x-ray rule 1050-03-.07 (1) which states once an x-ray program becomes Board approved the Director of the program is supposed to submit to the Board every two years, certain information so the Board can ensure their continued approval. The Board has received their first request for biennial renewal from Radiology Education Seminars (hereinafter "RES").

Ms. Martin asked the Board how they would like for these requests for renewal to be addressed. She informed the Board that these courses are all reviewed and approved by the BME as well, and the BME has designated Dr. Rene Saunders, Medical Director, to review these biennial requests. Ms. Martin suggested that the Board could have Dr. Saunders complete the review for them as well, or designate a member of the Board to review the content for approval. She outlined the information that is provided for review: the location of the course, the name of all personnel and their credentials of those providing the course instruction, and proof that at least 65% of their participants have passed the examination on their first attempt.

Dr. Polk suggested that bringing the requests to the full Board may be most appropriate. He also inquired about the total number of educational x-ray operator programs available and/or approved to ensure the Board is allowing individuals to have a variety to choose from. Ms. Martin estimated that there are five (5) Board approved educational x-ray operator programs in Tennessee. Dr. Polk stated that he has not seen the list of those approved educational programs and Ms. Martin agreed to circulate a list to the Board members following the meeting. Dr. Polk added that he would be

interested in seeing the list and seeing where DOX operators were educated. Ms. Martin will attempt to pull together some meaningful data for the Board.

Dr. Zieren questioned whether the Board is supposed to review the program itself or the operator's education. Ms. Martin confirmed that biennially the program itself is to be reviewed. Ms. Martin stated that prior to the next Board meeting the members will be given material on this RES course, and some further information referencing the Board's rules in this respect, for the Board to take action on at the next meeting.

CSMD

Ms. Martin advised the Board that at its last meeting it was decided that each agenda would include a standing agenda item to update the Board on the CSMD meetings. She informed the Board that the CSMD has not met since the Board had their May 6, 2015 meeting; however, there is a CSMD meeting scheduled for August 25th that she will attend, as well as Dr. Polk. Accordingly, an update will be available at the Board's next meeting.

Administrators in Medicine request

The Administrator's in Medicine (AIM hereafter) is an organization comprised of all of the Executive Directors and Executive staff for the state medical boards that offers beneficial tools such as ExecNet, training for investigators, a day at the FSMB meeting solely for Executive staff. Ms. Martin requested continued participation in AIM with a total cost of one thousand dollars (\$1000.00) that will be split between the BME and BOE. Dr. Hamre made a motion to approve Ms. Martin's request and Dr. Garabedian seconded the motion.

Dr. Zieren questioned if Ms. Martin were to miss any scheduled AIM meetings would it be beneficial to send a representative in her place. Ms. Martin confirmed that she will miss a meeting in October 2015 but that she is planning to attend the spring 2016 meeting. However, Ms. Martin assured the Board that she will have access to all resources available despite not being present at the October meeting. Also, that sending a representative may be beneficial but the cost proposed only pays for admission into AIM and meeting admission but not travel to and from the meeting. Dr. Polk spoke to the creditability of the AIM organization by affirming that AIM is a sister organization and is in alliance with the Federation of State Medical Boards (FSMB hereafter). Also, he mentioned that the FSMB has two Executive Directors from state Boards who are a member on the FSMB Board. Ms. Martin mentioned she was asked to run for office for AIM this year but has decided next year would be more feasible and wishes for the Board to allow continuity of participation. The motion carried unanimously.

Telemedicine Rules

The Board of Medical Examiners' drafted Telemedicine rules were previously circulated to the Board members for their informational review. These rules are being sent to the Attorney General's office for legality for the BME. Ms. Martin discussed that some of the provisions of that rule were preempted by legislation that passed this session, Public Chapter 261, and that we are waiting on feedback from the Attorney General's office.

Office of General Counsel

Ms. Francine Baca-Chavez reported that there are twenty-five (25) open cases against six (6) osteopathic physicians, no open cases against midwives, and one (1) Agreed Order to present to the Board. Also, there are no pending appeals at this time.

Ms. Baca-Chavez advised the Board that there is currently a need to promulgate rule-making. During this past legislative session the legislature repealed the intractable pain act, meaning there needs to be some elimination of terminology. She stated that Ms. Andrea Huddleston, the attorney for the BME, has worked towards revising the BME rules as needed and will be presenting the same suggested revisions to the Board today.

Agreed Order

Per Ms. Baca-Chavez, Brett Bolton, DO was granted a Tennessee license, number 1256, on May 7, 1998. His Osteopathic license is currently suspended pursuant to an order of summary suspension that was entered on November 25, 2014. Prior to the summary suspension, respondent operated a hair transplant practice in Brentwood, Tennessee and in Fort Lauderdale, Florida. On or about September 18, 2014, respondent was taken to the Bellevue Psychiatric Hospital after assaulting a stranger in the restroom of the 911 Memorial and claimed that he was Jesus Christ. While at Bellevue the respondent was generally uncooperative and disruptive. On or about October 1, 2014, the respondent was discharged by the court to continue in out-patient treatment. On or about October 11th, 12th, and 15th, 2014, the respondent posted a number of disturbing videos on a YouTube website in all claiming to be Jesus Christ and stating that he will run for President in 2016; and brags about many of the allegations that were made against him. On or about the middle of November 2014, the respondent established a website entitled Proof of God where in short he was claiming to be Jesus Christ. It is on those allegations that we base this Agreed Order. The parties have agreed to have Dr. Bolton's license suspended; in order for the suspension to be lifted the respondent agrees to undergo a multi-disciplinary evaluation with the University of Florida Recovery Center; forward the results of the evaluation to the disciplinary coordinator of the Board and comply with the evaluations recommendations. Also, if the evaluation requires the respondent to have continued follow up treatment the respondent must enter a monitoring agreement with the Professionals Resource Network in Florida. Also, at the discretion of the Board's medical consultant, in lieu of the multidisciplinary evaluation, the consultant can accept the psychiatrists' assessment or evaluation that respondent has undergone pursuant to a request by the Florida Board of Osteopathic Medicine. In any event, the respondent must continue to receive treatment for his bi-polar disorder by a medical professional and cause quarterly reports to be forwarded to the disciplinary coordinator for the Board for as long as the respondents' license is encumbered. The respondent also agrees to pay costs of the matter. Upon completion of the aforementioned terms the respondent may petition the Board for an order of compliance to have that suspension lifted. At that time he agrees to be placed on probation for a period of five (5) years. Also, as part of his order of compliance he must appear before the Board to seek the lifting of that suspension. As part of his conditions and probation the respondent shall continue to comply with all recommendations of his multi-disciplinary or other evaluation(s). If the recommendation of the evaluation requires the respondent to maintain a monitoring contract, with the Professional Resource Network of Florida, he is to cause quarterly reports to be submitted to the disciplinary coordinator detailing compliance with the terms of that monitoring contract. The respondent will also cause for the Professional Resource Network of Florida to notify the disciplinary coordinator, for the Board in writing, of any violation of that contract. Respondent also agrees to comply with all recommendations of the contract and maintain good and lawful conduct during that

five (5) year probationary period. The respondent is aware that this is formal disciplinary action that will be reported to the National Practitioner Databank.

The Board led a discussion along with Dr. Saunders, Ms. Baca-Chavez, and Mr. Dan Warlick representing the respondent. The consensus of the Board was not in favor of the terms within the Agreed Order as presented. A key point addressed was that the respondent should not be given an option for the disciplinary coordinator to review current evaluations and this potentially be accepted in lieu of a multidisciplinary evaluation. The Board expressed concerns of the order not offering the requested multidisciplinary evaluation to be presented to the full Board for review, opposed to it only requiring the Board's disciplinary coordinator to review the evaluation. Also addressed, were the Boards wishes for the respondent to complete a multidisciplinary evaluation through the Tennessee program, Vanderbilt Comprehensive Assessment Program, opposed to the Florida program. Lastly, the Board would prefer for the respondent to be required to seek monitoring in Tennessee if and when his suspension is lifted by the Board.

Ms. Baca-Chavez confirmed that the respondent has been practicing in the state of Florida since his license was summarily suspended in Tennessee. Mr. Warlick informed the Board that the Florida Board has been negotiating terms, a final order has not been issued for the respondent and his Florida license is presently unencumbered. After further discussion, the respondents' attorney and the Board agreed that it would be best to wait for the Florida Board to issue a final order before presenting a revised Agreed Order to this Board. At that point, this Board would be presented with the Florida Board's final order and evaluation updates to determine the necessary revisions of the Agreed Order, if an Agreed Order is still desired.

Dr. Garabedian made a motion to decline the Agreed Order as is and Dr. Hamre seconded the motion. The motion carried unanimously. This case was originally scheduled as a hearing for today and not appropriately amended, therefore Ms. Baca-Chavez will submit for an Agreed Order continuance. Dr. Brett Bolton, DO remains summarily suspended in the state of Tennessee with no agreements on how his suspension, if applicable, may be lifted.

Rule Making

Per Ms. Baca-Chavez, Ms. Andre Huddleston was prepared to provide the Board with a presentation about amendments to the BME rules; however, because of the delay she is not able to do that today and has asked to be deferred to the Board's November 4, 2015 meeting. Dr. Hamre requested for Ms. Huddleston's information to be sent in advance of their next meeting to allow the Board members time to review the material prior to the meeting. Ms. Baca-Chavez confirmed that this information will be provided to Board members prior to their November meeting.

FSMB Attorney's Workshop

Ms. Baca-Chavez requested for the Board to approve her attendance at the FSMB Attorney's workshop conference to be held November 12 and 13th, 2015 in Las Vegas, NV. The approximate cost is about two thousand dollars (\$2,000.00). She further stated that this workshop is specifically designed for attorneys who work in medical and osteopathic boards to discuss problems being experienced in each individual state. Dr. Polk inquired if anyone was in attendance at the previous meeting in Savannah and Ms. Baca-Chavez stated she was not employed with the state at that time but does believe other attorney's with the state were in attendance. Dr. Polk affirmed that he has been made aware that this is a valuable program. Dr. Zieren made a motion to approve Ms. Baca-Chavez'

request to attend the FSMB Attorney's workshop and Dr. Hamre seconded the motion. The motion carried unanimously.

Office of Investigations

Ms. Nichelle Dorroh informed the Board that there are seven (7) open complaints against osteopathic physicians in the Office of Investigations; which is a decrease from the fourteen (14) that were open at the Board's last meeting.

Disciplinary Coordinator

Ms. Dorroh directed the Board to the list of individuals currently being monitored by the Office of Investigations and the summary of monitored practitioners. Dr. Zieren questioned Ms. Dorroh on how the spreadsheet, provided to the Board, lay out was read in order to ensure the totals matched up. Ms. Dorroh rectified this concern by informing the Board that the totals at the top of the spreadsheet were totaled calculations from page 1 and 2 of the report, and that the chart could be read from left to right. The Board had no further questions or discussion.

Statistical Report

Ms. Stacy Tarr provided the following statistical information: between May 1, 2015 and July 31, 2015 there were fifty-four (54) new osteopathic physician applications received, two (2) new locum tenens applications, two (2) new osteopathic telemedicine physician application, one (1) special training osteopathic physician applications, and one (1) DO x-ray operator applications received. Per Ms. Tarr, there were fifty-two (52) new licenses issued for osteopathic physicians, thirteen (13) special training physicians, and four (4) reinstatements. Of the one hundred and twenty-eight (128) Osteopathic Physician renewals processed during that time, one hundred and two (102) were completed online, bringing the online renewal percentage to 80% for the Board. There were twenty-two (22) special training renewals with seven (7) completed online, bringing that online renewal percentage to 31%.

The total number of active osteopathic licensees as of July 31, 2015 is 1,294. The total number of active osteopathic licensees with a Tennessee mailing address is eight hundred and three (803). The total number of active osteopathic telemedicine licensees as of July 31, 2015 is twenty-three (23). The total number of osteopathic x-ray operators is fifteen (15). The total number of active professional midwives is forty-six (46).

Telemedicine Licensure & PC 261

Dr. Polk questioned if there will be any new Telemedicine licenses issued from here on out. Ms. Martin reported that Telemedicine licenses will be issued until the Board amends their rules and currently the administration is interpreting public chapter 261 to continue issuing Telemedicine licenses. She further stated that issuance of such licensure is in the BOE rules and is not preempted by public chapter 261; therefore the Board will need to take action to change the course. Dr. Polk inquired about the BME's steps toward rule changes and Ms. Martin stated that the BME has taken action and submitted rules to be reviewed by the Attorney General's office. Dr. Polk summarized the discussion by explaining that previously it was common to obtain a more restrictive Telemedicine license but nowadays it is common to obtain full licensure as Telemedicine is still considered as the practice of medicine. Ms. Martin reported that the time to discuss the rule changes is now as the BOE

rules are very outdated in terms of 1) continuing to issue a Telemedicine license, among a minority of states that still do, and 2) due to the outdated definition of the practice of Telemedicine as the practice of medicine that occurs across state lines. Dr. Polk requested to provide the BME updated rules and BOE telemedicine rules for the Board members to review between now and the next meeting. Ms. Martin confirmed any updated BME rules would be provided and this would be added to the November 4, 2015 meeting.

Collaborative Pharmacy Practice Taskforce

Ms. Martin reported that the Collaborative Pharmacy Practice rule was finalized but not yet submitted to the Attorney General's office. She stated that the rule making hearing is the next time that the Board and members of the public have an opportunity to weigh in. The Board of Pharmacy will be the Board who gets to promulgate the rule, so the rule making hearing will be held by the Board of Pharmacy and it will be open to the public. Dr. Polk requested an update on when the rule making hearing is scheduled. Ms. Baca-Chavez stated she is not presently aware of the status on the rules in the internal review process but she will inquire and provide the Board members with an update.

Dr. Polk commented, after the discussion on public chapter 494, in reference to the Collaborative Pharmacy Practice rules. He briefly stated that one topic of concern was the writing of prescriptions for controlled substances and Ms. Martin confirmed that the Board members have been previously presented with the finalized rule. Dr. Polk suggested that the Board members review this and if anyone has any suggestions to provide input through the administrative staff.

PC 494 Medical Spa Legislation

Ms. Martin informed the Board that public chapter 494 passed this session and that changed the medical spa legislation, in the definition of medical spa, to include physician's offices. That public chapter also directed the Board of Medical Examiners in consultation with this Board to promulgate rules. She further advised that the rules may be limited to only the authority of setting fees for an online registration for a medical spa. The Board has not been presented with draft rules yet because 1) administrative staff does not yet have data on how many people this will affect and 2) the technological structure is not set-up yet but this should be completed by January 1, 2016; which is the effective date of this public chapter.

Division of Health Licensure and Regulation

No reports were given.

Other Items at Board's Discretion

Dr. Hamre informed the Board that he previously e-mailed Ms. Martin in respect to the layout of the Board member list available on the Tennessee Department of Health's website. Dr. Hamre pointed out that the BME members' list displays their professional specialty and desired for the BOE members' list to reflect their professional specialties as well. A member chart was provided to the Board members to fill in their specialty and Dr. Hamre wished to confirm that all members filled in their specialty and that the chart be updated on the Departments website.

Dr. Garabedian wished to confirm the next scheduled meeting. Ms. Martin and Ms. Tarr advised that a list of all scheduled Board meetings will be sent to the members.

Dr. Polk moved to adjourn the meeting and Dr. Garabedian seconded the motion. The motion carried unanimously.

The meeting adjourned at 12:03 pm.

These minutes were ratified by the Board of Osteopathic Examination on November 4, 2015.