



**TENNESSEE BOARD OF
PHYSICIAN ASSISTANTS
REGULAR BOARD MEETING**

June 7, 2024

MINUTES

The regular meeting of the Tennessee Board of Physician Assistants (hereinafter, "the Board") was called to order on June 7, 2024, at 9:00 a.m. in the Iris Room, Ground Floor, Metro Center Complex, 665 Mainstream Drive Nashville, TN 37243.

Board Members Present: J. Seth Weathersby, PA-C
Andrew Hull, PA-C
C. Marie Patterson, Chair, PA-C
Robert Kasper, MD
Christina Free, Secretary, PA-C
Barbara Thornton, Consumer Member
Gregory Cain, PA-C

Board Members Absent: David Roberts, PA-C
Robert White, PA-C

Staff Present: Stacy Tarr, Executive Director
Brandi Allocco Administrative Director
Tracy Alcock, Office of General Counsel
Dexter Hawkins, Board Administrator
Emily Godwin, Fiscal Director

I. APPROVAL OF MINUTES

Mr. Weathersby proposed a motion to accept the minutes from the meeting held on April 19, 2024. This motion was seconded by Dr. Kasper and subsequently approved by the board.

Similarly, Mr. Weathersby initiated a motion to accept the minutes for the February 16, 2024, meeting. Dr. Kasper seconded this motion, which was approved by the board.

II. DEPARTMENTAL REPORTS

Financial Report/Fee Increase Rule Amendment

Emily Godwin provided a comprehensive financial report, placing particular emphasis on the proposed fee increase. During her presentation, Ms. Godwin highlighted that the initial application fee has remained unchanged since 1993, underscoring the need for a reassessment to align with current economic conditions and operational costs. She also noted that the Board had previously reduced the renewal fee in 2016, a decision that reflected the Board's responsiveness to the needs of its members at that time. Ms. Godwin's analysis reinforced the rationale for revisiting and updating these fees to ensure the Board's continued financial sustainability and effectiveness in fulfilling its regulatory responsibilities.

The report covered the financial performance for the first half of fiscal year 2024 (July 1, 2023, to December 31, 2023). It compares the previous fiscal years (FY2023 and FY2022) for expenditures and revenue.

Expenditures:

- Total direct expenditures for the first half of FY2024 were \$96,762.34, compared to \$183,488.50 in FY2023 and \$79,559.11 in FY2022.
- The largest expenditure categories were Salaries & Wages (\$53,183.76), Employee Benefits (\$14,322.73), and Professional Services & Dues (\$9,951.86).
- Allocated expenditures, which include administration, investigations, legal, and cash office costs, totaled \$121,683.79 in the first half of FY2024.
- Total expenditures for the first half of FY2024 were \$218,446.13, compared to \$436,549.79 in FY2023 and \$302,499.09 in FY2022.

Revenue:

- Board fee revenue for the first half of FY2024 was \$208,127.80, compared to \$411,815.00 in FY2023 and \$402,530.87 in FY2022.
- The report projects a 15-25% increase in application and renewal fees for FY2024, expected to generate an additional \$99,593 in revenue.

Net Position:

- The committee had a net loss of \$10,318.33 in the first half of FY2024, compared to a net loss of \$24,734.79 in FY2023 and a net gain of \$100,031.78 in FY2022.
- The projected cumulative carryover target for the end of FY2024 is \$391,978.06.

Technology Improvements:

- The board spent \$8,105.21 on technology improvements in the first half of FY2024, including LARS Improvements, Visual Investigator, and CSMD Gateway.
- The cumulative carryover balance at the end of the first half of FY2024 was \$280,727.66.

After thorough deliberation, the Board has resolved to proceed with a proposed fee adjustment, encompassing an increase in both the initial application and renewal fees. Under this new structure, the total fee for an initial application will amount to \$435.00, while the total renewal fee will be \$275.00. Mr. Cain formally moved to adopt these changes, thereby initiating the process for a rulemaking hearing. This motion was duly seconded by Mr. Weathersby, and subsequently passed with the Board's approval.

Administrative Office

- New Applications (April - June 2024)
- Full Physician Assistants: 87
- Temporary Physician Assistants: 0
- Reinstatements: 6
- Total New Licenses Issued: 68
- Total Renewals: 380
- Online Renewals: 344 (91% average)

- Active Licenses as of June 6, 2024:
- Total Physician Assistants: 3,879
- Tennessee Mailing Address: 3,200
- Orthopedic Physician Assistants: 8

Office of Investigations

The Board Statistical Complaint report is as follows: new complaints for PA open are twenty-two (22), total closed complaints are fourteen (14), twelve (12) were closed with no action, one (1) received a letter of concern, and one (1) was sent a letter of warning.

Of those numbers listed above, the following are regarding which category they fall under one (1) substance abuse, one (1) sexual misconduct, two (2) malpractice/negligence, twelve (12) unprofessional conduct, one (1) overprescribing, one (1) criminal conviction, and four (4) outside the investigative scope.

Under Orthopedic PAs, there were no new complaints.

III. CONDUCT NEW BUSINESS

Ratification of New Licenses

Mr. Weathersby initiated a motion to approve all licenses, which was seconded by Mr. Hull. The board approved this motion.

HB1862 / SB1727 PA Compact Law and Rule Amendment Discussion and appoint delegate to serve on compact commission.

Tracy Alcock presented the board with a new bill that passed HB1862 / SB1727. The bill, which requires a delegate to represent Tennessee in the compact. Key provisions of the new law include:

Purpose: The compact allows for the mutual recognition of PA licenses among participating states, enabling PAs to provide medical services across state lines. It establishes the Physician Assistant Licensure Compact Commission to oversee the implementation and administration of the agreement.

Compact Privilege: PAs who meet specific criteria, such as graduating from an accredited program, holding national certification, and having no disciplinary history, can obtain a "compact privilege" to practice in remote states. This privilege is valid until the expiration or revocation of the PA's qualifying license in their home state.

Adverse Actions: Participating states retain the authority to take adverse actions, such as suspension or revocation, against a PA's license or compact privilege. The home state where the PA holds a qualifying license has exclusive power to impose such actions, ensuring a fair and just process.

Data System: The compact requires participating states to submit licensure and disciplinary information to a centralized data system, ensuring efficient sharing of significant investigative information among states and keeping us well-informed.

Rulemaking: The Compact Commission is granted the authority to promulgate rules to facilitate the implementation and administration of the agreement. These rules have the force of law in the participating states.

Oversight and Dispute Resolution: The compact outlines mechanisms for oversight, including the Commission's ability to enforce compliance and resolve disputes among participating states.

Implementation: The compact will become effective once it is enacted into law by the seventh participating state. Subsequent states that join the compact will be subject to the established rules and bylaws.

The board deliberated on the selection of a delegate, during which Catherine Patterson was nominated. Mr. Cain moved to approve Catherine Patterson as the delegate to represent Tennessee, with Ms. Thornton seconding the motion. The motion was approved.

B2318 / SB2136 PA Endorsement Law, Rule Amendment Discussion, and Rule Task Force Delegates.

Tracy Alcock presented the board with a new bill that passed HB2318/ SB2136. The bill requires forming a task force and appointing a specific individual to discuss it with the administrative staff and general counsel's office. Key provisions of the new law include:

Expanded Scope of Practice for PAs: The bill authorizes PAs to perform a wide range of medical services, including diagnosis, treatment, minor surgical procedures, and drug prescribing—all within the usual scope of practice of their collaborating physician.

New Endorsement Process: The legislation creates an "endorsement" pathway for experienced PAs with at least 6,000 hours of postgraduate clinical experience. Endorsed PAs must not practice under strict protocols but maintain a collaborative agreement with a physician, which provides greater autonomy and flexibility for seasoned PAs.

Collaborative Practice Requirements: For PAs without endorsement, the law outlines detailed requirements for collaborative practice protocols between the PA and their supervising physician. This includes provisions for chart reviews, remote site visits, and consultation procedures.

Uniform Regulatory Framework: The bill establishes a task force of medical, osteopathic, and podiatric board representatives to develop uniform rules governing PA collaboration with physicians across different medical specialties. This aims to create consistency in PA practice regulations.

Expanded PA Roles: The legislation empowers PAs to complete and file medical certifications of death and to provide referrals for genetic counseling services, expanding their scope beyond direct patient care.

The board convened to determine the composition of the task force. During the discussion, Catherine Patterson, Gregory Cain, and Joseph Weathersby volunteered to serve on the task force. Joseph Weathersby moved to approve the three volunteers; a motion Barbara Thornton seconded. The motion carried.

Following this, Gregory Cain proposed that he serve as the sole liaison with the Office of General Counsel and the administrative team. Joseph Weathersby moved to accept Mr. Cain's nomination, and Mr. Hull seconded the motion. The motion was approved.

IV. OFFICE OF GENERAL COUNSEL AND PRESENTATION OF DISCIPLINARY ORDERS

Report from the Office of General Counsel by Tracy Alcock, Board Attorney

Ms. Tracy Alcock from the Office of General Counsel emphasized the crucial duty of the board members to ensure impartial and objective decision-making. This is a responsibility that each member should take seriously, as it is fundamental to the integrity of the board's work. Board members were asked to disclose any potential conflicts of interest regarding issues on the agenda to determine if recusal is warranted, further underlining their commitment to this duty.

Rules:

The Tennessee Legislature passed new laws in 2024 that will require the PA Board to amend its rules. These rule amendments will be discussed at the upcoming Board meeting.

Policies:

The Commissioner has approved a new Policy on Public Comment at Public Meetings, effective March 15, 2024. This policy will be provided in the Board materials.

Litigation:

As of May 2024, the Office of General Counsel has 4 open cases pertaining to physician assistants, and 1 active appeal in the matter of Allen Tate, P.A.

Legislation:

Two key bills were passed by the 113th Tennessee General Assembly that will impact the PA Board:

1. Senate Bill 2136 / House Bill 2318: This bill allows PAs to obtain an endorsement from the Board to practice with a collaborative agreement with a physician, rather than written protocols, after 6,000 hours of postgraduate experience. The Board will need to amend its rules to create a process for this endorsement and appoint 3 Board members to a task force to promulgate uniform collaboration rules.

2. Senate Bill 1727 / House Bill 1862: This bill enacts the Physician Assistant Interstate Licensure Compact, which has been adopted by 7 states so far. The Board will need to amend its rules to create a process for licensees to apply for a compact license.

The 114th Tennessee General Assembly will convene on January 14, 2025.

Petition(s) for Order Modification

1. Michelle Vasireddy, PA2607

Ms. Vasireddy seeks the board's approval to lift the restriction on her ability to prescribe controlled substances and to transition her license from suspension to probationary status. Represented by her attorney, Mr. Helmbrecht, Ms. Vasireddy has acknowledged her previous substance abuse issues and demonstrated her commitment to recovery by voluntarily relinquishing her DEA license and completing a 30-day inpatient treatment program in Florida.

Ms. Vasireddy remains under the Tennessee Medical Foundation (TMF) monitoring, and she has expressed her intention to continue with this monitoring even after her formal contract with TMF concludes. Mr. Helmbrecht emphasized that while her current employment alone may not suffice as grounds for modifying the existing order, he urged the board to consider the challenges posed by the COVID-19 pandemic, particularly the disruption of regular meetings during that time. Ms. Tamiaka Webb also supported Ms. Vasireddy, highlighting her full compliance with the agreement she signed on March 6, 2020. Ms. Webb noted that Ms. Vasireddy's urinalysis tests have returned negative, with no reported issues.

Following these deliberations, Mr. Cain moved to accept the proposed new order, which was seconded by Mr. Weathersby. The motion passed.

Public Comment

None

The meeting adjourned at 11:00 am.

These meeting minutes were ratified by the Board at their September 13, 2024, meeting.