



## **I. LEGISLATIVE UPDATE**

The legislative office provided a comprehensive overview of all enacted bills, which are outlined below.

PC.557 SB2074/HB1678: Transfers reporting duties from the health facilities commission to the department; birthing centers must report claims data quarterly.

PC.561 SB2075/HB1679: Limits dental hygienist supervision to three under general supervision; allows up to five under direct supervision during volunteer services.

PC.648 SB2398/HB2371: Extends the timeline for determining cause of death and completing medical certification from 48 hours to two business days.

PC.761 SB2482/HB2773: Enacts the "Cassie Wright Act," enhancing access to medical information for parents or guardians of unemancipated minors.

PC.783 SB1673/HB1625: Requires mental health professionals to warn identified victims of threats made by service recipients; provides legal immunity for such actions.

PC.808 SB2019/HB2060: Increases the number of patients a nurse practitioner or physician assistant can prescribe buprenorphine to from 50 to 100; allows supervision of five prescribers by a physician.

PC.831 SB1766/HB1882: Mandates healthcare providers to provide full medical records within 10 working days of a written request.

PC.857 SB2297/HB2308: Updates requirements for non-physician healthcare providers to prescribe buprenorphine for opioid use disorder.

PC.1027 SB1881/HB2857: Removes the requirement for an established provider-patient relationship prior to telemedicine visits.

PC.1030 SB1963/HB2176: Allows courts to award reasonable court costs and attorney's fees for violations of public meetings laws.

PC.1042 SB2136/HB2318: Clarifies the roles and collaborative agreements for physician assistants, including their scope of practice and prescriptive authority.

PC.980 SB2246/HB2093: Authorizes nurse practitioners and physician assistants to prescribe FDA-approved buprenorphine products under specific criteria.

PC.1061 SB2749/HB2936: Enacts the "Families' Rights and Responsibilities Act," requiring parental consent for certain treatments unless in emergencies.

PC.944 SB2588/HB2097: Requires state regulatory boards to issue advisory opinions upon request.

PC.1043 SB2151/HB2861: Prohibits coercion regarding vaccinations and misrepresentation of state law requirements for vaccinations and screenings.

## **II. ELECTION OF OFFICERS**

Mr. Cain moved to re-elect the current chair, Mrs. Patterson, to continue serving in her role. The motion was seconded by Mr. White and subsequently carried. Additionally, Mr. White moved to nominate Seth Weathersby as secretary, replacing Ms. Free. This motion was seconded by Mr. Cain and was also carried.

## **III. CONSIDERATION OF APPLICATIONS**

### **1. Clair Whitmore**

Ms. Claire Whitmore, PA-C, appeared before the Board for consideration of re-entry into clinical practice after a six-year absence. The Board reviewed her case under the Competency and Re-Entry Policy adopted on April 12, 2019. This policy applies to physician assistants who have been absent from clinical practice for four (4) to seven (7) years and outlines specific requirements to demonstrate current clinical competency.

In accordance with the policy, Ms. Whitmore was presented with two pathways for re-entry:

Completion of a formal assessment by a PLAS collaborator/program, with either no further training required or compliance with identified recommendations.  
Completion of a Committee-approved preceptorship, including a minimum eight-week clinical rotation and pharmacology instruction, supported by a temporary limited license.

After a thorough discussion, the Board determined that Ms. Whitmore should complete a 256-hour preceptorship under a limited license under the following terms:

1. The limited license shall be valid for a duration of up to six (6) months and is non-renewable.
2. Ms. Whitmore may only practice under the supervision of Dr. Jonathan Constant and Dr. Harvey Bowles.
3. Upon completion of the preceptorship, Dr. Constant and Dr. Bowles must submit a detailed evaluation to the Board of Physician Assistants, confirming Ms. Whitmore's clinical competency.
4. The limited license is subject to all rules and regulations applicable to a full and unrestricted license.
5. Violations of the practice act or applicable regulations during the limited license period will result in disciplinary actions, including potential denial of licensure upgrade.

Upon successful completion of the preceptorship and receipt of a positive evaluation from Dr. Constant and Dr. Bowles, the Board or its consultant will review the case for

approval of upgrading Ms. Whitmore's limited license to a full and unrestricted physician assistant license.

A motion to grant Ms. Whitmore a limited license with the outlined terms and conditions was made by Mr. White. The motion was seconded by Mr. Cain and carried unanimously.

#### **IV. APPROVAL OF MINUTES**

Mr. Hull proposed a motion to accept the minutes from the meeting held on June 7, 2024. This motion was seconded by Mr. Weathersby and subsequently approved by the board.

#### **V. DEPARTMENTAL REPORTS**

##### **Office of Investigation**

The Tennessee Department of Health presented the Board Statistical Complaint Report for 2024 concerning Physician Assistants (License Type 3628) and Orthopedic Physician Assistants (License Type 3629). The investigation report highlighted the complaint activity for the calendar year, including details of newly opened, closed, and ongoing cases.

##### Newly Opened Complaints (2024 Year-to-Date):

Total: 33 complaints opened.

Breakdown by month:

January: 7

February: 7

March: 1

April: 7

May: 4

June: 1

July: 5

August: 1

##### Closed Complaints (2024 Year-to-Date):

Total: 31 complaints closed.

Breakdown by outcome:

24 complaints closed without further action.

3 complaints closed with a Letter of Concern.

2 complaints closed with a Warning Letter.

2 complaints closed due to BIV, EMS, HCF, or AW findings.

Currently Open Complaints:

Total: 16 cases remain open as of August 2024.  
Nature of Allegations (2024 Year-to-Date):

Unprofessional Conduct: 19 cases.  
Malpractice/Negligence: 2 cases.  
Over Prescribing: 3 cases.  
Substance Abuse: 1 case.  
Sexual Misconduct: 1 case.  
Criminal Conviction: 1 case.  
Outside Investigation Scope: 6 cases.  
Regional Distribution of Complaints:

East: 11 complaints.  
Middle: 2 complaints.  
West: 1 complaint.  
Out-of-State: None.  
Unknown: 1 complaint.

Orthopedic Physician Assistants (License Type 3629):

No complaints were opened or closed for this license type (3629) in 2024.

### **Administrative Office**

Administrative Report on Physician Assistants for September 2024:

- New Applications Received:
  - Full Physician Assistants: 150
  - Temporary Physician Assistants: 1
  - Upgrades to Full Physician Assistant: 0
  - Physician Assistant Reinstatements: 4
  - No new Orthopedic Physician Assistant applications
- Total New Licenses Issued: 142
- Total Number of Renewals: 331
  - Total Number of Online Renewals: 313
  - Percentage of Renewals Completed Online: 94%
- As of September 12, 2024, the total number of active licenses:
  - Physician Assistants: 3,968
  - Physician Assistants with Tennessee mailing address: 3,261
  - Orthopedic Physician Assistants: 8

The report provides an overview of the licensing and renewal activity for physician assistants under the Tennessee Board of Medical Examiners' jurisdiction during the June 2024 to September 2024 time period.

## **VI. CONDUCT NEW BUSINESS**

### **Ratification of New Licenses**

Mr. Cain initiated a motion to approve all licenses, which was seconded by Ms. Thornton. The board approved this motion.

### **HB1862 / SB1727 PA Compact Law appoint a backup delegate to serve on the compact commission.**

Mr. Weathersby initiated a motion to appoint Mr. Hull as a backup delegate for the compact commission, which was seconded by Mr. Cain. The board approved this motion.

### **Discussion of High-Risk Prescribers**

The advisory attorney provided a detailed overview of the High-Risk Prescriber Policy, which is governed by Tennessee Code Annotated 68-1-28.

The policy mandates the identification of high-risk prescribers of controlled substances based on clinical outcomes, including patient overdoses. The Department of Health compiles lists, including the Top 50 Prescribers of Controlled Substances, the Top 20 Prescribers of Buprenorphine, and the Top 10 Prescribers in Smaller Counties. A separate High-Risk Prescriber List identifies providers associated with overdose deaths. Providers on the list receive certified letters and must respond as required by law. Failure to respond leads to follow-up actions and potential investigations. High-risk prescribers are required to complete board-mandated continuing education and provide educational materials to patients. The current policy requires review, with one outdated course identified for potential replacement. Questions were raised about the cost and accessibility of mandated education courses. The Board requested a detailed breakdown of course costs and duration for review in preparation for policy decisions. Concerns were discussed about the accountability of supervising physicians when a PA or NP under their supervision is flagged as high-risk.

The Board will further discuss and review the High-Risk Prescriber Policy at its next scheduled meeting on January 17, 2025. Topics for discussion will include:

1. Potential updates to continuing education requirements.
2. Analysis of historical data and trends for high-risk prescribers.
3. A detailed cost breakdown of current education courses.

## **VII. APPROVAL OF AGREED CITATIONS**

### **1. William Jason, PA 4230**

William Jason, PA, license #4230. The Board noted that Mr. Jason had failed to properly maintain the required continuing education credits, in violation of state law and regulations. Mr. Jason acknowledged this violation and agreed to the terms of the Agreed Citation, which included: Payment of a \$1,785 civil penalty, representing \$20 per delinquent continuing education credit hour, providing proof of completing the required continuing education credits within 180 days, Completing an additional 10 "penalty hours" of continuing education within 2

years By signing the Agreed Citation, Mr. Jason waived his right to a formal hearing and any further administrative proceedings. It was noted that the Citation will be reported on the Tennessee Department of Health's Disciplinary Action Report and website. Mr. Cain made a motion to approve the agreed citation; the motion was seconded by Mr. Weathersby. The motion carried.

## **2. Nicholas Blevens, PA 5039**

The Tennessee Board of Physician Assistants discussed the matter of Nick Blevens, license #5039. It was reported that Mr. Blevens had practiced as a physician assistant in the state of Tennessee on an expired license, which is a violation of Tennessee law. The board reviewed an Agreed Citation signed by Mr. Blevens, in which he acknowledged the violation and agreed to pay a civil penalty of \$300 to avoid further administrative proceedings. By signing the citation, Mr. Blevens waived his right to a hearing and agreed not to contest the validity of the disciplinary action. Mr. Hull made a motion to approve the Agreed Citation as presented, which was seconded by Mr. Cain. The motion carried.

## **VIII. 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.

The report mentions that the Legislature passed several bills in 2024 that will affect the PA Board, requiring rule amendments. The Board also voted to increase its fees and amend the rules accordingly. Policies: No specific updates on policies are mentioned. Pending Litigation: There are 4 open cases pertaining to physician assistants, with 1 consent order to be presented and 1 contested case hearing. Appeals: None. Civil Suits: None. Legislation: Senate Bill No. 2136 / House Bill 2318: This bill became law and allows PAs to obtain an endorsement to practice with a collaborative agreement with a physician after 6,000 hours of postgraduate clinical experience. Senate Bill No. 1727 / House Bill 1862: This bill became law and enacted the Physician Assistant Interstate Licensure Compact. The report provides a comprehensive overview of the key legal and regulatory updates relevant to the Board of Physician Assistants.

### **Consent Order(s)**

#### **1. Dereck G. Campbell, PA 2271**

Dereck G. Campbell, P.A. (the Respondent) is a licensed physician assistant in Tennessee, with license number 2271. On March 14, 2024, the Respondent self-reported to the Office of Investigations that he was impaired while on duty at his workplace, Watauga Surgical Group (WSG) in North Carolina. The Respondent reported seeking treatment with the North Carolina Physicians Health Program (NCPHP). The Respondent had a blood alcohol level of 209mg/dL (0.209%) while on duty. Violations: The Respondent's actions constitute violations of the Tennessee Physician Assistants Act and the Board's rules, specifically: Unprofessional or

unethical conduct Addiction to the use of alcohol, narcotics, or other drugs; professional, dishonorable, or unethical conduct; 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. Order: The Respondent's Tennessee physician assistant license is placed on probation for at least three (3) years. The Respondent must maintain 100% compliance with the requirements of his NCPHP monitoring agreement. The NCPHP and/or the Tennessee Medical Foundation must provide quarterly statements to the Board's disciplinary coordinator showing the Respondent's compliance. Any violation of the NCPHP monitoring agreement will result in additional disciplinary action, potentially including revocation of the Respondent's license. After the three-year probation period, the Respondent may petition the Board to have his license taken off probation and into an unencumbered status. The Respondent must pay the actual and reasonable costs of prosecuting this case, up to a maximum of \$5,000. Mr. Cain moved to approve the agreed citation, which was seconded by Mr. Roberts. The motion passed.

### **Petition for Order(s) of Compliance**

#### **1. Benjamin Reese, PA 2381**

The Tennessee Board of Physician Assistants reviewed the Petition for Order of Compliance filed by Benjamin Reese, PA, license #2381. The board noted that on February 16, 2024, a Consent Order was entered against Mr. Reese's license, which included the following disciplinary terms: Mr. Reese's license was reprimanded. He was prohibited from prescribing opioids, benzodiazepines, and Soma for 6 months or until he completed certain continuing education courses. He was assessed a \$1,000 civil penalty. He was required to pay the costs of the disciplinary proceedings, not to exceed \$3,000. The board reviewed the documentation submitted by Mr. Reese, including an affidavit from the Disciplinary Coordinator stating that Mr. Reese has complied with all terms of the Consent Order. After considering the materials provided, the board voted to issue an Order reflecting that Mr. Reese has complied with the terms of the previous disciplinary order and lifting the prohibition on his prescribing authority. Mr. Roberts made a motion to approve the order of compliance, which was seconded by Mr. Cain. The motion carried.

### **Public Comment**

None

Mr. Hull motioned to adjourn the meeting, and Mr. Cain seconded the motion. The motion carried.

These meeting minutes were ratified by the Board at their January 17, 2025, meeting.