

West Virginia Board of Osteopathy
NEWSLETTER

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Weirton WV 26062*

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May 6, 2008

Important

FOR YOUR INFORMATION—PLEASE READ

West Virginia Medical Professionals Health Program (WVMPHP)

In response to legislation signed into law on March 18, 2007, which authorized the WV Board of Medicine and the WV Board of Osteopathy to designate “programs in which physicians, podiatrists and physician assistants may be monitored while they pursue treatment and recovery for alcohol abuse, chemical dependency or major mental illness; enrolling on a voluntary basis without being subject to disciplinary action if the person complies with the goals and restrictions of the program,” the West Virginia Board of Osteopathy has designated the WVMPHP to fulfill this function. The legislation allows for confidential participation without the full knowledge of either board if treatment is related to self-administration of alcohol and other drugs and there is no evidence of patient harm. Physicians under investigation of either board may also be enrolled in the program while the appropriate board continues to investigate and/or take disciplinary action against the physician. When any physician enters the program, staff will check for any known board action against him or her. The mission of the program is “To protect healthcare consumers through seeking the early identification and rehabilitation of physicians, surgeons, and other healthcare professionals with potentially impairing health concerns including abuse of mood-altering drugs including alcohol, mental illness or physical illness affecting competency so that physicians, surgeons, and other healthcare professionals so afflicted may be treated, monitored and returned to the safe practice of their profession to the benefit of the healthcare profession and the patients we serve.”

Joseph Selby, M.D. is chair of the WVMPHP Board and P. Bradley Hall, M.D. is the medical director. You may contact the organization located in Charleston at 304-414-0400 or you may contact Dr. Hall at 304-677-9283. The e-mail address is pbh2006@hughes.net.

Drug Enforcement Administration—Schedule II Substances

Per information obtained from the DEA website: “A prescription for a controlled substance must be issued for a legitimate medical purpose by a practitioner acting in the usual course of professional practice. The practitioner is responsible for the proper prescribing and dispensing of controlled substances. Schedule II controlled substances require a written prescription which must be signed by the practitioner. An oral order is only permitted in an emergency situation. The refilling of a prescription for a Schedule II controlled substance is prohibited.”

Effective December 19, 2007, an individual practitioner may issue multiple prescriptions authorizing the patient to receive a total of up to a 90-day supply of a Schedule II controlled substance provided certain conditions are met, one of which allows the physician to indicate the earliest date on which a pharmacy may fill each prescription.

“In order to expedite the filling of a prescription, a prescriber may transmit a Schedule II prescription to the pharmacy by facsimile, but the original Schedule II prescription must be presented to the pharmacist for review prior to the actual dispensing of the controlled substance.”

An emergency prescription for a Schedule II Controlled Substance can be called in by the prescriber, but only for the amount needed during the emergency period. The prescriber must provide a written and signed prescription to the pharmacist within 7 days.

No controlled substance in Schedules III or IV may be dispensed without a written or oral prescription. These may not be filled or refilled more than 6 months after the date thereof or be refilled more than 5 times after the date of the prescription unless renewed by the practitioner.

For more information, please go to www.dea.gov.

Medicare & Medicaid E-Prescribing

E-prescribing is optional for physicians and pharmacies, but Medicare will require drug plans participating in the new prescription benefit to support electronic prescribing. The Centers for Medicare & Medicaid Services has released its final rule on e-prescribing, adopting uniform standards for medication history, formulary and benefits, and fill status notification for the Medicare Part D electronic prescribing drug program. The final rule also adopts the National Provider Identifier (NPI) as the standard for identifying health care providers for use in e-prescribing transactions. **These regulations go into effect on June 6, 2008.** WV Board of Pharmacy proposed emergency rules for the implementation of e-prescribing on January 4, 2008. You may also view www.cms.hhs.gov for further information.

2007 Board License Disciplinary Actions

Robert McCleary, D.O.: Five years probation; license suspended; license reinstated with Consent Agreement after hearing.
Steven Smith, D.O.: Two years probation; license suspended; license reinstated with Consent Agreement after hearing.
Barton Adams, D.O.: Summary suspension of license; suspension dismissed and license reinstated without restriction.
John F. Rice, PA-C: License placed on probation for 2 years, with restrictions.
James D. Lawrence, D.O.: Denial of license renewal.
Jeffrey Kent Bates, D.O.: License reinstated, on probation, for at least 5 years.

Physicians Face Changes in Tamper-Proof RX Pads

By April 1, written Medicaid prescriptions must have at least one feature to prevent unauthorized copying, erasure or modification, or counterfeiting. Written prescriptions must have a feature from all three categories by October 1. This law was adopted by Congress but does not apply to electronic, faxed or phoned prescriptions, or those paid for by Medicaid managed care organizations.

Features to prevent unauthorized copying:

Pantograph ("Void" appears when copied); Security back print; Reverse Rx or white area; watermarking.

Features to prevent erasure:

Non-white background; quantity ranges; refill indicator; Rx limit; Quantity and refill borders; Chemically reactive paper; Paper toner fuser.

Features to prevent counterfeiting:

Features list; Serial number; Batch number; Encoding techniques; logos; metal strip.

Collaborative Pharmacy Practice

A rule has been proposed jointly by the Boards of Medicine, Osteopathy and Pharmacy that becomes effective July 1, 2008. This pertains to a pharmacist's scope of practice pursuant to collaborative pharmacy practice agreements, and the selection of up to 5 pilot project sites in the community based pharmacy setting for collaborative pharmacy practice. Criteria needed for a pilot project site are a) designated patient care area for private conversation; b) ability to perform appropriate lab testing and take vital signs; c) capability of keeping comprehensive patient records in a HIPAA compliant manner; d) equipment must be maintained in an OSHA compliant and CLIA waived manner with appropriate records kept; and e) a maximum of one not for profit rural health care clinic may be given preference. For entire rule, visit www.wvdhhr.org/wvbom: Title 11, Series 8. If you are interested in further information or an application, contact the Board office.

Responsible Opioid Prescribing

The West Virginia Board of Osteopathy, in collaboration with the Federation of State Medical Boards, is providing this booklet to you to provide guidance with principles of appropriate pain management and effective prevention of narcotic abuse.

If you practice in WV and have not received this booklet by the end of May, please contact the Board office.

In Memoriam

Our deepest sympathies are extended to the families of: William Morrill, D.O.; Fred Saverice, D.O.; Mason Todd Corder, D.O. and Norman Wood, D.O.

Newest Osteopathic Medical Schools

Rocky Vista Univ. College of Osteopathic Medicine (CO)
Lincoln Memorial Univ. DeBusk College of Osteopathic Medicine in 2007 (TN)
Pacific NW Univ. of Health Sciences in 2008 (WA)

2008 HOLIDAYS—BOARD OFFICE CLOSED

May 13, 2008 - Primary Election Day
May 26, 2008 - Memorial Day
June 20, 2008 - West Virginia Day
July 4, 2008 - Independence Day
September 1, 2008 - Labor Day
October 13, 2008 - Columbus Day
November 4, 2008 - General Election Day
November 11, 2008 - Veterans' Day
November 27 & 28, 2008 - Thanksgiving
December 24, 2008 - 1/2 day holiday
December 25, 2008 - Christmas
December 31, 2008 - 1/2 day holiday



WV BOARD OF OSTEOPATHY

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OSTEOPATHIC PHYSICIANS: TREATING PEOPLE, NOT JUST SYMPTOMS