



West Virginia Board of Osteopathic Medicine

OSTEOPATHIC SUPERVISION OF PHYSICIAN ASSISTANTS

§24-2-5 outlines specific guidelines for osteopathic physicians to follow when supervising a physician assistant. If you currently supervise a Physician Assistant these are some of the things you should remember:

- 1) There is a separate application process for prescriptive writing privileges for a physician assistant. It is not automatic when granted a license to practice;
- 2) Monthly chart reviews must be conducted with the PA and the patient should be seen every third visit by the D.O.;
- 3) The Osteopathic Physician is legally responsible for the PA at all times;
- 4) Both the D.O. and the PA must notify the Board within 10 days of a change in their employment;
- 5) Board approval **MUST** be obtained before placing a PA in a satellite office.

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WV BOARD OF OSTEOPATHIC MEDICINE HAS NEW WEBSITE AND NEW LICENSING DATABASE!



In October 2012, the WV Board of Osteopathic Medicine purchased a new licensing database along with a re-design of its website: www.wvbdosteo.org. In early April the website will be available to the public as well as the osteopathic physicians and physician assistants. With this new implementation, the Board will be able to provide licensing information in real time. Online services will include; DO and PA license renewal applications, newsletters, forms, legislative rules, direct links to AOA, NCCPA, WV Legislature, WV Secretary of State, news articles, disciplinary actions and much more.

How the New Website Will **IMMEDIATELY** Affect You and Your License Renewal!!!



No license renewal applications will be mailed

No license renewal applications will be mailed to those physicians with a June 30, 2013, license renewal date. License renewals will be done online. **Just follow the following steps for renewal:**

- 1) From www.wvbdosteo.org click on "Renewals" in left hand column;
- 2) Log in with your last name, license number and last 4 digits of SSN;
- 3) Enter "Submit and Continue"
- 4) Continue to fill in all fields requesting information and enter "Submit and Continue;"
- 5) When answering the personal information questions, if you have a "yes" answer it will bring up a screen for you to type in your response;
- 6) Answer the State mandated child support questions;
- 7) Enter Specialty information and Employment information from drop down lists;
- 8) The CME report allows you to link directly with the AOA to obtain your CME hours;
- 9) There is also a place to waive the CME requirements for medical residents or military;
- 10) Lastly you check a certification box which attests to the accuracy of your information;
- 11) The next screen is the payment screen for you to enter your credit card information. You will be given the opportunity to print your receipt at the conclusion of the form.
- 12) The system will ask if you also want to renew your CSL and, if so, will prompt you for the required information.

If you do not have internet access and need a paper copy of your renewal application, please contact the Board Office (304) 558-6095, and request a mailed copy. If you have any problems, questions or concerns, do not hesitate to contact us. We want this to be a good experience and make the renewal process easier for all.

ALL LICENSES EXPIRING JUNE 30, 2013, MUST BE RENEWED ON-LINE UNLESS THE BOARD OFFICE RECEIVES A REQUEST FOR PAPER APPLICATION. REMEMBER, JUNE 30TH FALLS ON A SUNDAY.

PAIN MANAGEMENT PRESCRIBING CME PROGRAMS MET WITH GREAT SUCCESS

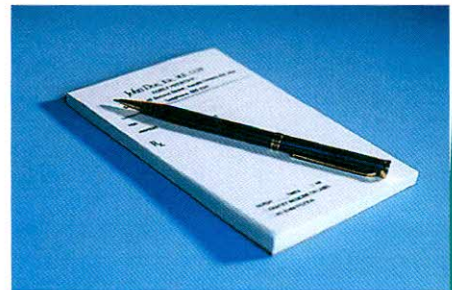
Pursuant to §24-1-15.2.g, all prescribing osteopathic Physician Assistants and Physicians prescribing controlled substances must have completed 3 hours of CME on drug diversion and best practice prescribing from a CME program approved by the WV Board of Osteopathic Medicine. These 3 hours must be completed prior to the June 2014 license renewal period to meet the license renewal requirement and, every renewal period thereafter.

To facilitate this, two CME programs have already been held and two more have been approved by the WV Board of Osteopathic Medicine. The meeting held in September 2012 at WVSOM in Lewisburg had over 125 attendees and the meeting held November 2012 at the Embassy Suites in Charleston had over 300 attendees. An online video of the November meeting will soon be available on the Board's website as well as the WVOMA website. However, two additional Pain Management CME programs have been approved by the Board:

Prescribing Opioids for Chronic Pain: Balancing Safety & Efficacy

Friday, March 22, 2013 8:30 AM – 4:45 PM
The Erickson Alumni Center, Morgantown, WV

7 Hours Category II AOA Hours



Prescribing of Controlled Substances Monitoring Program

Saturday, April 20, 2013 9:00 AM – 12:30 PM
Embassy Suites, Charleston, WV

3 Hours Category II AOA Hours



There is a waiver available on our website if you have not prescribed, administered or dispensed a controlled substance during the last two years and want to opt out of the CME requirement.

IMMUNITY OF LIABILITY FOR REPORTING DRUG DIVERSION ISSUES

The WV Controlled Substances Act provides that it is a misdemeanor criminal offense for a patient, in an attempt to obtain a prescription for a controlled substance, to knowingly withhold information from his/her physician that they have obtained a controlled substance prescription from another practitioner for the same or similar therapeutic use in a concurrent time period. This is set forth in **§60A-4-410**, which also provides that if convicted, one may be jailed for not more than nine months, or fined not more than \$2,500, or both.

Senate Bill 437, which was signed into law by Governor Earl Ray Tomblin on June 8, 2012, provides that a practitioner who notifies law enforcement of a violation of this statute is immune from civil, criminal or administrative liability if he/she makes this notification in good faith.



EXEMPTIONS TO PAIN CLINIC RULES

(As of this printing)

Both the law and the proposed rule have listed types of facilities that are exempt from being required to obtain a pain clinic license and both lists are the same. They include:

- A) Facilities affiliated with an accredited medical school which provides training for healthcare practitioners;
- B) Any facility/office that does not prescribe controlled substances for chronic pain;
- C) Hospitals licensed in West Virginia;
- D) Hospital-owned physician practices in West Virginia;
- E) Hospice programs;
- F) Nursing Homes;
- G) Ambulatory surgical facilities;
- H) Clinical research facilities;
- I) State owned and operated hospital.

Any other facility may petition the DHHR Secretary for an exemption.

Disciplinary Actions

Terry Linn Thomas, D.O.

License summarily suspended.
September 21, 2012.
License reinstated
with 5 years probation.
January 11, 2013.

John H. Pellegrini, D.O.

License summarily suspended
November 28, 2012.

Larry L. Fitzwater, PA-C

Placed on 1 year probation,
reprimanded, fined \$1,000
and required to complete an
educational program on medical
ethics approved by the board.
March 6, 2013

PAIN CLINIC LEGISLATION (As of this printing)

CURRENT LAW

Senate Bill 437

Pain Clinic Definition:

Privately owned clinic, facility or office wherein more than 50% of patients are prescribed or dispensed opioids or other controlled substances for chronic pain resulting from non-malignant conditions.

Requirements for Licensure:

- 1) Undergo initial inspection by OHFLAC.
- 2) Annual renewal.
- 3) License with Secretary of State, Tax Department, etc.
- 4) At least one owner must be a physician actively licensed to practice medicine in WV.

Requirements for Physician Owner:

Must have completed a pain management fellowship

OR

Must be board certified by the American Board of Pain Medicine, Board of Anesthesiology or other board approved by the DHHR Secretary.

Never had any actions taken against his/her DEA.

Never had an application for licensure denied.

PROPOSED LEGISLATIVE RULES

DHHR Rule CSR 69-8

Pain Clinic Definition:

Privately owned clinic, facility or office wherein the total number of chronic pain patients treated during any 1 month who receive tramadol, opioids, carisoprodol, or other Schedule II or III controlled substances equals greater than 50%.

Requirements for Licensure:

- 1) OHFLAC may conduct an unannounced inspection of the facility anytime during the licensure year.
- 2) Annual renewal fee based on total census of clinic.
- 3) If the clinic has more than 5 violations during the initial licensing inspection DHHR will deny license.
- 4) One owner must be an actively licensed Physician who practices 32 hrs/wk At the clinic.

Requirements for Physician Owner:

Must have completed a pain management fellowship

OR

Must be board certified by the American Board of Pain Medicine, Board of Anesthesiology or other board approved by the DHHR Secretary.

Never had any actions taken against his/her DEA.

Never had an application for licensure to prescribe, dispense or administer a controlled substance denied.

Responsibilities of Physician Owner:

- 1) Responsible for the operation of the clinic.
- 2) Supervise, control & direct the activities of each employee, volunteer or contract employee who provides patient care.
- 3) Maintain control and security of prescription blanks and any other method used for prescribing controlled substances.
- 4) Maintain a patient record which includes: history and physical exam; diagnosis of chronic pain, including signs, symptoms and causes; plan of treatment with patient's response to treatment; list of medications, date prescribed, dispensed or administered with amounts and dosages.
- 5) Before dispensing or prescribing a newly prescribed controlled substance for non-malignant chronic pain, the physician must access the Controlled Substance database, maintained by the Board of Pharmacy, and record the results in the patient record. If the patient continues to receive controlled substances for chronic pain, the physician should access the database at each patient visit or at a minimum of every 90 days.

Responsibilities of Physician Owner:

- 1) Practice a minimum of 32 hours/week at the clinic for which the physician owner has assumed responsibility.
- 2) Supervise, control & direct the activities of each employee, volunteer or contract employee who provides patient care.
- 3) Develop operation & clinical policies and procedures.
- 4) Supervise all medical services offered by the clinic.
- 5) Ensure compliance with all federal, state and local laws.
- 6) Approve continuing education programs of all clinic staff.
- 7) Conduct periodic appraisals of the medical unit.
- 8) Periodically examine credentials of candidates for medical staff membership.
- 9) Supervise all clinical quality assessment and performance improvement and performance improvement activities.
- 10) If the physician owner terminates with the pain clinic, the DHHR Secretary must be notified within 10 days. In the interim another physician shall be present during all hours of operation and shall assume the duties of the previous physician owner until such time as a new physician owner is designated and begins working at the clinic.

OTHER REQUIREMENTS ESTABLISHED BY SB 437

- Every new licensee shall complete 3 hours of BOARD APPROVED CME on drug diversion and controlled substance prescribing within one year of receiving their license;
- Every practitioner currently holding a WV license will be required to complete 3 hours of BOARD APPROVED CME on drug diversion and controlled substance prescribing before their next renewal period;
(The only exception will be to sign a waiver attesting that the provider has not prescribed a controlled substance during the two year licensing period.)
- Any practitioner prescribing or dispensing a combination of buprenorphine and naloxone to treat opioid addiction shall only prescribe or dispense said product in the form of sublingual film unless the sublingual film is clinically contraindicated.
- If a prescription is being picked up by someone other than the patient, a government-issued photo identification must be presented at the pharmacy;
- The WV Board of Pharmacy will establish two committees for policy making and oversight:
 - 1) ADVISORY COMMITTEE – Recommend parameters of unusual usage patterns.
 - 2) REVIEW COMMITTEE – Make determinations on a case-by-case basis of unusual prescribing practices and report to licensing and legal authorities.

Any prescriber who fails to access the WV Controlled Substances Monitoring Database when prescribing, as outlined in this law, shall be subject to discipline as the licensing board deems appropriate.

OTHER REQUIREMENTS AS PROPOSED BY DHHR

RULE CSR 69-8

(As of this printing)

- Any person, partnership, association, corporation or facility that qualifies as a pain management clinic under this proposed rule, shall apply for a pain management clinic license within ninety (90) days of the effective date of this rule;
- The role of the Clinic Administrator is clearly defined in the proposed rule, 69:8-6.6, but not defined or mentioned in Senate Bill 437;
- Requirements for the physical space and equipment within the pain management clinic are identified including method of securing controlled substances on site.
- Adequate parking for traffic flow;
- Infection control policies;
- Approval for any facility construction or renovations;
- Hiring and training requirements for all physicians and licensed healthcare professionals employed by the clinic;
- Policies regarding patient rights;
- Policies and procedures addressing safety and security issues for patients and staff, including the prohibited use of guns, handcuffs or mace by security personnel;
- All patients must undergo an initial assessment. Assessments completed by referring physicians are NOT acceptable;
- Follow up examinations must be completed four (4) times/year or every ninety (90) days at a minimum for continued prescribing;
- Policies and procedures must be developed to address incident and adverse outcome reporting and shall require quarterly review by physician owner and administrator;
- Administrative process and judicial review of licensing actions.