PUBLIC SESSION MINUTES STATE BOARD OF MEDICAL EXAMINERS OF SOUTH CAROLINA April 15, 2013 Teleconference

Board Meeting
Synergy Business Park
The Kingstree Building
110 Centerview Dr., Room 108
Columbia, South Carolina 29210

MEETING CALLED TO ORDER

Dr. Louis E. Costa, II, President of the Board, called the special meeting of the S.C. Board of Medical Examiners to order at 5:15 PM, on Monday, April 15, 2013, by teleconference and at 110 Centerview Drive, Room 108, Columbia, South Carolina, with a quorum present. Dr. Costa announced the meeting was being held in accordance with the Freedom of Information Act by notice emailed to The State newspaper, Associated Press, WIS-TV and all other requesting persons, organizations, or news media. In addition, notice was posted on the Board's website and on the bulletin boards located at both of the main entrances of the Kingstree Building where the Board office is located.

Board members present for this meeting were:

- Dr. Louis E. Costa, II, President, of Charleston
- Dr. David deHoll, of Iva
- Dr. Anthony Beall, of Mt Pleasant
- Dr. Jeff Welsh, of Columbia
- Dr. Stephen Gardner, of Greenville
- Dr. Jim Chow, of Columbia
- Dr. Robert Turner, of Florence
- Dr. James Hubbard, of Rock Hill
- Dr. Timothy Kowalski, of Columbia

Members of the S.C. Department of Labor, Licensing and Regulation (LLR) staff participating at various times in the meeting included:

S.C. Board of Medical Examiners

April Koon, Program Assistant

Office of Advice Counsel

Sheridon Spoon, Advice Counsel

REVIEW/APPROVAL OF AGENDA

An agenda for this meeting was reviewed and approved.

PHYSICIAN ASSISTANT LEGISLATION BILL 3618

Dr. Gardner started the discussion by explaining that he has established a good working relationship with all parties involved to include Kris Crawford, Regina Hitchcock with the SCMA and Paul Jaques, SCAPA. He stated that this PA Practice Act legislation change is intended to improve patient care and access as well as safety to care by midlevel extenders. He stated that the new legislation maintains the supervisory capacity of the physician over the PA as approved by the

Medical Board. He went on to describe the different things that the PA's wanted. The legislation states that they wanted to separate licensure from the need to be employed by a physician. He stated that the new legislation is set it up so that they could get licensed on a typical basis just like a physician, 90 days temporary license, permanent required and interview and the interview process is retained for those who have never had it. He went on to say when the PA gets employed, the BME has a series of 10 day windows to approve the supervising physician, the scope of practice guidelines for that PA and the physician and if it can't be approved within 10 days then you must notify them that we need more information or they need and appearance and then we have 10 days to either approve or deny. Kris Crawford wanted the physicians to handle problem cases and not staff. He stated this would speed up licensure. Dr. Gardner went on to state that the Board agreed with most of the request as long as it is supported by a supervising physician to maintain safe clinical settings along with clinical practice guidelines. Dr. Gardner stated that even though the PA may get licensed, they are not allowed to practice until they have an approved supervising physician.

Dr. Gardner stated that among other things the legislation suggests supervision of up to 4 full time FTE PA's by a supervising physician, request off-site set at 60 miles travel distance, 10% monthly chart review, and prescriptive authority would allow PA's to prescribe schedule II controlled substances under safe supervision with stipulations.

The Board had a lengthy discussion on PA's prescribing controlled substances. Dr. Kowalski expressed his opposition to language in the Physician Assistant Practice Act that would allow PA's to prescribe schedule II medications for chronic patients. The conclusion of that discussion was a motion made by Dr. Gardner to request paragraph 7 of the proposed bill be altered to include that "A physician assistant may authorize a medical order for a pretrial schedule two controlled substance as defined by the Federal Controlled Substances Act pursuant to the following requirements: Those requirements are listed 1. The authorization to write a medical order is especially approved by the supervising physician except for in a written scope of practice guideline; 2. The PA has directly evaluated the patient; 3. The PA is providing patient care in a hospital setting including emergency and out-patient departments and the patient has been examined and it is documented in the chart by the supervising or delegated physician." The Board refuses other setting and wants to take out paragraph # 4 that states that a PA may order a schedule II medication for immediate administration after consultation in person or via electronic communication with the supervising physician and the written order may not exceed a one- time dose within a 24 hour setting. Motion seconded by Dr. deHoll. All in favor. Motion carries.

A motion was made by Dr. Costa to adjourn and seconded by Dr. Gardner at 7:40 pm on Monday April 15, 2013

Respectfully Submitted April Koon Program Assistant