

ORIGINAL 2375

The Reading Hospital and Medical Center



REVIEW COMMISSION

Gerald P. Malick, MD
Vice President/ Medical Director
Telephone: 610-988-8248

January 9, 2004

Ms. Amy Nelson
State Board of Medicine
Post Office Box 2649
Harrisburg, Pennsylvania 17105-2649

RECEIVED

JAN 20 2004

DOS LEGAL COUNSEL

Dear Ms. Nelson:

I have reviewed the information received today on the proposed CME requirements for licensure by the State Board of Medicine. I commend the Board on establishing these requirements for licensure, which brings the Board for Allopathic Medicine into alignment with the requirements of the Osteopathic Board. This is a requirement that we have instituted for Staff privileges at The Reading Hospital and Medical Center several years ago.

I bring to your attention on page 4 of the document, first full sentence at the top of the page, which reads, "the remaining 70 credit hours shall be completed in any approved courses." The Pennsylvania Medical Society and AMA use the word activities regarding Category I and Category II approved CME hours. That information is available to you, but I have included a copy for your convenience.

It would also be very helpful to clarify whether the minimum of 10 credit hours regarding patient safety/risk management must be approved Category I activities or whether it can be made up of Category I and Category II activities.

Again, I congratulate the Board on acting on this important issue even though action was precipitated by passage of the Mcare Act.

Sincerely,

A handwritten signature in black ink that reads "Gerald P. Malick". The signature is fluid and cursive, with a long horizontal line extending to the right.

Gerald P. Malick, MD
Vice-President/Medical Director

GPM:ldm



Pennsylvania MEDICAL SOCIETY

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2004 JAN 23 AM 8:56

INDEPENDENT REGULATORY
REVIEW COMMISSION

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JAN 13 2004

DOS LEGAL COUNSEL

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Executive Vice President

January 7, 2004

Amy L. Nelson
Counsel, State Board of Medicine
P.O. Box 2649
Harrisburg, PA 17105-2649

Dear Ms. Nelson:

The Pennsylvania Medical Society strongly supports the Medical Board's proposal to amend Section 16.1 and create Section 16.19 in Chapter 16, State Board of Medicine-General Provisions.

These changes are necessary to implement the continuing medical education requirement created by Act 13 of 2002. We were pleased to note that the Board proposes to make the regulations effective with the license renewal period that begins on January 1, 2005. Although Act 13 called for the requirement to become effective on January 1, 2003, one could not expect physicians to comply retroactively.

We were also pleased to see that the Medical Board accepted our recommendation to include examples of topics that satisfy the requirement for education in patient safety and risk management. Those examples help greatly to clarify the requirements for physicians.

Sincerely,

Jitendra M. Desai, MD
President

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Cc: The Honorable Robert Tomlinson, Chair, Consumer Protection and Professional Licensure Committee
The Honorable Lisa Boscola, Minority Chair
The Honorable Thomas Gannon, Chair, House Professional Licensure Committee
The Honorable William Rieger, Minority Chair
Charles D. Hummer, Jr., MD, Chair, State Board of Medicine
Commissioner John R. McGinley, Jr., Chair, Independent Regulatory Review Commission

Original: 2375

DEPARTMENT OF RADIOLOGY

2004 JAN 23 AM 8:56

CHILDREN'S HOSPITAL OF PITTSBURGH

• 3705 Fifth Avenue • Pittsburgh, PA 15213-2583 •

January 6, 2004

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JAN 13 2004

DOS LEGAL COUNSEL

Amy L. Nelson
Counsel, State Board of Medicine
P. O. Box 2649
Harrisburg, PA 17105-2649

Dear Ms. Nelson:

I wish to comment on the proposed changes in Continuing Medical Education requirements for physicians as cited below, excerpted from a communication that I received today from Eugene Wiener, M.D., Medical Director, Children's Hospital of Pittsburgh:

PROPOSED RULEMAKING, STATE BOARD OF MEDICINE [49 PA. CODE CH. 16] Continuing Medical Education [34 Pa.B. 56]. "The proposed rulemaking requires proof of completion of 100 credit hours of continuing medical education as a condition of license renewal and requires that at least 20 of the 100 hours be American Medical Association Physician Recognition Award category 1 credits and that at least 10 credit hours must be in the areas of patient safety and risk management. Courses in the areas of patient safety and risk management may include topics such as improving medical records and recordkeeping, reducing medical errors, professional conduct and ethics, improving communications, preventative medicine and healthcare quality improvement."

My comments specifically address the proposed requirement for 10 credit hours of CME in the areas of patient safety and risk management. This is an unreasonable, excessive, and onerous burden for which, insofar as I can determine, neither the legislature nor the Board of Medicine has provided justification.

In addition to my Pennsylvania licensure I also am licensed in Florida. For medical license renewal, Florida has a mandatory requirement for only two hours CME in medical error reduction, encompassing subject matter equivalent to that described in the Pennsylvania proposal. Two hours of CME is not an unreasonable requirement, but even that is more than necessary when one looks critically at the material that must be reviewed, which I did only last week in preparation for renewing my Florida license. What could possibly be the justification for a 10-hour requirement in Pennsylvania? That number appears to have been arbitrarily pulled out of the air and should be drastically revised downward. In my opinion, one hour completely suffices to thoroughly cover the material if it is presented in a well-focused, efficient format.

Sincerely,



A'Delbert Bowen, M.D.

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Original: 2375

FEB 02 2004

Subject: Technical Adjustment to CME Regulations

DOS LEGAL COUNSEL

2004 FEB -9 AM 10:20

REVIEW COMMISSION

Hi Amy, In a conversation with a physician this morning, a thought occurred to me that would make the proposed regulations better. (1) states that the remaining hours of CME after the required Cat. I and patient safety can be in any approved course. Technically, ACCME accredited sponsors do not approve anything except Cat. I programs. Since the regulations define an approved course as one approved by a sponsor accredited under the ACCME system, this may cause some confusion. In addition, Cat. II includes things like teaching, research and journal study where there may not be a sponsor per se.

For example, suppose a physician attends a program on commonly encountered drug interactions sponsored by a local association of pharmacists. No one would argue that the physician would not deserve credit for such a program. However, the pharmacists' association would most likely not be approved by the ACCME as a sponsor of CME. Another example would be a physician evaluating research on a particular method of performing surgery for the purpose of preparing recommendations for colleagues. No question he or she is gaining medical knowledge and could claim Cat. II credit under the existing voluntary system but unless it's done as part of a teaching program in an accredited organization, it would not count toward the "other" 70 hours required to renew one's license.

The fix is easy. One could just remove "approved" from the sentence outlining the remaining 70 hours. However, we don't want to give credit for programs irrelevant to medicine.

Therefore, one could change "approved" to "medical." To be completely correct, it might be best to change "approved courses" to "medical educational activities."

Hopefully, this suggestion will defuse some potential objections so these things can finally get approved.

I hope this helps, Jeff

Jeffrey C. Greenawalt

Director, Public Health and Professional Licensure

Pennsylvania Medical Society

Phone: (717) 558-7750 or (800) 228-7823, ext. 1459

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THE HOSPITAL & HEALTHSYSTEM ASSOCIATION OF PENNSYLVANIA

Original: 2375

2004 FEB 13 AM 9:30

REVIEW COMMISSION

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FEB 04 2004

DOS LEGAL COUNSEL

February 2, 2004

Amy L. Nelson, Counsel
State Board of Medicine
P.O. Box 2649
Harrisburg, PA 17105-2649

Re: Chapter 16: State Board of Medicine—General Provisions, Subchapter A, Basic Definitions and Information and Subchapter B, Continuing Medical Education.

Dear Ms. Nelson:

On behalf of The Hospital & Healthsystem Association of Pennsylvania (HAP), which represents nearly 250 Pennsylvania member institutions, including 125 stand-alone hospitals and another 120 hospitals that comprise 32 health systems across the state, we appreciate the opportunity to comment on this proposed rule. We support the rule, but offer the following concerns and recommendations with the rule as proposed:

Definition of “approved course.” The definition limits approved courses to continuing medical education courses offered by a provider accredited by the ACCME. It is HAP’s understanding that providers can also be accredited to provide Category 1 credits through the state medical society if the education will be confined to Pennsylvania and that many hospitals are accredited as providers through this mechanism. In addition, many Category 2 CMEs are currently obtained through mechanisms other than providers accredited by ACCME. It is our understanding that the American Medical Association defines the list of medical education activities (for example, journal article, giving presentations, etc.) that can be recognized for Category 2 credits. The way the definition is currently written, the current options to obtain Category 2 CME would be significantly limited, by restricting them to CME courses offered by providers accredited by the ACCME.

Recommendation: *Please confirm/clarify that hospitals will still be able to function as Category 1 CME providers through the state medical society accreditation mechanism, with the medical society serving as an agent of ACCME.*

Recommendation: *The definition of approved course should be modified to explicitly allow those Category 2 medical education activities currently recognized by the AMA to continue to be recognized toward the 100 CME hour requirement for license renewal.*

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Amy Nelson, Counsel
February 2, 2004
Page 2

Exemptions. The proposed regulations provide an exemption from the CME requirements for physicians applying for licensure for the first time in Pennsylvania.

Recommendation: *If a resident completes their residency program in June 2003, but have had their unrestricted license since August 2001 (basically for moonlighting), the regulations as proposed do not exempt them from the CME requirements. We would suggest that the requirements be prorated under these circumstances.*

Thank you for the opportunity to comment.

Sincerely,

A handwritten signature in cursive script that reads "Paula A. Bussard". The signature is written in black ink and is positioned above the typed name.

PAULA A. BUSSARD
Senior Vice President

PAB/dd



Office of the General Counsel

Original: 2375

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2004 FEB -9 AM 10:20
REVIEW COMMISSION

Mary Ellen Nepps
Senior Counsel
Direct Dial: 215-746-5280
marvellen.nepps@ogc.upenn.edu

January 30, 2004

Via Telecopier (717) 787-0251

Amy L. Nelson, Esquire
State Board of Medicine
P. O. Box 2649
Harrisburg, PA 17105-2649

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FEB 02 2004

DOS LEGAL COUNSEL

Re: Proposed Rule-Making on Continuing Medical Education

Dear Ms. Nelson:

I am writing to comment on the proposed rule-making to implement Section 910 of the Medical Care Availability and Reduction of Error Act which was first published in the *Pennsylvania Bulletin* for public comment on January 2, 2004.

My comment pertains specifically to new Section 16.19 in Volume 49, Chapter 16 of the Pennsylvania Code regarding the timeframe within which physicians must demonstrate completion of the requisite 100 credit hours of continuing medical education. The preamble to new Section 16.19 states as follows:

Beginning with the licensure renewal period commencing January 1, 2005, proof of completion of 100 credit hours of continuing medical education in the preceding biennial period will be required for licensure renewal for medical doctors.

It is not clear from the quoted language whether physicians will be required to present proof of completion of the 100 credit hours within the preceding two year period at the time of application for licensure renewal during the renewal period beginning January 1, 2005 or whether physicians will be required to initially meet the 100 hour credit requirement during the two year period commencing on January 1, 2005, and then present proof of completion thereof at the time of the next renewal thereafter, that is, during the renewal period beginning January 1, 2007. If the latter interpretation of this language is correct, we would suggest the following clarification of the language:

Proof of completion of 100 credit hours of continuing medical education in the preceding biennial period will be required for licensure renewal for medical doctors for the licensure renewal period commencing January 1, 2007 and for each renewal period thereafter.

January 29, 2004
Page Two
Via Telecopier

If the quoted language from the proposed rule-making is intended to require proof of 100 credit hours of continuing medical education at the time licensure renewal is requested during the renewal period beginning January 1, 2005, we would request that the Board consider a reduced number of hours for this initial compliance period in light of the delayed publication of the proposed rule-making and the even later anticipated publication of the final rule-making. Indeed, were physicians required to provide proof of completion of 100 credit hours of continuing medical education in connection with their applications for licensure renewal for the renewal period commencing January 1, 2005, they would be severely prejudiced by their lack of notice of the specific requirements particularly with respect to the number of Category I courses required and those in the new category of patient safety and risk management inasmuch as they would be required to satisfy the requirement within less than 11 months in many instances. Under the circumstances, we would request that the Board consider a reduced hours requirement for this initial period commensurate with the brief period of time remaining for achieving compliance.

Thank you for your attention to this important issue.

Very truly yours,


MARY ELLEN NEPPS

MEN/dmr



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 REVIEW COMMISSION

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January 29, 2004

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FEB 02 2004

Amy L. Nelson, Esquire
 State Board of Medicine
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 Harrisburg, PA 17105-2649

DOS LEGAL COUNSEL

Re: Proposed Rulemaking, 49 Pa. Code Ch. 16
 Continuing Medical Education, 34 Pa.B. 56

Dear Ms. Nelson

There is ambiguity in the following language in the Proposed Rule with regard to whether physicians would be expected as of reapplication on January 1, 2005 to have completed the 100 credit hours (with 10 being in risk management and patient safety) at that time, or whether beginning January 1, 2005 through their next renewal January 1, 2007 they would be expected to obtain those credit hours.

Beginning with the licensure renewal period commencing January 1, 2005, proof of completion of 100 credit hours of continuing medical education in the preceding biennial period will be required for licensure renewal for medical doctors.

I have concerns if the intention was to require physicians in the next 11 months to complete this requirement in order to renew their license on January 1, 2005, as the risk management/patient safety requirement is a completely new one. If the intention was to give them notice beginning 1/1/05 that for that period they will be required to complete the credit hours required, then I think the confusion in the proposed rule could be rectified by adding something along the lines of the following language:

Beginning with the licensure renewal period commencing January 1, 2005, proof of completion of 100 credit hours of continuing medical education in the preceding biennial period will be required for licensure renewal [as of January 1, 2007 and continuing thereafter] for medical doctors.

Thank you for your consideration of this comment.

Very truly yours,

Annemarie Martin-Boyan
 Annemarie Martin-Boyan
 Associate Counsel

PENNSTATE ORIGINAL: 2315



Milton S. Hershey Medical Center
College of Medicine

2004 JAN 26 AM 10:23

REVIEW COMMISSION

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Marjorie Lebo, MSN, CRNP, CWOCN
Nurse Practitioner

January 13, 2004

Amy L. Nelson
Council
State Board of Medicine
PO Box 2649
Harrisburg, PA 17105

RECEIVED

JAN 20 2004

DOS LEGAL COUNSEL

**RE: ADMENDMENTS TO THE STATE BOARD OF MEDICINE
CONTINUING MEDICAL EDUCATION
CODE AS DESCRIBED IN THE PENNSYLVANIA BULLETIN - 01/02/04**

Dear Ms. Nelson:

I reviewed the proposed changes regarding continuing medical education requirements for physicians to be licensed in the state of Pennsylvania. It is being proposed that 20 out of 100 hours be in the areas of "patient safety and risk management". These will include record keeping, reducing medical errors, professional conduct, and healthcare quality improvement, amongst others.

I would like to suggest that changes be made to these requirements insofar as presently outlined. Specifically, as presently described, they do not give credit to physicians who have performed reviews of such topics, including patient outcomes and who have published in an academic peer-reviewed fashion on these very subjects that are outlined above. Specifically, physicians at the Milton S. Hershey Medical Center, myself included, have recently gone through extensive review of our own case outcomes and have published significant articles in peer-reviewed journals outlining methods to decrease complications, improve outcomes, etc. (included with this letter) Some how, I believe such contributions should be recognized for continuing medical education credit equivalence.

Sincerely,

Walter A. Koltun, M.D., FACS
Professor of Surgery
Chief, Section of Colon and Rectal Surgery

WAK/tmb

Cc: Kathy Remlinger
Wiley Souba, M.D., Chairman, Department of Surgery, HMC



**Shriners
Hospitals**
FOR
Children

ORIGINALISTS

2004 JAN 26 AM 10:24

REVIEW COMMISSION

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January 16, 2004

Amy L. Nelson, Counsel
State Board of Medicine
P O Box 2649
Harrisburg, PA 17105-2649

Re: Proposed Rulemaking, 49 PA. CODE CH.16 Continuing Education

Dear Attorney Nelson:

In a meeting with our hospital physicians, today, concern was addressed regarding the proposed rulemaking concerning the CME requirement with regards to the time limit for securing the 10 credits in patient safety/risk management and the availability of materials to read and/or sessions to attend. This number of hours will be difficult to achieve without help from the State.

In the past the Pennsylvania Medical Society (PMS) offered CMEs through a publication entitled CONSULT: Professional viewpoints concerning malpractice issues. This was a very convenient way for the physicians to obtain CMEs. Will this program or something similar be available through the PMS, or the State Board of Medicine to allow easier accessibility to this type of education for physicians

Sincerely,

Dianne C. Tate, CPCS
Medical Staff Services Coordinator

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JAN 22 2004
DOS LEGAL COUNSEL