

Regulatory Analysis Form

(Completed by Promulgating Agency)



IRRC

INDEPENDENT REGULATORY REVIEW COMMISSION

SECTION I: PROFILE

(1) Agency:

Department of State, Bureau of Professional and Occupational Affairs, State Board of Podiatry

(2) Agency Number: **16A**

Identification Number: **4410**

IRRC Number: **2811**

2009 DEC -9 PM 1:21
INDEPENDENT REGULATORY
REVIEW COMMISSION

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(3) Short Title:

Continuing Education

(4) PA Code Cite:

49 Pa. Code §§29.61 and 29.63a

(5) Agency Contacts (List Telephone Number, Address, Fax Number and Email Address):

Primary Contact: **Steven Wennberg, Board Counsel, One Penn Center, 2601 North Third Street, Third Floor, Harrisburg, PA 17710; Tele: (717) 783-7200; Fax: (717) 787-0251
E-mail: swennberg@state.pa.us**

Secondary Contact: **Joyce McKeever, Deputy Chief Counsel, One Penn Center, 2601 North Third Street, Harrisburg, PA 17710; Tele: (717) 783-7200; Fax: (717) 787-0251
E-mail: jmckeever@state.pa.us**

(6) Primary Contact for Public Comments (List Telephone Number, Address, Fax Number and Email Address) – Complete if different from #5:

(All Comments will appear on IRRC'S website)

(7) Type of Rulemaking (check applicable box):

Proposed Regulation

Final Regulation

Final Omitted Regulation

Emergency Certification Regulation;

Certification by the Governor

Certification by the Attorney General

Regulatory Analysis Form

(8) Briefly explain the regulation in clear and nontechnical language. (100 words or less)

The regulations would increase the biennial continuing education requirement for podiatrists from 30 hours to 50 hours. At least 30 of the hours would have in courses and programs in podiatric subjects that are approved by the Board or the Council on Podiatric Medical Education (CPME). The remaining 20 hours may be either in Board- or CPME-approved podiatric courses and programs or in courses and programs in related medical subjects that are approved by the American Medical Association or the American Osteopathic Association.

(9) Include a schedule for review of the regulation including:

- | | |
|---|--------------------------|
| A. The date by which the agency must receive public comments: | January 19, 2010 |
| B. The date or dates on which public meetings or hearings will be held: | N/A |
| C. The expected date of promulgation of the proposed regulation as a final-form regulation: | December 31, 2010 |
| D. The expected effective date of the final-form regulation: | December 31, 2010 |
| E. The date by which compliance with the final-form regulation will be required: | December 31, 2010 |
| F. The date by which required permits, licenses or other approvals must be obtained: | N/A |

(10) Provide the schedule for continual review of the regulation.

The Board regularly evaluates the effectiveness of regulations at its meetings. The Board holds at least six meetings each year.

Regulatory Analysis Form

SECTION II: STATEMENT OF NEED

(11) State the statutory authority for the regulation. Include specific statutory citation.

Section 9.1 of the Podiatry Practice Act, Act of March 2, 1956, P.L. 1206, as amended, 63 P.S. §42.9a, sets forth the Board's authority to prescribe continuing education requirements, while Section 15 of the Podiatry Practice Act, 63 P.S. §42.15, sets forth the Board's authority to adopt such regulations as it deems necessary and proper to carry out its statutory responsibilities.

(12) Is the regulation mandated by any federal or state law or court order, or federal regulation? Are there any relevant state or federal court decisions? If yes, cite the specific law, case or regulation as well as, any deadlines for action.

The regulations are not mandated any federal or state law, regulation or court order.

(13) State why the regulation is needed. Explain the compelling public interest that justifies the regulation. Describe who will benefit from the regulation. Quantify the benefits as completely as possible and approximate the number of people who will benefit.

The regulations are needed to ensure that podiatrists regularly update their professional knowledge and skills so that they may continue to practice podiatric medicine with reasonable skill and safety to patients. Apart from podiatrists themselves, podiatric patients would be the primary beneficiaries of the regulations; secondary beneficiaries would include companies that underwrite professional liability insurance for podiatrists as well as hospitals and other health care facilities that employ or grant practice privileges to podiatrists.

Regulatory Analysis Form

(14) If scientific data, studies, references are used to justify this regulation, please submit material with the regulatory package. Please provide full citation and/or links to internet source.

N/A

(15) Describe who and how many will be adversely affected by the regulation. How are they affected?

The Board cannot identify any group that would be adversely affected by the regulations.

(16) List the persons, groups or entities that will be required to comply with the regulation. Approximate the number of people who will be required to comply.

Podiatrists would be required to comply with the regulations. At present there are approximately 1,400 podiatrists with active licenses.

Regulatory Analysis Form

SECTION III: COST AND IMPACT ANALYSIS

(17) Provide a specific estimate of the costs and/or savings to the **regulated community** associated with compliance, including any legal, accounting or consulting procedures which may be required. Explain how the dollar estimates were derived.

Podiatrists would incur costs in meeting the increased biennial continuing education requirement. Owing to the wide range of continuing education offerings and providers, the Board cannot quantify these costs; however, they are not expected to be substantial or burdensome. None of the Board's approximately 1,400 active podiatrists, each of whom received written notification of the proposed rulemaking in December 2008, has advised the Board of any concerns about the costs of compliance. The cost of compliance is likely vitiated by the fact that many podiatrists already comply with the increased biennial continuing education requirement by virtue of conditions imposed by such groups as podiatric specialty organizations, insurance companies and hospitals.

The regulations would not impose new legal, accounting or consulting procedures on podiatrists.

(18) Provide a specific estimate of the costs and/or savings to **local governments** associated with compliance, including any legal, accounting or consulting procedures which may be required. Explain how the dollar estimates were derived.

The regulations would not result in costs or savings to local government. The regulations would not impose new legal, accounting or consulting procedures on local governments.

(19) Provide a specific estimate of the costs and/or savings to **state government** associated with the implementation of the regulation, including any legal, accounting, or consulting procedures which may be required. Explain how the dollar estimates were derived.

The Board would incur minor, unquantifiable costs associated with auditing compliance by podiatrists with the increased biennial continuing education requirement. These costs are expected to be adequately defrayed by the current \$395 biennial renewal fee paid by podiatrists. The regulations would not impose new legal, accounting or consulting procedures on state government.

Regulatory Analysis Form

(20) In the table below, provide an estimate of the fiscal savings and costs associated with implementation and compliance for the regulated community, local government, and state government for the current year and five subsequent years.

	Current FY Year	FY +1 Year	FY +2 Year	FY +3 Year	FY +4 Year	FY +5 Year
SAVINGS:	None	None	None	None	None	None
Regulated Community						
Local Government						
State Government						
Total Savings						
COSTS:						
Regulated Community	See #17	See #17	See #17	See #17	See #17	See #17
Local Government						
State Government	See #19	See #19	See #19	See #19	See #19	See #19
Total Costs						
REVENUE LOSSES:	None	None	None	None	None	None
Regulated Community						
Local Government						
State Government						
Total Revenue Losses						

(20a) Provide the past three year expenditure history for programs affected by the regulation.

Program	FY -3	FY -2	FY -1	Current FY
Podiatry Board	\$121,789	\$148,892	\$167,426 (projected)	\$301,000 (budgeted)

Regulatory Analysis Form

(21) Explain how the benefits of the regulation outweigh any cost and adverse effects.

The regulations would enhance the knowledge and skill of podiatrists – conferring a substantial benefit to all individuals, organizations and entities with an interest in the competent practice of podiatric medicine – at no cost to the public at large and only modest cost to podiatrists and the Board. The cost to the Board would be defrayed by existing fees paid by podiatrists.

(22) Describe the communications with and input from the public and any advisory council/group in the development and drafting of the regulation. List the specific persons and/or groups who were involved.

In drafting the regulations, the Board considered the views of the Pennsylvania Podiatric Medical Association, whose membership includes approximately 85% of all podiatrists in Pennsylvania.

(23) Include a description of any alternative regulatory provisions which have been considered and rejected and a statement that the least burdensome acceptable alternative has been selected.

The Board did not consider any alternative regulatory provisions.

(24) Are there any provisions that are more stringent than federal standards? If yes, identify the specific provisions and the compelling Pennsylvania interest that demands stronger regulations.

There are no federal standards applicable to the subject matter of the regulations.

Regulatory Analysis Form

(25) How does this regulation compare with those of other states? How will this affect Pennsylvania's ability to compete with other states?

The regulations' increased biennial continuing education for podiatrists is consistent with the requirements of other states with large populations. Fourteen states, including California, Texas, Michigan and Illinois, require podiatrists to complete 50 hours of continuing education biennially, while Virginia and Oklahoma require 60 hours of continuing education biennially, and Ohio and New Jersey require 100 hours of continuing education biennially. (A list of the continuing education requirements of other states is attached as Attachment 1.)

The regulations' increased biennial continuing education requirements would not be so burdensome as to impel podiatrists in Pennsylvania to relocate to other states or to dissuade podiatrists in other states from relocating to Pennsylvania.

(26) Will the regulation affect any other regulations of the promulgating agency or other state agencies? If yes, explain and provide specific citations.

The regulation would not affect other existing or proposed regulations of the Board or of any other state agency.

(27) Submit a statement of legal, accounting or consulting procedures and additional reporting, recordkeeping or other paperwork, including copies of forms or reports, which will be required for implementation of the regulation and an explanation of measures which have been taken to minimize these requirements.

The regulations would require podiatrists to retain records relating to their increased continuing education hours and to provide copies of those records to the Board upon audit. The regulations also would require the Board to modify its biennial renewal application. The regulations would not require legal, accounting or consulting procedures.

Regulatory Analysis Form

(28) Please list any special provisions which have been developed to meet the particular needs of affected groups or persons including, but not limited to, minorities, elderly, small businesses, and farmers.

The regulations would apply uniformly to all podiatrists, subject to the Board's existing regulations relating to continuing education exemptions and waivers for cause.

CONTINUING EDUCATION REQUIREMENTS FOR PODIATRISTS
AS A CONDITION OF RENEWAL OF LICENSURE

ALABAMA	12 hours annually
ALASKA	50 hours biennially
ARKANSAS	15 hours annually
ARIZONA	25 hours annually
CALIFORNIA	50 hours biennially
COLORADO	10 hours annually
CONNECTICUT	None
DELAWARE	32 hours biennially
FLORIDA	40 hours biennially
GEORGIA	50 hours biennially
HAWAII	40 hours biennially
IDAHO	12 hours annually
ILLINOIS	50 hours biennially
INDIANA	30 hours biennially
IOWA	40 hours biennially
KANSAS	54 hours triennially
KENTUCKY	20 hours annually
LOUISIANA	20 hours annually
MAINE	25 hours biennially
MARYLAND	50 hours biennially

MASSACHUSETTS	30 hours biennially
MICHIGAN	150 hours triennially
MINNESOTA	30 hours biennially
MISSISSIPPI	40 hours biennially
MISSOURI	50 hours biennially for those certified to to perform ankle surgery; 24 hours biennially for everyone else
MONTANA	None
NEBRASKA	48 hours biennially
NEVADA	50 hours biennially
NEW HAMPSHIRE	40 hours biennially
NEW JERSEY	100 hours biennially
NEW MEXICO	14 hours annually
NEW YORK	50 hours triennially
NORTH CAROLINA	25 hours annually
NORTH DAKOTA	20 hours annually
OHIO	100 hours biennially
OKLAHOMA	30 hours annually
OREGON	50 hours biennially
RHODE ISLAND	15 hours annually
SOUTH CAROLINA	12 hours annually
SOUTH DAKOTA	30 hours biennially
TENNESEE	15 hours annually

TEXAS	50 hours biennially
UTAH	40 hours biennially
VERMONT	None
VIRGINIA	60 hours biennially
WASHINGTON	50 hours biennially
WEST VIRGINIA	50 hours biennially
WISCONSIN	50 hours biennially
WYOMING	40 hours biennially

FACE SHEET
FOR FILING DOCUMENTS
WITH THE LEGISLATIVE REFERENCE BUREAU
(Pursuant to Commonwealth Documents Law)

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INDEPENDENT REGULATORY
REVIEW COMMISSION DO NOT WRITE IN THIS SPACE

Copy below is hereby approved as to form and legality. Attorney General

Copy below is hereby certified to be a true and correct copy of a document issued, prescribed or promulgated by:

Copy below is approved as to form and legality. Executive or Independent Agencies.

[Signature]
BY
(DEPUTY ATTORNEY GENERAL)

State Board of Podiatry
(AGENCY)

[Signature]
Andrew C. Clark

SEP 25 2009

DOCUMENT/FISCAL NOTE NO. 16A-4410

SEP 2 2009

DATE OF APPROVAL

DATE OF ADOPTION:

DATE OF APPROVAL

BY: *[Signature]*
Mary E. Loftus, D.P.M.

Chairperson

TITLE: (EXECUTIVE OFFICER, CHAIRMAN OR SECRETARY)

(Deputy General Counsel
~~Chief Counsel,~~
~~Independent Agency~~
~~(State inapplicable title)~~)

[] Check if applicable
Copy not approved.
Objections attached.

[] Check if applicable.
No Attorney General approval or objection within 30 days after submission.

PROPOSED RULEMAKING

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE
BUREAU OF PROFESSIONAL AND OCCUPATIONAL AFFAIRS
STATE BOARD OF PODIATRY
(49 PA. CODE, CHAPTER 29)

CONTINUING EDUCATION

PREAMBLE

The State Board of Podiatry (Board) proposes to amend Chapter 29, to read as set forth in Annex A, by revising § 29.61 (relating to requirements for biennial renewal and eligibility to conduct educational conferences) and deleting § 29.63a (relating to preapproved course provider).

Need for Proposed Rulemaking

Section 9.1 of the Podiatry Practice Act (63 P.S. § 42.9a) requires a podiatrist to complete continuing education hours prescribed by the Board as a condition of biennial renewal of licensure to practice podiatric medicine. Since January 1987, the Board has required podiatrists to complete 30 hours of continuing education during each biennial license period. Given the increasing complexity of modern podiatric medical practice, the Board now considers the 30-hour biennial continuing education requirement inadequate to ensure that podiatrists maintain and increase their skill, knowledge and proficiency as practitioners. Only 16 states currently require podiatrists to biennially complete 30 or fewer hours of continuing education. Moreover, many podiatrists are required to biennially complete well in excess of 30 hours of continuing education in order to maintain credentials issued by podiatric specialty bodies, to participate in insurance plans, or to practice in hospitals and other health care facilities.

Description of Proposed Rulemaking

§ 29.61 (Biennial continuing education requirement)

Section 29.61 sets forth the basic continuing education requirements for podiatrists in Pennsylvania. Subsection (a) provides that as a condition of biennial renewal of licensure, a podiatrist must complete, during the immediately preceding biennial renewal period, 30 hours of continuing education in acceptable courses and programs in podiatry that are offered by approved providers. A maximum of 10 hours may be obtained through courses and programs involving the use of the computer /Internet, magazines or journal articles. Excess continuing education hours may not be carried over to the next biennial renewal period. A licensee is responsible for ensuring that continuing education hours are in compliance with the Board's requirements. Subsection (b) states that Board-approved providers are eligible to conduct continuing education courses and programs. Subsection (c) lists the continuing education information that a licensee must set forth on the biennial renewal application. Subsection (d) requires a licensee to retain documentation of a continuing education course or program for 5 years after its completion and to produce such documentation when demanded by the Board or its agents who conduct the audit of continuing education hours.

The proposed rulemaking would rewrite § 29.61(a) to reflect substantive and editorial changes. The proposed rulemaking would increase the biennial continuing education requirement in § 29.61(a) from 30 hours to 50 hours, effective with the renewal of licensure for the biennial license period that begins January 1, 2011. Consistent with current regulations, at least 30 hours would have to be in podiatry courses and programs approved by the Board or the Council on Podiatric Medical Education (CPME). The CPME, a division of the American Podiatric Medical Association, is currently recognized in § 29.63a as an approving entity for podiatric continuing education. The remaining 20 hours could be either in Board- or CPME-approved podiatry courses and programs or in courses and programs in related medical subjects that are approved by the American Medical Association or the American Osteopathic Association.

A 50-hour biennial continuing education requirement for podiatrists is consistent with the requirements of podiatric licensing boards in other states, particularly those with large populations. Fourteen states – including California, Texas, Michigan, and Illinois – require podiatrists to complete 50 hours of continuing education biennially. Virginia and Oklahoma require podiatrists to complete 60 hours of continuing education biennially, while Ohio and New Jersey require podiatrists to complete 100 hours of continuing education biennially. Permitting podiatrists to obtain some of their continuing education hours in related medical subjects, in addition to podiatric subjects, is desirable because the collaborative, interdisciplinary approach to the diagnosis and treatment of medical conditions has fostered a commonality of interests between podiatrists and allopathic and osteopathic physicians. Continuing education in related medical subjects is widely available to podiatrists because allopathic and osteopathic physicians in Pennsylvania are required to complete 100 hours of continuing education biennially.

In December 2008, the Board provided each currently licensed podiatrist in Pennsylvania with written notification of the Board's intention to initiate regulatory action that would increase the continuing education requirement, as described in this proposed rulemaking, effective with the renewal of licensure for the 2011-2012 biennial license period. The same information has been posted on the Board's website since January 2009.

The proposed rulemaking would retain, with editorial changes, the 10-hour limitation in § 29.61(a) on the number of continuing education hours that may be obtained via the Internet or through the reading of articles in professional journals and magazines. The proposed rulemaking also would retain the provision in § 29.61(a) that prohibits the carrying over of excess continuing education hours from one biennial license period to another. The proposed rulemaking also would retain the provision in § 29.61(a) that places responsibility on a licensee to ensure that continuing education hours have been approved, with the clarification that the licensee should do so before participating in the course or program for which continuing education credit is sought.

The proposed rulemaking would add to § 29.61(a) a provision, currently set forth in § 29.63a, stating that continuing education credit will not be awarded for courses or programs in office management or marketing the practice. Section 9.1 of the Podiatry Practice Act (63 P.S. § 42.9a) specifically proscribes the awarding of continuing education credit for office management or practice building.

§ 29.63a (Preapproved continuing education provider and continued education subject matter)

Section 29.63a currently provides that the Board will accept continuing education hours in courses and programs offered or approved by the CPME. Section 29.63a further provides that all courses and programs must fall within the scope of podiatry, and that no continuing education credit will be awarded for office management or marketing the practice.

The proposed rulemaking would delete § 29.63a as unnecessary because its contents would be adequately treated in the revised § 29.61(a).

Fiscal Impact

The proposed rulemaking would require podiatrists to incur costs in meeting the increased biennial continuing education requirement. The costs cannot be quantified because of the large number and type of continuing education courses and programs available; however, the costs are not believed to be substantial or burdensome. As noted above, many podiatrists already exceed the current 30-hour biennial continuing education requirement.

The proposed rulemaking would cause the Board's administrative staff to incur unspecified costs relating to auditing compliance with the increased biennial continuing education requirement. The current \$395 biennial renewal fee paid by podiatrists would defray the costs, which are not believed to be substantial.

The proposed rulemaking would not have a fiscal impact on the public or on other agencies and political subdivisions of the Commonwealth.

Paperwork Requirements

The proposed rulemaking would require podiatrists to retain records relating to their increased biennial continuing education hours and to submit such records to the Board upon audit. The proposed rulemaking would require the Board to revise its biennial renewal application. The proposed rulemaking would not create additional paperwork for the general public or for other agencies and

political subdivisions of the Commonwealth.

Effective Date

The proposed rulemaking would become effective upon publication of final-form rulemaking in the *Pennsylvania Bulletin* and would apply to the renewal of licensure for the 2011-2012 biennial license period.

Statutory Authority

Section 9.1 of the Podiatry Practice Act (63 P.S. § 42.9a) authorizes the Board to prescribe continuing education requirements, while section 15 of the Podiatry Practice Act (63 P.S. § 42.15) authorizes the Board to adopt such regulations as it deems necessary and proper to carry out its statutory responsibilities.

Regulatory Review

On December 9, 2009, as required by section 5(a) of the Regulatory Review Act (71 P.S. § 745.5(a)), the Board submitted copies of the proposed rulemaking and a Regulatory Analysis Form to the Independent Regulatory Review Commission (IRRC) and to the chairpersons of the Senate Standing Committee on Consumer Protection and Professional Licensure and the House Standing Committee on Professional Licensure. A copy of the Regulatory Analysis Form is available to the public upon request.

Under section 5(g) of the Regulatory Review Act (71 P.S. § 745.5(g)), IRRC may convey any comments, recommendations or objections to the proposed rulemaking within 30 days after the close of the public comment period. The comments, recommendations or objections must specify the regulatory review criteria that have not been met. The Regulatory Review Act specifies detailed procedures that permit the Board, the General Assembly and the Governor to review any comments, recommendations or objections prior to publication of final-form rulemaking.

Public Comment

The Board invites interested persons to submit written comments, recommendations or objections regarding the proposed rulemaking to Steven Wennberg, Counsel, State Board of Podiatry, P. O. Box 2649, Harrisburg, PA 17105-2649 within 30 days following publication of the proposed rulemaking in the *Pennsylvania Bulletin*.

ANNEX A

TITLE 49. PROFESSIONAL AND VOCATIONAL STANDARDS

PART I. DEPARTMENT OF STATE

Subpart A. PROFESSIONAL AND OCCUPATIONAL AFFAIRS

CHAPTER 29. STATE BOARD OF PODIATRY

* * * * *

CONTINUING EDUCATION

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§ 29.61. Requirements for biennial renewal and eligibility to conduct educational conferences.

(a) [As a condition of biennial renewal of a license, a licensee shall have completed 30 clock hours of continuing education during the preceding biennium in acceptable courses and programs in podiatry by approved providers. It is the responsibility of the licensee to ensure that credits used to comply with this continuing education requirement have been approved by the Board. Excess clock hours may not be carried over to the next biennium. A maximum of 10 clock hours of computer/Internet, magazine or journal article courses, which are approved by the Council on Podiatric Medical Education, shall be accepted by the Board.] Effective with the renewal of licensure for the 2011-2012 biennium, a licensee applying for biennial renewal of a license shall have completed 50 clock hours of continuing education in approved courses and programs during the preceding biennium. At least 30 of the clock hours must be in courses and programs in podiatry that are approved by the Board or the Council on

Podiatric Medical Education (CPME). The remaining clock hours must be either in courses and programs in podiatry that are approved by the Board or the CPME or in courses and programs in related medical subjects that are approved by the American Medical Association or the American Osteopathic Association. A maximum of 10 clock hours may be in approved courses and programs that involve the use of the Internet or the reading of professional journals or magazine articles. Continuing education credit will not be awarded for clock hours in office management or marketing the practice. Excess clock hours may not be carried over to the next biennium. A licensee is responsible for ensuring that a particular course or program is approved for continuing education credit prior to participating in the course or program.

* * * * *

§ 29.63a. [Preapproved course provider] (Reserved).

[Courses or programs offered or approved by the Council on Podiatric Medical Education will be accepted for continuing education credit. All courses shall fall within the scope of podiatry practice. The Board will not approve courses or programs, or portions, thereof in office management or in marketing the practice.]

* * * * *



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE
BUREAU OF PROFESSIONAL AND OCCUPATIONAL AFFAIRS
STATE BOARD OF PODIATRY
P.O. BOX 2649
HARRISBURG, PENNSYLVANIA 17105-2649

TELEPHONE: (717) 783-4858
ST-PODIATRY@STATE.PA.US

TELEFAX: (717) 787-7769
WWW.DOS.STATE.PA.US/POD

December 9, 2009

The Honorable Arthur Coccodrilli
Chairman, Independent Regulatory Review Commission
Harristown II, 14th Floor
333 Market Street
Harrisburg, PA 17101

RE: Proposed Rulemaking of the State Board of Podiatry
Relating to Continuing Education (16A-4410)

Dear Chairman Coccodrilli:

Enclosed is a copy of a proposed rulemaking package of the State Board of Podiatry relating to continuing education.

The Board stands ready to provide whatever information or assistance your Commission may require during its review of this proposed rulemaking.

Sincerely,

A handwritten signature in black ink, appearing to read "Mary E. Loftus".

Mary E. Loftus, D.P.M., Chairperson
State Board of Podiatry

MEL:SW
Enclosure

cc: Hon. Basil L. Merenda, Deputy Secretary for Regulatory Programs and
Commissioner of the Bureau of Professional and Occupational Affairs
Department of State

Steven V. Turner, Chief Counsel
Department of State

Joyce McKeever, Deputy Chief Counsel
Department of State

Cynthia K. Montgomery, Senior Counsel in Charge
Department of State

Steven Wennberg, Counsel
State Board of Podiatry

**TRANSMITTAL SHEET FOR REGULATIONS SUBJECT TO THE
REGULATORY REVIEW ACT**

I.D. NUMBER: 16A-4410
 SUBJECT: CONTINUING EDUCATION
 AGENCY: DEPARTMENT OF STATE
 STATE BOARD OF PODIATRY

TYPE OF REGULATION

- X Proposed Regulation
- Final Regulation
- Final Regulation with Notice of Proposed Rulemaking Omitted
- 120-day Emergency Certification of the Attorney General
- 120-day Emergency Certification of the Governor
- Delivery of Tolled Regulation
 - a. With Revisions
 - b. Without Revisions

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 INDEPENDENT REGULATORY
 REVIEW COMMISSION

FILING OF REGULATION

DATE	SIGNATURE	DESIGNATION
		HOUSE COMMITTEE ON PROFESSIONAL LICENSURE
12-9-09	<i>Michael P. McGeehan</i>	MAJORITY CHAIRMAN <u>The Honorable</u> Michael P. McGeehan
		SENATE COMMITTEE ON CONSUMER PROTECTION & PROFESSIONAL LICENSURE
12-9-09	<i>Robert M. Tomlinson</i>	MAJORITY CHAIRMAN <u>The Honorable</u> Robert M. Tomlinson
12/9/09	<i>Kathy Cooper</i>	INDEPENDENT REGULATORY REVIEW COMMISSION
		ATTORNEY GENERAL (for Final Omitted only)
12/9/09	<i>N. Ladd</i>	LEGISLATIVE REFERENCE BUREAU (for Proposed only)