



**Upcoming Board Meetings** July 10, 2017 **September 11. 2017 November 13. 2017** 

# Letter from the President

by Ahmed D. Faheem, M.D.

Let me bring you up to date on the changes I wrote about in our last newsletter. The most important and challenging issue was the news of Bob Knittle's retirement and the hiring Dr. Faheem of Mark Spangler



to replace him. While we were anxious about Bob's departure, hiring Mark has been the right decision for us to make. He has in a short period of time already proven himself. He has great ability, great potential, and the exact qualities and abilities we were looking for in our executive director.

Mark has adjusted to the challenges of the new position very amicably. He is a quick thinker, quick learner, extremely friendly, highly adaptable, and effectively uses his already developed skills as an excellent administrator. So far, everyone including me has been extremely impressed.

Mark took over the position at a very critical time, just as we started the West Virginia

legislative session. We had a new governor and several new legislators. The governor is a Democrat and the Legislature is dominated by Republicans. As you are well aware, there does seem to be some tension there, with the budget compromise still

pending at this writing.

Nevertheless, Mark was able to navigate his way through the Legislature on several very critical issues with the help of Jamie Alley, our deputy director and general counsel, and Andy Wessels, our consultant. We have had a very successful session. We were able to work with the Legislature and the Governor's Office on several critical bills. So far, everyone on the board seems to be very pleased with the outcome of several initiatives and bills that were to impact the board's operation in a very significant way.

Mark has also been able to take on the running of the board on a day-to-day basis. He has kept his team very well informed and intact. He has developed a very good working relationship with all the staff members, particularly the leadership. He has put our fears to rest in just over three months of his tenure. Our board seems to be in very capable hands and should move forward without any difficulty.

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## Letter From the President (continued from page 1)

Several board members and staff just returned from the Federation of State Medical Boards annual meeting. It was again a very useful and informative ex-

Mark's perience. first with the national organization. A highlight of the visit was the federation's decision (at our board's recommendation) to honor Bob Knittle with a distinguished vice award. Unforbecause tunately. of an illness in the family, Bob was not the award on his

behalf. Bob also was recognized by FSMB administrators. We congratulate Bob for the welldeserved kudos.

During the federation meeting, I also had the opportunity to attend my first baseball game in Dallas. I didn't want Bob's ticket to go to waste. I was recruited to attend the game, and I have to say that I thoroughly enjoyed it. My "coach," who explained the game to me, was Mrs. Dick Bowyer, who seems to be very well informed about the game and gives all credit to Rev. Bowyer.

Overall, our board is up-todate on changes in regulations and ahead of the curve on such issues as controlled substances. the Interstate Medical Licensing Compact and other aspects of licensure that are extremely important to our ongoing functions.

Our board now has a full



able to attend. I was Left to Right: Mark Spangler, Dr. Humayun J. Chaudhry, executive director of honored to accept FSMB, Dr. Ahmed Faheem, and Dean Wright, PA-C. I wi

complement of 15 members. All committees are working in full swing. We are keeping up with various challenges. We soon additional have some may to help with instaff vestigations and disciplinary proceedings. We hope that we can ease some of the burden very efficient legal on our counsel and investigators, Leslie Inghram and Patrick Muncie.

In short, things are flowing as well as can be expected. There are some wrinkles as usual to be straightened up. But I can assure you all are working hard to make our board function as smoothly as possible.

We are planning a board retreat in the near future so that we can brainstorm about how to make things even better. In the meantime. if you have suggestions, please bring them to our attention so that we can take them into consideration. Also, we have highlighted eral issues of great importance to the board going forward, including several that might require legis-

I will keep you informed. As always, thank you for all of your input and commitment.

lative changes.

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# The Board Welcomes Two New Members



(Seated, left to right) Ashish Sheth, M.D.; Carrie Lakin, D.P.M.; Kishore Challa, M.D.; Ahmed Faheem, M.D.; Rahul Gupta, M.D.; and Mustafa Rahim, M.D. (Standing, left to right) Harry Duncan, M.D.; Rusty Cain, D.P.M.; Beth Hays, M.A.; Rev. O. Richard Bowyer; David Mullins, M.D.; Matthew Upton, M.D.; Wes Steele, M.D.; K. Dean Wright, P.A.-C.; and Cheryl Henderson, J.D.

In December 2016, former West Virginia Gov. Earl Ray Tomblin appointed two new members to the Board of Medicine. Carrie Lakin, D.P.M., succeeds R. Curtis Arnold, D.P.M., and Thomas (Wes) Steele, M.D., succeeds Carlos Jimenez, M.D.

Lakin was raised in rural Millerton in northern Pennsylvania. She completed her undergraduate

studies with a BS in Health Sciences at Gannon University in Erie, PA, and went on to obtain a Doctorate of Podiatric Medicine in Chicago in 1998. She remained in Chicago for her podiatric surgical residency at Loyola University Medical Center, before arriving in West Virginia in August 2000.



Dr. Lakin

Her special areas of interest are diabetic limb salvage and pediatric gait abnormalities. She now practices in Charleston and is active on many hospital boards and committees.

Lakin's previous roles include chief of surgery, credentialing committee chair, and ethics committee member at St. Francis Hospital. She also serves on the Tissue, Transfusion and Procedure

(TT & P) Committee at Charleston Area Medical Center and is the current podiatric sub-section chief at that hospital. She remains active in the West Virginia Podiatric Medical Association, formerly serving for seven years as the secretary/ treasurer and presently as the Medicare CAC representative. She is active in her local communi-



Dr. Steele

ty, serving the uninsured at West Virginia Health Right for eight years, and is a member of the staff parish relations committee at Christ Church United Methodist in Charleston. She has a daughter and enjoys spending time with her as well as various outdoor activities.

Steele was raised in Hun-

tington. He completed his undergraduate studies at Marshall University in Huntington, and at Wake Forest University in Winston-Salem, North Carolina. Steele is a West Virginia University medical school alumnus who likewise completed his residency in pediatrics through West Virginia University, where he served as chief resident. Steele joined Pediatric Partners in Fairmont in July 1995.

# Wright Named Distinguished Fellow in AAPA

K. Dean Wright, P.A.-C., of Huntington, a member of the West Virginia Board of Medicine, has been recognized as a Distinguished Fellow of the American Academy of Physi-

cian Assistants for his outstanding contributions to patient care and the profession during his 37-year career. He currently practices as a member of the general surgery team at the Huntington VA Medical Center.



D. Wright

Wright is a graduate of the PA program at Alderson-Broaddus College and the Norwalk Hospital / Yale University School of Medicine

PA Surgical Residency Program. His career started as the first surgical PA employed at Wheeling Hospital. As a relative pioneer in the profession, he developed a house staff of

PAs and served as the chief surgical PA at that institution for 13 years. In 1994, he moved to Huntington and practiced as a cardiothoracic and vascular surgery PA at St. Mary's Medical Center until 2015.

Wright has been involved in the lead-

ership of the West Virginia Association of Physician Assistants, which recognized him as "PA of the Year" in 1999. He chairs the Board of Medicine's PA Committee.

He also demonstrated significant dedication and involvement in the community of Barboursville/ Huntington where he has lived for the past 23 years with his wife Judy, and their six children. He is a member of Fifth Avenue Baptist Church and has served as its moderator, and participated in multiple church mission trips, nationally and internationally.

The Distinguished Fellow program was established by AAPA in 2007 to recognize the exceptional contributions of PAs to the medical profession. Distinguished Fellows of AAPA represent only 2 percent of the entire AAPA membership.

## **Drug Dispensing Changes Effective Next Month**

Beginning in July, all practitioners who engage in **office-based** dispensing and/or administering of controlled substances (including free samples of controlled substances) are required to register with the WV Board of Medicine as a drug dispensing practitioner. A separate registration is required for each practice location where the practitioner administers and/or dispenses controlled substances.

Practitioners who administer controlled substances exclusively to patients who are receiving inpatient health care services at a hospital or other inpatient health care facility at the time when administration of controlled substances occurs do not need to register with the board. Additionally, practitioners who only administer and/ or dispense medications which are not controlled substances are no longer required to register with the board. If you are currently registered with the board as a drug dispensing practitioner and will no longer be required to hold a drug dispensing registration, no action is required as your registration will automatically expire if not renewed.

Additional amendments to the board's legislative rule 11 CSR 5 set forth security, packaging and

labeling requirements, and provide guidance on when a practitioner may accept unwanted or unused prescription drugs from a patient for disposal. These standards apply to all dispensing practitioners. Consistent with federal law, the rule also prohibits a practitioner from accepting any unwanted or unused controlled substances.

If you dispense and/or administer prescription drugs in an office-based setting, please click on the link below to review the board's drug dispensing rule.

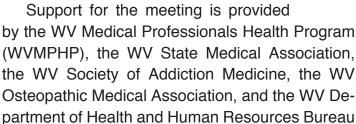
11 CSR 5 - Dispensing of Prescription Drugs by Practioners

# 2017 Appalachian Addiction & Prescription Drug Abuse Conference

By P. Bradley Hall, M.D. Executive Medical Director WV Medical Professionals Health Program

The annual Appalachian Addiction & Prescription Drug Abuse Conference will be held Oct. 19-22 in Charleston, the fifth conference of its type

held since inception of the licensure boards' three hour CME Best Practices Prescribing of Controlling Substances required education, associated comorbidity, recovery and relevant issues around substance use disorders and proper prescribing. The conference is endorsed and supported by both the WV Board of Medicine and the WV Board of Osteopathic Medicine.



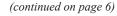
for Behavioral Health & Health Facilities.

CME joint sponsorship will be provided by CAMC Health Education & Research Institute. Attendees will earn 20+ CME/CE credits, inclusive of the three-hour mandatory CME. Nearly 300 physicians, physician assistants, nurses, dentists,

psychologists, lawyers, pharmacists, counselors, social workers and interested others are expected to attend. P. Bradley Hall, M.D., executive medical director, WVMPHP, is the primary planner and organizer of this conference.

Speakers will include DHHR Secretary Bill J. Crouch; Rahul Gupta, M.D., WV public health commissioner; Robert DuPont, M.D., first director of the National Institute on Drug Abuse and the sec-

ond White House Drug Czar; Allen Mock, M.D., WV chief medical examiner; and many other state and national experts, including the deans of all three state medical schools.





Dr. Hall

## **UPCOMING BOARD VACANCIES**

The board membership terms of the following members will expire on Sept. 30: Kishore Challa, M.D., F.A.C.C.; Rusty Cain, D.P.M.; Beth Hays, M.A.; Cheryl Henderson, J.D.; and K. Dean Wright, P.A.-C.

State law provides that, "The board shall consist of fifteen members. One member shall be the state health officer ex officio, with the right to vote as a member of the board. The other fourteen members shall be appointed by the Governor, with the advice and consent of the

Senate. Eight of the members shall be appointed from among individuals holding the degree of doctor of medicine and two shall hold the degree of doctor of podiatric medicine. One member shall be an individual licensed by the board as a physician assistant. Each of these members must be duly licensed to practice his or her profession in this state on the date of appointment and must have been licensed and actively practicing that profession for at least five years immediately preceding the date of appoint-

ment. Three lay members shall be appointed to represent health care consumers. Neither the lay members nor any person of the lay members' immediate families shall be a provider of or be employed by a provider of health care services. The state health officer's term shall continue for the period that he or she holds office as state health officer. Each other member of the board shall be appointed to serve a term of five years: Provided, That the members of the Board of Medi-

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### **Addiction Conference** (continued from page 5)

Topics cover a broad range of issues related to prescription drug abuse, addiction and the paradigm for the epidemic. Day One topics include office management of the addicted patient and integration of addiction treatment into the primary care office; and medication-assisted treatment (MAT) and suboxone, highlighting the current national and state expansion of addiction treatment.

Day Two includes the developmental process of addiction; management of chronic pain without opioids; burnout in the health care profession; and a special luncheon with updates from medical school deans focusing on early career physician education. Synthetic drugs of abuse also will be covered.

Day Three will highlight alcohol as the most common substance of abuse; case studies on best practices in prescribing; current WV overdose statistics; WV laws, rules, regulations and the Prescription Drug Monitoring Program; addiction and pregnancy; and the perils and pitfalls of benzodiazepines.

A physician education grant through DHHR will provide additional support, including multiple scholarships for early career students and residents. Other organizations in the field will be represented including organized medicine, treatment centers, laboratories, the legal system, the West Virginia Legislature and components of state government.

The success of the conference exemplifies collaboration and communication among organized medicine within the state, and the expertise, passion and support of the practice of medicine irrespective of discipline, government, regulatory agencies and relevant others. The WVMPHP hopes to continue its efforts around integration, collaboration, accountability and provider education with evidence-based content. As always, statewide support and guidance is a primary reason the WV Medical Professionals Health Program exists as it does today. On behalf of the WVMPHP, the providers we serve and West Virginia, I thank you all!

Access to additional conference information is available at <a href="https://www.wvmphp.org">www.wvmphp.org</a>.

## **IMLC Applications Under Way**

The Interstate Medical Licensure Compact Commission began processing applications for expedited licensure under the compact on April 6.

The Interstate Medical Licensure Compact is a binding statutory agreement among member states. creating streamlined process that allows physicians to become licensed multiple states, thereby enhancing the portability of a medical license. The IMLC creates another pathway for licensure and does not otherwise state's change а Medical Practice Act. The IMLC

also adopts a uniform and standard for licensure and affirms that the practice of medicine occurs where the patient is located at the time of the physician-patient encounter. Upon licensure via the IMLC, the physician will be under the jurisdiction of the medical board in the state where the patient is located.

Currently, there are nine states issuing licenses and seven states issuing letters of qualification and licenses. Five states are experiencing a delayed implementation and four states have pending legislation.

Therefore, only doctors who hold a full, unrestricted license in at least one of seven states—Alabama, Idaho, Iowa, Kansas, West Virginia, Wisconsin and Wyoming—and are residents, have at least 25 percent of their medical practice, or are employed by an entity in one of those states, can apply to be licensed in one or more of the other participating states.

For a complete list of participating states and more information, visit IMLCC website at www.imlcc.org or contact Wanda Bowling at (770) 335-2539 or via email at: inquiry@imlcc.net.

# Nature and Number of Complaints Received

From July 1, 2014 to June 30, 2016

Nature of Complaint	<b>Number of Complaints</b>
Licensing application, renewal: false statements	22
Exercising influence for sexual activity with patient	1
Conviction: felony, moral turpitude, relation to practice	1
False or deceptive advertising	1
Failure to keep written records justifying treatment	3
Exploitation for financial gain	2
Gross negligence regarding prescription forms	1
Deceptive representations in practice	1
Soliciting patients through fraud, undue influence	1
False reporting/failing to file required report	1
Kickbacks, rebates, split fees for patient referral	1
Prescribing other than in good faith in accord with medical standards	27
Practice beyond permitted scope of practice	3
Knowing delegation of responsibilities to one unqualified	7
Violation of laws, rules and orders	42
Inability to practice safely due to deterioration, through aging, impairment, drug or	alcohol abuse10
Failure to perform statutory or legal obligation	14
Malpractice or failure to practice acceptably	204
Disciplinary action in another state/license denial	10
Willful violation of confidential communication	1
Pre-signing blank prescription forms	1
Professional incompetence.	
Unprofessional, unethical conduct	216
Unprofessional, unethical conduct Failure to conform to AMA or APMA ethical	standards14
Unprofessional, unethical conduct Failing to comply with supervisory or collaborative agreement6	
Unprofessional, unethical conduct Charging excessive, unconscionable fees	1
Unprofessional, unethical conduct Grossly ignorant or incompetent act/unnecess	ary service1
Unprofessional, unethical conduct Issuing grossly improbable statements deceiving	ng public4
Unprofessional, unethical conduct Prescribing without an ongoing physician-patient relationship3	
Unprofessional, unethical conduct Prescribing controlled substances other than n	nedicinally/in a
manner to evade legal requirements/for personal or family use/excessively	5

# Medical Marijuana Panel to be Established

Tightly drawn legislation to allow medicinal marijuana in West Virginia, signed into law by Gov. Jim Justice on April 19, creates an Advisory Board within the state Department of Health and Human Resources' Bureau for Public Health.

West Virginia is now the 29th state to allow the medical use of cannabis.

Under the West Virginia Medical Cannabis Act (SB 386), which becomes effective on July 5, the Advisory Board will include:

- The BPH commissioner or a designee;
- The superintendent of the West Virginia State Police or a designee;
- Four physicians appointed by the WV State Medical Association with one each from family practice/ neurology/general practice, pain management, oncology/palliative care and psychiatry;
- A pharmacist designated by the WV Board of Pharmacy;
- A pharmacologist who has experience in the science of cannabis and a knowledge of the uses, effects, and modes of actions of drugs, to be appointed by the Governor;
- A member who is a horticulturalist, to be designated by the West Virginia Commissioner of Agriculture;
- A member designated by the West Virginia Association of Alcoholism and Drug Counselors;
- An attorney knowledgeable about medical cannabis laws;
- A member appointed by the West Virginia Prosecuting Attorneys Institute; and,
- One member appointed by the Governor, who shall be a patient, a family or household member of a patient or a patient advocate.

The bureau may issue permits for no more than 10 growers and 10 processors (\$5,000 appli-

cation fee; \$50,000 permit fee and \$5,000 annual renewal fee) and 30 dispensaries (\$2,500 application fee, \$10,000 permit fee per location and \$2,500 annual renewal fee), with no more than five in any region. The bureau may not issue more than two individual dispensary permits to one per-

son, and limits grower and processor permits to one per person.

A 10 percent tax is imposed of gross receipts on the sale of medical cannabis by growers and processors to dispensaries. All fees and taxes go into a Medical Cannabis Program Fund, 55 percent of which is allocated to the Bureau for Public Health. Of the remaining 45 percent: 50 percent

is allocated to a Fight Substance

Abuse Fund; 40 percent is allocated to the Division of Justice and Community Services, for grants to local law enforcement agencies for training, drug diversion, and other programs focused on crime and addiction; and 10 percent is allocated to a fund for law enforcement professional training and professional development programs.

Physicians would apply for registration with the bureau to be authorized to issue certificates to patients to use medical cannabis.

Patients eligible to receive treatment with medicinal marijuana include those with:

- cancer:
- HIV or AIDS;
- amyotrophic lateral sclerosis;
- Parkinson's disease;
- multiple sclerosis;
- damage to the nervous tissue of the spinal cord with objective neurological indication of intractable spasticity;
- epilepsy;

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# **New Fees for Health Care Records**

Legislation that goes into effect July 6 establishes a new fee structure that physicians and other providers may utilize for providing health records to patients or their representatives.

The law resulting from Senate Bill 578 requires providers to produce records within 30 days of receiving a written request. The provider may charge a patient or their personal representative a fee consistent with the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

For someone other than the patient or their personal representative, the provider may charge a \$20 search and handling fee, a per-page fee of 40 cents for paper copies, and postage (if mailed), plus any applicable taxes. If the requested record may be furnished in electronic form, upon agree-

ment of both parties, the per-page fee cannot exceed 20 cents.

In no event can the charge exceed \$150, inclusive of all fees, except for applicable taxes.

The new law also allows for a \$10 fee for certification of copies. If someone requests or agrees to an explanation or summary of the records, the provider can charge a reasonable cost-based fee for labor (plus postage and taxes). If records are stored with a third party, or a third party responds to a records request, the provider, "may charge additionally for the actual charges incurred from the third party."

The per-page fee for copying may be adjusted on Oct. 1 of each year to reflect the consumer price index for medical care services.

### Medical Marijuana (continued from page 8)

- neuropathies;
- Huntington's disease;
- Crohn's disease;
- post-traumatic stress disorder;
- intractable seizures;
- sickle cell anemia;
- severe chronic or intractable pain of neuropathic origin or severe chronic or intractable pain in which conventional therapeutic intervention and opiate therapy is contraindicated or has proved ineffective as determined as part of continuing care; and
- those who are terminally ill, with a medical prognosis of one year or less.

The BPH will develop a four-hour training course for physicians regarding the latest scientific research on medical cannabis, including its risks and benefits, and other information deemed necessary by the bureau. Successful completion of the course shall be approved as continuing ed-

ucation credits as determined by the WV Board of Medicine and the WV Board of Osteopathic Medicine.

Patients will be able to access treatment in different forms, including pills, oils, creams, ointments, gels, a form medically appropriate for administration by vaporization or nebulization, tinctures, liquid or dermal patch. It shall, however, be illegal to smoke medical cannabis, or to incorporate or sell it in edible form other than described above.

BPH is in the process of drafting temporary rules that are needed to implement the act. Those temporary rules will explain the program's operation, including how applications are to be submitted by growers/processors, dispensaries, patients and caregivers, and physicians. Under the act, the bureau may not issue the patient and caregiver identification cards necessary to obtain medical cannabis until July 1, 2019.

More information can be found on DHHR's website at:

http://www.dhhr.wv.gov/bph/Pages/Medical-Cannabis-Program.aspx.

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## **Board Actions**

## December 2016 through May 2017

Thair Ali Barghouthi, M.D. 12/29/2016 – Reprimand or Censure Consent Order

James Patrick Morgan, M.D. 01/09/2017 – Reprimand or Censure Consent Order

Ranga Chelva Krishna, M.D. 01/09/2017 – Reprimand or Censure Consent Order

Jason Charles Brinkman
Reutter, M.D.
01/09/2017 – Administrative Fine /
Monetary Penalty
Consent Order

James Ethan Lowe, P.A.-C. 01/09/2017 – Administrative Fine / Monetary Penalty Consent Order

Charles Lee Rosen, M.D. 01/09/2017 – Public Reprimand Consent Order

**Diane Elaine Shafer, M.D.** 01/12/2017 – Denial of License (Appeal Pending) Final Order Deleno H. Webb III, M.D. 01/12/2017 – Voluntary Surrender of License Consent Order

Cespedes, P.A.-C 01/12/2017 – Termination of Consent Order Board Order

Jacqueline Renae Shipman-

**Devender Kumar Batra, M.D.** 01/12/2017 – Public Reprimand Consent Order

Louis William Groves, M.D. 02/22/2017 – Limitation or Restriction on License / Practice Consent Order

Christopher John Murphy, M.D. 02/22/2017 – Voluntary Surrender of License Consent Order

**G. William Lavery, M.D.** 02/22/2017 – Voluntary Surrender of License Consent Order

Ahmed Mohamed Adeeb Kneifati, M.D.
02/28/2017 – Limitation or
Restriction on License / Practice
Consent Order

Joseph Anthony Jurand, M.D. 04/03/2017 – Limitation or Restriction on License / Practice Amended Consent Order

Jessica Faye Dunkley, P.A.-C. 04/04/2017 – Limitation or Restriction on License / Practice Consent Order

Nabeel Ghabra, M.D. 04/11/2017 – Administrative Fine / Monetary Penalty Consent Order

**Devin Mark Ciliberti, M.D.** 04/13/2017 – Administrative Fine / Monetary Penalty Consent Order

John Emil Capito, M.D. 05/02/2017 – Administrative Fine / Monetary Penalty Consent Order

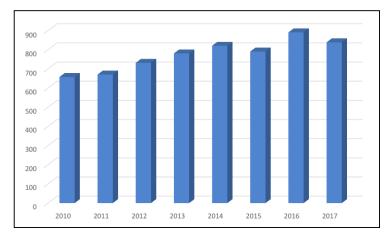
Raymond Omar Rushden, M.D. 05/08/2017 – Administrative Fine / Monetary Penalty Consent Order

Kimberly Elaine Connor, P.A.-C. 05/15/2017 – Termination of Consent Order Board Order

Yasar Aksoy, M.D. 05/30/2017 – Summary / Emergency Suspension of License Board Order

## **Physician Assistant Renewals Results**

Physician assistant licensure renewal concluded on March 31. There were 839 physician assistants who renewed their license to practice in the state of West Virginia. In addition, 128 PAs did not renew, resulting in the expiration of their licenses. As of June 1, two of the 128 PAs whose licenses expired have been reinstated. The graph represents the number of PAs who were licensed by the board as of July 1 of each year.



# Criminal History Record Check Required for all Applicants Seeking Initial Licensure

Beginning in July, applicants seeking initial licensure by the West Virginia Board of Medicine will be required to request and submit to the board the results of a fingerprint-based state and national criminal history record check. The criminal history record check must be requested no earlier than 12 months prior to the board's receipt of an application for licensure.

The West Virginia State Police has contracted with MorphoTrust USA to provide fingerprinting services. Applicants can schedule an appointment at any of the 26 MorphoTrust fingerpriting sites in West Virginia by visiting <a href="https://www.identogo.com">www.identogo.com</a> or by calling (855) 766-7746. The current cost of obtaining a state and federal background check is \$44.50.

If you are unable to visit a MorphoTrust site in West Virginia, you may submit an ink and roll hard card of your prints to MorphoTrust. MorphoTrust will then convert the hard card of your prints into an electronic fingerprint submission for processing. *Click here* for the hard card submitting procedure.

Please note that if you are submitting a hard card, you will need to provide the Board of Medi-cine originating agency identifier number (ORI) and the contributor agency name, which is WV Board of Medicine – M.D., D.P.M., and P.A.-C.

Once you have completed the fingerprint process, if you need to inquire about the status of your fingerprints and the results, or have general questions about the process, contact Morpho-Trust customer service center at (855) 766-7746. Service representatives are available by phone Monday through Friday from 8 a.m. to 5 p.m., EST.

Should criminal history offenses be reported on an applicant's criminal history record check, the board will consider the nature, severity and recency of offenses, as well as rehabilitation and other factors on a case-by-case basis.

Amendments were made to the board's legislative rules 11 CSR 1A, Licensing and Disciplinary Procedures: Physicians; Podiatric Physicians and

Surgeons, and 11 CSR 1B, Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants, to implement the process of criminal history record checks.

To view the Board's amended rules, please click on the appropriate link below.

11 CSR 1A - Licensing and Disciplinary Procedures: Physicians; Podiatric Physicians and Surgeons

11 CSR 1B - Licensure, Disciplinary and Complaint Procedures, Continuing Education, Physician Assistants

## Staff Members

Mark A. Spangler, M.A. Executive Director

Jamie S. Alley, Esq.
Deputy Director / General Counsel

Jamie C. Frame
Executive Administrative Assistant

Leslie A. Thornton-Inghram, CMBI
Supervisor of Investigation, Complaints and
Compliance

Patrick Muncie Investigator

Felicia A. Bryant – Paralegal

Rhonda A. Dean – Complaints Coordinator

**Sheree J. Thompson** – Supervisor of Licensing, Certifications and Renewals

Ryan P. Moore – Physician Assistant Licensure Analyst

**Angela M. Scholl** – Licensure Analyst Last Names A-L

Carmella L. Walker – Licensure Analyst Last Names M-Z

Kimberly R. Jett – Certifications Analyst

Deb D. Scott - Fiscal Office

Scott A. Wilkinson – Information Systems
Coordinator

# WV BOARD OF MEDICINE JUNE 2017 - PAGE 12 Greetings from your new Executive Director



M. Spangler

On Jan. 23, I assumed the role of executive director of the West Virginia Board of Medicine. The transition period was rapid, as the West Virginia legislative session began soon thereafter.

It quickly became apparent to me that my predecessor, Robert C. Knittle, had established a highly ef-

fective and efficient team of professionals at the board office. I was welcomed by all in the medical community and with the staff's assistance and the board of directors' commitment, we managed the transition nicely.

The legislative session was replete with matters that directly affected our regulatory responsibilities, as you can read in our president's report. It is certain that as these changes are initiated and the practice of medicine evolves, the West Virginia Board of Medicine must respond to the needs of our licensees and continue to focus on our mission to secure public safety.

In March, I had the privilege to attend the Federation of State Medical Boards annual meeting in Ft. Worth, Texas. The WV board had three staff and three board members in attendance. It was a wonderful opportunity for me to learn of national and international trends and challenges that medical boards are facing. It was equally valuable for me to meet my peers from other states and provinces.

The board also has charged me with representing our board as a commissioner on the Interstate Medical Licensure Compact Commission. In this capacity, I have participated in several phone conferences and one face-to-face meeting in St. Paul, MN, thus far. I am pleased to report that we are beginning to process a few IMLCC licenses as the state of principal licensure.

I look forward to serving in the capacity of executive director of the West Virginia Board of Medicine and continuing the tradition that has been established. Also, I look forward to getting to know many of you as we strive together to protect the public and support the availability of optimal health care for our citizens.



(Seated, left to right) Jamie C. Frame, Jamie S. Alley, Mark A. Spangler, Leslie A. Inghram and Sheree Thompson; (Standing, left to right) Patrick Muncie, Scott Wilkinson, Rhonda Dean, Deborah Scott, Kimberly Jett, Deena Stone, Felicia Bryant, Angela Scholl, Ryan Moore, and Carmella Walker

# New Licensees – January through May 2017

The West Virginia Board of Medicine issued 239 medical doctor licenses, five podiatric physician licenses and 23 physician assistant licenses for the period of January through May 2017.

Congratulations to:

#### **PHYSICIANS**

#### A-B

Abascal, Aliana Michelle Abbas, Ghulam Abu Sukheila, Ramy Mahmoud Adkins, David Alan Ahmad, Mirza Nayyar Daud Ahmad. Zeeshan Ahmed-Amr. Hesham Mohamed Ahsan, Afiah Anis Akram, Yasir Allampati, Sanath Kumar Anand, Abhishek Anderson, Peter William Arnone, Vincent John Astorne, Walter Jorge Azzuga, Abeer Aref Badawi, Mohamad Hayssam Bagchi, Arindam Baghshomali, Sanam Bailey, Lin Hsu Bailey, Jason James Baralt, Diana Maria Barhorst, Brian Randall Barnard, John Taylor II Basel, David Alan Benado, David Nissim Berkson, David Arnold Bhutia, Namgyal Dorjee Bijjula, Ragneel Reddy Bodenhamer, John Richardson Boman, Lars

Boquet, Mark James

Borkon, Matthew

Jacob

Brandmeir, Nicholas James Brewer, Zachary Seth Brodsky, Sergey Brogden, Stephanie Brown, Charles Michael

#### C-D

Camacho, Victor Miguel Campsey, David Michael Carney, Lesli Marie Carr. Michele Marie Cassis, Paul Norman Catena, William Joseph Chaffin, Samantha Leigh Chang, Sidney Tan Chang, Theodore Sean Charron, George Maurice Chaudhuri, Kallol Chaum, Edward Chen, Charles Chiqurupati, Naga Sambhavi Choi. Lorraine Chu, Jeffrey Ting-Yuan Cook, Johanna Lucy Cotoi, Daniel Crismon, Heidi Ream DeLa'O. Connie Michell DeLong, Peter Ade DeVience, Eva Deskins, Christopher Russell Dhumak, Vipul Jayendranath DiCiro, Dominic Theodore DiPoce, Jason Marc Dietrich, Stephen Leslie Dimachkie, Ziad

Dionne, Christopher Michael Dohar, Sheena Ann Dukes, Seth

#### E-G

Elder, Kerren Harry Espinoza, Salvador Fagin, Colby Lynn Faraon-Pogaceanu, Claudiu Cristian Farjo, Peter David Farooki, Sana Fei, Naomi H. Fogha, Evan Padinga Forte, Michael J. Foster, Toby Eugene Franklin, Mark **Nicholas** Ganesh, Shanti Portia Garber, Alan Craig Garcia, Gwenalyn Gail Capistrano George, Bassem Ragheb Goel, Harsh Goldberg, Richard Miles Goldhardt, II, Timothy Goldstein, Baruch Bernard Goodman, Brian Michael Gorchynsky, Andrew Michael Grabo, Jr., Daniel John Graham, Ian Roderick Gregg, Herbert Eldon Grundmann, Nicolas Krasovec Gumber, Ramnika Iqbal Singh

### H-J

Hahn, Bethani
Haider, Sajjad
Haider, Adnan
Hales, Charles
Farnsworth
Harris, Benjamin
Logan
Hatfield, Nathan
Randall
Hemminger, Jessica
Ann

Herschler, Jeremy Alan Hess, Clayton Burnett Hill, Mark Nolan Hojat, Rod A. Homsi, Yahia Horwath, Ewald Hu. Lulin Huff, Nicholas Owen Huff, Caleb Richard Hundley, Nathan Lee lacob, Codrin Eugen Ilyas, Mahwish Yasmeen Indramohan, Pavithra Mohan Inkollu, Sashi Kiran Ivy, Cathleen Ann Jacobs, John Paul Jahed, Kiarash Jedlicka, Lawrence John Johnson, Sharita Nicolle Justice, Charles Matthew

### K-L

Kaps, Cristopher Jonathan Kaseer, Bahaa Aldeen Kasenchak, James Eric Kaul, Aaradhana Kaura, Amit Kazienko, Brian Thomas Kedia, Shiksha Kelminson, Stephen Bruce Kennis, Jack David Khalil, Elie Kints, Geertruida Klein, Jonathan Tzvi Klenzak, Scott Michael Koff, Matthew Douglas Kouch, Michael Kowalska, Agnieszka Kubiczek, Piotr Antoni Kummet, Thomas Dale

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### **New Licensees** (continued from page 13)

Labus, Andrea
Michelle
Laird, Dennis Andrew
Lane, Debra Ann
Leftin, Howard Irwin
Leventhal, Andrew
Robert
Lidstone, Erich
Alexander
Lim, Tobin
LoDico, Matthew
Jean-Paul
Lounder, Dana Tiberio

#### M-N

MacDonald, Paul Henry Malphrus, Amy Denise Mandadi, Subhadra Martin, Erica Victoria McArthur, John Daniel Mehta, Rajesh Kumar Merati. Kambiz Miller, Tim Alan Miller, Samuel Douglas Miller, Sara Mucko Minc, Samantha Danielle Mor, Nadav Moreland, Margaret Wvnne Morton-Fishman, Melissa Moughrabieh, M. Anas Mustafa, Bisher Oscar-Shucri Nadarajah, Dhashaini Nadasdy, Tibor Narayan, Dwayne Avanish Naturale, Richard Timothy Naumova, Nadia Nikolaeva

### O-R

Okhumale, Paul Imoudu Pallavi, Ranjita Panbehi, Bahram Patel, Pratikkumar Popatlal

Ng, Chi-Kin

Patel, Rita Ramesh Patel, Karina Ponnusamy, Karthikeyan Ettigounder Potolicchio, Jr., Samuel Joseph Przybysz, III, William Stephan Pulluru, Harish Raheja, Divisha Rajagopalan, Swarna Ramirez, Claudia Patricia Rassias, Athos John Reddy, Sirisha Pasham Reich, Irwin Martin Renck, Gregory Richard Rothschild, Bruce Max

#### S-T

Salvaggio, Mark Anthony Santos, Árvin Lopez Satoskar, Anjali Abhav Schubach, Gregg David Sengupta, Partho Pratim Settles, II, Jeffery Dirk Seynnaeve, Carl A. Shang, Eric Kouwei Shao, Charles Yanping Sharabi, Abdelsalam Sheshadri, Navaneetha Krishnan Shives, Lisa J. Shulman, Joshua Alexander Shy, Joseph Cameron Simpson, Meagan McGinley Singh, Shalinder Jit Singh, Supreet Singh, Richa Skandamis, George Constantinos Smith, George Robert Snodgrass, Natalie Jean Stern, Augustus Graham

Subedi, Bishnu Hari Sultan, Wamiq Sohail Swartz, Barbara Elizabeth Syed, Tanvir Uddin Tanner, Jerry Wayne Tanner, Stacy Tarakji, Mark Elias Tariq, Fatima Teomete, Uygar Testani, Jr., Mario Thompson, III, Alvin Dewitt Tohidi, Behrooz Tretter, Justin Thomas Tummala, Mounika

#### V-Z

Valavoor, Shahul Hameed Vargo, IV, John Austin Vaughan, II, Freddie William Venbrux, Nuchanart Vengrow, Michael Ian Wagner, Richard Otto Walker, Sidney Patton Walker, Barbara Alice Webb, Arthur Lawson Wei, Kavita Kakkad West, Fay Bernadette Wu, Xinyu Wynn, Tanya Renee Yacoub, Shirley B. Zalzal, Habib George Zaraket, Hanna

## PODIATRIC PHYSICIANS

Abbasi, Amir Brouillette, Jeremy W. Giamo, Scott Jason Michael, Jennifer Erin Nielson, David L.

#### PHYSICIAN ASSISTANTS

Bateman, Erin Kristin Bonner, Laura E. Cameron, Candice Marie Douglas, Zachary Kent Dunkley, Jessica Faye Edmonds, Isaac H. Gottardi, Jodi Richelle Guy, Jonathan Mitchell Holly, Aaron Scott McMillion, Michael Darrell McQueen, Stephen Lee Miller, Brandon L. Mix, Anne Claire Oberg, Kevin Michael Paitsel, Lisa Dawn Risendal, Kylie Perkins Salser, Abigail Hubble Sanko, Meagan Marissa Smith, Elaine Marie Smith, Kristopher Lerov Soya, Danielle Caitlin Spence, Tina Louise Splitt, Nicholas William

### **Contact Information**

All licensees must provide the board with timely notice of all changes of address, including email addresses. A valid email address is important for licensees to receive notifications from the board regarding news releases and licensure renewal. Click on the link below to access the Licensee Change of Contact Information section of the board's website. Please be advised that your preferred contact information, although not published, may be subject to release pursuant to a public records request.

Licensee Change of Contact Information

# Legislature Approves Telemedicine Bill; PA Bill Sees New Life

The West Virginia Legislature, during its 2017 regular legislative session, passed several key bills that benefit the medical profession, including a law signed by Gov. Jim Justice on April 26 and made effective from passage that permits the prescription of controlled substances listed in Schedule II of the Uniform Controlled Substances Act via telemedicine under certain circumstances.

A physician or podiatric physician who practices medicine to a patient **solely** through the utilization of telemedicine technologies may not prescribe any Schedule II medication to that patient; in other words, at least one direct patient encounter/examination is required.

Prescribing limitations do not apply when a physician is providing treatment to patients who are minors, or if 18 or older, who are enrolled in a primary or secondary education program and who are diagnosed with intellectual or developmental disabilities, neurological disease, Attention Defi-cit Disorder, Autism, or a traumatic brain injury. Physicians may not prescribe any drug via tele-medicine with the intent of causing an abortion.

Other legislation approved during the 2017 regular session strengthens the power and authority of the medical boards. Effective July 7, HB 2631 prevents the dismissal of complaints against physicians that exceed the time standards for disposition when the licensee causes the delay. The final version of the bill states, "The time period for final ruling shall be tolled for any delay requested or caused by the respondent, or by counsel for the respondent, and in no event shall a complaint proceeding be dismissed for exceeding the time standards ... when such overage is the result of procedural delay or obstructive action by the accused or his or her counsel or agents."

Sen. Tom Takubo, chairman of the Senate Health Committee, explained: "Essentially, the time clock stops." The Legislature also passed HB 2359, which aligns the penalties for osteopaths who practice without a license with those of allopaths who practice without a license. Provisions amended into the bill allow the WV Board of Medicine and the WV Board of Osteopathic Medicine to share staff – such as investigators, attorneys, clerks and administrative staff – "when it may be efficient and practical for the functioning of the boards." The new law also becomes effective July 7.

Another new law, HB 2628, strengthens both boards' abilities to discipline physicians, particularly those who commit a felony offense, including the ability to revoke a license "for the life of the licensee." The bill also requires the boards to report to federal or state law enforcement, or a prosecuting authority, when they receive credible information that a licensee is or has been engaged in criminal activity. The new law becomes effective July 6.

Direct Primary Care is now permitted statewide, effective June 13, under HB 2301. Sometimes referred to as "concierge medicine," Direct Primary Care allows private practitioners to charge patients a flat monthly fee in exchange for unlimited access and a range of primary care services. DPC operates outside of traditional health insurance, Medicaid and Medicare.

The concept has existed as a pilot program at a Northern Panhandle practice for several years, and was recommended by the Joint Committee on Health. The bill allows for rule-making authority by both medical boards, as well as the boards for dentistry, chiropractic medicine and registered nurses.

Meanwhile, a physician assistants' modernization bill gained new life when it was reintroduced during the current special session of the Legislature. Following an advocacy campaign launched

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### **Legislature** (continued from page 15)

by the West Virginia Association of Physician Assistants and supported by key lawmakers, SB 1014 has been signed by Gov. Justice, effective 90 days from passage, or Sept. 7.

The bill changes language in the Physician Assistants Practice Act to grant PAs equal footing with advanced practice registered nurses. The changes reflect a relationship with a "collaborat-ing," rather than "supervising," physician. PAs will be allowed to prescribe a monthly supply of Schedule III drugs under certain circumstances, with specified restrictions. PAs also will be granted global signatory authority in a manner identical to APRNs for death certificates, orders for life-sustaining treatment, orders for scope of treatment and do-not-resuscitate (DNR) orders.

The bill also will add a second PA representative to the WV Board of Medicine.

The bill entitles PAs to 100 percent reimbursement from all public and private insurers, regardless of whether the collaborating physician

## **Board Vacancies** (continued from page 5)

cine holding appointments on the effective date of this section shall continue to serve as members of the Board of Medicine until the expiration of their term unless sooner removed. Each term shall begin on October 1 of the applicable year, and a member may not be appointed to more than two consecutive full terms on the board. A person is not eligible for membership on the board who is a member of any political party executive committee or, with the exception of the state health officer, who holds any public office or public employment under the federal government or under the government of this state or any political subdivision thereof."

If you are interested in and qualify for membership on the Board of Medicine, please submit a letter of interest to the Governor along with your curriculum vitae. Copy the board on your correspondence. is in the room when health services are rendered. In addition, "Constant physical presence of the collaborating physician is not required as long as the collaborating physician and physician assistant are, or can be, easily in contact with one another by telecommunication."

Justice vetoed the original legislation, SB 347, following the regular session out of concern over provisions that allowed that once a PA passes the initial National Commission on Certification of Physician Assistants certification exam, they would no longer need to be recertified in order to maintain licensure by the WV Board of Medicine and/or the WV Board of Osteopathic Medicine.

Incorporated in the new law is a requirement for NCCPA certification for initial licensure only. PAs are no longer required to maintain national certification to be eligible for license renewal.

# **Staff News**

In February, following three years of service, Karen Day-Burr resigned from her position as paralegal for the Board of Medicine to relocate out-of-state. We appreciate Day-Burr's service throughout the years and wish her much success in her future endeavors.



Felicia Bryant assumed the position of paralegal for the board on March 6. We welcome Bryant and look forward to working with her for years to come.

# 2017 Licensure Renewals and Registrations

The renewal period for physicians (whose last names begin with "M" through "Z") and podiatric physicians, as well as registration for drug dispensing for renewing physicians and for Professional Limited Liability Corporations (PLLCs) began May 3.

The Board of Medicine experienced unforeseen technical issues which delayed the implementation of the online renewal application for medical doctors. Regrettably, this year the board was not able to implement an online renewal application for podiatric physicians, drug dispensing registrations or PLLCs. The board regrets any inconvenience caused as a result of this necessary decision. The board extends its gratitude and appreciation for the patience and courtesy demonstrated by renewing licensees as the renewal process has unfolded.

Prior to renewing your license, please review the board's list of Frequently Asked Questions. If you are a medical doctor whose last name begins with the letters M-Z and you have not yet renewed your license to practice medicine and surgery in the state of West Virginia, click here to access the online renewal application with instructions.

If you are a podiatric physician and you have not yet renewed your license to practice podiatry in the state of West Virginia, click here to access a downloadable application with instructions.

If you are a drug dispensing practitioner and have not yet renewed your drug dispensing registration, click here to access a downloadable application with instructions. (see related story on page 4) Please note that the board's legislative rule governing drug dispensing has been amended. As of July 1, all physicians and podiatric physicians who engage in the office-based dispensing and/or administering of controlled substances (including free samples of controlled substances) are required to be registered with the board. Additionally, as of July 1, physicians and

podiatric physicians who only dispense medications which are not controlled substances are no longer required to be registered with the board.

If you are the owner of a PLLC and you have not yet submitted your application for renewal of your certificate of registration to operate as a PLLC in the state of West Virginia, please do so as soon as possible. If you need an additional copy of the application which was previously mailed to you, contact Kimberly Jett, certifications analyst, at (304) 558-2921, ext. 70012.

As a reminder, all renewal applications and fees must be received prior to 4:30 p.m. EST on Friday, June 30, to avoid expiration of your license and/or certification. If your medical or podiatric license expires, please expect an interruption in your practice while your reinstatement application is processed. For supervising physicians, expiration of your license will also terminate any currently authorized practice agreements.

# Comment Period Under Way for Proposed Board of Medicine Rule 11 CSR 6

The WV Board of Medicine is accepting written comments on proposed amendments to 11 CSR 6, Continuing Education for Physicians and Podiatrists. To view the proposed amendments, please click here.

All comments must be received by 4:30 p.m. July 21, and should be submitted to:

Mark A. Spangler, Executive Director West Virginia Board of Medicine 101 Dee Drive, Suite 103 Charleston, West Virginia 25311 Mark.A.Spangler@wv.gov