Board History

Most of the citizens of the Commonwealth may not be aware that some form of medical regulation has existed in Kentucky for over 150 years, as the ground work for the Kentucky Board of Medical Licensure was put in place by the Kentucky General Assembly in 1851 as the Kentucky State Medical Society. Soon after, the Kentucky State Board of Health was formed in 1878 with the goal of protecting the citizens of the Commonwealth from the diseases of the time. This entity was recognized as the legal arm of the state medical association and was a precursor to the current Kentucky Board of Medical Licensure.

In the 1880s, the General Assembly went further and gave the State Board of Health control of the examination and regulation of those practicing the healing arts. Later, in 1882, state, local and city boards of health became government agencies with the authority from the General Assembly to do everything necessary to protect the public health. As a result and over time, this led to the development of licensure examinations and hiring of staff to enforce basic medical practice laws. Finally, the General Assembly created the current Kentucky Board of Medical Licensure in 1972.

Since its inception, the primary mission of the Board has been to protect and promote the public welfare of the citizens of the Commonwealth. It is with this significant duty in mind that Board members are called upon to make crucial decisions as to whether physicians are competent to provide patient care or if they pose a threat to the public. Using this approach, the Board strives to license qualified medical and osteopathic physicians and take appropriate disciplinary actions when violations of the Medical Practice Act occur.
In addition to the licensing and regulation of medical and osteopathic physicians, the General Assembly has given the Board the responsibility of licensing and regulating other health care professions such as physician assistants, athletic trainers, acupuncturists, surgical assistants, and most recently genetic counselors. Each of these groups has its own advisory body, which reviews applications and considers policy matters and, in turn, makes recommendations to the Board for final approval.

Along with its role of licensing and investigating grievances against physicians and allied health professions, the Board is also a strong supporter of the Kentucky Physicians Health Foundation, which was established by the General Assembly. The Board contracts and provides funding to the Foundation in order to facilitate the prevention, identification, intervention and rehabilitation of Kentucky physicians who have, or who are at risk for developing, disorders that are associated with functional impairment or who are suffering from chemical dependency, mental health issues or behavioral problems. This valuable program has saved hundreds of medical careers over the years while ensuring that the public is protected through their monitoring activities.

The Board regulates the practice of medicine and osteopathy and its other professions under the statutory authority of Chapter 311 of the Kentucky Revised Statutes and Title 201 of the Kentucky Administrative Regulations. The Board is an independent licensure agency and is totally self-funded through licensure fees.

**Board Members**

The Board is presently made up of fifteen members, consisting of seven medical physicians who are in private practice, one osteopathic physician in private practice, three consumer-at-large representatives, the Deans of the state’s three medical/osteopathic schools and the Commissioner of Public Health for the Cabinet for Health and Family Services. The composition of the Board is slightly different when
compared to other state medical boards in the fact that the appointment of the Deans of the medical /osteopathic schools and the Commissioner of Public Health provides a unique perspective to matters under review by the Board.

2018 Members and Officers

- Russell L. Travis, M.D., Lexington, President
- C. William Briscoe, M.D., Corbin, Vice President
- Randel C. Gibson, D.O., Mayfield, Secretary
- William Duncan Crosby, III, Esq., Louisville (Consumer Member)
- Michael E. Fletcher, M.D., Crestview Hills
- John J. McConnell, Murray, (Consumer Member)
- Kenneth J. Payne, M.D., Louisville
- Waqar A. Saleem, M.D., Louisville
- Sandra R. Shuffett, M.D., Lexington
- Dale E. Toney, M.D. Lexington
- Richard Whitehouse, Esq., Louisville (Consumer Member)
- Dana C. Shaffer, D.O., Dean, University of Pikeville, College of Osteopathic Medicine*
- Toni M. Ganzel, M.D., Dean, University of Louisville School of Medicine*
- Robert S. DiPaola, M.D., Dean, University of Kentucky College of Medicine*
- Jeffrey D. Howard, M.D., Commissioner, Kentucky Department of Public Health*

*Ex-Officio Members

This year, the Board welcomed four new members to the Board with the appointment of Sandra R. Shuffett, M.D., by Governor Matt Bevin. Dr. Shuffett practices Radiology in Lexington and filled the vacancy left by Heidi M. Koenig, M.D., whose term expired. In addition to her service with the Board, Dr. Koenig also served as the Editor-in-Chief of the Federation of State Medical Board’s Journal of Medical Regulation. The Board also welcomed the appointment of William Duncan Crosby, III, Esq., to the Board in the role as a consumer member. Mr. Crosby practices law in Louisville and filled the vacancy left by Patrick R. Hughes, Esq. whose term also expired. In addition to the
changes of the noted above, the Board welcomed Dana C. Shaffer, D.O., who was recently named Dean of the University of Pikeville - Kentucky College of Osteopathic Medicine. Dr. Shaffer replaced Boyd R. Buser, D.O., who retired after a distinguished career as an educator and osteopathic physician. During his tenure at Pikeville University, Dr. Buser was recognized for his many contributions to osteopathic physicians in Kentucky and throughout his nation as he served as the 120th president of the American Osteopathic Association. Finally, the Board welcomed the addition of Jeffrey D. Howard, M.D. to the Board in his role as the Commissioner of the Kentucky Department of Public Health. He replaced Hiram C. Polk, M.D., who served in that position.

The Board would like to take the opportunity to express its deepest appreciation to Dr. Koenig, Mr. Hughes, Dr. Buser, and Dr. Polk for their service to the citizens of the Commonwealth and for their dedication to the citizens of the Commonwealth and the licensees under the Board’s authority.

**Board Activities**

The full Board met on a quarterly basis and reviewed applications for medical and osteopathic licensure. In total, the Board considered 1,399 applications for various licenses to practice in the state. As a result, 1,103 new medical licenses were granted and 204 osteopathic licenses were issued. The Board also issued 741 temporary permits to practice in the state and issued 293 residency training licenses, 14 institutional training licenses, and 4 faculty licenses. The Board also certified 147 new physician assistants, bringing the total number of physician assistants to 1,383. One Hundred Fifteen new athletic trainers were also certified by the Board, bringing the total number of certified athletic trainers in the state to 618. The Board certified 15 new surgical assistants in the state, for a total of 212. The Board also licensed 5 new acupuncturists in the state, for a total of 90 being licensed in the state. As mentioned previously, this year the Board was given the responsibility to regulate Genetic Counselors, and there were 84 licensed.
Along with the licensing and regulation of medical and osteopathic physicians and other health care providers under its jurisdiction, the Board is responsible for reviewing and investigating all grievances filed against these individuals. The Board reviews all types of grievances against physicians including for professional misconduct, moral turpitude, ethical concerns and practice irregularities. Grievances come to the Board from various sources such as consumers, hospitals, government agencies, law enforcement, physicians and other healthcare professionals. Once a grievance is reviewed and thoroughly investigated by one of the Board’s five investigators, it is presented to one of the Board’s Inquiry/Hearing Panels. It is important to note that each of the Board’s investigators are former detectives with the Kentucky State Police and the Louisville Metro Police Department.

For matters related to investigations and disciplinary action, the Board is split up into two different groups, Inquiry/Hearing Panel A and Inquiry/Hearing Panel B. These Panels meet each alternating month in order to determine whether an investigation revealed a violation of the Medical Practice Act. In the event that a violation is found, it is referred to the Board’s Legal Department to resolve through an informal process or administrative hearing. Once that process is complete, it is presented to the alternate Inquiry/Hearing Panel for final resolution.

This year, the Board’s Inquiry/Hearing Panels met 12 times and reviewed 373 cases, which included 295 investigative reports. The Board currently has 273 physicians’ licenses under some form of Order.

**Continuing Medical Education**

The Board is currently in the first year of the current three-year CME cycle. Continuing medication education is a valuable tool utilized by the Board to demonstrate a physician's personal competency. According to 201 KAR 9:310, all physicians maintaining a current Kentucky medical/osteopathic license are required to complete
sixty (60) hours of CME every three (3) year cycle, with thirty (30) hours being certified in AMA or AOA Category I by an organization accredited by the Accreditation Council on Continuing Medical Education (CME). The current CME cycle ends on December 31, 2020.

The Board, on a regular basis, reminds all licensed physicians to ensure that they obtain the appropriate continuing medical education hours to maintain compliance with this regulation. In order to monitor compliance with the CME requirements, the Board conducts random audits from the previous cycle. It is also important for physicians to remember that the continuing medical education requirements related to HB 1, which went into effect in 2012, remain ongoing. According to the regulation, for each three (3) year continuing education cycle, a licensee who is authorized to prescribe or dispense controlled substances in the Commonwealth at any time during that cycle shall complete at least four and one-half (4.5) hours of approved continuing education hours relating to the use of KASPER, pain management, addiction disorders, or a combination of two (2) or more of those subjects. A licensee may satisfy this requirement by completing a single approved program of 4.5 hours or longer or by completing multiple approved programs for a total of 4.5 hours or longer for that cycle. A summary of the Board’s CME requirements is available on at www.kbml.ky.gov.

Board Issues

As in years past, the reduction of prescription drug abuse continues to be a major focus of the Board. Over the past year, the Board has seen firsthand the efforts made by physicians, hospitals, allied health professionals and state officials to come together and discuss this crisis and make some advances in combating this problem in the Commonwealth. The Board recognizes that physicians are recognizing the dangers of controlled substances such as opioids and are identifying alternative treatments for their patients.
The Board finished 2017 by completing its work on the implementation of 2017’s HB 333, sponsored by Rep. Kim Moser, which required licensure boards to promulgate or amend their regulations limiting prescriptions for Schedule II controlled substances for acute pain to a three-day supply with several exceptions. As a result, the Board amended 201 KAR 9:260 to include this limitation. Physicians are strongly encouraged to review this information and become familiar with the changes in the regulation and the exceptions. The Board issued numerous announcements of this change and included information about the amended language in the regulation with its 2018 renewal announcement, which also included some frequently asked questions and answers to provide guidance to physicians. The changes along with an updated summary of the regulation were made available on the Board’s website, www.kbml.ky.gov.

The Board took steps this year to provide resources and education to address Kentucky’s opioid epidemic by holding its first ever continuing medical education event at Baptist Health Lexington in June. The focus of the education was on the requirements of House Bill 1 and House Bill 333 along with 201 KAR 9:260 and the critical components of opioid management. This in-depth course, which was approved for seven Category I CME hours, also provided critical information on managing patients on opioids, interpreting urine drug screens, weaning opioids and recognizing and dealing with addiction. The course was offered at no cost to the participants and was approved for the HB 1 CME for the Board’s current CME cycle. The response to this training was overwhelmingly positive, and the Board plans to hold further events in Louisville and Northern Kentucky in October of 2018. The Board would like to acknowledge the efforts of Dr. Russell Travis on this project and thank him for spearheading the efforts in this area.

While still on the topic of prescribing controlled substances, the Board wants to remind physicians that one of the best ways to help protect your practice is to review your personal KASPER Prescriber Report Card on a regular basis. The Kentucky Health & Family Services Cabinet recently updated this resource and expanded the information that is available to help physicians monitor their controlled substances
prescribing and actually compare your prescribing practices with physicians in the same specialty throughout the Commonwealth. KASPER Prescriber Report Cards are available on a quarterly basis and annual (calendar year) basis. The Board strongly encourages all physicians who are authorized to prescribe controlled substances to take advantage of these useful tools.

Like many state agencies throughout the Commonwealth, the Board is continually looking to streamline its services and alleviate any undue burden in order to obtain or maintain a medical/osteopathic license. This year, the Board took steps to cut some red tape by removing items on the application for initial licensure that were deemed to be redundant or not relevant to a physician’s qualifications for licensure. The response to this action was almost immediate, as our staff noted that physicians have been able to obtain their initial license faster than ever before. Another area where the Board focused its streamlining efforts was on the pilot project with the FSMB, which began last year, in an effort to streamline a physician applicant’s ability to query and obtain a required report from the National Practitioner Data Bank as part of the FSMB’s core verification services. Again, the results of this project have been very successful, as we have been able to seamlessly incorporate this report and make it even easier for a physician to apply for a license. In addition, the Board, during the deliberations of its June meeting, voted to support the adoption of joining the Interstate Medical Licensure Compact, which will most likely be presented to the Kentucky General Assembly in 2019. The Compact was developed by a collective group headed by the Federation of State Medical Boards (FSMB) to develop an expedited licensure procedure to assist in cutting through the administrative burden of medical licensure and make it much simpler for physicians to obtain medical licenses in multiple states.

Finally, the Board also began addressing the serious and complex issue of physician wellness and burnout that is being discussed by the physician community throughout the nation. One of the major groups addressing this issue is the Federation of State Medical Boards who developed a Workgroup on Physician Wellness and Burnout that was charged with identifying resources and strategies to address burnout in physicians. The finished result of this workgroup was the presentation and adoption
of a report and list of recommendations by the FSMB during its 2018 Annual Meeting. One of the recommendations focused on the concerns by many that questions posed by licensure boards on their respective applications were not compliant with the American with Disabilities Act (ADA) and potentially posed an obstacle for physicians to obtain appropriate medical care. The Board considered this matter during its June meeting and voted to amend questions on its applications involving a physician’s health conditions to the one recommended by the FSMB and is committed to collaborating with partners within the Commonwealth on how it can continue with a dialogue on this issue.

**Outreach Efforts**

Over the past few years, the Board has been committed to increase the level of communication between the agency and its licensees. A perfect example of this commitment was the previously mentioned opioid CME event offered this year, which was the first ever sort of offering by the Board. While the Board does still utilize formal ways of communicating with physicians such as hard copy mailings, it also focuses much of its communication efforts through electronic means. The primary medium the Board utilizes for communication continues to be its quarterly newsletter, which is available on the Board’s website and emailed to each of the Board’s licensees. This year, the Board’s newsletter contained numerous articles about prescribing controlled substances, KASPER updates, and timely notices about CME and issues relating to various standards of care. Along with our newsletter, the Board continues to utilize email blasts to share important updates on regulatory changes and on issues deemed to be time sensitive. It is not uncommon for another state agency such as the Department of Public Health to contact the Board in order to share a specific message with the physician community.

The Board’s website, [www.kbml.ky.gov](http://www.kbml.ky.gov), continues to provide valuable information about the Board, policy statements, Board Opinions, and a direct link to the Medical Practice Act and administrative regulations. The website is updated on a daily basis with a focus on alerts, which appear directly on the home page with important
updates. In addition to physicians and healthcare providers, consumers often utilize the website to verify licensure information on a specific physician or inquire about disciplinary action.

Along with the Board’s traditional mode of communication, Board staff regularly accepts speaking engagements throughout the Commonwealth to speak on subjects ranging from prescribing controlled substances to ways to avoid coming before the Board for a disciplinary matter. Whether the event is an association meeting, hospital grand rounds, or appearing before medical/osteopathic students, the Board recognizes the importance of its outreach efforts and attempts to honor all requests for speaking engagements.

Final Summary

This is a brief summary of some of the many activities this Board has been involved with this past year. The Board continues to be active in carrying out its statutory responsibilities, and we have attached an administrative report reflecting the number of meetings held by the Board and its various Committees, the number of licenses issued and renewed and a summary of disciplinary action taken for the year. We have also included statistical data on physicians with active Kentucky medical and osteopathic licenses noting their medical status, the number of physicians practicing in each county, the various specialties practiced in the state and the types and sources of grievances filed against physicians licensed by the Board.

In conclusion, I would like to thank the members of the Board and its staff for their dedication and hard work throughout the year. I cannot overstate what an honor it has been to serve on the Board, and I know each member of the Board shares the same opinion of their service. We take great pride in the Board’s ability to serve the citizens of the Commonwealth and will continue to work to protect the public and improve the quality of health care in Kentucky.
## Meetings Held:

<table>
<thead>
<tr>
<th>Committee</th>
<th>FY2018</th>
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</thead>
<tbody>
<tr>
<td>Board of Medical Licensure</td>
<td>4</td>
</tr>
<tr>
<td>Inquiry/Hearing Panels</td>
<td>12</td>
</tr>
<tr>
<td>Physician Assistant Advisory Committee</td>
<td>4</td>
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<tr>
<td>State Council on Athletic Trainers</td>
<td>4</td>
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<tr>
<td>Surgical Assistant Advisory Committee</td>
<td>3</td>
</tr>
<tr>
<td>Acupuncture Advisory Committee</td>
<td>3</td>
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<tr>
<td>Genetic Counselor Advisory Committee</td>
<td>3</td>
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</tbody>
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## Licensure Activity for M.D.'s and D.O.'s

### Renewals and Applications:

- Registered In State: 11,681
- Registered Out of State: 6,270
- Applications Provided For Initial Licensure: 1,399

### New Licenses Issued:

- Medical Licenses: 1,103
- Osteopathic Licenses: 204
- Temporary Permits: 741
- Residency Training Licenses: 293
- Institutional Practice Limited Licenses: 14
- Fellowship Training Limited Licenses: 15
- Faculty Licenses: 4

## Licensure/Certification Activities for Allied Health Professionals

### Physician Assistants

- Active: 1,383
- New: 147

### Athletic Trainers

- Active: 618
- New: 115

### Surgical Assistants

- Active: 212
- New: 15

### Acupuncturists

- Active: 90
- New: 5

### Genetic Counselors

- Active: 84
- New: 84

*Includes 638 retired physicians for FY2018.*
Disposition of Grievances and Disciplinary Actions Taken:
Grievances Opened 213
Total Cases to Panel 373
Cases Investigated to Panel 152
Investigations Pending 51
Malpractice Cases Reviewed 106
Disciplinary Proceedings Authorized 93

Disciplinary Action Taken
Complaints Issued 14
Emergency Orders of Suspension 8
Emergency Orders of Restriction 3
Orders Denying License 0
Final Orders 1
Orders of Probation 1
Orders of Reprimand 1
Orders of Restriction 2
Orders of Revocation 0
Orders of Suspension 0
Agreed Orders 49
Agreed Orders of Indefinite Restriction 0
Agreed Orders of Surrender 6
Agreed Orders of Probation 0
Agreed Orders of Revocation 0
Agreed Orders of Suspension 0
Agreed Orders of Fine 7
Agreed Orders of Retirement 0
Interim Agreed Orders 10
Orders Amended 27
Letters of Agreement 14
Letters of Admonishment 20
Letters of Concern 19
Type of Grievance
July 1, 2017 - June 30, 2018
213 Grievances

- Court/Legal Action: 7%
- Standard of Care: 40%
- Hospital Action: 3%
- Action In Another State: 0%
- Practicing Without A License: 1%
- Substance Abuse: 5%
- Sexual Misconduct:...
- Mental Impairment: 1%
- Other: 1%
- Unprofessional Conduct: 23%
- Prescribing: 17%
Source of Grievance
July 1, 2017 - June 30, 2018
213 Grievances

- Public: 59%
- State/Federal Agencies: 12%
- KBML Board/Panel: 3%
- Self Reported: 3%
- KPHF: 2%
- Law Enforcement: 0%
- License Renewal: 4%
- Other Licensing Boards: 0%
- Hospitals: 4%
- Inmates: 3%
- Other: 3%
- Physicians: 6%
- Other Licensing Boards: 0%