

# Kentucky Board of Medical Licensure Newsletter

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Spring 2020

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### **Reopening Healthcare Services**

The Board would like to share the Beshear Administration's guidelines, for reopening certain medical services and healthcare facilities in Kentucky. The first phase of reopening, which began on Monday, April 27, includes non-urgent/emergent healthcare services, diagnostic, radiology and lab services in outpatient, hospital settings, healthcare clinics and medical offices, physical therapy settings and chiropractic offices, optometrists and dental offices. The guideline, which outlines 4 phases can be found at https://chfs.ky.gov/agencies/dph/covid19/healthcareservicereopening.pdf

According to the guidance, the following criteria should be included in all phases of Kentucky's reopening of healthcare services:

- Use of telemedicine/telework instead of in-person whenever possible
- Fever and COVID-19 screening prior to entry into healthcare facility
- Discontinue use of traditional waiting rooms/common areas:
  - o Use non-traditional options, e.g., wait in car, call ahead registration, etc.
  - Use modifications to ensure social distancing >6 feet and/or physical barriers
- Universal masking for all persons for all direct person-person contact
- Enhanced sanitizing and disinfecting; hand sanitizer stations available
- · Providers must procure required PPE through commercial routes
- · No visitors except end-of-life and assisting vulnerable populations
- · ALL phases subject to delay or roll-back if COVID-19 surge occurs

Physicians are strongly encouraged to follow the guidelines and monitor the state's website, <a href="www.kycovid19.ky.gov">www.kycovid19.ky.gov</a> for future updates on the various phases of the reopening of medical practices.

## Physician Assistants Obtain Ability to Prescribe Controlled Substances

On March 27, 2020, Governor Beshear signed HB 135, sponsored by Rep. Steve Sheldon, which amends KRS 311.842 to require the Board to promulgate administrative regulations relating to the prescribing of controlled substances by physician assistants. HB 135 gives physicians assistants the ability to prescribe controlled substances, but it is limited to Schedules III, IV and V after the physician assistant has been licensed and has practiced for one year and been approved by the Board. In addition, physician assistants must obtain a DEA certificate and register for a KASPER account. HB 135 limits Schedule III prescriptions from physician assistants to a 30-day supply without a refill and Schedule IV and Schedule V to a six-month supply.

The law takes effect on July 14, 2020. During the interim, the Board will be working on promulgating the appropriate administrative regulations setting out the professional standards for prescribing and administering controlled substances and the professional standards for prescribing or administering Buprenorphine-Mono-Product or Buprenorphine-combined with-Naloxone. We anticipate an application will be made available for physician assistants by July 1, 2020.

Board Orders can be viewed under the Physician Profile/ Verification of License link on the Board's website: www.kbml.ky.gov

Board Action Report (actions taken since 01/01/20)

Briana L. Boyd, M.D., Betsy Lane, KY License # 40671

Second Amended Agreed Order entered into 03/26/2020

Jason H. Campbell, M.D., Glascow, KY, License # 33935

Amended Agreed Order, entered into 01/31/2020

Mary R. Clifton, M.D., Plantation, FL, License # 51817

Order Terminating Agreed Order, issued 01/02/2020

Brandon Nelson Conrad, M.D., Lexington, KY, License # 47034

Amended Agreed Order, entered into 01/30/2020

Steven Conrotto, M.D., West Liberty, KY, #28990 Agreed Order, entered into 02/14/2020

Sean Russell Dillon, M.D., Carthage, IN, #47180 Order Terminating Second Amended Agreed Order, Issued 02/27/2020

Vinson M. DiSanto, D.O., McKinney, TX, License # 03250

Agreed Order entered into 03/19/2020

Curtis S. Gale-Dyer, D.O., Lexington, KY License # 03368

Third Amended Agreed Order entered into 03/05/2020

Shawn Gorden, M.D., Pampa, TX, #39057 Third Amended Agreed Order, entered into 02/27/2020

James E. Goris, M.D., Evansville, IN, License # 32461

Order Terminating Agreed Order, issued 01/23/2020

Amir Kaldas, M.D., Davidson, North Carolina License # 47846

Order Terminating Agreed Order issued 3/20/2020

A Barry Klein, M.D., Louisville, KY License # 24316 Fourth Amended Agreed Order entered into 03/06/2020

Mohammed A.H. Mazumder, M.D., Prestonburg, KY #43704

Agreed Order, entered into 02/20/2020

Charles R. Noplis, M.D., Louisville, KY, #44044
Amended Agreed Order, entered into 02/17/2020

Ronnie C. Parker, D.O., Pikeville, KY License # 02815

Order of Probation issued 03/24/2020, effective 04/24/2020

Matthew S. Schoen, M.D., Carrollton, TX, License # 51233

Fourth Amended Agreed Order, entered into 01/28/2020

Thomas E. Sonne, M.D., Floyds Knobs, IN, #43861 Agreed Order, entered into 02/07/2020

Thomas E. Sonne, M.D., Floyds Knobs, IN, #43861
Amended Agreed Order, entered into 02/10/2020

David A. Thomas, M.D., Louisville, KY, License # 27346

Amended Agreed Order, entered into 01/27/2020

Heloise D. Westbrook, M.D., Greenville, KY, #47657 Agreed Order, entered into 02/06/2020

Denis A. Yalkult, M.D., Richmond, KY License # 37296

Final Order issued 03/24/2020, effective 04/25/2020

#### Advisory on Prescribing During Declaration of Emergency

In response to the recent novel coronavirus (COVID-19) pandemic and subsequent declaration of State of Emergency by Governor Andy Beshear, the Board has received inquiries from licensees about prescribing controlled substances during this period. The Board would like to remind all of its licensees who are prescribing controlled medications (whether Schedule IIs, IIIs, IVs or Vs) of KRS 311.597(4) which calls upon licensees to conform with acceptable and prevailing medical practices and the provisions of 201 KAR 9:260 Section 2(2), which states:

If a physician is unable to conform to professional standards for prescribing or dispensing controlled substances due to circumstances beyond the physician's control, or the physician makes a professional determination that it is not appropriate to comply with a specific standard, based upon the individual facts applicable to a specific patient's diagnosis and treatment, the physician shall document those circumstances in the patient's record and only prescribe or dispense a controlled substance to the patient if the patient record appropriately justifies the prescribing or dispensing of a controlled substance under the circumstances.

The standards of acceptable and prevailing medical practices that apply under normal circumstances may not apply in a state of emergency. During this time it is particularly important that licensees responsibly exercise their best clinical judgment on a case-by-case and patient-by-patient basis, balancing a variety of factors (including being mindful not to contribute to the ongoing opioid epidemic). When considering whether to have an in-person patient visit, licensees should ask themselves whether the service provided would be retrospectively deemed necessary if the patient were to become infected by COVID-19 as a result of the visit. Where possible, use of telehealth technologies should be considered in an effort to limit and contain the spread of COVID-19. For instance. the current but temporary state of emergency may be a circumstance in which it would not be appropriate to require a patient to come in prior to refilling a prescription. The physician should consider whether the patient has a history of compliance with treatment directives; whether the patient is established and stable on the dose of medication. If it is a matter of refilling the same medication at the same dosage for an established patient, in order to avoid exposing the patient or others to the current environment, it may be appropriate to authorize a refill without an in-person visit. For patients beginning treatment of opioid use disorder with buprenorphine, in order to avoid exposing the patient or others to the current environment, it may be appropriate to screen the patient using telehealth technologies in order to determine whether an in-person examination is warranted. In this state of emergency, telehealth may be a clinically sound approach for some patients and some conditions, but for others it may not. It is appropriate to use telehealth resources to help make such a determination on patient-by-patient basis. The Board recognizes that the current state of emergency is a fluid environment requiring extraordinary effort, physical and mental, from many of its licensees. The Board understands the fine line of balancing treatment of individual patients with the protection of others and are grateful for its licensees' efforts to exercise sound judgment in unsound circumstances.

### **Board Holds Special Meeting on COVID-19**

On Friday, April 10, 2020, the Kentucky Board of Medical Licensure convened for a Special Meeting to consider the provisions of SB 150 Section 1(13) along with Governor Andy Beshear's Executive Order 2020-215, which allows the Board to waive or modify any statutes or administrative regulations relating to licensees under the Board's jurisdiction.

After review and consideration, it was the consensus of the Board to not extend any additional waivers or modifications to any of the Board's statutes or administrative regulations at this time. The Board noted that on March 17, 2020, the Secretary for the Health and Family Services activated its operation of the emergency system for advanced registration for volunteer health practitioners, pursuant to KRS 39A.356 and directed the Board to accept and review licenses for volunteer health practitioners and confirm that they have an active license in good standing to perform health services in another state during the current state of emergency. In response to this directive, the Board immediately implemented the registration process and made it available on its website.

During the deliberation of the meeting, the Board focused specific attention to the statutes and regulations on the supervision and scope of practice of physician assistants. The Board acknowledged the current provisions of the physician assistant statutes and administrative regulations does allow for some flexibility in the supervision of physician assistants especially in a healthcare system and decided to not waive any of the requirements set by law. While the Board voted to not extend any additional waivers or modifications to the Board's statutes and regulations, it was the Board's consensus to continue to monitor the issues related to COVID-19, especially as it relates to manpower, and would revisit the issue if changes in the current conditions change.

# Reminder on Mandatory KASPER Account Registration and Transition to Kentucky Online Gateway

Again, the Board would like to remind all licensed physicians of the mandatory KASPER account registration for any physician who is authorized to prescribe controlled substances in Kentucky. Prior to procuring, dispensing or prescribing controlled substances to patients in Kentucky, a physician must have the following:

- 1. An active Kentucky Medical License
- 2. A DEA registration number specific for Kentucky. If you practice in more than one state or store controlled substances in multiple location within Kentucky, you may be required to register for additional DEA numbers.
- 3. An active KASPER account

Information on how to obtain a KASPER account for new users is available at the Cabinet for Health and Family Services' Office of Inspector General website at: <a href="https://chfs.ky.gov/agencies/os/oig/dai/deppb/Pages/kasper.aspx">https://chfs.ky.gov/agencies/os/oig/dai/deppb/Pages/kasper.aspx</a>
Here is an additional link with detailed instructions on obtaining a new user account: <a href="https://ekasper.chfs.ky.gov/Help/NewAccountRequest.htm">https://ekasper.chfs.ky.gov/Help/NewAccountRequest.htm</a>

In addition, it is our understanding there are a number of physicians who initially signed up for a KASPER account years ago, but are not able to access the system because they have not taken steps to transition their old account to the Kentucky Online Gateway (KOG). As a reminder, KRS 218A.202 requires that ANY person authorized to prescribe or dispense controlled substances must be registered and MAINTAIN use of the KASPER system. In order to MAINTAIN use of the KASPER system, you must transition your old KASPER account to KOG. If you have not transitioned your old account to KOG, you currently do not have access to KASPER. All licensed physicians practicing in Kentucky and are authorized to prescribe and dispense controlled substances are required to ensure they have access to KASPER. Instructions on how to transition your old KASPER account to KOG is available at the following link: <a href="https://chfs.ky.gov/agencies/os/oig/dai/deppb/Documents/">https://chfs.ky.gov/agencies/os/oig/dai/deppb/Documents/</a>

#### MandatoryKASPERKOGAccountInstructions.pdf

For questions regarding your KASPER account, please contact the KASPER Help Desk at (502) 564-2703. If you have questions about KOG, please contact (502) 564-0104, option 2.

# KASPER Report Cards Are Now Available

KASPER Prescriber Report Cards have returned! It is easier than ever to read, identify high-risk patients and view prescribing comparisons within your specialty. To view annual or quarterly report cards, log into your KASPER account through the Cabinet for Health and Family Services' secure Kentucky Online Gateway (KOG) portal, click on the account maintenance screen and scroll down to the prescriber report card section. To migrate your KASPER account to KOG, follow the onboarding instructions in the KASPER-KOG User Guide. For information about report card calculations and prescriber comparisons, please review the KASPER Prescriber Report Card User Guide.

#### Important CME Reminder – Final Year of 3 Year Cycle

The Board would like to remind all of its licensees that we are in the third year of the Board's 3 year CME Cycle. Board Regulation 201 KAR 9:310 requires all physicians maintaining a current Kentucky medical license 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). Again, please note that the current CME cycle ends on December 31, 2020.

The Board would like to remind all licensed physicians to ensure that they obtain the appropriate continuing medical education hours to maintain compliance with this regulation. It is important to note the continuing medical education requirements related to 2012's HB 1, which went into effect in 2012, remain in effect. According to the regulation for each three (3) year continuing education cycle beginning on January 1, 2015, 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 our website, www.kbml.ky.gov.

# Kentucky Board of Medical Licensure 310 Whittington Parkway, Suite 1B Louisville, KY 40222

#### **Change of Address Notice**

All information provided below is used to update the licensee's profile on the Board's website www.kbml.ky.gov. You may also change your address online by clicking here, Date: \_\_\_\_\_ License Number: \_\_\_\_\_ Name: \_\_\_\_\_\_ Mailing Address: \_\_\_\_\_ Practice Address: Practice County: \_\_\_\_\_ Office Phone Number:

Email Address:

<sup>\*</sup>The Board does not publish your email address.