

Kentucky Board of Medical Licensure

Newsletter

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Summer 2020

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Free Board Sponsored Virtual CME Event

The Kentucky Board of Medical Licensure (KBML) is pleased to announce that it is collaborating with the Kentucky Medical Association (KMA) to offer virtual Continuing Medical Education (CME) as part of the KMA's **Meet the Mandates** event in conjunction with their annual meeting. This CME is sponsored by the KBML, thanks to a grant from the Federation of State Medical Boards Foundation. This CME is especially timely given that the COVID-19 pandemic has forced many to forgo scheduled CME activities.

Meet the Mandates will occur Friday, Aug. 28 through Sunday, Aug. 30 via KMA's Annual Meeting/Meet the Mandates Virtual Event Platform. The CME is free and open to all physicians, but registration is required and can be found at www.kyma.org/2020-kma-annual-meeting. Physicians will be able to log in and participate directly through the event platform utilizing Zoom Webinar integration. For those that are unable to attend on the scheduled date, links to recorded sessions will be available through the end of the year. Information on mandated CME requirements can be found at www.kyma.org/2020-kma-annual-meeting or www.kbml.ky.gov/cme/Pages/default.aspx.

Pediatric Abusive Head Trauma: Friday, Aug. 28 at 8:00 a.m. ET.

Domestic Violence: Friday, Aug. 28 at 9:00 a.m. ET.

House Bill 1 (HB1): Saturday, Aug. 29 10:00 a.m.-12:30 p.m. ET and Sunday, Aug. 30 10:00 a.m.-12:00 p.m. ET.

The Board is extremely excited about this opportunity for physicians to receive mandated training and looks forward to this collaboration with the KMA. The Board would also like to offer its deep appreciation to the Federation of State Medical Board Foundation for their support of this endeavor.

Workers' Compensation Medical Treatment Guidelines Update

The Commissioner of the Kentucky Department of Workers¹ Claims (DWC) has promulgated an administrative regulation (803 KAR 25:260) adopting the ODG by MCG Health medical treatment guidelines for use in the treatment of work-related injuries and occupational diseases. Implementation of treatment guidelines was mandated by House Bill 2 (2018). Treatment options in the guidelines are generally designated as either "Recommended," "Not Recommended," or "Conditionally Recommended." Treatment designated as "Recommended" does not require preauthorization and is presumed reasonable and necessary. When a medical provider seeks preauthorization for treatment designated as "Conditionally Recommended" or "Not Recommended," the medical payment obligor must consider any sound medical reasoning submitted by the provider in support of that treatment.

The treatment guidelines are available by subscription at <u>www.odgbymcg.com</u>. The treatment guideline regulation may be accessed online at <u>https://</u> <u>apps.legislature.ky.gov/law/kar/803/025/260.pdf</u>.

Board Orders can be viewed under the Physician Profile/ Verification of License link on the Board's website:		
www.kbml.ky.gov	Gregory T. Koo, M.D., Dry Ridge, KY License # 33614	
Board Action Report (actions taken since 04/01/20)	Order Terminating Agreed Order, issued	
Melecio G. Abordo, M.D., Jackson, KY License # 34645	4/20/2020	
Order Terminating Agreed Order, issued 4/20/2020	Eric Lapp Lo, M.D., Edgewater, FL License # 21989 Order Terminating Agreed Order issued 05/29/2020	
Richard L. Bennett, M.D., Lexington, KY License # 20182	John A. McCleerey, M.D., Elizabethtown, KY License #41138	
Agreed Order entered into 4/7/2020	Agreed Order entered into 06/15/2020	
James B. Brien III, M.D., Paducah, KY License # 38115	Travis Howard Montgomery, PA-C, Morehead, KY License # PA1714	
Agreed Order entered into 06/19/2020	Agreed Order entered into 06/19/2020	
George E. Burnette, M.D., Jackson, KY License #20414	Jerry W. Nein, M.D., Nashville, TN License # 26925 Agreed Order entered into 4/7/2020	
Agreed Order entered into 06/08/2020	Matthew S. Schoen, M.D., Carrollton, TX License #	
Sanjay Chavda, M.D., Hopkinsville, KY License # 33784	51233	
Order Terminating Agreed Order, issued 4/20/2020	Fifth Amended Agreed Order entered into 04/28/2020	
Brandon Nelson Conrad, M.D., Lexington KY Li- cense # 47034	Lawrence A. Shirley, M.D., Lexington, KY License # 53721	
Second Amended Agreed Order entered into	Agreed Order entered into 4/1/2020	
04/23/2020	Lawrence A. Shirley, M.D., Lexington, KY License # 53721	
Vinson M. DiSanto, D.O., McKinney, TX License # 03250	Order Terminating Agreed Order issued 05/22/2020	
Amended Agreed Order entered into 04/29/2020	Gregory Lee Spears, M.D., Catlettsburg, KY License	
Wayne R. Edwards, M.D., Pikeville, KY License #34226	# 34565 Agreed Order entered into 05/21/2020	
Order Terminating Seventh Amended Agreed Order issued 06/01/2020	Jason N. Stamper, D.O., Pikeville, KY License #	
Ali Farooqui, M.D., Louisville, KY License #51657 Amended Agreed Order entered into 06/15/2020	02798 Order Terminating Agreed Order issued 05/29/2020	
Aaron M. Ferda, M.D., Lexington, KY License #	Zia Ullah Virk, M.D., Pikeville, KY License # 48955	
48494 Amended Agreed Order entered into 4/20/2020	Agreed Order entered into 05/14/2020	
Ralph T. Fossett, M.D., Morehead, KY License #	Michael A. Weicker, M.D., Huntington, West Virginia	
14451	License #49822 Agreed Order entered into 06/03/2020	
Amended Agreed Order entered into 04/23/2020	5	
Naren James, M.D., Stanford, KY License # 30199 Order of Indefinite Restriction issued 06/22/202 (effective on 7/22/2020)		
Joshua Kadetz, M.D., Barbourville, KY License # 42223		
Fifth Amended Agreed Order entered into 05/05/2020		

Kentucky EPCS Mandate

Mandatory Electronic Prescribing of Controlled Substances is Coming

Are You Ready?

Kentucky Revised Statute 218A.182 mandates the electronic prescribing of controlled substances (EPCS) in Kentucky effective January 1, 2021. The Kentucky mandate is similar to the federal Medicare Part D EPCS mandate effective January 1, 2021, but applies to all controlled substances prescribed in Kentucky - regardless of payer.

Some controlled substance prescriptions will be exempt from the Kentucky EPCS mandate. The complete list of exceptions is found in KRS 218A.182. Examples include:

Prescriptions issued by veterinarians

Prescriptions issued for hospice patients or residents of a nursing facility

Prescriptions issued during a temporary technological or electrical failure

Prescriptions issued for extemporaneous compounding

Prescriptions issued by practitioners who have received a temporary EPCS waiver from the Cabinet for Health and Family Services (CHFS)

A practitioner who is unable to comply with the EPCS mandate may petition the cabinet for a temporary waiver based on:

Economic hardship

Technological limitations outside the practitioner's control

Other exceptional circumstances

Practitioners who wish to seek an initial temporary waiver must submit a completed Temporary Exemption Form (see link below) to the cabinet no later than **November 1, 2020**. Additional information regarding EPCS prescription requirements and temporary waivers are available in Kentucky Administrative Regulation 902 KAR 55:130 and on the CHFS-OIG Drug Enforcement website.

If you have an Electronic Health Record (EHR) system that is not currently EPCS certified, you should contact your EHR vendor as soon as possible to determine how to implement EPCS. If you prescribe controlled substances in Kentucky, please take the appropriate steps now to ensure compliance with the Kentucky EPCS mandate. Failure to do so may result in penalties, including licensure board referral and fines.

Helpful Links:

EPCS Temporary Exemption Request Form: <u>https://chfs.ky.gov/agencies/os/oig/dai/deppb/Documents/</u> EPCSTemporaryExemptionForm.pdf.

KRS 218A.281: https://apps.legislature.ky.gov/law/statutes/statute.aspx?id=49590.

KAR 902 55:130: https://apps.legislature.ky.gov/law/kar/902/055/130.pdf.

CHFS-OIG Drug Enforcement: https://chfs.ky.gov/agencies/os/oig/dai/deppb/Pages/default.aspx.

DEA EPCS Website: https://www.deadiversion.usdoj.gov/ecomm/e_rx/.

Physician Assistants May Now Obtain Prescribing Authority

As previously reported, Governor Beshear signed HB 135, sponsored by Rep. Steve Sheldon on March 27, 2020. This legislation amended KRS 311.842 to require the Board to promulgate administrative regulations relating 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. Prescriptions issued by the physician assistant for benzodiazepines or Carisprodol are limited to 30-day supply without any refill.

The law is now in effect and physician assistants may now submit an application to the Board to be approved to prescribe controlled substances. The appropriate form and directions are available on the Boards website. The Board has also taken steps to promulgate the appropriate regulations setting out the out the professional standards for physician assistants prescribing and administering controlled substances and the professional standards for prescribing or administering Buprenorphine-Mono-Product or Buprenorphine-combined with-Naloxone. During the interim, physician assistants are advised to follow standards described in proposed regulations, which are to be considered the acceptable and prevailing practices for physician assistants, unless otherwise contradicted by law, until the final changes are effective.

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. Just click on the link for continuing medical education. You can also find information about approved courses that are available online.

Reminder of Board Advisory on Prescribing During Declaration of Emergency

In response to the novel coronavirus (COVID-19) pandemic and subsequent declaration of State of Emergency by Governor Andy Beshear, 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.

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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 <u>here,</u>		
Date:	License Number:	
Name:		
Mailing Address	X	-
Practice Address	s:	
Practice County	:	
Office Phone Nu	umber:	
	*The Board does not publish your email address.	