

MISSISSIPPI STATE BOARD
OF
MEDICAL LICENSURE



ANNUAL REPORT

JUNE 30, 2013

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JULY 1, 2012 THROUGH JUNE 30, 2013

The Mississippi State Board of Medical Licensure is the state's legally constituted licensure board for allopathic physicians (M.D.s), osteopathic physicians (D.O.s), podiatrists (D.P.M.s), physician assistants (P.A.s), radiologist assistants (R.A.s), and acupuncturists (L.Ac.s). The Board is responsible for setting and enforcing policies and professional standards regarding the practice of medicine, podiatric medicine and acupuncture; considering applications for licensure; conducting licensure interviews; investigating legitimate drug traffic among medical practitioners under the state's Uniform Controlled Substances Act; conducting hearings on disciplinary matters involving violations of the state's Medical Practice Act; and keeping up-to-date records on all licensed physicians, podiatrists, physician assistants, radiologist assistants, and acupuncturists in the state. The Board is also charged with the duty of permitting those individuals who apply ionizing radiation in a physician's office, radiology clinic or a licensed hospital in Mississippi who are under the specific direction of a licensed practitioner.

The Board is composed of nine physicians (M.D.s and D.O.s) appointed by the Governor. Three physicians are nominated to the Governor by the Mississippi State Medical Association for each appointive position of the State Board of Medical Licensure. Currently, the Board has bi-monthly meetings in the Medical Board conference room located at 1867 Crane Ridge Drive, Suite 200-B, Jackson, Mississippi 39216. Specific meeting dates and times are located on the Board's website at www.msbml.ms.gov.

The administrative functions of the Board are performed under the direction of Executive Director, H. Vann Craig, M.D. The Board has two divisions, Licensure and Investigative. The Licensure Division consists of four employees overseen by a Bureau Director who is also responsible for the accounting, personnel and information technology (IT) departments, which have a total of seven employees. The Licensure Division is responsible for credentialing and maintaining all licenses of physicians, physician assistants, radiology assistants, acupuncturists and limited x-ray machine operators in the state.

The Investigative Division consists of ten employees plus a Bureau Director. The division is comprised of eight investigators, four of which work in decentralized offices. The Investigative division is responsible for ensuring a licensee is accountable for their actions.

LICENSURE DIVISION

Any physician, podiatrist, physician assistant, radiologist assistant, or acupuncturist desiring to practice in Mississippi must first obtain a license to do so by completing an application for licensure. An allopathic physician, osteopathic physician, podiatrist or physician assistant may apply for license by utilizing the Board's online application system. All of the physician's or physician assistant's application information can be entered online and submitted to the Board with their electronic payment. Currently, radiologist assistants and acupuncturists must download a manual application from the Board's website and submit it along with a check or money order. Board staff begins processing the application immediately upon receipt. Based upon the information given by the practitioner, a determination is made as to their eligibility for licensure.

Queries for practitioner applications are made to the American Medical, Osteopathic, or Podiatric Medical Associations; other states in which the practitioner is or has been licensed; National Practitioners Data Bank; Federation of State Medical Boards; and hospitals where the practitioner holds or has held staff privileges. This process takes from four to six weeks depending upon the amount of information to be submitted regarding the applicant. The majority of the information required for processing an application is being submitted via the Internet or by other electronic means. The Board has implemented an imaging system which allows the staff to scan in physician information instead of manually filling in a paper licensure file. The electronic information is more easily accessible by others in the office and documents are less likely to be lost and/or misplaced once they are stored in the system. Upon documentation of required information and approval, the applicant is notified to schedule their personal appearance, background check and jurisprudence examination.

The Board performs background checks on all new licensees, with the exception of radiologist assistants. The background check begins when the applicant appears for their personal appearance and jurisprudence examination. The applicant's fingerprints are scanned into a database and submitted to the Mississippi Criminal Investigatory Center (CIC) who then forwards the fingerprints to the Federal Bureau of Investigation (FBI). A report is then returned to the Board, usually within 48 hours. If the report is returned with no record of action, the applicant is issued their Mississippi license number. However, if the report reveals an arrest history, additional information is requested and the issuance of the license is delayed.

During the year ending June 30, 2013, 889 new licenses and permits were issued in Mississippi. This is approximately 50 more new licenses issued than the year 2012. As shown in Figure 1, it appears that the number of licenses issued is increasing. Figure 2 also shows an increase of approximately 100 applications received in 2013. It appears by looking at Figure 1 and Figure 2 that the rise in the number of licenses issued is comparable with the rise in the number of applications received. The Board is anticipating that this trend will continue as students graduate from William Carey Osteopathic School and Mississippi College Physician Assistant Program.

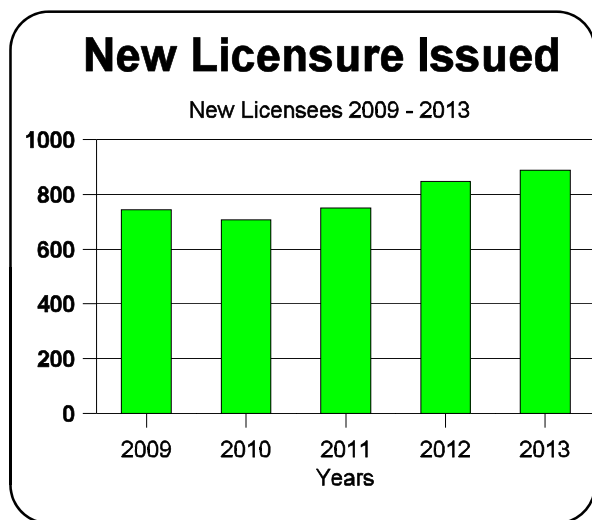


Figure 1.

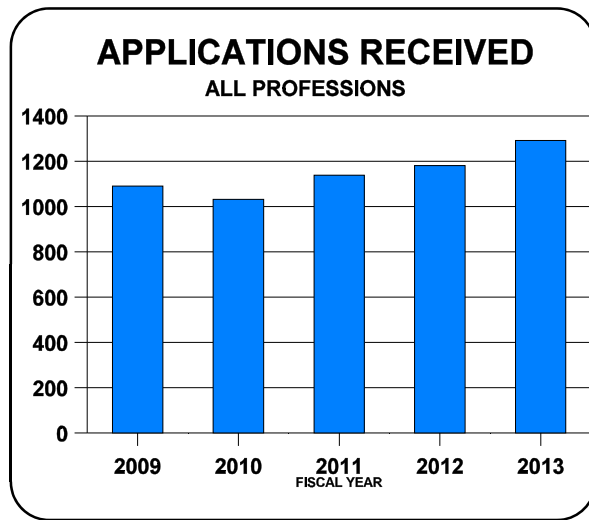


Figure 2.

Licensees applying for hospital staff memberships or licensure in another state or jurisdiction request certifications/verifications to be sent to the designated entity. During the year ending June 30, 2013, 4,485 verifications were submitted to hospitals for credentialing purposes (Figure 3.) The Board allows entities or individuals desiring a verification of a physician’s or physician assistant’s medical license to request it

electronically and instantly from the Board’s website. Individuals may search for the licensee they would like to verify. Once they verify the correct individual and select a payment option for the \$25 verification fee plus convenience fee charged by the credit card company, the requester will receive an email with a link to the verification and any attachments it may have.

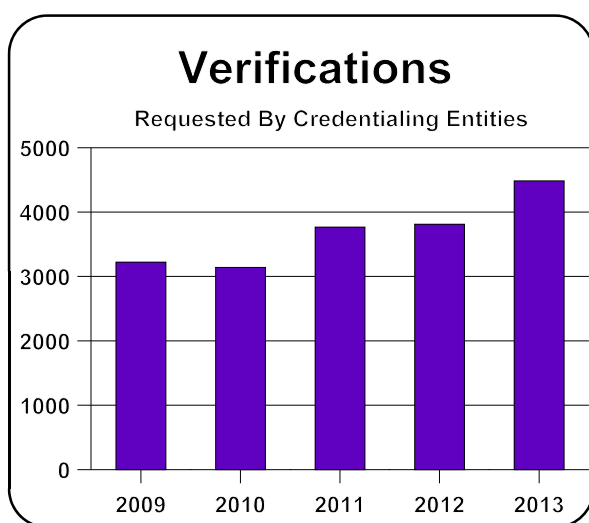


Figure 3.

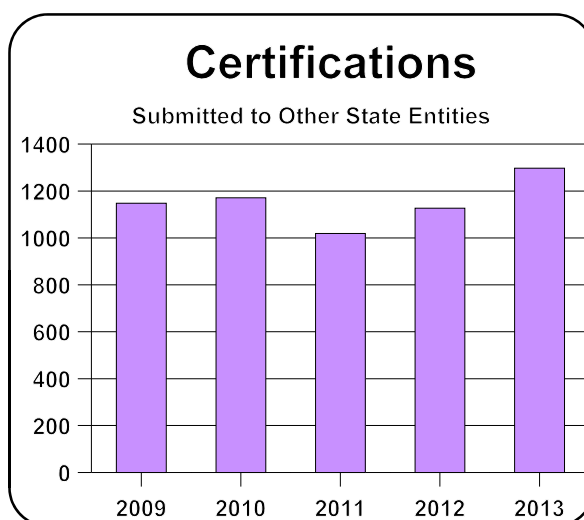


Figure 4.

Figure 4 shows 1,297 certifications were submitted to other state regulatory boards. The Board uses the VeriDoc electronic verification system which allows physicians and physician assistants to purchase a verification of their Mississippi medical license that will automatically be transmitted via email to the designated state medical board. This system has saved the cost of printing and mailing certifications as well as the processing time if done by board staff. This has allowed other states to receive the licensees’ Mississippi licensure verification instantly instead of going through the U.S. Postal service.

During the fiscal year ending June 30, 2013, the Board processed 9,733 annual

renewals for Mississippi licenses and permits. Renewal notices are prepared and mailed to all individuals currently licensed in Mississippi. The on-line renewal system allows physicians and physician assistants to access their renewal information via the Internet to update and pay their renewal fee without submitting any paperwork to the Board. The Board mandates that all physician and physician assistant license renewals be submitted electronically. The on-line renewal process has greatly reduced the time required to process renewals and eliminated the need to hire contract workers to assist in the process.

There are 9,766 currently licensed physicians in Mississippi. Of the 9,766 licensed physicians, 6,042 indicate they are practicing medicine in Mississippi, which is approximately 125 more than was reported last year. Figure 5 shows the overall number of physicians licensed in Mississippi continues to increase year by year. As can be seen in Figure 6 there has been approximately a 8% increase of physicians practicing medicine in Mississippi since 2009.

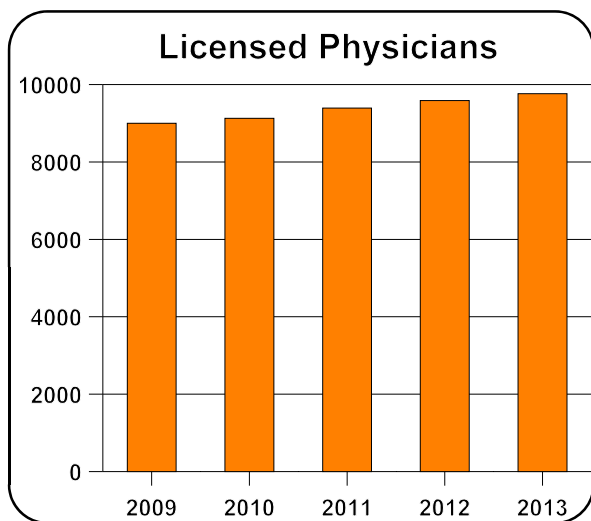


Figure 5.

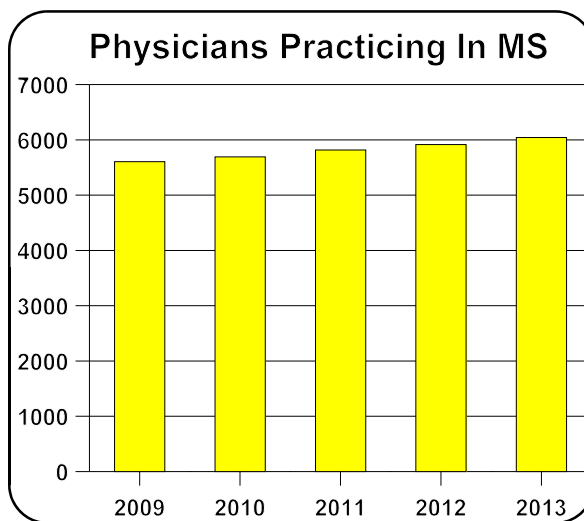


Figure 6.

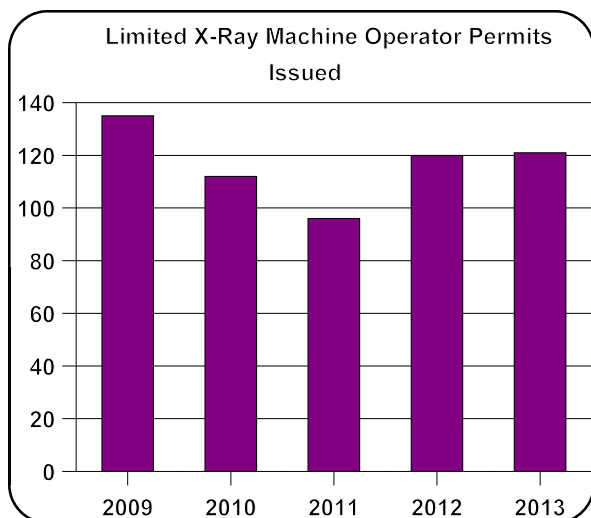


Figure 7.

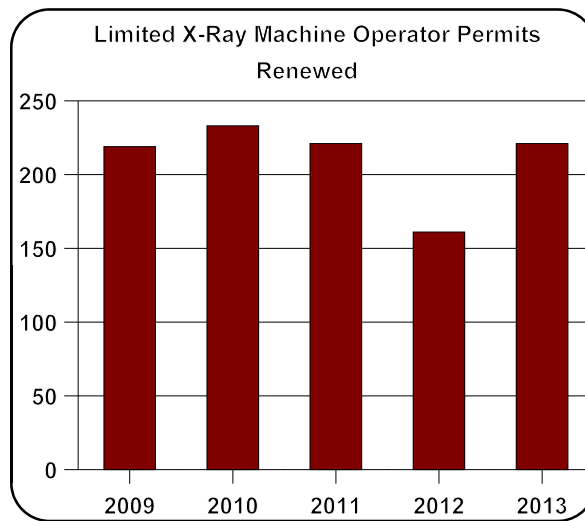


Figure 8.

In compliance with Mississippi Code (1972) Annotated, Section 41-58-1 through Section 41-58-5, the Licensure Division continued tracking continuing education requirements for limited x-ray machine operators and others employed in a physician’s office who perform x-rays under the specific direction of a physician. Limited x-ray machine operator permits are issued to those individuals whose certificate of completion of required courses has been received by the Board of Medical Licensure. This requirement is an on-going process of the Licensure Division. During the fiscal year ending June 30, 2013, the Board issued 121 limited x-ray machine operator permits and renewed 221 permits (Figures 7 and 8).

Pursuant to Mississippi Code (1972) Annotated, Section 93-11-153, the Board of Medical Licensure has entered into a Memorandum of Understanding with the Mississippi Department of Human Services to track and report the names of licensees licensed by this Board who are delinquent in child support. An updated report is presented to the

Department of Health and Human Services on a monthly basis, or more often if requested.

The Licensure Division responds to thousands of telephone calls each year from the public as well as other licensing/regulatory agencies regarding the status of a licensee's license or permit. The Licensure Division submits certified documentation of licensee licensure information to other state boards upon request by the licensee, and responds to requests for laws, rules and regulations pertaining to licensees in this state. The Licensure Division is responsible for filing all rules and regulations of the Board with the office of the Secretary of State in compliance with the Administrative Procedures Act. Licensees can also download licensure requirements, laws, rules and regulations, application packets, past newsletters and statistical information from the Board's website at www.msbml.ms.gov. Figures 9 through 12 represent some of the statistical data available via the Board's website.

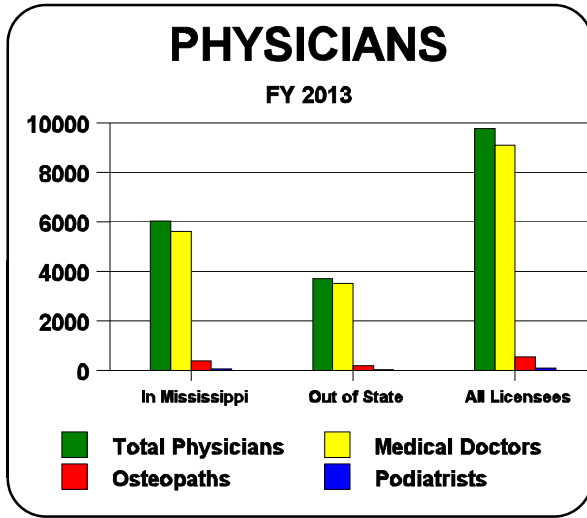


Figure 9.

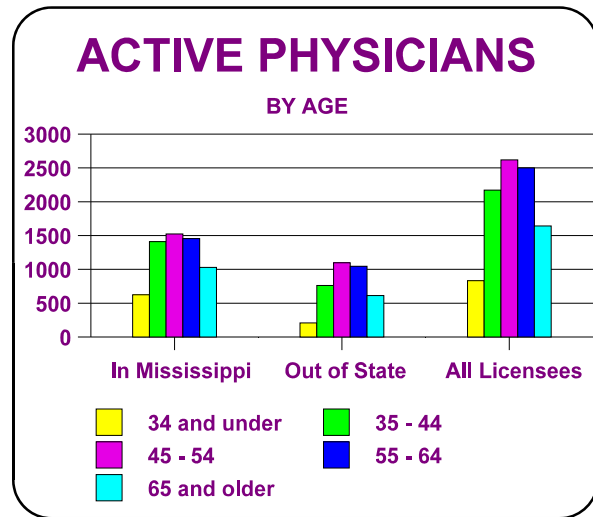


Figure 10.

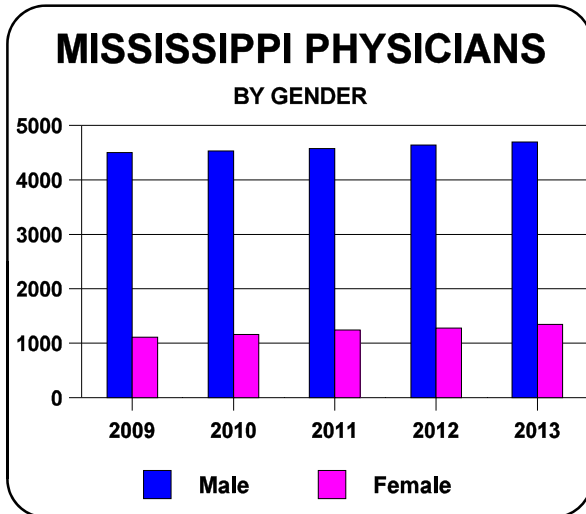


Figure 11.

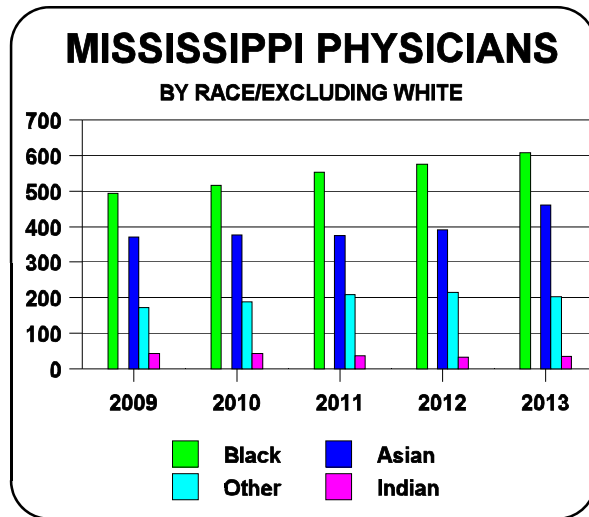


Figure 12.

INVESTIGATIVE DIVISION

Under the direction of the Executive Director, the Investigative Division of the Board carries out the responsibilities of investigating violations of the Medical Practice Act and the Mississippi Uniform Controlled Substances Act as it applies to physicians, podiatrists, radiologist assistants, physician assistants and acupuncture practitioners. The Board does not have jurisdiction over other health professionals such as psychologists, dentists or nurses. Neither does it has jurisdiction over health care facilities such as hospitals and nursing home, or personal care homes.

The Investigative Bureau Director has supervisory responsibility for six (6) field investigators. Three investigators work in decentralized offices in the northern and southern areas of the state (this enables investigators to be extended around the state and minimize travel time from area to area). The Bureau Director also oversees a licensing investigator supervisor, a nurse inspector, a special projects officer, and an administrative assistant. The investigators are responsible for making inquiries concerning all valid complaints of violations of the Medical Practice Act or Rules and Regulations of the Board. These complaints may involve prescribing issues, professional boundary violations, competency questions, civil and criminal court actions, Mississippi Uniform controlled substance law, the practice of medicine and/or assisting an unlicensed person to practice medicine, or compliance violations of existing Board Orders. If the complaint is within the Board's jurisdiction, an investigation will be conducted.

Licensees of the Board may administer or dispense controlled substances in

Schedules II, IIN, III, IIIN, IV, V, and other drugs having addiction-forming and addiction-sustaining liability to a person in the usual course of treatment for a diagnosed condition causing chronic pain. The investigators conduct pharmacy profiling and monitor the “legitimate” or pharmaceutical drug traffic among physicians (M.D./D.O.), podiatrists (D.P.M.), and physician assistants (P.A.). Pharmacy profiles help determine if a licensee of the Board is prescribing suspicious quantities of controlled substances and also identify possible licensees of the Board that have substance abuse problems. This monitoring often reveals the unlawful diversion of drugs by “doctor shopping” patients and other suspicious circumstances.

The increase in prescription drugs abuse and diversion is a problem for the citizens of the state of Mississippi. The number of so called “pain clinics” operating in Mississippi has contributed to the increase in prescription drug abuse and diversion. Many patients of these type clinics have been identified by the Mississippi Prescription Monitoring Program (PMP) as patients that are receiving the same medications from several practitioners during the same time period. The Board knows that access to and the provision of competent health care can affect the issues related to diversion and abuse of prescription drugs. Pursuant to the Mississippi State Board of Medical Licensure Administrative Code Title 30: Part 2640 Chapter 1: Rules and Regulations Pertaining to Prescribing, Administering and Dispensing Medication, Rule 1.15, registration of Pain Management Medical Practices is now a requirement for pain management practices to operate in this state. A pain management medical practice is defined as a public or privately owned medical practice that provides pain management services to patients, a majority (more than 50%) of which

are issued a prescription for or are dispensed, opioids, barbiturates, benzodiazepines, carisoprodol, butalbital compounds or tramadol for more than one hundred eighty (180) days in a twelve month period. The pain management practice has to be majority owned by a licensed physician and the physician must register the pain management practice with the Board. Hospital owned pain management clinics are exempt from the Board's physician ownership requirements. The Investigative Division has the responsibility of issuing the registration certificate for the pain management medical practice and monitoring the practices for compliance. During the fiscal year ending June 30, 2013, fifty-six (56) applications for certification to operate Pain Management Medical Practices were processed. Forty-three (43) applications were approved and thirteen (13) applications were denied certification to operate in Mississippi.

The Board investigates cases involving fraud in the procurement of a license; conviction of crimes; incompetence, negligence and malpractice; substance abuse; the improper handling of controlled substances; complaints of sexual relations between licensees and patients; and complaints or claims of unauthorized practice of medicine. Upon determination of need to pursue disciplinary action, the Board's investigators assist the Board's complaint counsel in case preparation by conducting interviews; performing analysis of patient records and pharmacy profiles; and serving Administration Inspection and Search Warrants, subpoenas and summonses. Further, investigators often assist other state and federal regulatory or law enforcement agencies in investigations involving licensees of the Board.

During the fiscal year ending June 30, 2013, the Investigative Division received and

processed three hundred and five (305) complaint cases. One hundred and ninety-two (192) cases were closed. On average, it took thirty-five (35) calendar days to close or refer complaints that did not proceed to adjudication. Regarding these complaints, the Board rendered thirty-four (34) reportable disciplinary actions, of which there were seven (7) Consent Orders, four (4) Orders of Prohibition, five (5) Voluntary Surrender of License, two (2) Revocation of license, one (1) Order of Reprimand, one (1) Agreement Not to Practice, three (3) Suspension, two (2) Request for Reinstatement of License and five (5) Removal of All Restrictions.

The investigative staff made seven hundred-twenty four (724) field/office visits to various entities, including visits to hospitals, physicians' offices, law enforcement offices, pharmacies, homes of patients and witnesses, etc., when conducting investigations. In addition to the aforementioned field/office visits for investigative purposes, there were 18 visits made to physicians to monitor compliance with Board Orders, Board Rules and Regulations, prescribing laws, etc. The investigative staff also reviewed/examined the Continuing Medical Education (CME) of thirteen (13) licensees to ensure compliance with the Board's CME requirements.

Part of the investigative process entails written correspondence between the physician, the complainant, and the Board. The investigative staff, with the oversight of the Executive Director, formulated and mailed two hundred-five (205) letters to complainants and three hundred-eighty (380) letters to licensees advising of the status of the complaints and/or the resolution of the matter, when appropriate.

During crucial parts of some investigations, there were three (3) Administrative

Inspection and Search Warrants served upon physicians in order to compel the production of patient medical records. Twelve (12) Summons and Affidavits for Licensees to appear for hearings before the Board were served by the investigative staff. Thirty-four (34) subpoenas were served by the investigative staff for witnesses to appear at Board hearings or to provide medical records.

The Board entered into 15 non-disciplinary Recovery Contract Agreements (RCA) with licensees participating in the Mississippi Professionals Health Program (MPHP). Recovery Contract Agreements are written agreements between the program participant (Licensee), the Board, MPHP, and the Mississippi Professionals Health Committee (MPHC), which place non-disciplinary restrictions and requirements for the purpose of maintaining the participant's recovery. So long as the participant complies with the terms and conditions of the RCA, the MPHP/MPHC serves as an advocate to support the participant's continued licensure with the Board. If the participants violate the terms of the RCA, the MPHP/MPHC has the right to withdraw advocacy, wherein the Board may enforce the RCA through an order prohibiting the licensee to practice medicine. The investigative staff collected one hundred twenty-two (122) random urine specimens from these participants as part of their monitoring process with the Board. Although most licensees enter the recovery program on a voluntary basis, the Investigative Division was responsible for referring 7 licensees to this program. Some licensees are monitored when there are competency questions regarding their clinical skills, or a mental or physical disability which would impede or prohibit their ability to safely practice. When such questions arise, the Board refers these individuals to an Examining Committee of the Mississippi State Medical

Association for evaluation purposes. The Board made 8 such referrals.

The Investigative Division's Special Projects Officer received and processed 76 requests for license verifications and certifications; 259 public record requests; composed and mailed forty-nine (49) letters in regard to licensees' compliance with the Mississippi Professionals Health Program (MPHP); and drafted eighteen (18) Consent Orders for consideration by licensees in violation of previous Board orders, Board rules and regulations, the Medical Practice Act, etc.

During the year ending June 30, 2013, the Investigative Division's nurse inspector contacted physicians that have collaborative practices with Advanced Practice Nurses (APRN) and reviewed all collaborative practices of physicians and APRN(s) operating free standing clinics (clinics more than 15 miles away from the primary offices of the supervising physicians) in the state of Mississippi. Due to medical concerns, the nurse inspector had to retire from State Government services before the end of the 2013 fiscal year. Before the retirement of the nurse inspector, seventeen (17) free standing clinics were approved. The nurse inspector made eight (8) site visits to clinics to review the collaborative agreements between physicians and APRN(s), per Mississippi State Board of Medical Licensure Administrative Code, Part 2630, Chapter 1: Collaboration/Consultation with Nurse Practitioners. These figures do not include the clinics that are under the Mississippi State Department of Health, the Department of Mental Health or United States government-owned clinics.

TABLE 1		
CATEGORY I	IMPAIRMENT	Total
	substance abuse	3
	mental illness	1
	physical disability	12
CATEGORY II	COMPETENCY	
	malpractice/negligence	22
CATEGORY III	PRESCRIBING	
	inventory/accountability	89
CATEGORY IV	FELONY/MISDEMEANOR	
	arrest	1
	conviction	1
CATEGORY V	UNPROFESSIONAL CONDUCT	
	action by other jurisdiction	10
	medical records	31
	sexual boundary	6
	workers comp	0
	disruptive physicians	2
	license surrendered	1
	medicare/medicaid fraud	2
	EC referral	2
	billing dispute	11
	substandard care	75
	misleading advertising	1
	patient abandonment	1
	MPHP referral	2
	weight loss	21
	other	32
CATEGORY VI	NON-LICENSE	2

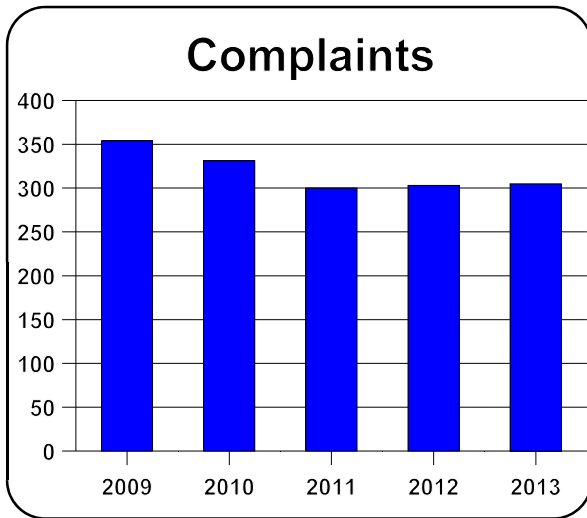


Figure 13.

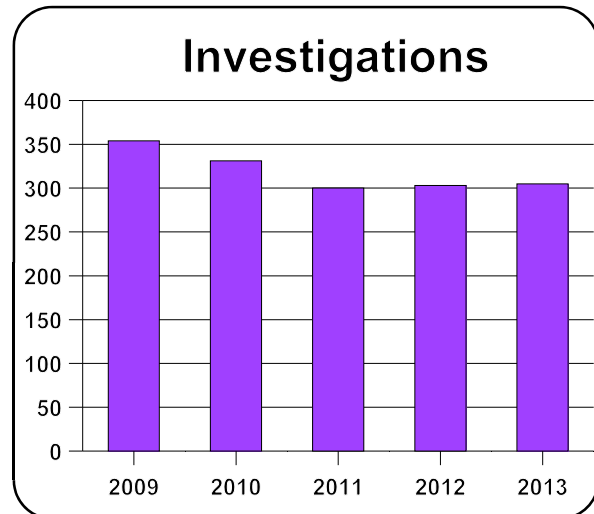


Figure 14.

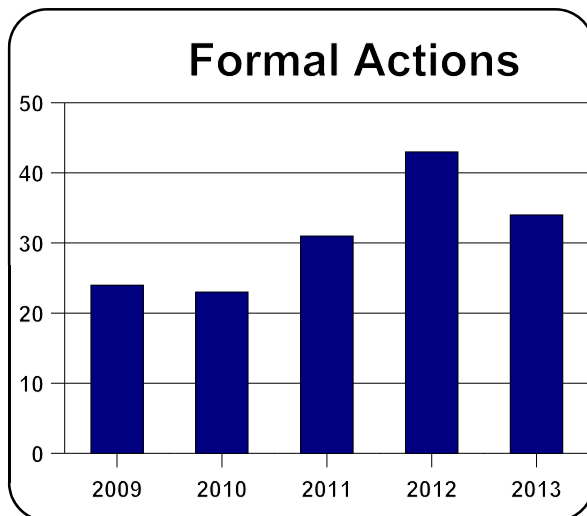


Figure 15.

INCOME AND EXPENSES

All income for the Board is derived from fees collected for the annual renewal of licenses, applications for licensure, limited x-ray machine operator permits, certifications and verifications of license to other entities, investigative recovery costs, copy costs and various small fees relating to licensure. Expenses are shown for major object codes as reflected on the budget request for fiscal year ending June 30, 2013. Attached is a report of the FY 2013 income and expenses for the Board of Medical Licensure.

Mississippi State Board of Medical Licensure
Fiscal Year 2013 Income and Expenses
As of August 31, 2013

Category	Budget Allotment	Current Y-T-D		Unobligated Allotment Balance	Percent Unused
		Total	Encumbered		
Personal Services					
Salaries	1,322,486.00	1,190,004.00		132,482.00	10.02%
Travel	32,000.00	33,623.00		-1,623.00	-5.07%
Contractual Services	664,487.00	575,838.00	0.00	88,649.00	13.34%
Commodities	48,525.00	39,440.00	0.00	9,085.00	18.72%
Equipment	30,000.00	23,461.00	0.00	6,539.00	21.80%
Subsidies, Loans and Grants	<u>250,000.00</u>	<u>250,000.00</u>		<u>0.00</u>	<u>0.00%</u>
Total:	2,347,498.00	<u>2,112,366.00</u>	<u>0.00</u>	<u>235,132.00</u>	<u>10.02%</u>

Revenue Collected in 2013:	2,477,575.00
- Y - T - D Expenditures:	<u>2,112,366.00</u>
2013 Balance	<u><u>365,209.00</u></u>

