

About the Board

The 21st General Assembly created the State Board of Medical Examiners in 1886 to license physicians and regulate the practice of medicine. Initially, the Board issued licenses to several classes of physicians, including medical (M.D.), homeopaths, and eclectics.

The Board did not issue licenses for osteopathic physicians until 1902. In 1921, the 39th General Assembly created a separate board to license and regulate osteopaths. In 1963, the 60th General Assembly abolished the osteopathic board and redefined the State Board of Medical Examiners, making it a composite board to license allopathic physicians (M.D.s) and osteopathic physicians (D.O.s).

In 2007, the 81st General Assembly changed the board's name to the Board of Medicine.

Since 1994, the Board has registered, licensed and regulated acupuncturists. Over the past 127 years, the Board has directly or indirectly been responsible for licensure of other health care providers, including nurses, advanced emergency medical technicians, paramedics, and physician assistants. All of these professions are now licensed and regulated by their own boards.

In 1996, the Legislature authorized the Board to establish the Iowa Physician Health Committee, which administers a program to advocate for and monitor the recovery and rehabilitation of impaired physicians.

The Board regulates the practice of medicine and surgery and acupuncture under the authority of Iowa Code chapters 147, 148, 148E and Section



IOWA BOARD OF MEDICINE 400 SW Eighth Street, Suite C Des Moines, Iowa 50309-4686

HOURS: 8 a.m. to 4:30 p.m., Monday

through Friday

PHONE: 515-281-5171 **FAX**: 515-242-5908 **EMAIL**: ibm@iowa.gov

WEB: www.medicalboard.iowa.gov

653 in the Iowa Administrative Code.

The Board is charged with enforcing these laws and rules to protect the public from licensees who do not practice medicine and acupuncture within prevailing and acceptable standards of care. The Board also issues cease and desist notices to persons who practice medicine and acupuncture without a license.

The Board is an Executive Branch agency within the Iowa Department of Public Health. The Board is funded entirely with licensure fees.

IOWA BOARD OF MEDICINE 2012 ANNUAL REPORT



MEMBERS OF THE BOARD OF MEDICINE, MAY 1, 2012, TO APRIL 30, 2013: (front row from left): Hamed Tewfik, M.D., Iowa City, secretary; Colleen Stockdale, M.D., West Burlington, chairperson; Joyce Vista-Wayne, M.D., Ottumwa; Jeffrey Snyder, M.D., Crescent, vice chairperson; Julie Perkins, M.D., Carroll; Monsignor Frank Bognanno, Des Moines; Ann Gales, Bode. (Back row): Greg Holversten, D.O., Sioux City; Michael Thompson, D.O., Pella; Diane Clark, Lake Mills.

Board Members

The 10-member Board of Medicine is composed of seven physicians (five M.D.s and two D.O.s) and three non-physicians who represent the public. Members are appointed by the Governor and confirmed by a two-thirds' majority vote in the Iowa Senate for a full three-year term or to complete the unexpired term of a member who resigned. Members can serve up to nine years. Members receive a per diem and expenses. The Board annually elects a chairperson, vice chairperson and secretary and is organized into four standing committees, each with five members: Executive, Licensure, Monitoring, and Screening, which reviews complaints about licensees.

| BOARD MEMBER | APPOINTED | TERM EXPIRES |
|---|------------------|---------------------|
| Colleen Stockdale, M.D., West Burlington, Chairperson | 2007, 2010 | April 30, 2013 |
| Jeffrey Snyder, M.D., Crescent, Vice Chairperson | 2008, 2010 | April 30, 2013 |
| Hamed Tewfik, M.D., Iowa City, Secretary | 2011 | April 30, 2014 |
| Monsignor Frank Bognanno, Des Moines | 2012 | April 30, 2015 |
| Diane Clark, Lake Mills | 2011 | April 30, 2014 |
| Ann Gales, Bode | 2012 | April 30, 2013 |
| Greg Hoversten, D.O., Sioux City | 2011 | April 30, 2014 |
| Julie Perkins, M.D., Carroll | 2012 | April 30, 2015 |
| Michael Thompson, D.O., Pella | 2012 | April 30, 2015 |
| Joyce Vista-Wayne, M.D., Ottumwa | 2010 | April 30, 2013 |

Executive Director's Report

The Board of Medicine, through efficient and effective organization, will license, monitor, discipline, educate, and when appropriate, rehabilitate physicians to assure their fitness and competence in the practice of medicine. The Board protects and enhances the public's health, safety and welfare by establishing and maintaining standards of excellence used in regulating the practices of medicine, surgery, and acupuncture and ensuring quality health care for lowans.

In 2012, the Board:

- Administered active licenses for 11,134 physicians, up 222 from 2011, and 46 licensed acupuncturists, down from 47 in 2011. The number of physicians practicing in lowa has increased 6.7 percent since 2008.
- Began using a uniform application for resident, special, temporary, and permanent physician licensure. Iowa is first state to use this application for all types of physician licenses.
- Opened 804 complaint files, up from 746 in 2011.
- Took 74 public disciplinary actions, up from 55 actions in 2011, and issued 92 confidential letters of warning and education, down from 93 in 2011.
- Filed charges against 32 physicians, down from 34 in 2011.
- Monitored 205 physicians under disciplinary orders, up from 195 in 2011.
- Assessed civil penalties totaling \$185,000 involving 29 cases versus \$112,000 in penalties for 23 cases in 2011.
- Amended five administrative rules to update regulatory language, recognize the continuing education gained by physician Board members, and require licensees to report adverse changes to their hospital privileges.
- Held seven two-day administrative meetings, 14 teleconference meetings, and eight contested case hearings.
- Distributed more than 60 news releases to the public and other stakeholders.
- Continued to participate in the activities of the Federation of State Medical Boards and the Administrators in Medicine. These organizations provide staff and Board member training and help the agency to remain aware of medical licensure and regulatory issues.
- Provided educational materials and outreach programs to lowa's physicians, physician associations, the public, state and federal government officials, and other stakeholders.

More information about the Board's work is available in this report and in the agendas, minutes and news releases on the Board's website, www.medicalboard.iowa.gov, and on the Board's page on Facebook. I am very proud of the staff and Board members and their commitment to excellent service to the citizens of Iowa.

April 30, 2013

MARK BOWDEN

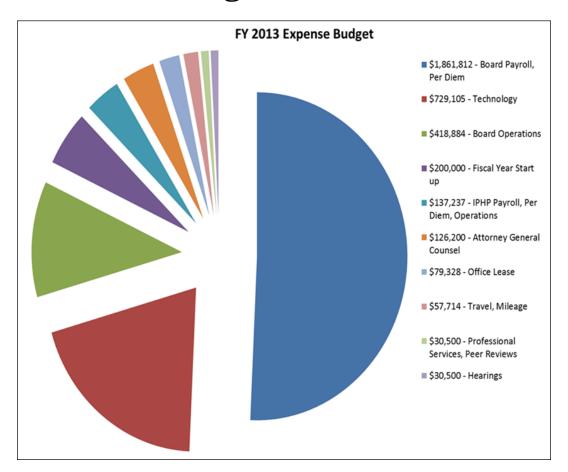
EXECUTIVE DIRECTOR, IOWA BOARD OF MEDICINE

Runh & Doubles

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FY 2013 Budget



The Board of Medicine's expense budget for fiscal year 2013 (July 1, 2012, through June 30, 2013) is \$3,671,280, down from \$3,759,472 in FY 2012. The FY 2013 budget includes roll-over funds accrued to cover one-time expenses to fund the Board's new database and technology upgrades. The Board's anticipated revenue from licensure fees in FY2013 is \$2,999,740. On September 21, 2012, the Board voted to maintain the current schedule of licensure fees, which have not been increased since 2007.

2012 Meeting Schedule

| <u>MEETINGS</u> | TELECONFER | TELECONFERENCES | | |
|-----------------|-------------------|------------------------|---------------|--|
| January 12-13 | January 31 | August 14 | January 12-13 | |
| March 1-2 | February 9 | August 23 | January 26 | |
| April 19-20 | March 29 | August 31 | February 2 | |
| June 7-8 | April 12 | September 17 | June 6 | |
| July 26-27 | May 17 | October 18 | June 21 | |
| September 20-21 | July 12 | December 5 | August 16 | |
| November 15-16 | August 10 | December 13 | December 8 | |

Licensure

| Diccilouic | | | |
|---|--------|--------|--------|
| JANUARY 1 TO DECEMBER 31 | 2010 | 2011 | 2012 |
| Active M.D. licenses on 12/31 | 9,039 | 9,310 | 9,468 |
| Active D.O. licenses on 12/31 | 1,554 | 1,602 | 1,666 |
| Total active (M.D. & D.O.) on 12/31 | 10,593 | 10,912 | 11,134 |
| M.D.s residing in Iowa with active license on 12/31 | 5,302 | 5,431 | 5,478 |
| D.O.s residing in Iowa with active license on 12/31 | 1,173 | 1,183 | 1,222 |
| Active (M.D. & D.O.) residing in Iowa on 12/31 | 6,475 | 6,614 | 6,700 |
| Permanent physician licenses issued | | | |
| By endorsement | 398 | 351 | 418 |
| By expedited endorsement | 59 | 154 | 145 |
| By examination | 252 | 271 | 252 |
| Total physician licenses issued | 709 | 776 | 815 |
| Physician licensure denied | 0 | 1 | 0 |
| Physician licenses renewed | 5,055 | 4,987 | 5,223 |
| Physician licenses that went inactive | 511 | 533 | 589 |
| Physician licenses reinstated | 90 | 73 | 93 |
| Resident physician licenses | | | |
| Resident licenses issued | 268 | 277 | 276 |
| Resident licenses renewed | 13 | 5 | 4 |
| Resident licenses that went inactive | 298 | 285 | 284 |
| Total active resident licenses on 12/31 | 651 | 674 | 691 |
| Special physician licenses | | | |
| Special licenses issued | 3 | 9 | 2 |
| Special licenses renewed | 27 | 24 | 28 |
| Special licenses that went inactive | 6 | 7 | 4 |
| Total active special licenses on 12/31 | 31 | 31 | 29 |
| Temporary physician licenses | | | |
| | 11 | E | 7 |
| Temporary licenses issued | 11 | 5 | |
| Temporary licenses renewed | 0 | 0 | 0 |
| Temporary licenses that went inactive | 12 | 8 | 5 |
| Total active temporary licenses on 12/31 | 9 | 5 | 6 |
| Acupuncturist licenses | | | |
| Acupuncturist licenses issued | 3 | 6 | 5 |
| Acupuncturist licenses renewed | 40 | 0 | 44 |
| Acupuncturist licenses that went inactive | 1 | 2 | 0 |
| Total active acupuncturist licenses on 12/31 | 41 | 47 | 46 |

Enforcement

| JANUARY 1 TO DECEMBER 31 | 2010 | 2011 | 2012 |
|---|------|------|------|
| New complaints | 540 | 636 | 723 |
| Liability cases | 117 | 110 | 81 |
| Total files opened | 657 | 746 | 804 |
| Informal letter of warning | 67 | 80 | 81 |
| Informal letter of education | 12 | 13 | 11 |
| Total informal actions | 79 | 93 | 92 |
| Case closed - no action | 210 | 210 | 219 |
| Cases closed administratively | 161 | 166 | 193 |
| Total cases closed | 371 | 376 | 412 |
| Complaint files closed | 651 | 670 | 604 |
| Liability files closed | 117 | 108 | 81 |
| Total files closed | 768 | 778 | 685 |
| Statements of charges | 22 | 34 | 32 |
| Evaluations ordered | 8 | 18 | 9 |
| | | | |
| Formal disciplinary actions | | | |
| License revocation/surrender | 5 | 6 | 10 |
| License suspension | 3 | 6 | 8 |
| License probation | 8 | 12 | 12 |
| Civil penalty | 24 | 23 | 30 |
| Citation and warning | 2 | 3 | 6 |
| Practice restriction | 9 | 5 | 8 |
| Total formal disciplinary actions | 61 | 55 | 74 |
| Physicians under sanctions | | | |
| New restrictions | 10 | 5 | 8 |
| Restrictions terminated | 2 | 5 | 5 |
| Under restriction on 12/31 | 52 | 61 | 58 |
| New probations | 9 | 12 | 12 |
| Probations terminated | 16 | 8 | 9 |
| Under probation on 12/31 | 65 | 65 | 67 |
| New suspensions | 4 | 6 | 8 |
| Suspensions terminated | 5 | 0 | 0 |
| Under suspension on 12/31 | 43 | 46 | 52 |
| Disciplinary monitoring cases on 12/31 | 183 | 195 | 205 |
| Total liability files open on 12/31 | 1 | 2 | 3 |
| Total complaint files open on 12/31 | 479 | 652 | 704 |
| Total investigative files open on 12/31 | 479 | 564 | 707 |

Alternate Members

Alternate members of the Board of Medicine play an important role in contested case hearings. Up to two Alternates can serve on a six-member panel for a hearing when a quorum (six members) of the 10 current members of the Board is not available. Since it was authorized by law in 2008 and implemented in 2009, the Alternate pool is routinely tapped for hearings. Alternates are recommended by the Board, but must be approved by the Governor. An Alternate's term is nine years. Alternates receive a per diem and expenses.

| ALTERNATE MEMBER | <u>APPOINTED</u> |
|-------------------------------------|-------------------|
| Carole Frier, D.O., Des Moines | March 25, 2011 |
| Analisa Haberman, D.O., Mason City | August 21, 2012 |
| Bruce Hughes, M.D., Des Moines | March 25, 2011 |
| John Marshall, M.D., Council Bluffs | August 21, 2012 |
| Dana Shaffer, D.O., Exira | March 19, 2009 |
| Paul Thurlow, Dubuque | November 14, 2011 |
| Janece Valentine, Fort Dodge | July 8, 2012 |
| Allen Zagoren, D,O., Clive | March 19, 2009 |

Contested Case Hearings

The Board of Medicine may file a statement of charges if it finds probable cause that a licensee violated lowa law or the Board's rules. The case is referred to the Iowa Attorney General's Office and an assistant attorney general is assigned to prosecute the case. The Board office schedules a hearing for the licensee and the state to present evidence related to the charges to a hearing panel of Board members. State law encourages the Board to enter into informal settlement negotiations prior to the initiation of a hearing. In most circumstances the state makes a settlement offer. If no settlement is attempted or reached, the case proceeds to hearing. A panel of at least six Board members, two of whom can be Alternate members, will hear the case at the Board's office. An administrative law judge from the Iowa Department of Inspections and Appeals presides over the hearing, rules on matters of law and assists the Board in preparing the findings of fact, conclusions of law, decision, and order of the Board based on the evidence presented during the hearing.

| | HEARINGS | | | |
|--------------------------------|-------------|-------------|-------------|-------------|
| | <u>2009</u> | <u>2010</u> | <u>2011</u> | <u>2012</u> |
| Hearings | 6 | 7 | 4 | 8 |
| Hearings using Alternates | 5 | 4 | 3 | 6 |
| Total hearing days | 8 | 7 | 4 | 9 |
| Cases settled without hearings | 57 | 50 | 38 | 40 |
| | | | | |

Peer Reviews

In addition to three public members, the Board of Medicine includes only seven physicians, representing at most seven specialties. Complaints about lowa physicians, however, cross the spectrum of specialties, from anesthesiology to urology. Therefore, in competency issues expertise in a given case may not be available on the Board when the case is discussed. If, after a case has been investigated and discussed at the Board level, specialty expert opinion is needed to fairly determine if the standard of care has or has not been met, a formal peer review may be requested. John Olds, M.D., the Board's medical advisor, will recruit lowa physicians to serve on a committee to review a case file, which includes the investigative report, interviews with the complainant, witnesses and the physician involved, and pertinent medical records. The peer reviewers then discuss their findings and determinations amongst themselves and submit a formal report to the Board for consideration. Iowa physicians who are interested in serving as a peer reviewer may contact Dr. Olds at 515-242-3229.

| | PEER REVIEWS | | | | | | |
|-----------|---|---|---|---|---|--|--|
| | <u>2008</u> <u>2009</u> <u>2010</u> <u>2011</u> <u>20</u> | | | | | | |
| Ordered | 10 | 8 | 6 | 7 | 9 | | |
| Completed | 9 | 9 | 6 | 8 | 9 | | |

Civil Penalties

lowa Code 148.6(1) provides that the Board of Medicine, after due notice and hearing, may issue an order to discipline a licensee, including imposing a civil penalty not to exceed \$10,000. All penalties are deposited in the general fund of the State of Iowa. The Board does not financially benefit from the penalties it imposes. The Board is funded entirely with licensure fees.

| CIVIL PENALTIES | | | | | | | | |
|-----------------|-------------|-------------|-------------|-------------|-------------|-------------|--|--|
| | <u>2007</u> | <u>2008</u> | <u>2009</u> | <u>2010</u> | <u>2011</u> | <u>2012</u> | | |
| Licensees | 22 | 23 | 19 | 24 | 23 | 29 | | |
| \$1,000 | 13 | 3 | 4 | 1 | 2 | 3 | | |
| 2,000 | 0 | 1 | 0 | 0 | 0 | 1 | | |
| 2,500 | 2 | 9 | 7 | 5 | 7 | 6 | | |
| 4,000 | 0 | 0 | 0 | 1 | 0 | 0 | | |
| 5,000 | 5 | 7 | 4 | 13 | 9 | 5 | | |
| 7,500 | 1 | 0 | 1 | 0 | 1 | 4 | | |
| 10,000 | 1 | 3 | 3 | 4 | 4 | 11 | | |
| Total | \$60,500 | 92,500 | 78,500 | 122,500 | 112,000 | 185,000 | | |
| | | | | | | | | |

Since 2007, the Board has deposited \$631,000 in the general fund of the State of Iowa.

Administrative Rules

The Board of Medicine's administrative rules, which have the weight of law, are found in Section 653 of the Iowa Administrative Code. Before adopting a new rule or amending an existing rule, the Board discusses potential changes at a public meeting. If the Board decides to pursue a new rule or amendments, this information is prepared and published in an Administrative Bulletin. A public hearing is held to receive comments on the proposed changes. Before formally adopted by the Board, the new rule or amendments can be reviewed by the Legislative Administrative Rules Review Committee.

These amendments were adopted by the Board in 2012:

- CHAPTER 9, PERMANENT PHYSICIAN LICENSURE ARC 0215C
 - The purpose of Chapter 9 is to establish provisions for permanent physician licensure. The new amendments update language and eliminate redundancies throughout the chapter, apply the continuing education requirements for licensure reinstatement, and streamline the application process. NOTICED: 3/1/2012 | ADOPTED: 6/8/2012 | EFFECTIVE: 8/29/2012
- CHAPTER 10, RESIDENT, SPECIAL AND TEMPORARY LICENSURE ARC 0216C

 The purpose of Chapter 10 is to establish provisions for resident, special and temporary physician licensure. The new amendments update language throughout the chapter and apply the continuing education and training requirements for renewal of a special license. NOTICED: 3/1/2012 | ADOPTED: 6/8/2012 | EFFECTIVE: 8/29/2012
- CHAPTER 11, CONTINUING EDUCATION AND MANDATORY TRAINING ARC 0217C
 The purpose of Chapter 11 is to establish continuing education and training requirements for renewal or reinstatement of a permanent physician license or renewal of a special physician license. The amendments update language throughout the chapter and recognize the continuing education gained by physicians from their service on the Board, on the lowa Physician Health Committee and by completing peer reviews for the Board. NOTICED: 3/1/2012 | ADOPTED: 6/8/2012 | EFFECTIVE: 8/29/2012
- CHAPTER 22, MANDATORY REPORTING—ARC 0532C

The purpose of Chapter 22 is to establish that certain occurrences must be reported by licensees to the Board. The amendment requires licensees to report any disciplinary action taken which results in a limitation, restriction, suspension, revocation, relinquishment or nonrenewal of their hospital privileges or any voluntary limitation, restriction, suspension, revocation, relinquishment or nonrenewal of hospital privileges to avoid a hospital investigation or hospital disciplinary action. Correspondingly, Chapter 23, "Grounds for Discipline" was also amended (ARC 0533C) to includes sanctions for failure to make this new mandatory report. NOTICED: 4/19/2012 | ADOPTED: 11/16/2012 | EFFECTIVE: 1/30/2013

Iowa Physician Health Program

The Iowa Physician Health Program (IPHP) was established in 1996 to support physicians who self-report mental health issues, physical disabilities or substance use disorders. The advocacy and confidential monitoring program is administered by the Iowa Physician Health Committee, which is appointed by the Board of Medicine. Participants sign contracts agreeing to adhere to the strict guidelines. The program's overarching goals are supporting physicians who seek the program's assistance, protecting the public by carefully monitoring physicians with diagnosed impairments that may affect their abilities to practice, and maintaining credibility with the Board and the public by accountability and responsible application of authority. The committee and program are defined in Iowa Administrative Code 653 Chapter 14. Committee members receive a per diem and expenses.

The committee held seven meetings in 2012 and met with 77 program participants. The IPHP's budget of \$137,237 in FY 2013 is funded entirely with licensure fees. Licensees do not pay additionally to participate in the program, but they are responsible for all costs associated with drug screening, therapy, treatment and so forth.

Staff members of the Board manage the program, and the committee's co-chairs and legal counsel provide guidance on case issues. Members of the committee in 2012:

- Michael Flaum, M.D., Iowa City, co-chair (through August 24, 2012)
- Sasha Khosravi, D.O., Grimes, co-chair
- Lester Yen, M.D., West Des Moines, co-chair
- Raymond Harre, M.D., Davenport
- Lynn Martin, Ph.D., Des Moines, licensed marriage and family therapist
- Diane O'Connor, Fort Dodge
- Julie Scheib, Spirit Lake, alcohol and drug counselor
- Mark Bowden, executive director, Board of Medicine

Board staff members assigned to the IPHP are program coordinator Deb Anglin, L.M.S.W., and case manager Patti Rix, L.M.S.W. Sara Scott, an assistant Iowa Attorney General, provides legal counsel for the program.

| | | IPHP | http://iphp.iowa.gov/ | | |
|-------------------------|------|-------------|------------------------|-------------|-------------|
| (Totals on December 31) | 2011 | <u>2012</u> | | <u>2011</u> | <u>2012</u> |
| Participants | 80 | 79 | Chemical dependency | 18 | 8 |
| Male | 68 | 59 | Mental health | 24 | 24 |
| Female | 12 | 20 | Physical disability | 6 | 7 |
| M.D. | 61 | 62 | Chemical & mental | 20 | 18 |
| D.O. | 19 | 16 | Physical & mental | 2 | 3 |
| L.Ac. | 0 | 1 | New participants | 43 | 48 |
| Avg. age | 47.5 | 45.3 | Discharged | 47 | 49 |
| Avg. years in IPHP | 2.4 | 3 | Noticed for violations | 7 | 5 |

Board Staff

The Board of Medicine is fortunate to have dedicated, competent personnel who take their jobs — and the Board's mission — seriously. Every day, these men and women perform licensure and regulatory enforcement duties that enable the Board to protect the health of lowans.

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Shantel BillingtonOffice Manager

Kent Nebel

Director of Legal Affairs

John Olds, M.D.

Medical Advisor

LICENSURE

Amy Van MaanenDirector of Licensure
& Administration

Rachel Davis

Licensing Assistant

Sylvia Crook

Licensing Specialist

Judy Hojati

Renewal Coordinator

Amanda Woltz

Licensing Specialist

Steve Ervin

Technology Specialist & Webmaster

IOWA PHYSICIAN HEALTH PROGRAM

Deb Anglin, Coordinator

Patti Rix, Case Manager

ENFORCEMENT

Russell Bardin

Chief Investigator

Brandi Allen

Investigator

Luann Brickei

Support Coordinator

Jennifer Huisman

Investigator

Aaron Kephart

Investigator

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Monitoring Coordinator

James Machamer

Investigator

Cathy McCullough

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David McGlaughlin

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