

**FISCAL YEAR 2003-2004
ANNUAL REPORT**

**ARIZONA MEDICAL BOARD
AND
ARIZONA REGULATORY BOARD OF
PHYSICIAN ASSISTANTS**



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LETTER TO THE GOVERNOR

JANET NAPOLITANO

Governor

Janet Napolitano

Members of the Arizona Medical Board

Edward J. Schwager, M.D.
Chair/Physician Member

Sharon B. Megdal, Ph.D.
Vice Chair/Public Member

Robert P. Goldfarb, M.D.
Secretary/Physician Member

Patrick N. Connell, M.D.
Physician Member

Ingrid E. Haas, M.D.
Physician Member

Tim B. Hunter, M.D.
Physician Member

J. Becky Jordan
Public Member

Ram R. Krishna, M.D.
Physician Member

Douglas D. Lee, M.D.
Physician Member

William R. Martin, III, M.D.
Physician Member

Dona Pardo, Ph.D., RN
Public Member/RN

M. Chris Wertheim
Public Member

Members of the Arizona Regulatory Board of Physician Assistants

Randy D. Danielsen, Ph.D., P.A.-C
Chair/Physician Assistant Member

Albert Ray Tuttle, P.A.-C
Vice Chair/Physician Assistant Member

Michael E. Goodwin, P.A.-C
Physician Assistant Member

G. Bradley Klock, D.O.
Osteopathic Physician Member

James Edward Meyer, M.D.
Allopathic Physician Member

Sigmund Popko
Public Member

Anna Marie Prassa
Public Member

Joan Reynolds, P.A.-C
Physician Assistant Member

Peter C. Wagner, D.O.
Osteopathic Physician Member

Barry D. Weiss, M.D.
Allopathic Physician Member

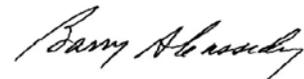
Dear Governor Napolitano:

On behalf of the Arizona Medical Board and the Arizona Regulatory Board of Physician Assistants, I present to you the 2004 Annual Report. The events of last year have fostered continued protection to the citizens of Arizona, increased public awareness and have clarified the increasingly complex roles physicians and physician assistants now face in the healthcare industry. Through your support and the support of the Arizona Legislature, both boards made policy and process advancements that are now recognized nationally. These advancements recently earned the Arizona Medical Board the honor as one of the top disciplinary boards in the country.

As you are aware, a member of the Arizona Medical Board, Ronnie R. Cox, Ph.D., was recently called to active duty in the United States Army Reserves. While in Iraq, Dr. Cox was promoted from Lieutenant Colonel to Colonel. His presence on the Board will be missed. In his stead, the Board welcomes your newest appointee, Chris Wertheim. Ms. Wertheim brings extensive consumer advocacy experience that is appreciated by both her peers on the Board and the public. Additionally, the Board welcomed two of your other appointees this year, Ingrid E. Haas, M.D. and Douglas D. Lee, M.D. Both of these physicians are valuable assets to this organization.

Finally, I would like to thank you for giving these Boards and the agency that serves them the opportunity to be of service to the citizens of Arizona. We take pride in our accomplishments and in the knowledge that our actions have improved the quality of healthcare received by millions of Arizonans. Furthermore, we will strive for continued excellence in the years ahead.

Sincerely,



Barry A. Cassidy, Ph.D., P.A.-C
Executive Director

EXECUTIVE SUMMARY

“To protect the public through the judicious licensing and regulation of physicians and physician assistants.”

- *Agency Mission Statement*

It has been the overriding objective of the Arizona Medical Board and the Arizona Regulatory Board of Physician Assistants to protect the public. This Annual Report highlights many of the accomplishments made by the Arizona Medical Board and the Arizona Regulatory Board of Physician Assistants. While some achievements are the result of new initiatives, others are the end products of research projects and organizational changes made within the last few years. Excerpts of these achievements are as follows:

- ◆ **Board Leadership** *with considerable experience in regulatory issues affecting the quality of health care for Arizonans.*
- ◆ **Recognition** *as one of the leading medical boards in the country.*
- ◆ **Public Outreach Campaign** *that has reached hundreds of thousands of people in Arizona and worldwide.*
- ◆ **Technological Advances** *that have positively impacted customer access to physician and physician assistant information and the agency's operational processes.*
- ◆ **Licensing processes** *that have ensured timely licensure to those physicians and physician assistants who meet or exceed Arizona requirements to practice.*
- ◆ **Regulation** *of physicians and physician assistants that has revolved around fairness, consumer protection and high standards for medical consultant review.*
- ◆ **Fiscal accountability** *that supports current Board programs and plans for those in the future.*
- ◆ **Legislative bills** *that focus on current issues affecting consumer safety and clarify standards for medical practice.*

ARIZONA MEDICAL BOARD MEMBERSHIP

Edward J. Schwager, M.D., the Board's **Chairman**, is a family physician in Tucson. He was the national chairman of the Association of American Medical Colleges' Organization of Student Representatives and went on to serve as a member of the Executive Council of the Association of American Medical Colleges, and president of the Arizona Academy of Family Physicians. He is listed in Best Doctors in America, Pacific Region. He is certified by the American Board of Family Practice and has received an additional Certificate of Added Qualifications in Geriatrics. Dr. Schwager is also an Associate Clinical Professor in the Department of Family and Community Medicine at the University of Arizona. Dr. Schwager completed his medical degree and family practice residency at the University of Arizona.



Sharon B. Megdal, Ph.D., the Board's **Vice Chair**, serves as Director of the Water Resources Research Center, as well as Professor and Specialist of the Department of Agricultural and Resource Economics at the University of Arizona. She has been a member of the Arizona Corporation Commission and served as the Chair of the Arizona Joint Select Committee on State Revenues and Expenditures. In 1997 Dr. Megdal completed a six-year term on the Arizona State Transportation Board, serving as the board's Chair during the last year of her term. Dr. Megdal has also been a member of the Board of Trustees of TMC Healthcare and the Board of the Arizona Hospital and Healthcare Association. She recently



served as Co-Chair of the Governor's Transportation Vision 21 Task Force and was a member of the Governor's Water Management Commission. She currently serves on the Arizona Water Quality Appeals Board. Dr. Megdal received her doctor of philosophy degree in economics from Princeton University, with a specialization in public sector economics and econometrics. In October 2000 The Business Journal named Dr. Megdal one of the "Valley's Most Influential" in the area of Transportation.

Robert P. Goldfarb, M.D., the Board's **Secretary**, graduated from Tulane University, School of Medicine and works in a Tucson, Arizona private neurosurgery practice. Dr. Goldfarb is also the neurosurgical consultant to the University of Arizona Athletic Department. Dr. Goldfarb completed his Internship at Michael Reese Hospital and Medical Center in Chicago and his Residency in Neurological Surgery at the University of Illinois Hospitals and Presbyterian-St. Lukes Hospital in Chicago. He is certified by both the American Board of Neurological Surgery and the American College of Surgeons. He has previously served as Chief of the Medical Staff at Tucson Medical Center and as a Member of the Board of Trustees at El Dorado Hospital and is a member of professional societies including the American Association of Neurological Surgeons (Harvey Cushing Society), Congress of Neurological Surgeons, American Medical Association, Arizona Medical Association, and the Pima County Medical Society. Dr. Goldfarb is listed in a number of Who's Who publications including Who's Who in America and Who's Who in Medicine and Healthcare.

ARIZONA MEDICAL BOARD MEMBERSHIP

Patrick N. Connell, M.D. is an emergency department staff physician at Maryvale Hospital Medical Center, West Valley Health Center, and part time attending at Maricopa Medical Center. He is President of Maryvale Emergency Physicians, Ltd.; Medical Director of Healthwaves, Inc., a corporate wellness company; and, Councillor of the Arizona College of Emergency Physicians. Dr.



Connell has worked with the American College of Emergency Physicians as a member of their Practice Management Committee and assisted in policy development for the College. He is a past president of the Arizona College of Emergency Physicians and has served on their Board for ten years. Dr. Connell has been a Fellow of the American College of Emergency Physicians since 1983.

Dr. Connell received his medical degree at the University of Arizona and performed his residency in surgery at University Hospital in Tucson.

Ingrid E. Haas, M.D. is an obstetrician/gynecologist, actively practicing in Scottsdale, Arizona. She graduated from the University of Oregon Health Sciences Center and completed a residency in OB/GYN from Baystate Medical Center. Dr. Haas is Board certified in OB/GYN from the American Board of Obstetrics and Gynecology and is a fellow of the American College of Obstetricians and Gynecologists. She also subspecializes in Advanced GYN Surgery/Pelviscopy.



Dr. Haas was listed in the Arizona Who's Who 1984, the Who's Who for Business and Professional Women, Best Doctors in America 2003-

2004, and was listed as one of the "Top Docs in Phoenix" for three years. She is a member of the Planned Parenthood Medical Review Committee and has served as a Scottsdale Memorial Health Foundation Board member since 1995. In addition to speaking and presenting at various health-care groups, Dr. Haas holds numerous memberships, such as the American Association of Gynecologic Laparoscopists, the American Fertility Society, the Arizona Medical Association, and the Maricopa County Medical Society.

Tim B. Hunter, M.D. is a tenured professor and Vice-Chairman of the Department of Radiology at the University of Arizona. Previously, he served as chief of staff of Uni-

versity Medical Center and was the founder and first director of the Tucson Breast Center. Featured in Who's Who in Medicine and Healthcare, Dr. Hunter, along with two other physicians, was awarded a patent for a digital mammography apparatus. A



prolific author and speaker, Dr. Hunter is a member of the distinguished Society of Gastrointestinal Radiologists, an organization that limits its membership to those who have published significant works in gastrointestinal radiology.

Dr. Hunter received his medical degree at Northwestern University in Chicago. He completed his internship at Wayne County General Hospital in Eloise, Michigan; his residency in diagnostic radiology at the University of Michigan; and, his fellowship at the University of Arizona in Tucson.

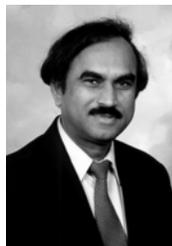
ARIZONA MEDICAL BOARD MEMBERSHIP

Becky Jordan served in the United States Air Force for twenty years. She retired in 1977 with the rank of major. In 1992, Ms. Jordan was elected state representative for District 16, which she held for two terms. While in the State Legislature, Ms. Jordan served as chair of the Natural Resources and Agriculture Committee. During her distinguished military career, she received the USAF Commendation Medal with one Oak Leaf Cluster, the USAF Outstanding Unit Award with three Oak Leaf Clusters, the Republic of Vietnam Campaign Medal, the Vietnam Service Medal with four Bronze Service Stars, and the Meritorious Service Medal. Other honors include the University of Arizona Alumni Association Distinguished Citizen Award and the American Legion Distinguished Legislator Award.



Ms. Jordan received a bachelor of arts in chemistry from Queens College in Charlotte, North Carolina, and a bachelor of science in animal science from the University of Arizona with additional postgraduate coursework in animal physiology.

Ram R. Krishna, M.D. is an orthopedic surgeon who is currently in private practice in Yuma, was formerly the chief of surgery at Yuma Regional Medical Center. Dr. Krishna served as chair of the Yuma Regional Medical Center Board of Trustees and as president of the Yuma County Medical Society. Currently, he is a member of the Arizona Orthopedic Society and the Arizona Medical Association. Dr. Krishna was awarded the Ari-



zona Medical Association's Distinguished Service Award in 2000 for his exceptional work in the community.

He completed his medical degree at Bangalore University Medical College in Bangalore, India, and his internship and a one year residency in general surgery and a four year residency in orthopedics at the University of Massachusetts Medical Center.

Douglas D. Lee, M.D. is a Board certified anesthesiologist practicing in Flagstaff, Arizona. He graduated from the University of Arizona School of Medicine, completed an internship at the National Naval Medical Center in Bethesda, Maryland and a residency at the Naval Regional Medical Center in San Diego, California. From 1980 to 1981, Dr. Lee was a United States Marine General Medical Officer in Okinawa, Japan and he was also a reservist called to serve in the Desert Shield/Desert Storm 1st Marine Division from 1990 to 1991.



In addition to his professional experience, Dr. Lee is a member of the Arizona Society of Anesthesiologists and a member of the American Board of Anesthesiologists. He previously served as the Chairman of Anesthesia for the Flagstaff Medical Center (FMC), President of the FMC Medical Staff, and President of the Arizona Society of Anesthesiologists. He currently serves as a Staff Anesthesiologist at FMC and Managing Partner of Forest County Anesthesia, PC. He is also a Board Member of the FMC Ambulatory Surgery Center and a member of the FMC Credentials Committee.

ARIZONA MEDICAL BOARD MEMBERSHIP

William R. Martin, III, M.D. is an Orthopaedic Surgeon at Canyon Orthopaedic Surgeons, LTD. in Phoenix. He currently serves on the Board of Directors of the Arizona Kidney Foundation and the Dr. Charles E. Gavin Memorial Foundation. Dr. Martin has been a member of the National Association for the Advancement of Colored People since 1973. He is a member of the American Academy of Orthopaedic Surgeons, the American Medical Association, the Arizona Medical Association, the Arizona Orthopaedic Association, the Maricopa County Medical Society, and the Western Orthopaedic Association.



He received his medical degree from the Loyola University of Chicago in Maywood, Illinois.

Dona Pardo, R.N., Ph.D. is a healthcare educator and former faculty member and is currently serving as the continuing education administrator for the University of Arizona Health Sciences Center. She is actively involved in the nursing profession and has received numerous awards, including the Sigma Theta Tau International Medical Award for Excellence in Nursing Journalism and the Sigma Theta Tau, Beta Mu Chapter, Award of Distinction for Excellence in Nursing Education. Dr. Pardo has developed continuing education courses and study modules for nursing students and professional nurses on such topics as mental health, HIV/AIDS, chemotherapy, managed care, and ethics.



Dona Pardo earned her master's degree in nursing from the University of Texas Health Science Cen-

ter at San Antonio and holds a doctorate in higher education from the University of Arizona.

Chris Wertheim has been an executive recruiter with Witt/Kieffer, Ford, Hadelman, Lloyd for twelve years and specializes in recruiting senior management for managed care organizations across the country. She has successfully completed executive search assignments for a broad range of positions including chief executive officers, chief operating officers, chief medical officers and medical directors.



Chris is a current and founding board member of the Institute for Mental Health Research, a board member of Sunnyslope Village Revitalization working for affordable housing, past board chair of the Northside Job Training Center and a past board member of the Sunnyslope Village Alliance. She earned a bachelor's degree in psychology from Kent State University.

BOARD RECOGNITION

Medical board rankings bring national attention to one of the Arizona Medical Board’s most visible functions—its disciplinary actions. While achieving a top ten ranking requires diligence, maintaining that ranking over a period of multiple years takes dedication.

Success does not come easily, nor does it come overnight. It is the goal an agency aspires to and works diligently to achieve. Strategic plans are formed, competent and committed employees are hired, and visionary Board members are appointed. When combined, these factors lead to a gradual and systematic change in an environment that promotes innovation, efficiency of operation, and overall achievement.

This year the Arizona Medical Board was recognized by both the Public Citizen Health Research Group (Public Citizen) and the Federation of State Medical Boards (FSMB) for the number of disciplinary actions taken over the last calendar year. Public Citizen ranked the Board 4th for its serious disciplinary actions and 1st in a composite ranking of actions taken over the last three years. The FSMB also rated the Board 4th for total

number of actions. In the last four years, the Board has consistently ranked among the top ten medical boards in the country.

While disciplinary actions are a sign of a board’s ability to protect the public, continual improvements in the Board’s investigative processes, adequate funding for Attorney General litigators, and support from the agency’s internal systems such as information technology, licensing, and business operations all contribute to the Board’s success. Of greater importance to the public is access to physician information, including Board actions.

Year	Public Citizen Individual Year Ranking	Public Citizen Composite 3 Year Ranking	FSMB Individual Year Ranking
2003	4 th	1 st	4 th
2002	6 th	3 rd	4 th
2001	1 st	5 th	1 st
2000	7 th	18 th	6 th

Public Citizen Health Research Group is a Washington D.C.-based consumer advocacy organization that promotes research-based, system-wide changes in health care policy.

The Federation of State Medical Boards is a national organization representing the 70 state medical boards of the United States and its territories. Acting on behalf of its membership, the Federation’s mission is to continually improve the quality, safety and integrity of health care in the United States through the development and promotion of high standards for physician licensure and practice.

PUBLIC OUTREACH

"I just wanted to take a moment to thank you for this terrific website ... very informative and helpful in attempting to decipher background and historical data with which to make an informed decision on medical care. I have recommended this site to others and they, too, have found it to be most useful."

- AZ Healthcare Provider

"Dr. Barry Cassidy and staff, I don't know if you have seen the news story below, but I just want to send you a BIG THANK YOU."

- Arizona citizen

(In response to news article about Public Citizen ranking)

"Please accept my sincere thanks for all your help. You guys are impressive! And I am grateful for your kindnesses."

-National reporter

Over the years, the Board has made public information freely accessible. Information is provided through website content, newsletters, pamphlets and public speaking arrangements. This commitment to the public has built a firm foundation of trust and assurance between this agency and Arizona citizens. Furthermore, judging by the increased communication between the public and the agency through e-mails, phone calls and website hits, it is evident that the Board's communication efforts are well received.

The following chart demonstrates the total number and types of public information requests the agency routinely receives:

Public Information Requests			
Type of Information Request	FY 02	FY 03	FY 04
Public E-mails	971	1,421	4,669
% of Public E-mails Responded to Within 48 Hours	96	97	100
Physician Profiles Accessed (Internally)	216,700	85,484	70,831
Physician Profiles Accessed (Internally & Externally)	1,624,518	3,196,113	4,024,719
Profiles Accessed Through DocFinder	N/A	N/A	1,462,483

As expected, the number of public information requests from the Board's public e-mail address and website have risen over the last two years. This increase is primarily due to public outreach efforts such as press releases, appearances on local television news shows, and expanded website content.

Maintaining positive media relationships is important to delivering facts and news-worthy events to the public. Over the last year, the agency fielded over 180 requests from media sources and submitted 13 press releases, of which 75% were published in statewide and national media outlets.

TECHNOLOGY

“The public has been asking for this option for years.” - a quote often repeated and a request often fulfilled at the Arizona Medical Board. Technological advances provide services that are easily accessible to the public and systems that streamline Board and agency processes.

Technology has become a major factor in worldwide operational systems. Entire newspaper sections and magazines are devoted to technological advances. For the average agency, deciding which new software program or piece of hardware to purchase requires intense evaluation of that agency's actual needs, the costs involved, and the overall benefit to the consumer. Like these agencies, the Board must make similar decisions when pursuing its technological advances. The examples below show how good decision making has provided the Board measurable benefits to the public and to Board and agency processes.

Physician Search Capabilities

When looking for a specialist, consumers and physician office staff routinely call the Board asking for lists of physicians by specialty in an area close to them. In the past, the only available resource for this information was the Board's annual *Medical Directory and Resource Handbook* produced on CD-Rom. For those users not accustomed to searching through Excel or Access databases, the methodology was far from convenient. In October 2003 the Board developed an expanded search capability whereby consumers can sort through all in-state licensed physicians based on their specialty and office location. From the customized listing, consumers can access and review each hyperlinked physician profile to make an informed healthcare decision.

On-Line Complaint Filing

In December 2003 the Board positioned itself as one of the only medical boards in the country to establish an on-line complaint filing system. In addition to avoiding filling out a complaint form

by hand, consumers now have the ability to submit the form electronically, receive an immediate confirmation receipt and tracking number, and to then track the status of the complaint at a time most convenient to them. Currently, about 10% of all complaints are received electronically. As this service gains public familiarity, the Board estimates that number to rise to about 25%.

The Source

In addition to serving external consumers, technology also enhances internal operations. This year, the Board unveiled its first ever Intranet—an on-line resource. Named *The Source*, the intranet site includes automated agency reports, employee contact information, links to Arizona government resources, and listings of upcoming events.

Automated Voting Software

Capturing a vote properly is essential to adhering to state open meeting laws and to providing the public with a clear record and this is the most difficult task a minute-taker will face during a Board meeting. To assist in this process, the Board developed a web-based system for casting and recording a vote. Using a software program developed in-house Board members can log onto a secure site where they view the motion on the floor. From there, they can cast a vote of aye, nay, abstain or recuse. After all votes are submitted the final voting results are displayed on a screen in the Boardroom for public viewing. Following each Board meeting, results of each vote are archived electronically for easy access in case of a future dispute.

TECHNOLOGY

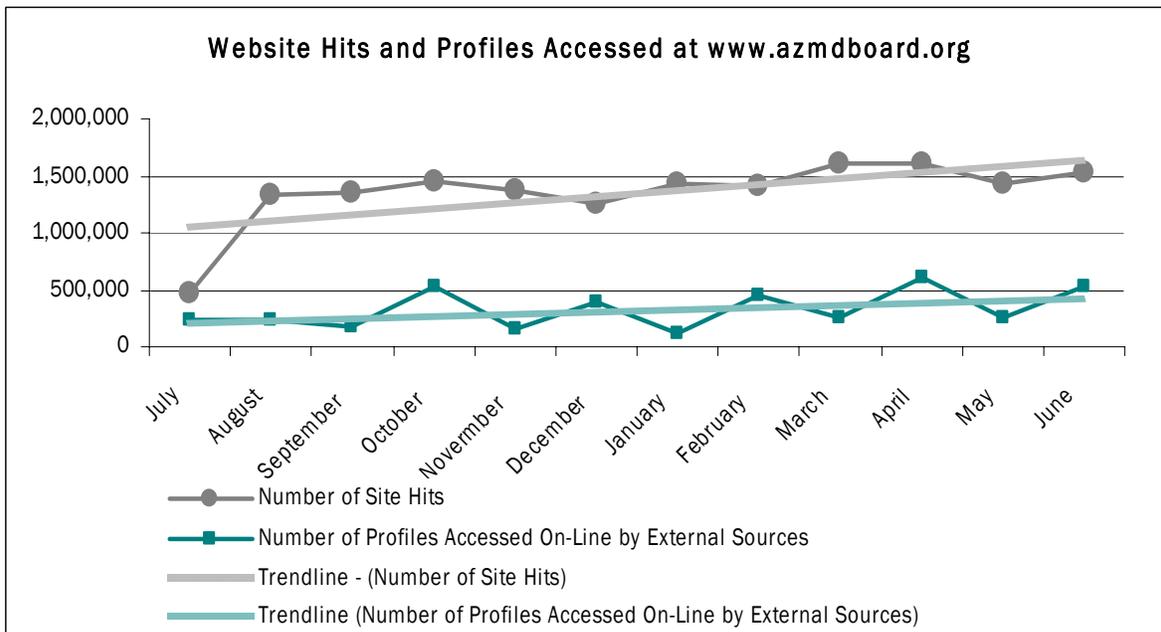
Web-based SIRC Meetings

The Arizona Medical Board has a Staff Investigational Review Committee (SIRC) that meets weekly to review cases before they are forwarded for the Board's review. In part, SIRC serves as a quality control mechanism to ensure the proper materials are given to the Board. During the investigative process, all materials are electronically scanned into the database and saved as individual files. Based on requests from SIRC, the agency's Information Services Division developed a web-based application that allows SIRC members to view all individual files related to a particular case as one document; the same format as presented on CD-Rom to the Board. While reviewing these documents on a plasma screen monitor in a conference room, SIRC members have the ability to edit document titles and captions and hide documents, such as confidential complaints, on-line – without ever having to print out the materials and rescan them under a different bar code category.

Website Statistical Tracking System

The two charts below demonstrate how effective statistical tracking systems can provide the Board feedback about the number of users accessing its website. This information is used to determine what resources consumers seek most. For example, there is a correlation between increased numbers of website hits to Board meeting months and/or times of increased media publicity.

	Number of Site Hits	Number of Profiles
July	472,159	233,526
August	1,330,841	239,799
September	1,350,942	182,563
October	1,459,143	528,924
November	1,367,527	151,181
December	1,251,994	388,923
January	1,431,069	126,949
February	1,411,127	450,375
March	1,607,744	256,988
April	1,612,141	601,385
May	1,437,363	262,308
June	1,521,362	530,967
Total	16,253,412	3,953,888



LICENSING

“Over sixteen thousand physicians currently licensed by the Arizona Medical Board and many more thousands of physicians over the last 100 years have undergone a close level of scrutiny to become the privileged licensees that serve Arizona’s citizens.

Since 1903, seven years before Arizona became a state, the Arizona Medical Board has licensed physicians. In the Board’s first year of establishment, 198 physicians received a license to lawfully practice medicine. For a license fee of \$2.00, the names of these physicians were entered into *The Great Register*, a handwritten book of all physicians licensed to practice here.

Today, the number of licensed physicians exceeds 16,000, with over 10,000 physicians practicing in-state. License fees self-support an agency infrastructure of licensing, investigative, budgetary and administrative functions. Additionally, they also support public outreach efforts in the community and rehabilitative programs for physicians.

Physicians undergo an intense process before

receiving a license. Primary source verifications are conducted on each physician’s medical education and training programs and national queries are performed to determine if the physician previously faced discipline in another state. By using many of the on-line tools available, Board staff now conducts many of these verification processes on behalf of the physician, thus reducing the overall timeframe for licensure.

In the next fiscal year the agency will launch a new web-based database application program in phases, beginning with the Licensing Division. This application program is expected to streamline the licensure process and further decrease the amount of time to process license applications.

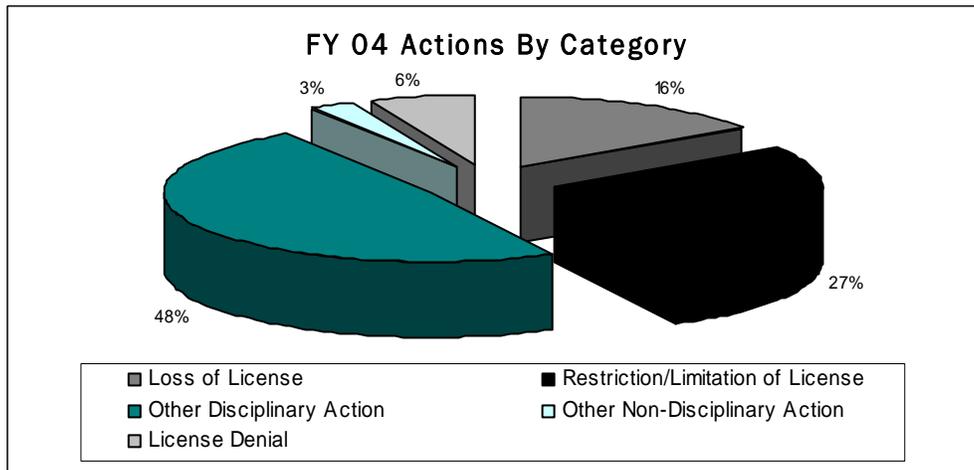
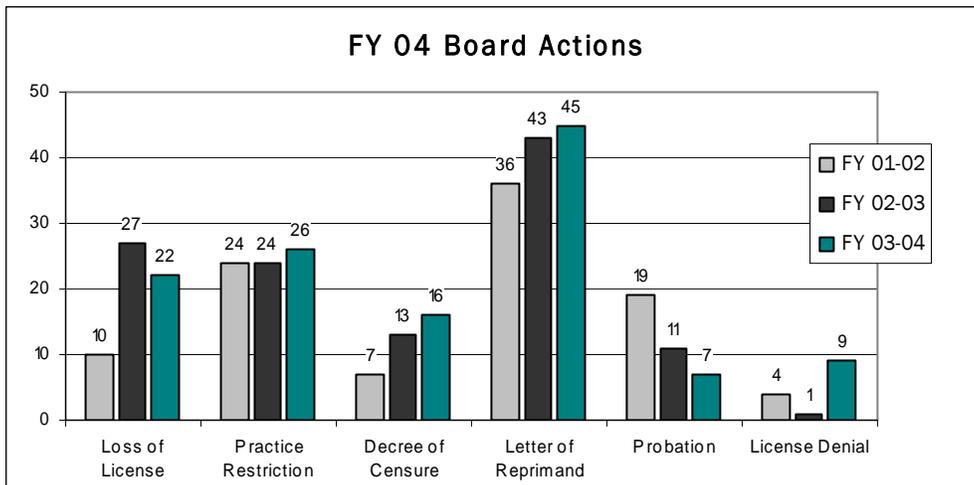
Licenses Issued			
	FY 02	FY 03	FY 04
Licenses Issued	1,018	1,242	1,368
Resident Permits Issued	980	1,427	1,096
Miscellaneous Licenses Issued	76	80	58
Dispensing Certificates Issued	508	328	366
Average Number of Days to Issue a License <i>(Date of receipt to final issue)</i>	120	30	2
Customer Satisfaction Rating	92%	99%	99%

REGULATION

By far, one of the most publicly recognized functions of the Board is its investigation of physicians accused of unprofessional conduct and the subsequent discipline of those licensees who violate the law. Disciplinary actions taken against a licensee remain public for a lifetime and the effect these actions can have on a physician are long-lasting. For that reason, the Board takes all complaints lodged against a physician seriously and the decision to issue discipline is not made without considerable contemplation. In the end, the Board is bound by its charge to protect Arizona's

citizens from the unlawful and incompetent practice of medicine and the actions the Board takes are reflective of that mission.

In the last fiscal year, the Board took 141 actions, including 125 disciplinary and 16 non-disciplinary actions. Of the total number of actions, 27% resulted in a restriction or limitation of a license, 16 % resulted in loss of license, 6% were the result of license denials, 3% were from other non-disciplinary actions and the majority, 48%, were the result of other disciplinary actions.



REGULATION

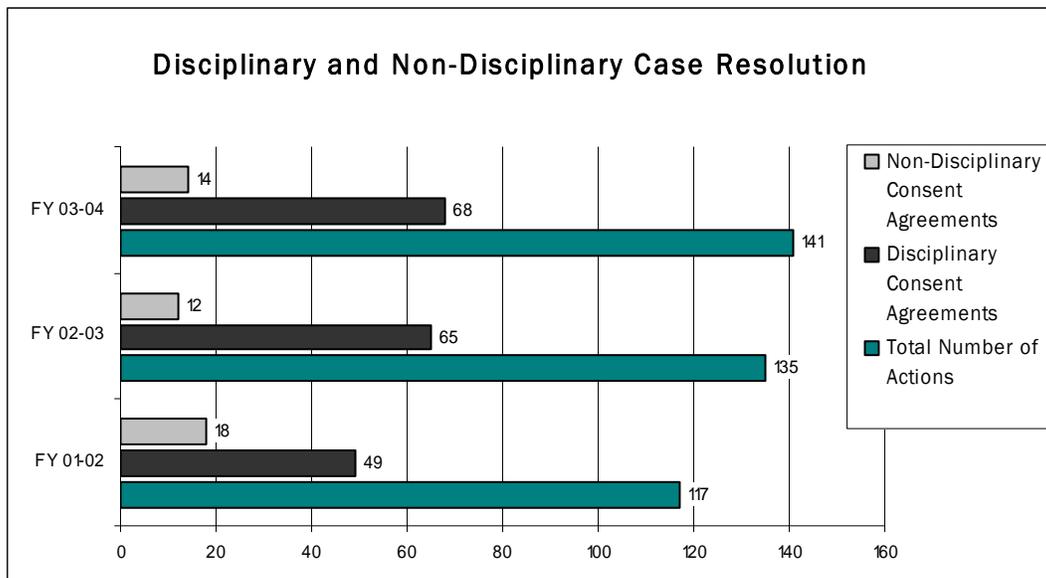
While the Board hears and adjudicates a tremendous number of cases each year, often, physicians choose to sign an agreement to waive the formal adjudication process and accept a disciplinary action. Non-disciplinary agreements are also available under certain circumstances.

Consent agreements may be offered at a number of occasions during the adjudication process. At times, consent agreements are also the end product of a case that has been forwarded for a formal hearing in front of an administrative law judge. Often, before the case goes to hearing, an agreement is reached with the physician, the Attorney General Litigator assigned to the case and the Board. These agreements resolve cases in a manner that is acceptable to all parties involved.

This year 29 cases referred to formal hearing were resolved through a consent agreement. The other 39 disciplinary consent agreements were reached in lieu of a formal interview, as part of an interim practice restriction or were offered di-

rectly by the Board during the course of a formal interview. Additionally, 14 consent agreements for non-disciplinary actions such as practice limitations, were entered into this fiscal year. Overall, about 57% of the Board's total actions are resolved through consent agreements.

The Attorney General's Office is also responsible for expediting many case resolutions. Of the 37 new cases referred to formal hearing, 15 were resolved this year, in addition to 51 resolved cases referred from previous years.



REGULATION

Last year the Board announced a restructuring of its investigative processes by developing Professional Conduct and Quality of Care divisions in its investigative branch. This year the agency expanded on that concept by creating a Quality Assurance Division that ensures investigations and supporting materials are complete before they are forwarded for Board review.

The Board has focused on reducing its investigative timeframes and set a goal to complete investigations within 180 days. This includes investigations into complaints lodged by consumers, statutory actions taken against a physician by a facility, malpractice settlements and judgments, complaints involving moral and ethical lapses and investigations into any prior actions or criminal history reported by a license applicant. Last year, the Board averaged 28 days above its 180 day goal. However, as demonstrated in the first chart, this year's timeframe dropped to 152 days, or 28 days below its goal.

One change in the investigative process had an opposite impact in the Board's statistical progress. As the second chart demonstrates, the number of investigations remaining open at the fiscal year end has more than doubled over the last year. This increase is largely due to a shift in agency policy to open every complaint received, including those that fall outside the Board's jurisdiction and those that are forwarded to other regulatory agencies.

Another important aspect of the Board's investigative process is its compliance monitoring of physicians placed under a probationary order. As the third chart demonstrates, the number of physicians monitored for compliance has remained about the same over the last three years.

There was a decrease this year as many physicians petitioned and were granted termination from indefinite probationary terms. Any alleged violations of a probationary order are immediately brought before the Board for review. Physicians who are found in violation are subject to further disciplinary actions.

Average Days to Complete an Investigation	
Year	Days
2002	226
2003	208
2004	152

Investigations Remaining Open at Fiscal Year End	
Year	Number
2002	626
2003	476
2004	*1,059

*Beginning in FY 04, the Board opened every complaint received.

Compliance Monitoring	
Year	Cases Monitored
2002	221
2003	221
2004	185

BUDGET

Fiscal accountability is essential to the successful management of agency programs. The Board is classified as a 90/10 agency, which means that 90% of all revenue generated through licensing fees and ancillary billing are retained by the agency and the other 10% is returned to the State and is added to the total State budget. Even though the agency is self funded the State appropriates a specified budget each year based on projected agency needs. That money must be managed well so that critical agency operations such as licensing and investigations are supported.

This year the agency's total appropriation dropped from that provided in the prior year. This decrease is due mostly to the end of a one-

time only appropriation for equipment purchases over fiscal years 2002 and 2003 and changes in interagency service agreements.

Furthermore, the agency was also allocated an increase in employee related expenditures. This funding increase was put in place to account for rising employee retirement and health benefit costs accrued by the agency.

Budget Appropriations			
	FY 02	FY 03	FY 04
<i>Full-time employee positions</i>	58.5	58.5	58.5
Personnel services	2,279,600	2,337,000	2,474,100
Employee related expenditures	470,100	498,100	632,700
Professional and outside services	1,091,100	1,199,200	1,026,700
Travel in-state	65,900	65,900	65,900
Travel out-of-state	20,800	20,800	20,800
Other operating expenditures	475,600	511,000	495,000
Equipment	197,000	179,000	37,000
Total	4,600,100	4,811,000	4,752,200
FY 03-04 JLBC Appropriations			

LEGISLATION

Board policy initiatives were introduced into law this legislative session. These new laws increase public protection by clarifying requirements for certain types of practice and by providing a proactive and supportive environment for physicians with health problems that may impact their practices.

Over the last several years, the Arizona Medical Board has gained notoriety for setting goals for progressive policy initiatives and gaining legislative support for enacting them into law. This year was no exception as the Board introduced legislation addressing two notable issues: office-based surgery and physician health.

Office Based Surgery

In 2003 the Board formed a subcommittee to research outpatient surgery centers that are not regulated by the Arizona Department of Health Services. These surgery centers have no guidelines in place for the training of surgery assistants and for the administration of intravenous anesthesia.

The Board agreed to take a two-pronged approach to the subject by first introducing legislation that defined the practice of office based surgery and to make it an act of unprofessional conduct to practice it without adhering to Board rule. Secondly, within the next fiscal year, the Board will work with its stakeholders to develop rules addressing the training of facility personnel, policies for drug supply, storage and administration, and patient selection. The rules will also set minimum standards for operating and emergency equipment and require facilities to have policies in place for the emergency transfer of patients.

These rules are not intended to place undue restrictions on those physicians who routinely

practice within reasonable parameters for patient safety. Rather, they are designed to protect the public from those practitioners who do not place patient care as a priority.

Practitioner Health Program

While many Board programs focus on physicians who violate the law, this year, the Board successfully passed legislation that provides a confidential program for those licensees who have a medical, psychiatric, psychological or behavioral health disorder that may impact that licensee's ability to safely practice medicine or perform healthcare tasks. It is a proactive program for licensees who have not committed an act of unprofessional conduct to receive treatment and take the steps necessary to ensure positive patient relationships.

Within the next year, the Board will begin to establish contracts with other organizations to operate the program. Board staff will have minimal contact with the program's participants and the licensee's involvement in the program will remain confidential to the Board as long as there are no violations of law.

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ARIZONA REGULATORY BOARD OF PHYSICIAN ASSISTANTS MEMBERSHIP

Randy Danielsen, Ph.D., P.A.-C, the Board's **Chairman**, is Dean and former Associate Professor & Chair in the Department of Physician Assistant Studies at the Arizona School of Health Sciences. He is a member of the American Academy of Physician Assistants. Dr. Danielsen serves as an affiliate member of the Arizona Medical Association and the Arizona Osteopathic Medical Association, as well as a member of the American Society of Law, Medicine & Ethics. Dr. Danielsen serves on the Editorial Board of the Clinicians Publishing Group and on the Review Board of the Perspectives on Physician Assistant Education. He received a Masters of Physician Assistant Studies from the University of Nebraska, with specialization in Internal Medicine. Dr. Danielsen is certified by the National Commission on the Certification of Physician Assistants.

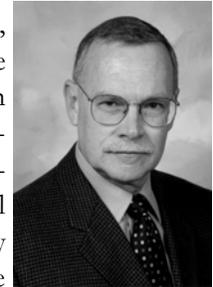


Albert Ray Tuttle, P.A.-C, the Board's **Vice Chairman**, is employed by the Northern Cochise Community Hospital in Wilcox, the Sulphur Springs Medical Center in Wilcox and at a clinic that is managed by Sunsite Hospital in a medically underserved area. He has been a P.A. in Arizona since 1981 and formerly was a medic in the U.S. Army. During the years that he has been in Arizona, he has worked exclusively in family practice in rural settings and in the ER. He currently serves on the City of Safford Planning and Zoning Commission and has served on the Special Olympics and other boards that pro-



vide services for the developmentally disabled and local mental health providers. He is actively involved as a Boy Scout Leader. P.A. Tuttle is a member of the American Association of Physician Assistants, the Arizona Medical Association, and the Arizona State Association of Physician Assistants. P.A. Tuttle has a special interest in the developmentally disabled and in 1998 became certified as a lifestyle counselor for weight control and stress management.

Michael E. Goodwin, P.A. is the founder and owner of Occupational Assessments & Services, an occupational medicine provider in and out of the state of Arizona. He is a licensed physician assistant, receiving his training at the United States Medical Center in Springfield, Missouri and attended the University of Cincinnati residency in occupational medicine. Goodwin is currently a member of the Executive Board, Section on Medical Center Occupational Health for the American College of Occupational and Environmental Medicine. He is also a member of the Adjunct Faculty, Arizona School of Health Sciences and is a member of the Advisory Board for the Arizona Valle del Sol Association of Occupational Health Services. Goodwin is a member of the American Academy of Physician Assistants in Occupational and Environmental Medicine, is a founding member of the Arizona State Association of Physician Assistants, and belongs to the American Academy of Physician Assistants and to the Arizona Medical Association.



ARIZONA REGULATORY BOARD OF PHYSICIAN ASSISTANTS

G. Bradley Klock, D.O. is currently in private practice in Phoenix. He serves as Chairman of the Department of Osteopathic Manipulative Medicine at John C. Lincoln Hospital/Deer Valley, and was former Chief of Staff and Chairman of the Board of Phoenix General Hospital. Dr. Klock is a delegate for the Arizona Osteopathic House of Representatives, as well as an appointed Member of the Board of Governors, American Academy of Osteopathy (AAO) and the Bureau of Experts in Manipulative Medicine (AAO). He is a Board Member of the John C. Lincoln Hospital Foundation and Chairman of the Phoenix General Osteopathic Endowment Fund. He has served the Arizona Osteopathic Medical Association in many capacities since 1991, including President in 2000. Dr. Klock completed a pre-doctoral fellowship in Osteopathic Manipulative Medicine and received his Doctor of Osteopathy from the College of Osteopathic Medicine and Surgery in Des Moines. He is Board Certified in Osteopathic Manipulative Medicine by the American Osteopathic Association. Dr. Klock completed a fellowship in Federal Healthcare Policy through Michigan State and Ohio State Universities and earned Fellowship status in the American Academy of Osteopathy.



James E. Meyer, M.D. is the Medical Director of the Physician Assistant Program and an Associate Professor for the College of Health Sciences at Midwestern University. He is also an Associate Medical Director for Hospice of Arizona. Dr. Meyer received his



Medical Education at the University of Michigan Medical School and completed a medicine internship at the Milton S. Hershey Medical Center of the Pennsylvania State University and an Internal Medicine Residency at the University of Colorado Medical Center. He also completed extensive postgraduate psychotherapy training. He is a Board certified Marriage and Family Therapist and is a Diplomate, American Board of Internal Medicine. He is a member of the American College of Physicians, the American Association for Marriage and Family Therapy, the American Society of Clinical Hypnosis, and the American Academy of Hospice and Palliative Medicine. and Who's Who in Medicine and Healthcare.

Sigmund G. Papko earned his Juris Doctor from the University of Arizona, College of Law. Prior to assuming his current position, he served as a Visiting Attorney for the United States Sentencing Commission in Washington, D.C. and as an Assistant Federal Public Defender for the Federal Public Defender's Office, District of Arizona. Mr. Papko is a member of several professional and civic associations, including the Arizona Attorneys for Criminal Justice and the Association of Federal Defenders, and is the Vice-President, Board of Directors for Toby House, Inc.



ARIZONA REGULATORY BOARD OF PHYSICIAN ASSISTANTS MEMBERSHIP

Anna Maria Prassa founded Executive Stress Busters, Inc. and pioneered the 15-minute in-office massage concept to combat computer and work related injuries. She also opened Natural Day Spa, which is an environment that naturally activates our 5 senses. Anna Marie is a highly trained motivational speaker. She holds a Bachelor of Science Degree, has completed workshops and medical programs at the Touch Research Institute at the University of Miami School of Medicine and has attended an internship program at the University of Arizona. Ms. Prassa has conducted extensive research on Carpal Tunnel Syndrome, Headaches and Temporal Mandible Joint Disorder. She has 17,300 hours in training and over 15 years experience working with the muscular system. Ms. Prassa currently also serves on the Homeopathic Board and the Acupuncture Board. She was recently appointed to conduct a special study of the private investigator and security guard professions. In April 2001, Ms. Prassa sold her businesses for a less stressful life and will be pursuing her speaking career.

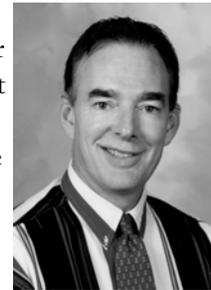


Joan M. Reynolds, P.A.-C is a practicing physician assistant at Mayo Clinic in Scottsdale. She has been employed as a physician assistant for over a decade, serving in primary care settings. Ms. Reynolds earned her degree at the Hahnemann University in Philadelphia, PA and also holds a practical nursing degree and a certificate in the Study of Mammography and Interpretation. She is a past president of the Arizona State



Association of Physician Assistants, served as an Arizona House of Delegates member to the American Academy of Physician Assistants, serves on the Kirksville Center for Osteopathic Medicine Advisory Committee and is an Adjunct Faculty member for Midwestern University in Glendale.

Peter C. Wagner, D.O. is in private practice in family medicine at East Valley Center for Family Medicine and is a member of the clinical faculty at Midwestern University in Glendale. Formerly, Dr. Wagner was the acting clinical director at Sells Indian Hospital in Sells, Arizona, a clinical lecturer at the U of A Medical School, and the vice-chairman and chairman of the Family Medical Department at Mesa General Hospital. Dr.



Wagner has served on Arizona Osteopathic Medical Board and on the Arizona Osteopathic Association Committee on Comprehensive Planning. He is a published author in *Osteopathic Annals* and is the recipient of numerous awards from the Mesa Association for Retarded Citizens and the Tempe Center for Rehabilitation. Dr. Wagner received his D.O. degree from Kirksville College of Osteopathic Medicine in Missouri and completed his residency in family practice at Richmond Heights General Hospital in Ohio. He is a member of the American Osteopathic Association and the American College of General Practice, and is Board Certified in Family Medicine.

ARIZONA REGULATORY BOARD OF PHYSICIAN ASSISTANTS

Barry D. Weiss, M.D., FAAFP is a Professor of Family and Community Medicine at the University of Arizona's College of Medicine. He is the editor of Family Medicine for the Journal of the Society of Teachers of Family Medicine and serves as editor of McGraw-Hill's "20 Common Problems" medical textbook series. He is also a site surveyor for the Accreditation Council for Continuing Medical Education. Dr. Weiss received his M.D. degree from the State University of New York at the Buffalo School of Medicine. Dr. Weiss is certified by the American Board of Family Practice.



LICENSING

From military corpsmen and rural providers to essential figures in healthcare today, physician assistants have played an important and expanding role as America’s health care providers. Today, over 1,000 physician assistants serve Arizona’s citizens in numerous environments.

In the 1960s the concept of physician assistants developed as the need for health care personnel in underserved and rural communities rose. At the same time, former military corpsmen with medical training sought civilian work, but lacked opportunity to enter the physician-dominated health care system. The Arizona Regulatory Board of Physician Assistants was established in 1973 to license and regulate those physician assistants. Throughout the last 30 years, the Board has played an integral part in shaping the system in which physician assistants practice.

For example, last year, new laws went into effect that provided greater prescribing authorities to those physician assistants who met certain licensing requirements. The Board granted over 500 of those prescribing authorities within the first year. While physician assistants do not need

to renew their expanded prescribing authority privileges, they are required to apply for new privileges when they change or add supervising physicians. This year, 208 expanded prescribing authorities were granted.

Also indicative of the increasing responsibilities physician assistants are taking on in the workplace is the growing number of licensees. Within the last year, the physician assistant population has increased by 13%, from 1,042 licensees last fiscal year, to 1,177 licensees this year.

Licenses Issued			
	FY 02	FY 03	FY 04
Active Licenses Issued	182	201	199
Temporary Licenses Issued	45	58	54
Supervision Notifications Processed	462	530	528
Expanded Prescribing Authorities Granted (New)	N/A	514	208

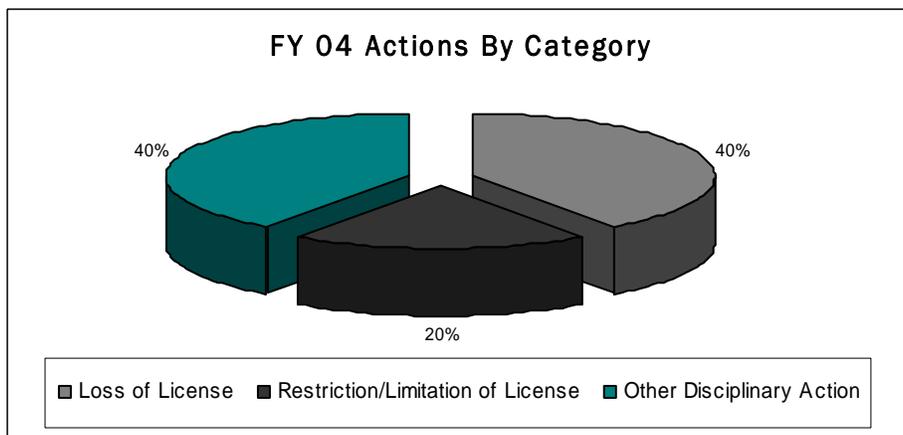
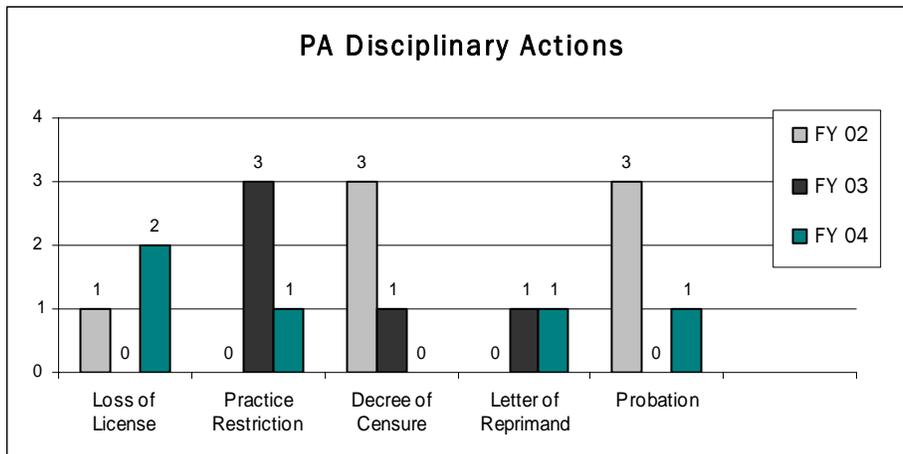
REGULATION

While the Arizona Regulatory Board of Physician Assistants shares its investigative staff with the Medical Board, its actions and enforcement of physician assistants is autonomous. The adjudication of each case is determined on its own merits and Board members are cognizant of the roles they play to protect the public.

The total number of actions taken by the Board in this fiscal year account for less than 1% of the physician assistant licensee population. This number is consistent with actions taken in past years and is also in-line with the ratio of Board actions per population taken by the Medi-

cal Board.

This year, 20% of the Board's actions resulted in a restriction or limitation of license. Another 40% resulted in the loss of a license and an equal 40% of the Board's actions were from other disciplinary actions, such as a letter of reprimand or probation.



TECHNOLOGY & PUBLIC INFORMATION

As physician assistants play an increasingly prominent role in health care delivery to millions of Arizonans, it is important for consumers to take an active interest in the educational and regulatory backgrounds of these health care providers.

To make that information more accessible, this year, the Board created its first website, www.azpaboard.org, dedicated solely to the dissemination of physician assistant information to the public. Similar to the Arizona Medical Board site, the website provides helpful information in the form of pamphlets, frequently asked questions, and hyperlinked statutes and rules. The site also contains important downloadable forms for licensees, such as license and renewal applications, notice of physician supervision applications, and a schedule of fees.

"I really like the new website! Way to go. Looks more professional. I also like that you guys posted the fact that I can prescribe 14 days of Schedule II drugs. That's helpful for pharmacists when they're trying to determine which PAs can or cannot prescribe 14 days worth. Thanks!"

- Arizona physician assistant

Public Information Statistics

Type of Information Request	FY 02	FY 03	FY 04
Public Record Requests	15	35	26
% of Public Record Requests Processed within 10 days	96	100	100
Physician Assistant Profiles Accessed (Internally)	N/A	N/A	235
Physician Assistant Profiles Accessed (Internally & Externally)	N/A	N/A	98,930

To date, the physician assistant website has received 98,930 hits from its consumers (including those profiles accessed internally at the Board's office.) This number is likely attributed to the increased awareness the public has of the Arizona Regulatory Board of Physician Assistants and the role it plays to protect Arizona citizens.

LEGISLATION

For the Arizona Regulatory Board of Physician Assistants it was smooth sailing through last year's legislative session. With the successful passage of House Bill 2600 the Board introduced significant changes to Arizona law books.

Of note, the Board's legislative bill introduced an exemption clause to its physician supervision law. The law now allows licensed physician assistants, in response to a natural disaster or other emergency, to provide medical care at any location without supervision.

The bill also adds a measure of fairness to the public physician assistant profiles provided on the Board's website. In the past the number of dismissed cases against a physician assistant were provided on the profile. However, since dismissed cases represent unproven allegations, this portion of the profile will be removed.

Additionally, House Bill 2600 expands A.R.S. § 32-2501(21)(cc) to make it an act of unprofessional conduct to fail to submit to "other examinations known to detect the presence of alcohol or other drugs." This subsection was expanded as a result of the advances made in substance detection mechanisms. The bill also adds a new subsection to § 32-2501(21) to make it an act of unprofessional conduct to perform healthcare tasks under a false or assumed name in this state.

In past discussions, the Board addressed the issue of supervising physicians working in rural areas of Arizona. Specifically, the Board addressed growing concerns from mid-level practitioner groups in rural areas that often have difficulty arranging weekly face-to-face meetings with supervising physicians and physician assistants who work in nearby cities. These meetings often require extensive travel time and can force a facil-

ity to close its doors to the public while the two parties meet.

It is the Board's intent to make quality health-care services available in rural areas without jeopardizing patient safety. As a result, the Board agreed to direct staff to research methodologies used by other states, such as video communications and electronic medical records, that provide acceptable solutions to address this issue. The Board will also solicit feedback from other interested parties to ensure a reasonable compromise can be met.

Following the research phase of this issue the Board will work toward amending its current rule regarding physician assistant supervision requirements or pursue statutory changes.