

# NSBOM NEWSLETTER

Nevada State Board of Osteopathic Medicine, 901 American Pacific Dr., Unit 180, Henderson, NV 89014

July, 2012 Volume 7

## What you need to know about our laws . . .

### ***IN THIS ISSUE, WE ARE REPEATING SOME REGULATIONS AND STATUTES AS MANY LICENSEES ARE STILL NOT AWARE...***

NAC CHAPTER 633 contains the Nevada laws pertaining to osteopathic physicians and physicians' assistants and can be found on the Board's website. [www.bom.nv.gov](http://www.bom.nv.gov). In a continuing effort to assist the Board's licensees, you will find an unofficial version of NAC chapter 633 on the website. This version contains the 2007 and 2009 revisions to the regulations. These revisions have been adopted by the Board and approved by the Legislative Commission. The Legislative Counsel Bureau has now codified the regulations. This can be found on our website under "Laws and Regulations".

If you wish to view other applicable statutes and regulations, they can be found on the Legislature's website, [www.leg.state.nv.us](http://www.leg.state.nv.us).

### **National Board of Osteopathic Medical Examiners launches new newsletter -**

NBOME has launched a new quarterly newsletter, [\*The Osteopathic Examiner\*](#), to provide information about the NBOME's many activities in the arena of assessment for osteopathic competencies and related health care professions.

### **INSIDE THIS ISSUE**

Changes in the laws  
Actions by the Board



### **NSBOM BOARD MEMBERS**

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*Executive Director*  
Tammy Sine

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### **REMINDER: NRS 633.469 Supervising osteopathic physicians: Requirements of supervision**

1. A supervising osteopathic physician shall provide supervision to his or her physician assistant continuously whenever the physician assistant is performing his or her professional duties.
2. **Except as otherwise provided in subsection 3**, a supervising osteopathic physician may provide supervision to his or her physician assistant in person or by telecommunication. When providing supervision by telecommunication, a supervising osteopathic physician may be at a different site than the physician assistant.
3. **A supervising osteopathic physician shall provide supervision to his or her physician assistant in person at all times during the first 30 days that the supervising osteopathic physician supervises the physician assistant.**

Go to [www.bom.nv.gov](http://www.bom.nv.gov) to read in full...

### **Do you supervise a PA-C or an APN?**

• Physician assistants must be licensed with the Osteopathic Board in order to be supervised by an Osteopathic Physician. You can contact the Board to confirm the PA is licensed and in good standing. All physician assistants and/or APNs and their supervising physicians MUST sign a supervising agreement form and mail it into the Board office.

REMEMBER YOU MUST NOTIFY THE BOARD IN WRITING WITHIN 10 DAYS OF TERMINATING AN AGREEMENT WITH A P.A. or A.P.N.

*Continued on next page*

## DUIs are reportable offenses...

NRS 633.511 Grounds for initiating disciplinary action. [Effective January 1, 2012.]

17. Failure by a licensee or applicant to report in writing, within 30 days, any criminal action taken or conviction obtained against the licensee or applicant, other than a minor traffic violation, in this State or any other state or by the Federal Government, a branch of the Armed Forces of the United States or any local or federal jurisdiction of a foreign country.

## So what has your Board been doing lately . . .

The statistics contained on this page indicate NSBOM and staff have not been greatly impacted by the sluggish economy and is still showing signs of a more active Board. Also, please note the NSBOM board meetings are being conducted on the 2<sup>nd</sup> Tuesday of each month at 6pm. There is no meeting in July.

### **.MANY LICENSEES ARE STILL FORGETTING ABOUT THAT "PESTY" REPORTING STATUTE**

**(NRS 633.527)** . . . Physicians and physician assistants are required to report to the Board when they are served with a summons and complaint in a medical malpractice case, as well as report any type of a disposition of that lawsuit, and whether that matter is referred to mediation or arbitration. Licensees are mandated to report such information within 45 days of notice. Physicians & Physician Assistants may be fined up to \$5,000 per violation of this statute.

## HAVE YOU HEARD?

Check out the following stats pertaining to NSBOM's licensees per fiscal year (July 1 through June 30<sup>th</sup>):

<b>Licenses</b>	<b>2009/10</b>	<b>2010/11</b>	<b>2011/12</b>	<b>2012/2013</b>
D.O.	742	774	808	820
P.A.	58	66	77	77
Special	198	220	190	190
Inactive	65	73	81	81
DO Special		4	3	3
Temporary		2	2	2

<b>Discipline</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>
Settlements	32	72	15	3
Hearings	72	0	0	1
License Surrender	1	1	1	0
License Suspension	1	2	3	1
License Denial	1	0	0	0
Public Reprimands	2	0	0	0
Private Letters of Warning		74	26	9
Probation		1	2	3

(Please note, the Board was only given the authority to write private letters of warning by the 2009 Legislature.)

### REMINDER: CME REQUIREMENTS

We have had a lot of calls regarding CME requirements. These requirements have not changed and are as follows: DOs need proof of 35 credits with 10 of them AOA category 1A or AMA category 1. PAs need 20 hours of CME. **CMEs must be taken in the calendar year January 1, 2012 thru December 31, 2012. If you are included in the 33% CME audit, CME proof must be received before your license renewal is approved and your licensee card is mailed.**

### Senate passes Food and Drug Administration Safety and Innovation Act

On Thursday, the U.S. Senate passed its version of S. 3187, the Food and Drug Administration Safety and Innovation Act. Three amendments were passed of interest to state medical boards. Sen. Joe Manchin's (D-WV) amendment classifies any substance containing hydrocodone as a schedule II drug. Sen. Rob Portman's (R-OH) amendment, the Interstate Drug Monitoring Efficiency and Data Sharing Act of 2012, directs the U.S. Attorney General to establish national interoperability standards to facilitate the exchange of prescription information across state lines by states receiving grant funds under the Harold Rogers Prescription Drug Monitoring Program. Sen. Portman's other amendment, the Synthetic Drug Abuse Prevention Act of 2012, adds synthetic drugs to the Schedule 1 classification of the Controlled Substances Act. The House of Representatives is expected to vote on its version of the bill later this summer.

There is a New Campaign and Hotline to Combat Illegal Medical Activity in Nevada  
To download campaign materials visit:

<http://www.unr.edu/latinocenter/medicosclandestinos/english/materials.html>

The awareness campaign has multiple components. Bilingual posters and brochures will be distributed across the state at various businesses and to targeted organizations. The brochure provides information about unlicensed doctors, how to detect a certified physician and where to go to get help or additional information. The brochure is meant to give people the knowledge they need to make an informed decision when choosing a physician or undergoing a medical procedure. Another important component of this campaign is the Community Health Resource List which is available on our website and it includes what we believe to be a thorough list of health-related resources across the state.

## ***IMPORTANT INFORMATION FROM THE PHARMACY BOARD***

### **“Someone has Been Fraudulently Using My Prescription Pads. What Do I Do Now?”**

Unfortunately we at the Board of Pharmacy get this question several times a week from practitioners. So, what do you do when you discover that this has happened in your practice? Here are our suggestions:

**First**, call the Board of Pharmacy. Let us know what has happened. We will direct you on how to handle the situation. We can be reached at (775) 850-1440.

**Second**, call the Prescription Controlled Substance Abuse Task Force so that you can file a hotline report that will be sent by fax blast to all pharmacies in your area of Nevada alerting them to the fraudulent prescriptions and your cooperation to personally confirm all your controlled substance prescriptions. The Prescription Controlled Substance Abuse Task Force can be reached at (775) 687-5684.

**Third**, obtain your practice profile from the Task Force and review your practice profile to help identify those fraudulent prescriptions that may have already been filled by pharmacies. We ask that only the practitioner confirm the controlled substance prescriptions, as the practitioner needs to know how large the fraud is.

**Fourth**, we encourage you to file a police report. The police may or may not be able to help but you the practitioner are a victim of identity theft. Somebody unknown or unauthorized by you is using your identity through your DEA number to unlawfully obtain controlled substances. If the police come asking for a statement from you in the event that someone who has illegally obtained controlled substances in your name has harmed himself or herself or somebody else and the pills are traced back to a prescription that you “allegedly” wrote and this is not your patient, it will greatly facilitate your protection if you share the police report number that you obtained when you filed your police report.

If you have not yet been the victim of somebody fraudulently using your DEA or CS number, good for you. We would ask that you assess your practice now – before anything bad has happened – to best protect yourself from future fraudulent misuse of your identity. Following are a few tips for you to consider:

**First**, as a DEA and Nevada CS registrant, you have an obligation to protect your prescription pads to make sure that they are secured and not left unattended so patients and staff members can steal them. Keep these locked up.

**Second**, never – and we mean NEVER – sign blank script pads. It is not only illegal, but it also invites mischief (we have seen it time and again).

**Third**, occasionally check your practitioner profile through the Task Force just to make sure that you recognize the prescriptions that are being filled in your name. Often patients will seek and obtain unauthorized refills or they may be originating prescriptions in your name in addition to those that you actually authorized. Some minutes spent monitoring your practitioner profile may well protect you from much more hassle later on.

We are seeing more criminal activity regarding prescription controlled substances in Nevada. Nevada has fraud rings at work that accrue DEA registration numbers and then take over a practitioners identify. Often (more often than you would like to think), a practitioner’s office staff member who calls in the prescriptions for a practitioner will also call in prescriptions for friends and family who are not patients of the practitioner. We have seen some extraordinary case of fraud this past year with telephone lines being intercepted after hours and fraud rings setting up their own secure systems complete with secure paper etc.

But the simple act of locking up your script pads will help keep your staff and patients honest and your practice trouble free. And of course, get signed up with the Task Force and monitor your practice profile. Only you know who your patients are, the type of medications that are prescribed, and the quantities you write for. This is just common sense advice. But if you need help just call us because we are always here to help you, the practitioner.