



Regulating the Practice of Medicine

Medical Error Task Force

September 25, 2023

Overview

- Physician Licensure Process
- Continuing Medical Education
- Mandatory Report Obligations
- Licensee Disciplinary Procedures
- Compliance Data

Board of Medicine

Membership of the Board		
Five Allopathic Physicians	Two Osteopathic Physicians	Three Members of the Public

- Appointed by the Governor
- Confirmed by the Senate
- Charged with Protecting the Public Health, Safety, & Welfare

**Every Physicians has an Ethical
Obligation to Ensure Safe
Medical Practice in Our State**



Physician Licensure

- Iowa Code §148 & IAC 653-9 & 653-10
- Establish Minimum Qualifying Standards
- Ensure Regular Review & Renewal Processes
- Impose Requirements for Continuing Education
- Licensee Information is Publicly Available



Physician Licensure

Minimum Qualifications

American Medical Graduates

1. At least 21 years of age.
2. Hold a medical degree from an accredited educational institution.
3. Have successfully completed at least one year of postgraduate training in an accredited, hospital-affiliated program in the US or Canada.
4. Have passed one of the nation multi-part medical licensure examinations:

USMLE	NBME	FLEX	NBOME	COMLEX	LMCC
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Physician Licensure

Minimum Qualifications

International Medical Graduates

- At least 21 years of age.
- Complete an international medical training program & meet one of the following:

A	Hold a valid ECFMG certificate (<i>International Accreditation</i>)		
B	Successfully complete a one-year fifth pathway program (<i>Supplemental US-Based Training</i>)		
C	Successfully pass US, Canadian, or FSMB licensing exam	Complete three years of postgraduate training at an approved training program	Complete five years of active practice in US or Canada without license restriction
D	Successfully pass US, Canadian, or FSMB licensing exam & hold board certification	Complete five years of active practice in US or Canada without license restriction	

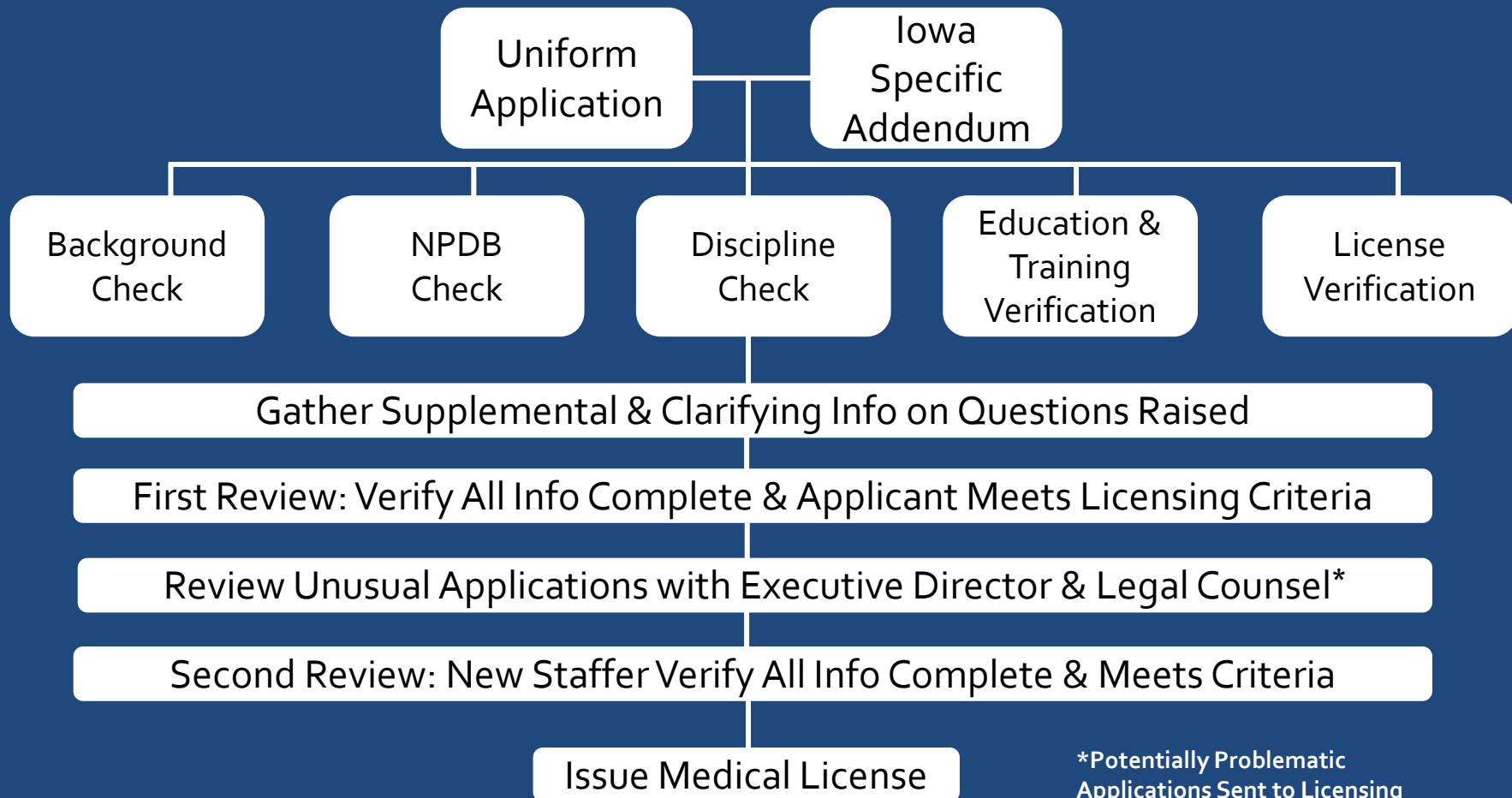
- Have successfully completed at least two years of postgraduate training in an accredited hospital-affiliated program in the US or Canada.
- Have passed one of the nation multi-part medical licensure examinations:

USMLE	NBME	FLEX	NBOME	COMLEX	LMCC
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Physician Licensure

Minimum Qualifications



*Potentially Problematic Applications Sent to Licensing Committee of the Board for Review

Physician Licensure

Board Review

Licensure Committee

Reviews issues including false information on the application, issues in training, criminal history, malpractice claims, substance abuse, competency, physical or mental illness, or professional disciplinary history.

Committee Actions					
Request Applicant Appearance	Request Competency or Behavioral Evaluation	Refer for Board Investigation	Recommend Unrestricted Licensure	Recommend Restricted Licensure	Recommend Licensure Denial

Common Restrictions			
Practice Restrictions	Prescribing Restrictions	Worksite Monitor	Follow Evaluation Recommendations

Continuing Medical Education

- 40 hrs Required Every License Renewal (2 years)
 - ABMS or AOA Board Certification Equivalent to 50 hrs CME
- Required Content:
 - 2 hrs/3 yrs: Identifying & Reporting Child Abuse *(If Regularly Treats Children)*
 - 2 hrs/3 yrs: Identifying & Reporting Dependent Adult Abuse *(If Regularly Treats Adults)*
 - 2 hrs/2 yrs: CDC Opioid RX Guidelines *(If Prescribed Opioids in Previous Licensure Cycle)*
 - 2 hrs/5 yrs: End-of-Life Care *(If Regularly Provides Direct Care to Actively Dying Patients)*



Mandatory Reporting Obligations

Iowa Administrative Code 653-22

- Every Adverse Judgement or Settlement of a Claim
- Wrongful Acts or Omissions by Another Licensee
- Licensure Discipline in Another Jurisdiction
- Child & Dependent Adult Abuse
- Hospital Disciplinary Actions Impacting Credentials

**Reporting
Must Occur
Within 30
Days**



Mandatory Reporting Obligations

Wrongful Acts or Omissions

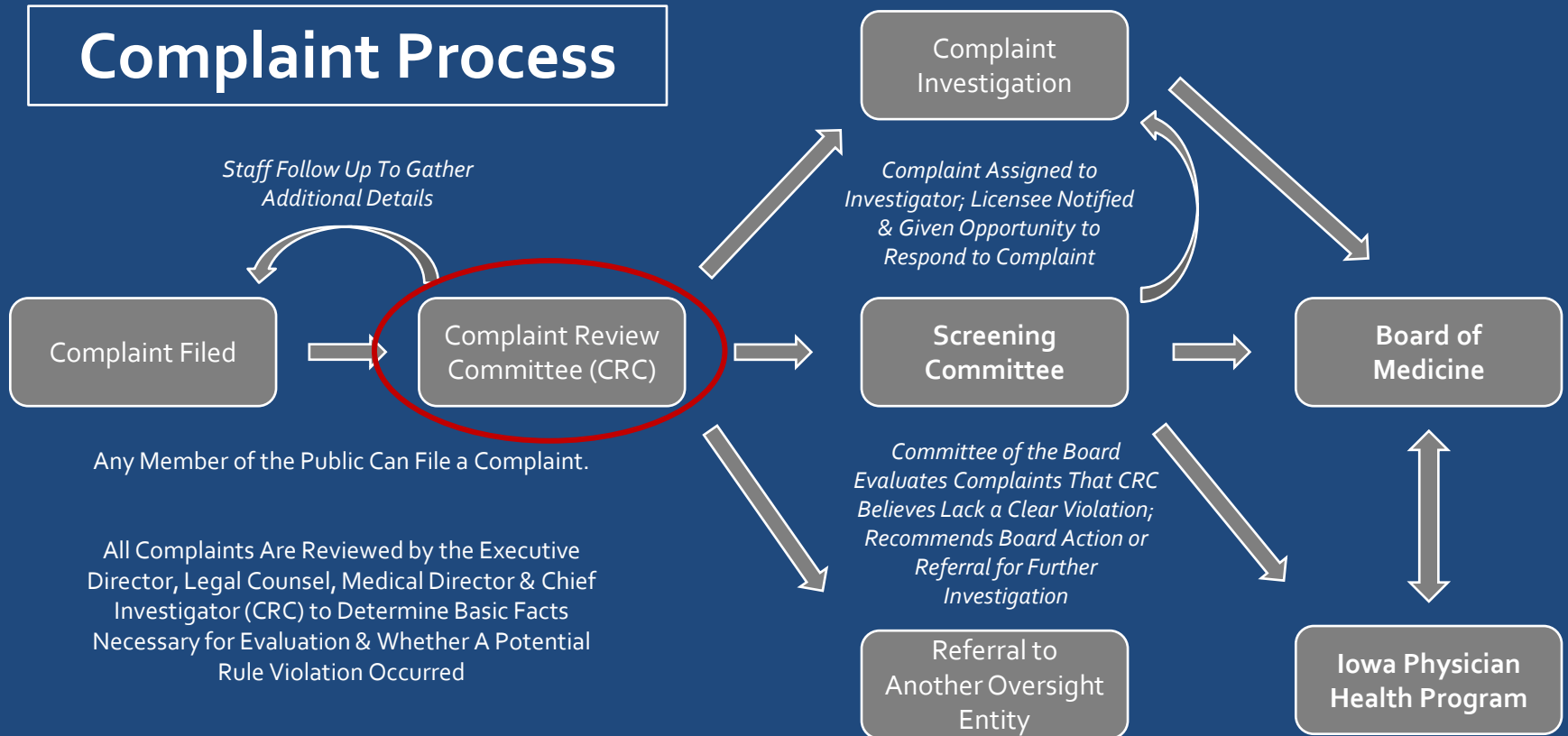
IAC 653-22.2

- **Knowledge**: Personal Observation, Reliable or Authoritative Source, or Circumstances Causing Licensee to Believe Reportable Incident Occurred

- **Reportable Conduct**: Acts or Omissions That Meet One of the Following:
 - 1) Would be Grounds for Board Discipline
 - 2) Constitute Negligence
 - 3) Demonstrate an Inability to Practice Medicine
 - a) Competently
 - b) Safely
 - c) Within the Bounds of Medical Ethics



Licensee Disciplinary Procedures



Any Member of the Public Can File a Complaint.

All Complaints Are Reviewed by the Executive Director, Legal Counsel, Medical Director & Chief Investigator (CRC) to Determine Basic Facts Necessary for Evaluation & Whether A Potential Rule Violation Occurred

Complaints Involving a Licensee Under Another Board's Jurisdiction or Under the Oversight of Another Entity are Referred for Evaluation by That Body

Licensee Disciplinary Procedures

Complaint Review Committee

1) Does Complaint Contain Sufficient Information to Evaluate Situation?

- If No, Follow Up with Complainant for More Info

2) Does The Board Have Jurisdiction?

- In No, Refer to Proper Oversight Body or Close Case

3) Can a Potential Rule or Statutory Violation be Identified?

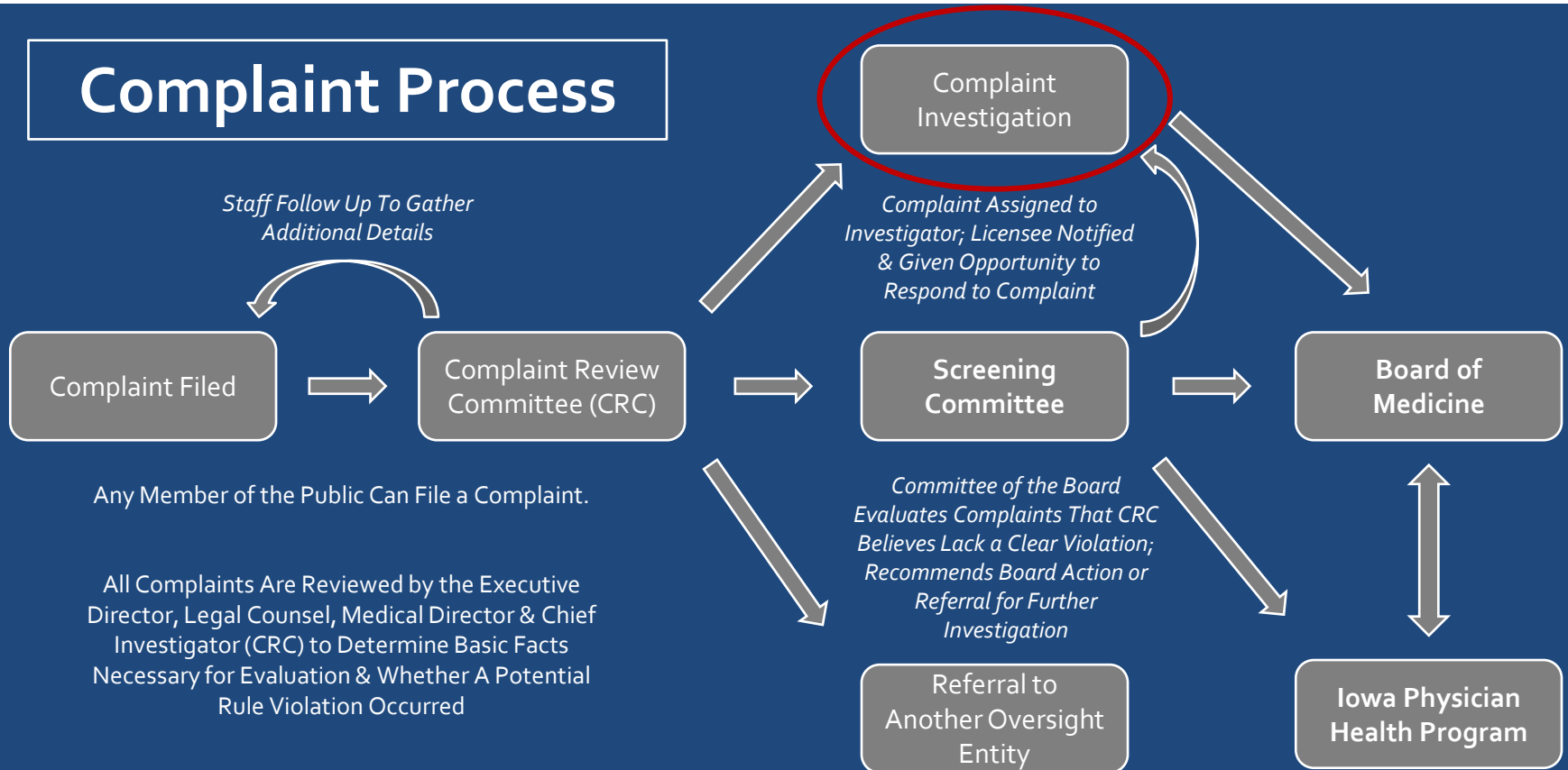
- In No, Refer to Screening Committee for Possible Closure

4) Should Case be Referred to Iowa Physician Health Program?

- Cases Can Run Parallel Paths of Board & IPHP Involvement



Licensee Disciplinary Procedures



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Licensee Disciplinary Procedures

Investigations

1. Compile Licensee's Complaint History
2. Obtain Medical, Personnel, and/or Facility Records
3. Interview Complainant, Licensee, Witnesses, and Others
4. Consult with Other Regulatory Bodies *(e.g., Other Boards, Federal Agencies, etc.)*
5. Consult with Board Legal Counsel & Medical Director
6. Inquiry Letter to the Licensee
7. Compile Investigative Report for Board Review

Elements of an Investigation
Look Different
Depending on
Nature of Case



Licensee Disciplinary Procedures

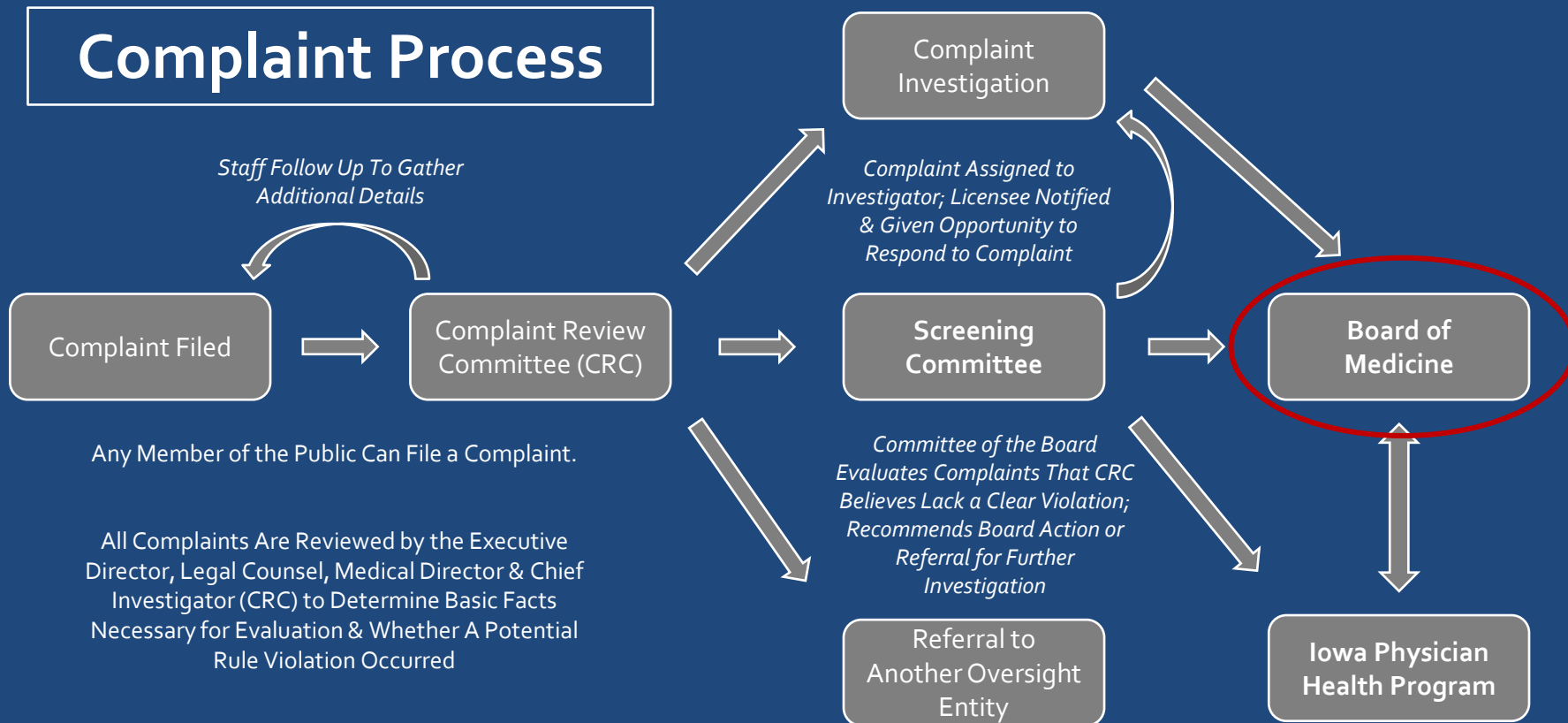
Investigative Materials

- Licensee Basic Demographic Info (*Practice Location, Specialty, Licensure Info, etc.*)
- Complaint & Board Action History
- Current Complaint
- Summary of Staff Investigation
- Licensee Response to Inquiry Letter
- Recordings of Interviews & Any Medical Images Obtained
- Records, Documentation & Correspondence Compiled During Investigation

Typical Materials
Range from a
Few Hundred to
a Few Thousand
Pages Per Case



Licensee Disciplinary Procedures



Licensee Disciplinary Procedures

Board Deliberations

- Three Board Members Assigned to Present Each Case
- Assigned Members Lead Board Discussion
- Board Staff & Legal Counsel
 - Answer Board Questions
 - Provide Historical Context for Similar Cases
 - Outline Legal Thresholds for Disciplinary Action
 - Seek Clarity on Board Requests & Directives for Action



Licensee Disciplinary Procedures

Medical Ethics

IAC 653-13.20

- AMA Code of Medical Ethics & AOA Code of Ethics Utilized by Board as Guiding Principles for Practice of Medicine in Iowa
- Codes Cover Broad Array of Practice Topics Including Informed Consent, Prescribing Practice, Innovation in Medical Practice, & Promoting Patient Safety
- Broadly Constructed to Ensure Applicability in Diverse Specialty and Practice Settings



Licensee Disciplinary Procedures

Promoting Patient Safety

AMA Ethical Opinion 8.6

In the context of health care, an error is an unintended act or omission or a flawed system or plan that harms or has the potential to harm a patient. Patients have a right to know their past and present medical status, including conditions that may have resulted from medical error. Open communication is fundamental to the trust that underlies the patient-physician relationship, and physicians have an obligation to deal honestly with patients at all times, in addition to their obligation to promote patient welfare and safety. Concern regarding legal liability should not affect the physician's honesty with the patient.

Board Tasked with Interpreting
Subjective Term Based Upon
Facts of the Case



Licensee Disciplinary Procedures

Potential Board Actions:

- 1) Dismiss Complaint & Close Case Without Action
- 2) Close Case & Issue a Confidential Letter of Education or Letter of Warning to Licensee
- 3) Refer to the Iowa Physician Health Program For Evaluation & Potential Participation in Program
- 4) Continue Investigation:
 - Refer Case for Further Investigation
 - Refer Case to Peer Review for Expert Opinion, or
 - Order Licensee to Complete a Confidential Evaluation
- 5) Request Legal Director seek a Settlement with Licensee; Settlements are Approved by the Board & Become Public Information
- 6) File a Public Statement of Charges & Refer Case for Prosecution
- 7) Suspend Some or All of Licensee's Privileges to Practice & Order a Hearing



Licensee Disciplinary Procedures

Disclosure of Investigative Information

Iowa Code §272C.6

“...all complaint files, investigation files, other investigation reports, and other investigative information in the possession of a licensing board or peer review committee acting under the authority of a licensing board or its employees or agents which relates to licensee discipline are privileged and confidential...”

- **Investigative Materials May be Disclosed to Other Appropriate Licensing Boards in Iowa or Other States, and Law Enforcement**
- **Materials & Contested Case Record Must be Shared with a Licensee if Board Action is Appealed in District Court**
- **Final Decision & Finding of Fact by the Board is Public Record**



Licensee Disciplinary Procedures

Disclosure of Investigative Information

Calcaterra v. Iowa Board of Medicine

- Interpreted Iowa Code §272C.6(4)(a)
- Halted Long-Standing Board Practice of Summarizing Allegations Against a Licensee at the Time of Filing Disciplinary Charges
- Court Ruled Matters Asserted Cannot be Released Until a Settlement Has Been Reached or the Board Issues a Decision Following a Contested Case Hearing
- Board Filed Legislation in 2021 to Restore Public Notice at Time of Filing Disciplinary Charges; Did Not Advance



Compliance Data

	2022	2016-2022 Avg.
Total Complaints Filed	674	616
Complaints Investigated	205	320
Public Discipline	22 Licensees	18 Licensees
Non-Disciplinary Action	54 Licensees	62 Licensees

Non-Disciplinary Action
Includes Letters of Education
& Letters of Warning



Compliance Data

2022 “Medical Error” Complaints*

72.8%

Improper Pain Management	Inappropriate Prescribing	Inappropriate Treatment	Competency
Wrong-Site Surgery	Excessive Testing or Treatment	Practice Harmful to the Public	Misdiagnosis
Questionable Prescribing Practice	Quality of Care	Malpractice Suit	Diversion

*Categories Most-Likely to Contain an Allegation of a Medical Error





Questions?

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