

## ***Part 1 – Agency Profile***

### **Agency Overview**

Established in 1892 the Idaho Board of Medicine has served to protect the public through licensure and regulation of medical professions. The Board was under the Department of Law Enforcement until 1949.

The Idaho Board of Medicine licenses allopathic and osteopathic physicians, physician assistants, dietitians, athletic trainers, respiratory therapists and limited permit polysomnographers. The Board registers supervising and directing physicians for physician assistants, cosmetic and laser personnel and athletic trainers. The Board also registers medical interns, externs, residents and trainees in the various professions. The Board investigates complaints and provides for discipline and rehabilitation of regulated professions.

The Board provides representatives for advanced practice nursing advisory committee and emergency medical services physician commission.

As a function of the Idaho court system the Board provides for pre-litigation screening panels as requirement for medical malpractice suits against physicians and hospitals in Idaho. Enacted in the mid-1970's this requirement provided no additional appropriation to provide the services required.

The Board functions with four licensing boards, the committee for professional discipline and physician assistant advisory committee. The allied health boards and committees advise and make recommendations to the Board of Medicine in matters of licensure and discipline of their respective professions. The Committee on Professional Discipline makes recommendations to the Board of Medicine regarding physician discipline.

Board of Medicine members are appointed by the Governor. Committee on Professional Discipline members and allied health board members are appointed by the Board of Medicine.

The Board's offices are located on Westgate Drive in Boise. The Executive Director is hired by the Board of Medicine. The Board has an associate director, an in-house counsel, and contract prosecuting attorney.

The staff for discipline includes three quality assurance specialists (registered nurses), a compliance monitor and an investigative assistant who performs administrative tasks for the discipline staff. Licensing has a licensing manager for physician licensing and a manager for allied health and one member who divides her time between licensing and pre-litigation. Pre-litigation requires one full time administrative assistant and the half time assistance mentioned earlier. One financial technician performs the bookkeeping functions for the Board. A receptionist completes the staff.

### **Core Functions/Idaho Code**

The core functions of the Board include licensing, discipline, and pre-litigation. Statutory authority is as follows for each of the professions regulated:

#### **Title 54**

**Physicians and Physician Assistants** Chapter 18 54-1802. **PURPOSE.** Recognizing that the practice of medicine is a privilege granted by the state of Idaho and is not a natural right of individuals, the purpose of this chapter is to assure the public health, safety and welfare in the state by the licensure and regulation of physicians, and the exclusion of unlicensed persons from the practice of medicine.

**Dietitians** Chapter 35 54-3501. **PURPOSE.** The legislature finds and declares that the provision of medical and therapeutic nutritional services affects the public health, safety, and welfare. The legislature further finds that it is in the public interest to aid in the provision of medical and therapeutic nutritional services of high quality to the people of Idaho. To aid in fulfilling these purposes, this chapter provides for the licensure and regulation of dietitians within the state of Idaho.

**Athletic Trainers** Chapter 39 54-3901. LEGISLATIVE INTENT. In order to promote the public health, safety, and welfare, to promote the highest degree of professional conduct on the part of athletic trainers, and to assure the availability of athletic trainer services of high quality to persons in need of such services, it is the purpose of this chapter to provide for the registration of persons offering athletic trainers services to the public

**Respiratory Therapist and Polysomnography Permits** Chapter 43 54-4302. LEGISLATIVE INTENT. In order to promote the public health, safety, and welfare; to promote the highest degree of professional conduct on the part of persons providing respiratory care to the public; and to assure the availability of respiratory care services of high quality to persons in need of such services, it is the purpose of the provisions of this chapter to provide for the licensure and regulation of persons offering respiratory care services to the public.

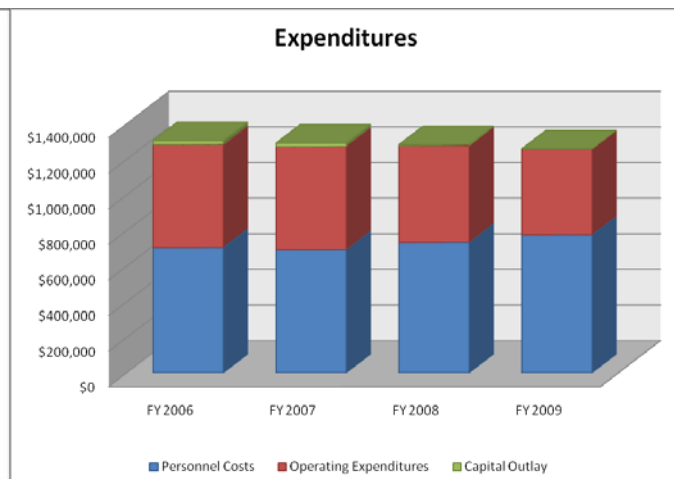
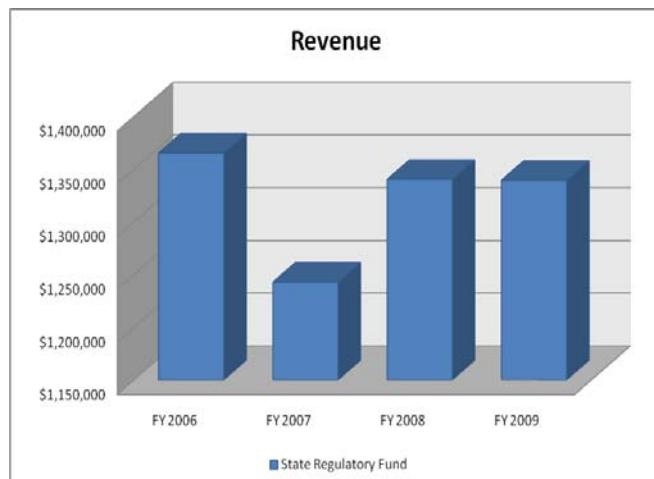
**Medical Malpractice 6-1001.** The Idaho state board of medicine, in alleged malpractice cases involving claims for damages against physicians and surgeons practicing in the state of Idaho or against licensed acute care general hospitals operating in the state of Idaho, is directed to cooperate in providing a hearing panel in the nature of a special civil grand jury and procedure for pre-litigation consideration of personal injury and wrongful death claims for damages arising out of the provision of or alleged failure to provide hospital or medical care in the state of Idaho, which proceedings shall be informal and nonbinding, but nonetheless compulsory as a condition precedent to litigation. Proceedings conducted or maintained under the authority of this act shall at all times be subject to disclosure according to chapter 3, title 9, Idaho Code. Formal rules of evidence shall not apply and all such proceedings shall be expeditious and informal.

**Title IV of Public Law 99-660-** The Health Care Quality Improvement Act of 1986-requires state licensing boards, hospitals and other entities to report certain licensing and discipline actions to a national database.

**Public Law 104-191-** The Health Insurance Portability and Accountability Act of 1996- requires the reporting and disclosing of certain actions to combat fraud and abuse in health insurance and health care delivery

## Revenue and Expenditures

Revenue	FY 2006	FY 2007	FY 2008	FY 2009
State Regulatory Fund	\$1,365,200	\$1,242,700	\$1,340,200	\$1,339,400
<b>Total</b>	<b>\$1,365,200</b>	<b>\$1,242,700</b>	<b>\$1,340,200</b>	<b>\$1,339,400</b>
Expenditure	FY 2006	FY 2007	FY 2008	FY 2009
Personnel Costs	\$702,700	\$691,000	\$732,200	\$774,400
Operating Expenditures	\$579,000	\$579,300	\$543,800	\$483,100
Capital Outlay	\$23,000	\$20,800	\$6,300	\$1,200
Trustee/Benefit Payments				
<b>Total</b>	<b>\$1,304,700</b>	<b>\$1,291,100</b>	<b>\$1,282,300</b>	<b>\$1,258,700</b>



**Profile of Cases Managed and/or Key Services Provided**

Cases Managed and/or Key Services Provided	CY 2006	CY 2007	CY 2008	CY 2009
Complaints Received/Investigations	393/296	363/254	330/233	225/137 YTD
Licensing of health professions	8564	8181	8383	8754 YTD
Pre-litigation screening panels	104	102	103	68 YTD
On Line Public Information/Licensee service				

**Performance Highlights**

The number of complaint investigations remains consistent. Surrounding states average 30-35 cases per investigator. The Idaho Board of Medicine's three investigators handle 80+ cases per investigator per year.

The Board of Medicine implemented on-line renewals for all its professions and continues to offer on-line license verification, discipline and board action information, and information for licensees and consumers. The Board was able to credit \$264,582 back to its dedicated fund balance this year due to personnel cost savings, paperless initiatives, on-line services and discipline cost savings.

The Idaho Board of Medicine is a participant in Federation of State Medical Boards federally funded project to enhance physician license portability and reduce barriers to telehealth services while providing for public safety.

**Part II – Performance Measures**

Performance Outcome Measure	FY 2006	FY 2007	FY 2008	FY 2009	Benchmark
1. GOAL- Meet or exceed the public demand for information  Web site utilized as primary source for information/ documents/ verification (231/written 232/web 2006) (1)  Increase online renewal use to 40% of licensee (27% 2006) (2)		Web 1024  Written 640  78.4 % -No paper form sent	Web 1050  Written 830  75.19%-No paper form mailed	Web 1015  Written 640  79.2% no paper form mailed	Reduce written requests by 25%   Increase online renewal use to 40%
2. GOAL- Utilize technology to improve agency function and reduce cost  100% of all committee and board meeting are paperless (2006-Board of Medicine and Committee on Professional Discipline are paperless) (3)		BOM and COPD paperless.  Allied Health Boards using paper	BOM, COPD, PA, paperless 50%	BOM, COPD, PA paperless 50%	100% of all board/committee meetings are paperless
3. Goal- Improve and cultivate public outreach activities/continue to improve communication with licensees  Board initiates participates in at least six outreach/licensee activities per year (4)		7 outreach activities in 2006	8 outreach activities in 2008	10 outreach activities in 2009	Board initiates or participates in six outreach/licensee activities per year
4. Goal-Identify and address training needs of staff and members on an on-going basis		Ongoing	Ongoing	Ongoing	100% staff trained in functional area

**Performance Measure Explanatory Note:**

- (1) Web access is 24/7 decreases waiting time, copying, mailing and personnel costs.
- (2) On line renewal process decreases temporary hires, financial processing time, mailing and personnel costs, some Boards are using a partial paperless meeting, but still incurring copying and mailing fees
- (3) Demonstrated savings in copy, paper, mailing and personnel time costs
- (4) Activities increase public and licensee knowledge of Board function and Board knowledge of issues and concerns of public and licensees

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