

Part I – Agency Profile

Agency Overview

Established in 1892 and operated under the Department of Law Enforcement until 1949, the Board of Medicine functions as a self-governing agency supported solely by dedicated funds from licensees of the agency. The Board has primary responsibility for licensure and discipline of physicians, doctors of osteopathy, physician assistants, dietitians, respiratory therapists, and athletic trainers. The Board provides for limited permits for polysomnographers as it applies to the practice of respiratory therapy. The Board registers medical students, interns, externs, residents, physician assistant trainees, and polysomnography trainees in approved training programs. The Board regulates supervising physicians who supervise physician assistants, residents, interns and externs, cosmetic procedures and directing physicians who supervise athletic trainers. The Board has primary responsibility for the coordination of malpractice prelitigation hearings for physicians and licensed acute care hospitals operating in Idaho.

The Board staff includes an Executive Director, Associate Director, Board Attorney, four Quality Assurance Specialists/Investigators (including two physician assistants and one registered nurse), two Physician Licensing Specialists, two Allied Health Licensing Specialists, Prelitigation Manager, Finance Specialist, Discipline Specialist, and an Administrative Assistant/Prelitigation Assistant.

The Board functions with four licensing boards, the Committee for Professional Discipline and the Physician Assistant Advisory Committee. The allied health boards and committees advise and make recommendations to the Board 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 office of the Board of Medicine is on 1755 Westgate Drive, Suite 140, Boise, Idaho, 83704. Information about the Board is available at <http://bom.idaho.gov>.

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 Idaho Code 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 2014	FY 2015	FY 2016	FY 2017
State Regulatory Fund	\$1,889,300	\$1,683,600	\$1,705,100	\$1,856,500
Total	\$1,889,300	\$1,683,600	\$1,705,100	
Expenditures	FY 2014	FY 2015	FY 2016	FY 2017
Personnel Costs	\$868,300	\$838,720	\$869,800	\$1,080,400
Operating Expenditures	\$603,100	\$679,303	\$707,000	\$757,400
Capital Outlay	\$2900	\$19,738	\$18,400	\$18,700
Trustee/Benefit Payments	\$0	\$0	\$0	\$0
Total	\$1,474,200	\$1,537,761	\$1,695,200	\$1,856,500

Profile of Cases Managed and/or Key Services Provided

Cases Managed and/or Key Services Provided	FY 2014	FY 2015	FY 2016	FY 2017
Complaints Received/Investigations	350/215	368/233	283/175	283/188
Licensing of health professions	10,348	10,382	10,803	10,699
Pre-litigation screening panels	106	115	111	100
On Line Public Information/Licensee service	85%	85%	87%	88%

The Board receives complaints regarding all health care professions, health care and prison facilities. For those complaints that are outside of the statutory authority of the Board of Medicine, the Board reviews the complaint, corresponds with complainant and forwards the information to the appropriate regulatory agency for review.

FY 2017 Performance Highlights

The Board hired a new in-house attorney (effective 10/18/16) to cross-train with its retiring contracted prosecuting attorney who had served the Board for over forty years. On 10/1/2017, the Board’s vendors began upgrading the custom IBOM database from an outdated Access platform to a web-based platform that will add necessary functionality to maintain increased needs, accessibility and quality. The upgrade is scheduled to be installed, tested, and staff fully trained by the end of FY 2018. Despite over a 20% turn-over rate, the Board maintained its commitment to excellence in service.

Part II – Performance Measures

Performance Measure		FY 2014	FY 2015	FY 2016	FY 2017	FY 2018
GOAL: Promote Customer/Constituent Service Through Improved Communication with Stakeholders						
1. Board members are able to access needed information on website or through secure access, feedback confirms access.	actual	25%	75%	90%	100%	-----
	target	50% <i>Delayed due to database transition</i>	75% <i>Delayed due to database limitations of state IT policy</i>	90% <i>All Board materials provided and accessed online</i>	100% <i>All Board materials accessed online or via VPN</i>	Maintain 100% Access
2. Develop a secure access for physician information to expedite credentialing, eliminate duplication and enhance communication.	actual	25%	25%	50%	75%	-----
	target	25% <i>Delayed due to database transition</i>	25% <i>Delayed due to database transition</i>	70% <i>Prep for database upgrade</i>	75% <i>Delay due to Database upgrade—working to get full application MD/DO info online</i>	Achieve 80% in 1 st roll-out phase of new database Anticipate full functionality in FY2019/2020
GOAL: Promote Responsible Government Through Efficient Use of Technology and Responsible Utilization of All Resources						
3. Enhance licensing functions and reduce redundancies in licensure practices.	actual	25%	75%	80%	90%	-----
	target	50% <i>Delayed due to database and vendor transition</i>	75% <i>Delayed due to database and vendor transition</i>	80% <i>Reviewing Statutes and Rules to eliminate unnecessary application submissions</i>	100% <i>Reviewing Statutes and Rules to eliminate unnecessary application submissions</i>	Work towards 100% over life of strategic plan
4. All of allied health licensing functions on-line	actual	25%	25%	30%	50%	-----
	target	40% <i>Delayed due to database and vendor transition</i>	40% <i>Federation uniform application not available yet</i>	40% <i>Federation uniform application not available yet; Database upgrade in progress</i>	60% <i>Physician Assistant forms on line. Working on delegation of services agreements for PAs</i>	Work towards >75% by 2018 online functionality for all allied health
5. Streamline the administration of the pre-litigation process.	actual	25%	50%	75%	90%	-----
	target	25%	75%	80%	90% <i>Review of associated statutes/Rules/processes</i>	Achieve 100% efficiency in pre-lit process
GOAL: Promote Professionalism by Identifying and Addressing the Education and Training Needs of the Staff, Board Members, Licenses, Healthcare Facilities						
6. Staffing in each functional area is adequate and balanced for the workload.	actual	80%	80%	80%	90%	-----
	target	80%	85%	90% <i>New ED in place; seeking AD and in-house attorney to replace retiring AD and contract attorney</i>	90% <i>After 30% turnover, new staff hired and in training</i>	Maintain workforce retention

Performance Measure		FY 2014	FY 2015	FY 2016	FY 2017	FY 2018
7. Board members and staff have access to professional development training resources.	actual	100%	100%	100%	100%	-----
	target	100%	100%	100%	100% <i>100% Training manuals in all areas are complete</i>	<i>Planned Board & Staff Trainings throughout FY2018</i>
8. Educate licenses and healthcare facilities on Idaho Board of Medicine law, rules and processes.	actual	N/A	N/A	N/A	New for 2017 75%	-----
	target	N/A	N/A	N/A	N/A <i>New: 100% - Provide educational session with PA Students (ISU) Produce four newsletters a year. Deliver information to credentialing committees and hospital personnel regarding the relationship between peer review activities and complaint review and disciplinary processes and procedures</i>	<i>Maintain 100% Provide min of 5 educational sessions annually (IHA, IMA, ISU, WWAMI, future DO school, etc.)</i>
GOAL: Promote Continuity Through Succession Planning and Leadership Development						
9. Provide ongoing Leadership Development.	actual	80%	80%	80%	90%	-----
	target	100%	100%	100%	100%	<i>Continuous professional development for all staff</i>

For More Information Contact

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