

STATE OF NEW MEXICO

MEDICAL BOARD

STRATEGIC PLAN

FY2012 TO FY2017

August 2013

EXECUTIVE SUMMARY

The Board consists of nine (9) governor-appointed members, six (6) physicians, two (2) public members and one (1) physician assistant. In addition, the Polysomnography Practice Advisory Committee consists of five (5) board-appointed members.

The Board is responsible for making policy decisions about licensing, discipline, and practice-related issues.

The Board holds four (4) regular meetings and four (4) interim meetings per year, in addition to dedicating many hours reviewing licensing issues and complaints, participating as hearing officers in administrative hearings, and developing rules and policies.

The Medical Board is a relatively small agency, with an authorized staff of fifteen (15) in FY14.

AGENCY PURPOSE STATEMENT, USERS, AUTHORITY

The NMMB is the state agency responsible for the regulation and licensing of physicians (MD's), physician assistants, anesthesiologist assistants, genetic counselors, polysomnographic technologists, and as of July 1, 2011 naprapaths. It is an executive agency supported solely by self-generated fees. It is one of five (5) independent licensing agencies that exist outside the Regulation and Licensing Department (RLD).

The main services provided by the agency include:

- the licensing of qualified applicants;
- enforcement of the Medical Practice Act through the investigation of complaints against license holders, with the subsequent discipline of those found to be in violation of the Medical Practice Act or rules;
- promoting the rehabilitation of impaired health care providers regulated by the Board;
- providing information to interested consumers.

These services are delivered most frequently in writing, but also by telephone, in person, and through electronic means, including the agency website.

The Board holds quarterly meetings in February, May, August and November, with interim meetings scheduled in January, March, June, and September. The Board is responsible for making policy decisions about licensing, discipline, and practice related issues. Staff members use established policies, guidelines, and guidance from the Board to perform required tasks.

The Medical Practice Act (Section 61-6-1 NMSA 1978) specifically defines the purpose of the Board:

B. In the interest of the public health, safety and welfare and to protect the public from the improper, unprofessional, incompetent and unlawful practice of medicine, it is necessary to provide laws and rules controlling the granting and use of the privilege to practice medicine and to establish a Medical Board to implement and enforce those laws and rules.

C. The primary duties and obligations of the Medical Board are to issue licenses to qualified physicians, physician assistants and anesthesiologist assistants to discipline

incompetent or unprofessional physicians or physician assistants and anesthesiologist assistants, and to aid in the rehabilitation of impaired physicians, physician assistants and anesthesiologist assistants, for the purpose of protecting the public.

Our key stakeholders are applicants for licensure, current license holders, individuals requesting license reinstatement, patients, insurance companies, hospitals, clinics, attorneys, and other boards and agencies.

AGENCY VISION/MISSION/GOALS

The “mission” of the Board is to promote excellence in the practice of medicine through licensing, discipline, and rehabilitation.

The “vision” of the Board is:

- to improve information portability;
- to achieve efficient licensing, investigation, and discipline;
- to provide helpful, knowledgeable and responsive staff;
- to maintain an agency that is accessible and visible; and
- to promote increased public awareness of services provided by the Board.

ACTIVITY: *Licensing/re-licensing of qualified applicants/licensees*

Goal: The New Mexico Medical Board strives to continually make improvements to the licensing processes to assure applicants for licensure/re-licensure are qualified and that licenses are issued in a timely manner.

Objectives:

- Work with participating neighboring states to establish guidelines and qualifications to create a “Deemed Status” license that would allow a qualified licensee to register their active out-of-state license with the New Mexico Medical Board and begin practicing medicine without extensive delay. This would also allow a New Mexico Licensed Physician to do the same in participating states.
- Maximize the use of new licensing software.
 - Explore options to create a more user friendly survey tool for the New Mexico State Legislature mandated Health Care Work Force Data Collection survey.
 - Allow the applicant online access to check the status of the application. Applicants, and their agents, call routinely (often several times a week) to check on the status of various documents. If this information could be viewed online we estimate it would significantly reduce the number of calls, allowing staff to spend more time reviewing the supplementary information and processing the application.
- Continue developing strategies for improving the processing time for initial licensure and re-licensure through increased accessibility or sharing of source documents.

*Performance Measures: (** indicates DFA Performance Based Budget Measure)*

- Number of tri-annual physician licenses and renewals.**
- Number of physicians who requested Inactive, Retired or Voluntarily Lapsed status.
- Number of days to issue a physician license,** from the receipt of a complete application (form and fee only, not required documentation) until a license is issued.
- Number of days from complete application, including documentation, until a license is issued.
- Number of biennial anesthesiologist assistant licenses issued and renewals.**
- Number of biennial physician assistant licenses and renewals.**
- Number of applications received, by type.
- Customer satisfaction survey of licensing process.
- Number of first permanent physician licenses issued in New Mexico.
- Number of biennial genetic counselor, polysomnographic, and naprapathic licenses and renewals.

Achievements:

- Since November of 2012 the New Mexico Medical Board has offered the Federation of State Medical Board's Uniform Application as an option to applicants. This is an online application that allows for a physician applicant to apply to many different states using one application. This option is in addition to our original online application hosted by Hospital Services Corporation and the paper application.
- The New Mexico Medical Board has taken steps toward expediting the licensing process by eliminating redundancy and also proposed rule changes are in place to reduce the amount of years of work experience verifications required from five years to two years. Although these efforts were implemented at the end of the fiscal year, the average number of application processing days for physicians has gone down approximately 13 days from last fiscal year.
- In FY13, 2,774 physician licenses were renewed and 887 new physician licenses were issued.
- In FY13, 312 physician assistant licenses were renewed and 86 new physician assistant licenses were issued.
- In FY13, 17 anesthesiologist assistant licenses were renewed and 7 new anesthesiologist assistant licenses were issued.
- In FY13, 68 polysomnographic technologist licenses were renewed and 18 new polysomnographic licenses were issued.
- In FY13, 16 genetic counselor licenses were renewed and 6 new genetic counselor licenses were issued.
- In FY13, 11 doctor of naprapathy licenses were renewed and 2 new doctor of naprapathy licenses were issued.
- In FY13, the average number of days from Board receipt of a physician application to licensure was 72 days.
 - An important aspect of the licensing process that often effects the time of licensure is the amount of time it takes to gather all the necessary documentation. For example, during FY13 the average time from application to licensure was, as

noted, 72 days, however, the average time from receipt of all necessary documentation to issuance of the license was 10 days.

- Responses to the Board’s customer satisfaction survey continue to be very high with 93% rating their experience as either “excellent” or “good.”
- In FY13, 963 criminal background checks were successfully processed.

ACTIVITY: *Timely and appropriate investigation of complaints against applicants/licensees*

Goal: Continue to improve the complaint and disciplinary processes to identify and sanction practitioners who are found to be incompetent, unprofessional, unethical, or are in violation of statutory or regulatory requirements.

Objectives:

- Continue to work collaboratively with other state and federal agencies, healthcare entities, other state licensing boards, etc., in identifying licensees who may be in violation of the Medical Practice Act in order to ensure public safety.
- Improve communication with the public in order to increase awareness regarding the Board’s jurisdiction over complaints against licensees.
- Prioritize complaints received in accordance with immediate harm to the public standard and timely investigate in order to submit to the Board for quick licensure decision.
- Continue to delegate investigative assignments to the agency’s Administrative Assistant in order to streamline and process complaints in a timely manner.
- Continue to develop relationships with other state licensing boards, law enforcement agencies, hospitals, health plans, and other government agencies, to ensure open flow of information.
- Use the Compliance Manager in assisting with the processing of complaints that involve matters of possible substance abuse in order to consolidate these types of complaints with appropriate staff person whose job already requires monitoring compliance of licensees.
- Continue to improve processing time of cases under investigation to assure timely actions and public protection.

Measures and Achievement: Refer to next activity “Consistent discipline of individuals in violation of law and/or rules”

ACTIVITY: *Consistent discipline of individuals in violation of law and/or rules.*

Goal: Continually improve the disciplinary processes to sanction practitioners who are incompetent, unprofessional, unethical, or are in violation of statutory or regulatory requirements.

Objectives:

- Keep complaint committees informed when discussing licensure action recommendations on investigation cases where violations are found in order to ensure fairness and consistency in the disciplinary process.
- Track all complaint committee decisions on sanctions against licensees in order to maintain consistent decision-making among all committees.

- Continue to develop processes to assure fair and consistent actions that protect the public while not unduly restricting licensee practices.
- Monitor the time period from the date the Board has voted licensure action, to actual issuance of a Notice of Contemplated Act to ensure timely processing of same for the public's protection.
- Timely report licensure actions to the national databanks to ensure public safety and open communication with other healthcare entities and other state boards.

*Measures: (** indicates DFA Performance Based Budget Measure)*

- Average length of time for complaint resolution, from date of receipt to date of closure or formal action.
- Percent of complaints received within 12 months.
- Percent of board complaints resulting from alcohol/substance-related allegations.
- Percent of formal actions taken within 12 months.
- Percent of disciplinary actions (complaints) resolved within 12 months.**

Achievements:

- In FY13, the Board resolved 243 complaint cases within 12 months (which includes carryovers from the previous fiscal year).
- In FY13, the Board received 205 complaints for investigation.
- In FY13, 20% of complaints were resolved in less than six (6) months.

ACTIVITY: *Aid in the rehabilitation of impaired practitioners*

Goal: Continuously improve the process for identification and monitoring of licensees who may be impaired by reason of mental illness, physical illness, or habitual or excessive use or abuse of drugs or alcohol.

Objectives:

- Work with the New Mexico Monitored Treatment Program (MTP) to provide additional outreach to physicians through hospitals and other organizations located through-out the state.
- Continue to improve communication between MTP and the Board's compliance officer regarding compliance status of all mandated MTP participants.
- Continue to develop strategies to improve the process of identifying practitioners who have a substance use disorder.
- Develop new strategies to identify and secure physicians and other health care professionals to serve on impaired physicians' committees.
- Develop strategies to identify and treat disruptive practitioners or those exhibiting behaviors that may impact the health care provider's effectiveness as part of a health care team.
- Continue to develop ways the Board can assist and support the recovery of impaired practitioners.

*Measures: (** indicates DFA Performance Based Budget Measure)*

- Number of participants in Monitored Treatment Program.** (note, agency has no control over this measure)
- Percent of participants who relapse.** (another measure that is not controlled by the agency)

Achievements:

- In FY13, 255 physicians, physician assistants and polysomnographic technologists participated in the Monitored Treatment Program. One hundred and seventy-six (176) were mandated by the Board (158 MD's, 16 PA's and 2 polysomnographic technologists). This was an increase from FY12 (173 in FY12). Fifty (50) were voluntary participants (49 MD's and 1 PA). This was a decrease from FY11 (52 in FY11).
- In FY13, there were two (2) participants that relapsed.
- The contract with MTP requires statewide outreach. MTP has eight "population centers" within the state and travels there each quarter if participants are located in those areas. MTP has also worked cooperatively with other state monitoring programs to monitor practitioners licensed by the NM Medical Board but residing in other states, whom the Board requires to be monitored. MTP networks throughout the state via newsletters, onsite visits, telephone consultations, and presentations when requested.

ACTIVITY: *Public information and education*

Goal: Fulfill the Board's primary purpose to protect the public by continuing to improve the quality, quantity, and appropriate distribution of available information to the general public, including the NM legislature.

Objectives:

- Continue to have the Public Information Officer communicate effectively with consumers, licensees and the media.
- Provide accurate and timely information on the Internet.
- Continue to update the agency website to be more "user friendly," including ease of access to recent Board actions.
- Provide the most frequently requested information in Spanish as well as English.
- Promptly respond to requests for information, including verbal and electronic license verification.
- Use paperless technology more efficiently to provide requested information.
- Assure all actions are promptly and appropriately reported to the American Medical Association (AMA), National Practitioner Data Bank (NPDB), Healthcare Integrity & Protection Data Bank (HIPDB), and Federation of State Medical Boards (FSMB).
- Develop an electronic News Corner to notify licensees of statutory requirements, regulation changes, and other noteworthy issues.

*Measures: (** indicates DFA Performance Based Budget Measure)*

- Number of consumers provided with information through written license verification and website access.**

Achievements:

- The Board's website continues to be a valuable resource for consumers and others who need to check on board-related information and physicians. In FY13 there were 1,162,220 visits to the DocBoard website. In FY13 there were 50,686 visits to the Board's website.
- License verifications continued to be provided in written format as well. In FY13, 1,818 written verifications (from the Board and from VeriDoc) were provided to consumers and others.
- The Board's Public Information Officer continued to work with the media and consumers, primarily regarding requests for information about Board actions and public licensing information.
- Information concerning complaints against physicians, including the complaint form, is now available in Spanish, as well as English.
- Statewide newspapers routinely cover actions taken by the Board.
- The Board's website continues to provide quick and easy access to information for consumers about license status and any formal actions taken against licensees.
- The website also allows consumers to download complaint forms and instructions to facilitate the initial filing of complaints.
- Quarterly Board Actions, containing information on all board actions, are now published exclusively on the Board website (www.nmmb.state.nm.us/).
- All formal actions against licensees continue to be available on the website linked directly to the individual practitioner's name.
- All formal Board actions are reported to the National Practitioner Data Bank (NPDB), Health Insurance Portability and Accountability Act (HIPAA), Federation of State Medical Boards (FSMB), and American Medical Association (AMA) as appropriate. Procedures are in place to assure that reporting is consistent within the official guidelines.
- All [in-state] hospitals on our distribution list receive notification quarterly when the Board takes formal, reportable action against a licensee.