



Technology Upgrade Enables Online
Licensure Renewal

The Board of Podiatric Medical Examiners is pleased to announce that significant upgrades to our information technology system have been completed. As a result of the upgrade, online license renewal is available for the upcoming 2008/2009 license renewal cycle. Detailed renewal instructions are provided on our website. Podiatrists are encouraged to submit their license renewal application online with credit card payment. Renewal applications and CME compliance forms may be downloaded from our website if you are unable to complete your renewal online. Requests for paper applications must be submitted to the Board in writing via fax or mail.

Practitioners that renew online will receive a prompt during the completion of the

CME form if their CMEs are being audited. Practitioners that renew by paper will be informed in writing if they are being audited. If audited, proof of CMEs must be submitted in paper form to the Board. No license will be renewed or printed until the Board reviews and accepts the submitted CME documentation as meeting the CME renewal criteria. For audited online renewals, the application remains in queue until the Board reviews and accepts the submitted CME documentation. As always, licenses will not be renewed or printed until the Board approves the audited CMEs.

Please note that all practitioners that have any form of disciplinary action from the Board will be audited.

Continuing Medical Education (CME) Requirements

No CMEs REQUIRED

New graduates that received a license within six months of completing a two year graduate training from an approved residency program are not required to fulfill the continuing education requirement of the Board for the first 2-year renewal cycle following initial licensure.

25 CMEs REQUIRED

New graduates that received a license within six months of completing a one year graduate training from an approved residency program OR New licensees licensed in the 2006-2007 cycle, with previous out-of-state practice experience are given a courtesy 25 CME credits by the Board. Those new licensees falling in this category are required to submit only 25 CME credits for the first 2-year renewal cycle following initial licensure (2008/2009). Note: The Board awarded 25 CME courtesy credits fall within the Category A option in the CME policy.

50 CMEs REQUIRED

All other licensees that do not fall within the above categories are required to submit 50 CME credits for licensure renewal. Those licensees that accrued CMEs as part of Board sanctions, must submit 50 CMEs that do not include the mandated credits.

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Special Notice

The Maryland Board of Podiatric Medical Examiners Newsletter is considered an official method of notification to podiatrists. **These Newsletters may be used in administrative hearings as proof of notification.** Please read them carefully and keep them for future reference.

2010-2011 Licensure Fees Announced

The Board approved a \$75.00 annual increase in licensing fees for the 2010-2011 license.

This is as a result of annual increases in indirect costs, rent and state wide expenses.

Board Determinations - Scope of Practice Issues

History & Physicals

Effective January 27, 2007, the Centers for Medicare & Medicaid Services (CMS) modernization of the Medicare hospital conditions of participation defines podiatrists as physicians, thus recognizing podiatrists as being able to perform History and Physicals in a hospital setting, if so credentialed. Acknowledging that podiatrists receive training and residency experience performing History and Physicals, the Board determined that this is within the scope of practice of podiatry.

Dispensing prescription drugs in podiatry offices

The Board responded to an inquiry regarding the selling of antibiotics in podiatry offices by advising that a drug dispensing permit issued by the Board of Podiatry is needed in addition to complying with all requirements of

the Board of Pharmacy.

Common Peroneal and Popliteal nerve blocks

The Board determined that performing Popliteal and Peroneal nerve blocks via continuous infusion catheters, the initiation site being behind the knee, is within the scope of practice of podiatry.

Injecting for intractable plantar keratosis

The Board determined that injecting for intractable plantar keratosis is within the scope of practice of podiatry.

Prescribing Drugs for Family Members and self prescribing

It is a violation of the Practice Act to prescribe for family members without treatment documentation. The Board strongly discourages self prescribing even within the scope of practice, since this may lead to violation of the Practice Act.

CDC Guidelines

Podiatry offices are required to be in compliance with all CDC and OSHA standards including the mandatory posting of information. A link to the CDC guidelines is available from our website at:

<http://www.mbpme.org/fyi.html>

CPT Codes for the Treatment of Warts

The Board advises that as of January 1, 2007, CPT code 17110 is the most appropriate code for billing the destruction of benign lesions for the treatment of up to fourteen (14) plantar warts. For the treatment of fifteen (15) or more plantar warts, the most appropriate CPT code to report is 17111.

Proactive Disclosure Service (PDS)

The Board is now subscribed to the NPDB-HIPDB's Proactive Disclosure Service. The NPDB-HIPDB will send notification within one business day of the Data Banks' receipt of a disciplinary report on any of the enrolled practitioners.

National Practitioner and Healthcare Integrity Practitioner Data Bank Queries

Effective April 12, 2007, the Board implemented a primary source verification standard requiring Board staff to complete **NPDB-HIPDB** queries for all initial licensure applicants. Previously, applicants were required to self query the **NPDB-HIPDB** and submit the results of that query to the Board as part of the licensure process. The Board determined that primary source verification best protects the public by ensuring the validity of the data received and no longer requires licensure applicants to submit the results of self queries.

CONTINUING MEDICAL EDUCATION (CME) POLICY

The Maryland Board of Podiatric Medical Examiners (Board) requires fifty (50) CME hours to be completed between December 1, 2005 and December 1, 2007 for the 2008/2009 licensure renewal. **THE BOARD WILL NOT RENEW A LICENSE IF THE REQUIRED CME CRITERIA ARE NOT MET.**

ALL CME COURSE WORK MUST BE PRE-APPROVED BY THE BOARD TO DETERMINE CREDIT HOURS, UNLESS CMEs ARE ACCRUED FROM A BOARD APPROVED SPONSOR AS LISTED ON OUR WEBSITE. For approval of CMEs, the Board must receive and review a course syllabus in order to determine the credit hours for each seminar/course.

- Approved credits can be applied toward fulfillment of the CME requirement **only in the renewal period in which they are earned.**
- The Board allows **ALL 50 CME units to be taken online.**
- **At least 35 CME hours are to be taken in Category A. Category A includes scope of practice issues and record keeping and coding courses.** Please note that a maximum of 8 CME credits may be counted toward Category A for Board pre-approved record keeping and coding courses. Category A hours are credited at the rate of 1:1.
- **No more than 15 CME units may be taken in Category B, which include medically related issues not specific to podiatry.** CME units on medically related issues are awarded only half the credit contact hours, i.e. a HIPAA Conference that is advertised for 8 CME units would be given only 4 CMEs by the Board. Category B hours are credited at the rate of 2:1.
- The Board will not award CME credit for continuing education involving financial planning, marketing or practice enhancement strategies.
- **CME units will NOT be given for teaching and residency lectures.**
- **No more than 25 CME units will be awarded to podiatrists who participate in NBPME test development activities.**
- **The Board will award one (1) CME credit (Category A) for attendance at Open Session Board meetings.**
- **For Podiatric Residents only** – Twenty-five (25) hours of category A credit will be granted for each full year of residency training within the current licensing cycle immediately preceding application for a full license.
- Please be advised that you are **REQUIRED** to submit a signed affidavit listing your CME units verifying that you have met the CME requirement for this renewal cycle. This form is available to download from our website. If audited, you **will be required** to submit supporting documentation for all CME units.
- **It is the responsibility of each podiatrist to keep accurate records of attendance at approved continuing education programs and to substantiate those records for the current licensing period upon request.**
- Signing the CME affidavit form is an affirmation of compliance with the CME requirement. If upon audit, the licensee cannot provide acceptable proof of attendance or completion of the 50 required CME credits, the Board may take immediate disciplinary action against the license.
- **If a licensee fails to earn the required number of credit hours for license renewal, the licensee must petition the Board prior to the December 1st licensure renewal deadline requesting an extension of time to complete CMEs.** The Board may impose a requirement that the licensee earn up to double the number of required credit hours still to be earned. The Board at its discretion, upon good cause shown, may grant a 90 day extension of time to complete CMEs. Podiatrists granted CME time extensions are required to obtain a 90 day Temporary practice license valid December 1, 2007 through March 1, 2008. The Temporary license fee of \$100 is in addition to the annual license renewal and late renewal fees. (\$425 license renewal fee + \$100 late renewal fee + \$100 temporary license fee = \$625). Please note that 80 licensees did not meet the required deadline or number of credits required in the last licensing cycle.



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<http://www.mbpme.org>

The Board will send
notification letters to
all licensees when
Online Renewal goes
Live!

Please make sure your
mailing address is up to
date with the Board.

Retention and Disposal of Medical Records and Protected Health Information Proposed Regulations

New regulations proposed by the Department of Health and Mental Hygiene that apply to medical records and protected health information held by a health care provider in Maryland would enact on a State level the HIPAA Privacy and Security Rules that podiatrists are required to comply with by federal law.

The proposed regulations define a "Medical record" as any oral, written, or other transmission in any form or medium of information that: is entered in the record of a patient; identifies or can readily be associated with the identify of a patient; and relates to the health care of the patient.

Instructions for handling medical records upon the discontinuations of a Medical Practice are provided as well as definitions of terms including

"Records retention schedule" and "Sanitizing" for the destruction of electronic media.

The Board's authority over individual health care providers is established to ensure compliance and enforcement of the proposed regulations. Penalties for violations include liability in court for actual damages and administrative fines not to exceed \$10,000 for all violations cited in a single day.



Board Meetings

October 11, 2007

November 8, 2007

December 3, 2007

January 10, 2008

February 14, 2008

March 13, 2008

April 10, 2008

The Board meets the second Thursday of each month at the Department of Health and Mental Hygiene, 4201 Patterson Avenue, Baltimore, Maryland 21215. The Open Session of the meeting begins at 1:00 p.m. and is open to the public. For further information regarding these meetings, or to place an item on the public agenda, please contact the Board office at (410) 764-4785.