



ALABAMA State Board of Medical Examiners Medical Licensure Commission

Newsletter and Report

www.albme.org

July – September 2014

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A Message from the Executive Director License Renewal: Proving U.S. citizenship or lawful permanent resident status

Pursuant to the Beason-Hammon Alabama Taxpayer and Citizen Protection Act, as amended by Act 2012-491, the Alabama Board of Medical Examiners and the Medical Licensure Commission of Alabama are required to obtain information concerning U.S. citizenship or lawful status in the United States before initial certificates of qualification/licenses can be granted or renewed. When the bill was originally passed, it required every licensed physician to verify again their U.S. citizenship or lawful permanent residence in the United States before they could renew their medical licenses. This is no longer required for annual licensure renewals for U.S. citizens and permanent resident physicians. The Alabama Board of Medical Examiners was instrumental in the passage of an amendment during the 2012 legislative session, which removed this requirement for U.S. citizens and lawful permanent residents. As the law currently stands all applicants for an initial certificate of qualification and license to practice medicine only requires such documentation.

However, Act 2012-491 still requires lawful aliens/foreign national physicians practicing in this state to submit yearly proof of legal presence as a nonpermanent alien. To further complicate the issue, once the documentation is received by the Board of Medical Examiners it must then be verified through the federal government's SAVE Program (Systematic Alien Verification for Entitlement) before the Alabama Board can legally renew a license for a nonpermanent alien physician.

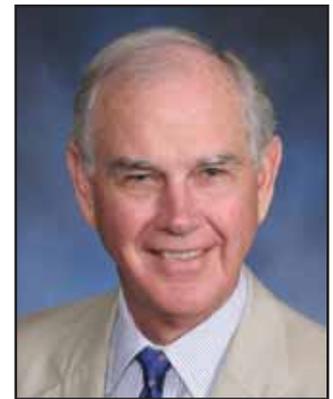
As physicians in this state are aware, the license renewal process is available online. If you fall into the alien/foreign national category, the renewal program will not allow you to renew online until your legal presence documentation is received in this office and processed through SAVE. Likewise, any manual license renewals received will **not** be processed without prior proper documentation.

As Director of the agency, it is my hope that any physician who is a nonpermanent resident alien would immediately take the necessary steps to comply with these requirements to renew medical licenses before the renewal period ends Dec. 31, 2014. Don't wait until the last minute to submit your documentation and run the risk of having your license expire. For additional information please use the contact information listed below.

1-800-227-2606

MD and DO licensees should contact Ms. Cindy Smith

PA, AA and TA licensees should contact Mrs. Deana Bozeman



Larry Dixon

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2015 License and Registration Renewals

- ▶ All licenses and registrations are renewed annually.
- ▶ Orange renewal reminder postcards are sent to all licensees' addresses of record in October.
- ▶ Online renewal site will open Oct. 1, 2014.
- ▶ Online renewal will use last name and last four digits of SSN (you do not have to have received a postcard to renew).
- ▶ Online renewal site: <http://www.alrenewals.org>.
- ▶ **IMPORTANT: Licensee is responsible for completing forms and submitting payment. Do not rely on someone else to do this for you.**
- ▶ Renew license first. If you have an ACSC/QACSC, pain management registration and/or collaborative practice agreement, you will be asked if you want to renew them. Credit card payment is made separately for separate renewals. You can print a receipt upon completion of each transaction.
 - ▷ **M.D./D.O. Licenses** reported to the Board
 - Expire Dec. 31
 - \$300 license renewal fee
 - Grace period Jan. 1 - Jan. 31 (\$400 fee during this period)
 - **NO grace period**
 - ▷ **P.A./A.A. Licenses**
 - Expire Dec. 31
 - \$100 renewal fee
 - **NO grace period**
 - ▷ **ACSC Registrations***
 - Expire Dec. 31**
 - \$150 renewal fee
 - **NO grace period**
 - ▷ **QACSC Registrations**
 - Expire Dec. 31
 - \$60 renewal fee
 - **NO grace period**
 - ▷ **Collaborative Practice (CP) Registrations**
 - Expire Dec. 31
 - \$100 renewal fee
 - If you are prompted to renew a CP registration and you do not think you have a CP, contact our office – if our records indicate a CP and it is not renewed or formally terminated by Dec. 31, it will be
 - ▷ **Pain Management (PM) Registrations**
 - Expire Dec. 31
 - \$100 First facility
 - \$10 Each additional facility
 - **NO grace period**

**Before renewing an ACSC, the applicant must have a current registration to access the Prescription Drug Monitoring Program (PDMP) established and maintained by the Alabama Department of Public Health, and must have a current and appropriate registration issued by DEA.*

***Writing any prescriptions for controlled substances without a current ACSC is a violation of Board rules and state law and will be investigated. The Board is authorized to fine up to \$10,000 per violation.*

CME Requirement for physicians and physician assistants

Twenty-five (25) *AMA PRA Category 1 Credits*TM or equivalent annually (calendar year). **Credits must be earned Jan. 1 - Dec. 31 of each year** (grace period eliminated May 2012). Licensees are responsible for being familiar with and reading the Board Rules Concerning CME (<http://www.alabamaadministrativecode.state.al.us/docs/mexam/540-X-14.pdf>).

DEA Final Rule reschedules Hydrocodone Combination Products

Recently, the Drug Enforcement Administration (DEA) issued a final rule **rescheduling hydrocodone combination products (HCPs) into Controlled Substance Schedule II**, effective Oct. 6, 2014.

The DEA clarified key points impacting implementation that are of interest to health care providers and patients:

- Prescriptions for HCPs that are issued **on or after Oct. 6, 2014**, must comply with requirements for Schedule II prescriptions; refills of these prescriptions will be prohibited.
- Prescriptions for HCPs that are issued **before Oct. 6, 2014**, that have authorized refills may be dispensed in accordance with DEA rules for refilling, partial filling, transferring and central filling Schedule III-V controlled substances until April 8,

2015. However, state law, insurance limitations, and some pharmacy quality and safety operations and processes may not allow for these prescriptions to be refilled.

- **On or after Oct. 6, 2014**, pharmacies with HCPs in commercial containers labeled as Schedule III controlled substances are authorized to continue dispensing these products, but the DEA requires all other commercial containers of HCP to be labeled as Schedule II controlled substances.

Impact of State Law:

- State law, if more stringent, will govern how HCPs are handled with respect to refills. Several states have published notices that they intend to treat HCP refills for prescriptions written prior to *see DEA, page 4*

DEA Notices

- ▶ **DEA rescheduling of Hydrocodone Combination Products to Schedule II effective Oct. 6, 2014.** See <http://federalregister.gov/a/2014-19922> for more information.
- ▶ **DEA placement of Suvorexant into Schedule IV effecting Sept. 29, 2014**
- ▶ **DEA placement of Tramadol into Schedule IV effective Aug. 18, 2014**

For more information go to http://www.deadiversion.usdoj.gov/fed_regs (Rules and Notices).

BME congratulates Alabama Healthcare Hall of Fame inductees

Congratulations to John S. Meigs Jr., MD, and George C. Smith Sr., MD, on their recent induction into the Alabama Healthcare Hall of Fame!

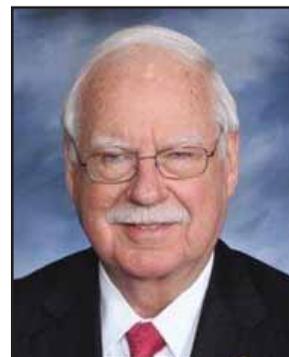
Founded in 1997, the Hall of Fame was created with the purpose of recognizing those persons who have made outstanding contributions to or rendered exemplary service for healthcare in the State of Alabama.

John S. Meigs Jr., MD

Dr. John Meigs, one of the most recognized primary care physicians in Alabama, has held many positions with the Alabama Academy of Family Physicians including president and chairman of the board. He is currently a member of the Board of Censors of the Medical Association, the Board of Medical Examiners, Alabama Family Practice Rural Health Board, the Alabama Board of Medical Scholarships and serves as vice chair of the Alabama State Committee of Public Health. A fellow in the American Academy of Family Physicians (AAFP),



John S. Meigs Jr., MD



George C. Smith Sr., MD

Dr. Meigs is on the AAFP Board of Directors and is speaker of the Congress of Delegates.

George C. Smith Sr., MD

Dr. George Smith, a native of Lineville, has become a legend in the state through his dedication to family practice, compassionate and nurturing care for his patients and extensive involvement in organized medicine. He has been active in many professional organizations including the Clay County Medical Society and Alabama Academy of Family Physicians as well as the American Academy of Family Physicians. Dr. Smith served as president and later chairman of the Board of the Alabama Academy of Family Physicians, chairman of the Board of Censors of the Medical Association, chairman of the Alabama State Board of Medical Examiners, chairman of the Alabama State Committee of Public Health and is currently a member of the Alabama Medical Licensure Commission.

Board mourns loss of Leon C. Hamrick Sr., MD

Described as ‘a giant of a man,’ Dr. Leon Hamrick, Sr., passed away peacefully on Sept. 7, 2014, surrounded by his family. He was 88 years old.

Dr. Hamrick started saving lives at the age of 18 when he joined the US Navy and trained as a pharmacist mate. He was on an amphibious landing boat during the Allied invasion at Normandy Beach on June 6, 1944, treating the wounded with nothing to offer but morphine tablets and caring hands. “He dealt with things with such dignity, always”, said one of his four daughters, Mary Bostick.

After the war Dr. Hamrick returned home, graduated from Emory University School of Medicine and became a surgeon at Lloyd Noland Hospital in Fairfield. From 1972 until his death, he served as medical director and CEO for Noland Health Services.

Dr. Hamrick spearheaded the creation of the Alabama Medical Licensure Commission in 1981 and served 10 years as Chairman. He remained an active member of that Commission for 33 years, until the time of his death. Prior to his service on the Commission, Dr. Hamrick was Chairman of the Board of Censors of the Medical Association of the State of Alabama, the Alabama Board

of Medical Examiners and the State Committee on Public Health, and was on the Board of Directors for Mutual Assurance, now ProAssurance. And this just skims the surface of his accomplishments.

Not only did Dr. Hamrick commit his life to serving the medical community, but he was also devoted to his church. He was a delegate to the United Methodist General Conference and the World Methodist Conference, and was on the board of Global Ministries, traveling twice to China to visit churches there.

Though a corporate executive and a very astute businessman, Dr. Hamrick had the air of a country doctor. He grew up in Talking Rock, Ga., in a house with no electricity or running water and never lost that down to earth care for others. No one left his home without a bag of vegetables from his garden or something he and his wife had canned.

Dr. Leon Hamrick Jr, said it best, “He was going to make the most of his time on earth. He was going to help anybody (who) might need help. He was a generous man, a kind man, dedicated to serving.”

DEA cont.

Oct. 6, 2014, like the federal rule.

However, most states have not provided clarity. Thus, prescribers should be prepared to provide new hard copy or electronic prescriptions for patients beginning on Oct. 6, 2014, rather than have patients use what would have been existing refills.

Impact on Prescribers Starting on Oct. 6, 2014:

- Prescriptions for HCPs must be written on a hard copy, original prescription or electronically transmitted where e-prescribing of C-II's is allowed by state law, the prescriber is certified to e-prescribe C-II's and the pharmacy is certified to accept electronically prescribed controlled substances. Fax transmission is not allowed.
- Prescriptions for HCPs cannot be called into a pharmacy.

- Prescriptions for HCPs cannot be refilled (unless the prescription was issued before Oct. 6, 2014). Note that many health insurers will not honor these refills and many pharmacies will not be able to refill prescriptions issued prior to Oct. 6, 2014, due to state law limitations and some pharmacy safety and quality systems and processes.

How Prescribers Should Prepare for Oct. 6, 2014:

- Be prepared to issue new written or electronic prescriptions for patients beginning on Oct. 6. Some prescriptions may be refillable, but many will not.
- Notify patients with HCP prescriptions of the new steps required to obtain prescriptions issued after Oct. 6, 2014.
- Ascertain possible state-based restrictions applicable to allied

health professionals with prescriptive authority and determine whether modifications to collaborative practice agreements between physicians and allied health professionals with prescriptive authority are needed.

- Determine, based on sound medical judgment and consistent with established medical standards and federal **and state laws**, the appropriateness of issuing multiple prescriptions. The DEA permits multiple prescriptions authorizing a patient to receive a total of up to a 90-day supply of HCP where a prescriber has determined it is appropriate to see the patient only once every 90 days. Each prescription must “be dated as of, and signed on, the day issued” and include written instructions on each prescription indicating the earliest date on which that prescription may be filled.

Physician Impairment: What Should I Do?

by Eric Hedberg, MD

Alabama Physician Health Program

What do you do if you or another physician you know has a problem that could cause impairment? The problem could be burnout, depression or a problem with alcohol or drugs. These kinds of problems are embarrassing and difficult to face. If impairment occurs, then a licensed professional can be in jeopardy of losing his/her license and career.

There is usually a desire to do something, to preserve reputations and careers, but because of stigma or indecision we sometimes wait and just hope things get better. They almost always get worse.

Human beings have problems! Physicians are human beings who have problems just like other humans. This seems obvious; however, many health professionals suppress the idea that they can be vulnerable. We have the false sense that having medical knowledge somehow protects us from illness.

In general, doctors don't take good care of themselves. We know from research that physicians tend to seek general medical check-ups less often than controls and tend to wait longer

before seeking consultation for serious symptoms.¹ We tend to diagnose and treat ourselves and/or obtain treatment from friends.² Doctors seem to have difficulty in accepting the role of the patient and fear the potential or real loss of status and authority associated with becoming a patient.

Stress, depression, anxiety, and substance dependence among physicians are significant problems with a lifetime prevalence of 10-15%.³ Last year the Alabama Physicians Health Program (APHP) received 76 referrals for physicians with problems. If you know of a colleague you

suspect may be impaired, you are obligated by Alabama state law 34-24-361b to report that colleague. Fortunately, a report to APHP can be made rather than to the Alabama Board of Medical Examiners.

APHP was developed to help. We can offer assistance in several important ways:

1. The Medical Board has agreed to allow confidential assistance by APHP. (i.e., they accept participation in APHP in lieu of their need to investigate potential impairment.) APHP allows

physicians to be evaluated and treated confidentially.

2. If you call APHP about a colleague who may have a problem, you are protected legally by state law. (You cannot be sued.)
3. We have extensive experience in dealing with problems that can cause impairment. We recommend that as a first step an adequate evaluation be done. We generally give three choices of approved evaluation sites.
4. We are experienced at doing professional interventions in the least confrontational manner with good results.
5. Physicians involved in the evaluation, treatment and monitoring process through APHP have excellent outcomes. We are able to provide support and advocacy such that the vast majority of physicians maintain their clinical practice.

There are many other benefits to our program. If you or a colleague are having a problem, please have the courage to call and discuss the problem confidentially and/or anonymously. **Contact us at (334) 954-2596 or www.alabamaphp.org.**



¹ Edelstein EL. Physicians as Patients: A Comparative Study of Attitudes of Physicians and Non-Physicians. *Psychopathology*. 1984; 17:213-216.

² Stoudemire A, Rhoads JM. When the Doctor Needs a Doctor: Special Considerations for the Physician-Patient. *Annals of Internal Medicine*. 1983; 98(Part 1): 654-659.

³ Anthony JC. Prevalence of substance use among US physicians. *JAMA* 1992; 11:268(18):2518.

Limited Purpose Schedule II Permit (LPSP)

Act 2013-223 of the Alabama Legislature, effective Oct. 1, 2013, and codified as Ala. Code § 20-2-260, authorized the Board of Medical Examiners to create a Limited Purpose Schedule II Permit (LPSP) to permit Physician Assistants (PAs), Certified Registered Nurse Practitioners (CRNPs) and Certified Nurse Midwives (CNMs) to lawfully prescribe, administer and authorize for administration Schedule II controlled substances. An LPSP may not be utilized for purchasing, obtaining, maintaining or ordering of any stock supply or inventory of any controlled substance in any form. It is the intent of the law that the LPSP may be used only at the Board's discretion and as limited by the Board to specific circumstances and specific drugs.

On Aug. 29, 2014, proposed Board Rules, Chapter 540-X-20, Limited Purpose Schedule II Permit (LPSP), were published in the *Alabama Administrative Monthly*

for public comment. The public comment period ended Oct. 3, 2014. The Board will consider the rules for final adoption at its meeting on Oct. 15, 2014. If the Board adopts the proposed rules as final rules, they will become effective on Nov. 20, 2014. Application forms will be made available beginning on Nov. 20, and LPSPs will be issued to qualified, approved applicants beginning Jan. 1, 2015.

To qualify for an LPSP, the mid-level practitioner must hold a current, active and unrestricted Qualified Alabama Controlled Substances Certificate (QACSC) for Schedules III, IV and V; have a current registration or collaborative practice agreement; and submit the application forms and fee.

Once an LPSP is issued, the permit holder must contact the Drug Enforcement Administration for issuance of a new DEA registration that includes Schedule II controlled substances.

Welcome new Board member: Mark H. LeQuire, MD



Mark LeQuire, MD

Mark H. LeQuire, MD, who is serving a three-year term on the Board of Medical Examiners, is a Vascular and Interventional Radiologist with Montgomery Radiology Associates, P.A. He is licensed to practice in eight southeastern states and is staff radiologist at 15 hospitals in Alabama.

Dr. LeQuire attended undergraduate school at the University of Alabama where he graduated Phi Beta Kappa, and earned his doctor of medicine degree from the University of Alabama School of Medicine. After joining the Air Force, he completed internship, residency and fellowship training while stationed at Lackland AFB, Texas. Dr. LeQuire was a partner with Charlotte

Radiology, P.A., in North Carolina for 11 years before joining the Montgomery practice in 2001.

The list of honors and leadership positions Dr. LeQuire has held is both impressive and extensive. He is equipped with a wealth of knowledge and experience to serve on the Board.

We applaud Dr. LeQuire not only for his dedication to the profession but also his continuous efforts in giving back to the community in which he lives.

Welcome, Dr. LeQuire!

NEW! PA Corner

The purpose of the PA Corner is to offer you information and knowledge that will strengthen your ability to practice and provide quality care for your patients.

Did you know?

ASPA hosts an annual meeting offering 25 *AMA PRA Category 1 Credits*[™] required annually for license renewal. This includes four hours of pharmacology needed every two years to meet the CME requirement for QACSC renewal.

For more information, go to the ASPA website: <http://www.myaspa.org>.

Your Medical License

As a physician, your license to practice medicine in the State of Alabama is one of your most important assets. It allows you to apply what you learned during years of school and post-graduate training to earn a livelihood to support your family. Exercise care to protect this asset.

Report of Public Actions of the Medical Licensure Commission and Board of Medical Examiners

MLC – July 2014

◆ On July 30, the Commission entered an Order removing all restrictions from the license to practice medicine in Alabama of **Samuel W. Beenken, MD**, lic. no. MD.15438, Calera, AL.

◆ On Jul. 7, the Commission entered an Order approving one and denying another practice plan submission by **Mark P. Koch, DO**, lic. no. DO.322, Monroeville, AL.

◆ On Jul. 7, the Commission entered an Order revoking the license to practice medicine in Alabama of **Diana K. McCutcheon, MD**, lic. no. MD.19246, Rogersville, AL.

◆ On Jul. 7, the Commission entered an Order denying a motion to remove from disciplinary status the license

to practice medicine in Alabama of **W. Ricardo Montiel, MD**, lic. no. MD.18168, Prattville, AL.

◆ On Jul. 7, the Commission entered an Order terminating the probationary status of the license to practice medicine in Alabama of **Rock Navarkal, MD**, lic. no. MD.30114, Denver, CO.

◆ On Jul. 7, the Commission entered an Order revoking the license to practice medicine in Alabama of **Joseph F. Piazza, MD**, lic. no. MD.27961, Ft. Lauderdale, FL.

MLC – August 2014

◆ On Aug. 13, the Commission entered an order approving a practice plan submission by **Mark P. Koch, DO**, lic. no. DO.322, Monroeville, AL.

BME – September 2014

◆ On Sept. 9, the Board issued an Order terminating the Voluntary Restrictions previously attached to the certificate of qualification and license to practice medicine in Alabama of **Jarrold Stewart Roberts, MD**, lic. no. MD.29094, Auburn, AL.

Non-disciplinary action (administrative fine) for failure to renew ACSC but continuing to write controlled substances:

- **Larry E. Thorne, MD**, lic. no. MD.18478, Auburn, AL
- **Frank B. Benson, III, MD**, lic. no. MD.7906, Decatur, AL

Continuing Medical Education

FOR ADDITIONAL CREDITS TO MEET 2014 CME REQUIREMENT

Register today to attend a 3-day CME event November 21-23, 2014, at The Wynfrey Hotel Birmingham and receive **18.75 AMA PRA Category 1 Credits™**

Medical Ethics
Friday, November 21

Prescribing of Controlled Drugs
Saturday, November 22

ER/LA Opioid Analgesics REMS
Sunday, November 23

To register go to masalink.org/education and click on Medical Ethics, Prescribing and ER/LA Opioid REMS Course.

Questions? Contact Margaret at (334) 954-2500 or mmcguire@masalink.org.

2015 CME ACTIVITIES

Jan. 17-18 Prescribing of Controlled Drugs and ER/LA Opioid REMS
Renaissance Montgomery Hotel & Spa

April 16 Medical Records and Ensuring Quality in the Collaborative Practice
2015 Annual Session
Renaissance Montgomery Hotel & Spa

July 10-12 Prescribing of Controlled Drugs and ER/LA Opioid REMS
Grand Hotel – Point Clear

Nov. 20-22 Medical Ethics, Prescribing of Controlled Drugs and ER/LA Opioid REMS
Westin Hotel – Huntsville



Alabama BME Newsletter and Report

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Look inside for important news
from the Board of Medical Examiners
that pertains to your license to practice
medicine in Alabama.



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Receive alerts for new public actions,
agendas, newsletters and rules.

Change of Address

Alabama law requires that every
licensed physician notify the Board
of Medical Examiners in writing
within 15 days of a change of the
physician's practice location
address and/or mailing address.

All current licensees receive the Board of Medical Examiners *Newsletter and Report* at their address of record at no charge. Licensees may also choose to receive the newsletter by e-mail. Non-licensee subscriptions to the newsletter are by e-mail only. If you would like to receive the newsletter by e-mail, please send a request to albmenews@yahoo.com.