The members of the Missouri State Board of Registration for the Healing Arts (“Board”) convened at 7:00 p.m. on Sunday, July 8, 2018, via a conference call, which originated from the Board office at 3605 Missouri Blvd., Jefferson City, Missouri 65109.

**Board Members Present:**
David A. Poggemeier, MD, President  
Jade A. James, MD, Secretary  
James A. DiRenna, Jr, DO, Member  
Jeffrey S. Glaser, MD, Member  
Sarah Martin, PhD, Member  
David E. Tannehill, DO, Member

**Board Members Absent:**  
Katherine Mathews, MD, Member

**Staff Present:**  
Connie Clarkston, Executive Director  
James Leggett, Associate Executive  
Hong Chen, Associate General Counsel  
Katie Struemph, Associate General Counsel  
William Smittle, DO, Chief Medical Officer  
Bridget Otto, Senior Office Support Assistant

1. **Prerogatives of the Chair**  
Dr. Poggemeier asked for an update on the Impaired Physician Committee meeting and the August 2018 Board Meeting. Ms. Clarkston reported both would be held at the Hilton Garden Inn in Independence Missouri and additional information regarding travel and lodging would be forthcoming. No action was taken by the Board.

2. **Collaborative Practice Rule**  
Emergency rules and proposed amendments were jointly filed by the Board of Healing Arts and the Board of Nursing to extend the mileage limitation and enable APRNs and collaborating physicians to practice to seventy-five (75) miles apart, whether the APRN works in an health professional shortage area or not. The rules appeared in the Missouri Register on May 15, 2018 and the official comment period for the proposed rule ended on June 14, 2018. One (1) written comment was received from the Missouri Association of Osteopathic Physicians and Surgeons (MAOPS) opposing the proposed amendment. Brian Bowles, Executive Director submitted the comments on behalf of the nearly three thousand (3,000) physicians they represent in the state of Missouri. MAOPS opposes changes to the mileage limitations between a collaborating physician and an advanced practice registered nurse to seventy five (75) miles by road and expressed concern regarding the use of emergency rulemaking procedures for this unnecessary
change. MAOPS further stated they feel the current fifty mile limitation is adequate. MAOPS’ position is that the fifty-mile limitation was put in place to protect the patient AND the collaborating physician and APRN. It allows for a more rapid response of a collaborating physician in case of emergency, so the patient can receive appropriate medical care. Expanding this distance jeopardizes patient safety. Equally important, expanding this distance jeopardizes the collaborative relationship, not only for the collaborating physician who has placed his/her license on the line in order to provide expanded access in the first place, but for the APRN who has willingly agreed to practice under the terms specified in the agreement. MAOPS worries that fewer physicians will be willing to risk their license as restrictions are weakened, thus exacerbating the access to care issue for which this rule was promulgated. MAOPS further states that we cannot forget that physicians are essentially loaning their licenses to APRNs to allow them to practice independently without direct supervision. The physician licenses need to be protected and the Board of Healing Arts has a duty to ensure this, in order that patients have access to quality medical care when needed. MAOPS further states that no mileage restriction is in place for collaborating physicians and APRNs using telemedicine. This was passed in statute and promulgated in rule several years ago to "solve" the mileage issue of concern to the nurses. MAOPS questions the motivation of a rule to increase the mileage restriction to seventy-five (75) miles, when an avenue already exists for unlimited mileage. If collaborating physicians and APRNs do not have the technology or knowledge to effectively use telemedicine in their collaboration, shouldn't we question the wisdom of increasing the mileage restriction to accommodate them? Addressing the decision that this be promulgated as an emergency rule, MAOPS feels strongly that this was a politically motivated decision, and not in the best interest of patients or of the collaborating physicians and APRNs. MAOPS states that they know of no data that suggests that 1) the fifty-mile (50) restriction is posing a public health threat, or 2) that increasing it to seventy-five (75) miles will solve the access to care issue cited. Lacking such data, MAOPS question the necessity of the emergency rule, and are concerned with the precedent this sets for future emergency rulemaking. Again, current law allows for no mileage restriction if telemedicine is used in the collaboration, making not only the emergency rule, but the rule in general, unnecessary. However, if the Board feels the need to promulgate this rule, MAOPS asks that it be made very clear in the rule that the collaborating physician has the sole discretion to choose whatever mileage limitation they feel comfortable with, up to seventy-five (75) miles.

A motion was made by Dr. James and seconded by Dr. DiRenna to respond to the comment stating: The Board appreciates the comment received from MAOPS and reiterates this amendment was a difficult discussion for the Board and the changes were made in good faith. The Board believes that collaborative practice protects the health, welfare and safety of the public. The Board is not interested in making any further changes that they believe will compromise Missouri citizens. Dr. DiRenna, Dr. Glaser, Dr. James, Dr. Martin and Dr. Poggemeier voted in favor of the motion. Dr. Tannehill abstained. Dr. Mathews was absent. The motion carried.

Motion was made by Dr. Glaser and seconded by Dr. James to proceed with filing the Final Order of Rulemaking with no changes to the text of the proposed amendment. Dr. DiRenna, Dr. Glaser, Dr. James, Dr. Martin, Dr. Poggemeier and Dr. Tannehill voted in favor of the motion. Dr. Mathews was absent. The motion carried unanimously.
3. Physical Therapy Licensure Compact Rule
The Physical Therapy Compact Commission held a special meeting on June 5, 2018 to review an amendment to Rule 2.1. of the Physical Therapy Compact Rules. The Commission voted to adopt the amendment and the rule became effective on June 5, 2018. The Advisory Commission for Physical Therapy reviewed the rules on June 26, 2018 and recommend to the Board the rules be adopted by the Board. The Physical Therapy Compact Commission announced that compact privileges will be available for the states of Missouri, North Dakota, and Tennessee starting Monday, July 9, 2018. In order to fully implement the Physical Therapy Licensure Compact in Missouri, the Board will need to adopt rules associated with the compact and incorporate by reference the Physical Therapy Compact Rules.

Motion was made by Dr. DiRenna and seconded by Dr. Glaser to approve the Physical Therapy Compact Rules as submitted and proceed with seeking approval to file. Dr. DiRenna, Dr. Glaser, Dr. James, Dr. Martin, Dr. Poggemeier and Dr. Tannehill voted in favor of the motion. Dr. Mathews was absent. The motion carried unanimously.

Closed Session
Motion made by Dr. DiRenna and seconded by Dr. James to go into closed session pursuant to sections 610.021(1), (3), (5), (7) and (14), 324.001.8 and 324.001.9, and 334.001, RSMo. Dr. DiRenna, Dr. Glaser, Dr. James, Dr. Martin, Dr. Poggemeier and Dr. Tannehill voted in favor of the motion. Dr. Mathews was absent. The motion carried unanimously.

Adjournment
Motion made by Dr. DiRenna and seconded by Dr. James to adjourn the meeting at approximately 9:35p.m. Dr. DiRenna, Dr. Glaser, Dr. James, Dr. Martin, Dr. Poggemeier and Dr. Tannehill voted in favor of the motion. Dr. Mathews was absent. The motion carried unanimously.