



HB 320

Board of Medical Examiners

Testimony

Business, Labor, and Economic Affairs Committee

By Ryan Burke, EMT

Madame Chair and members of the committee; my name is Ryan Burke and I am here to represent the Montana Board of Medical Examiners and voice our concerns on adding another member to the Board.

The Board of Medical Examiners' primary responsibility and obligation is to protect health care consumers through proper licensing and regulation of acupuncturists, physicians, EMTs, physician assistants, podiatrists, and nutritionists.

I want to first thank Representative Schmidt for her interest in the Board's membership. Currently, the Board is comprised of volunteers who all represent either one of the occupations regulated by the board or the general public. In your wisdom, the legislature added a representative to the Board during the 2009 legislative session to represent volunteer EMTs. I am honored to serve as the first representative for volunteer EMTs on the Board of Medical Examiners.

Acupuncturists remain the only occupational group that does not have a seat on the Board and such representation is being considered during this session and has passed the House. Should this bill pass, the size of the Board will increase to fourteen members.

The Board believes adding a second representative for EMTs is simply not needed. There already exists a seat on the board for EMTs and few serious EMT issues come before the Board. Also, adding another member to the Board will increase Board costs and likely lead to increased licensure fees for EMTs, most of which are volunteers.

Personally, I live and work in Great Falls where I am a volunteer emergency medical technician and a full time firefighter. Essentially, I wear both hats as a paid and unpaid EMT.

The 4,756 licensed emergency medical service providers are well represented by the medical board, regardless of their modality or position. Along with my EMT position on the board, we also have two EMTs on staff, and two medical directors and experienced physicians with EMS knowledge on the Board. There is a medical director committee created to research EMS related issues and bring recommendations to the Board. And soon, we will be adding a part time state medical director that will spend much of their time dealing with EMS issues as well.

The Board doesn't have jurisdiction over firefighters, with the exception of those who hold a license as an EMT. The Board does establish protocols for patient care during emergency medical service calls. In Montana, there are many pre-hospital EMT positions and four different EMT levels- first responder through paramedic. It is impractical to have a representative for every position.

The Board works exceptionally well with the balance you created of five medical doctors, a doctor of osteopath, a podiatrist, a nutritionist, a physician assistant, a volunteer EMT, and two public members. As I noted earlier, the board seat established to represent EMTs is new, has existed for just over one year. It warrants giving that new structure and representation more time to become more firmly established.

I am available to answer any questions you may have as you deliberate this bill. Thank you for your consideration and, again, the Board asks that you not pass HB 320.

Board Members

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Board Quick Facts

- License and regulate acupuncturists, emergency medical technicians, nutritionists, physicians, residents, telemedicine physicians, physician assistants and podiatrists
- 9,923 active licensees
- Receive about 170 complaints each year
- Takes an average of 30 days to get a license to practice medicine in Montana
- Board consists of 13 members. 12 Board members are appointed by the Governor and confirmed by the Senate. One member is selected by the Montana Academy of Physician Assistants.
- Board members serve staggered four year terms
- Board meets minimum of six times/year

Board Contact Information

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Emergency Medical Technicians

- As of February 1, 2011 there are 4,756 licensed EMTs
- 518 new licenses were issued in CY 2010
- 503 endorsement applications approved in CY 2010
- EMTs pay a \$20 - \$60 application fee for initial licensure
\$20: EMT First Responders \$30: EMT Basic
\$40: EMT Intermediate \$60: EMT Paramedic
- Licensed EMTs renew their license every two years

*The duty of the board goes beyond licensing and regulation.
We are obligated to protect health care consumers.*

What is a State Medical Board?

The Montana Board of Medical Examiners' primary responsibility and obligation is to protect health care consumers through proper licensing and regulation of physicians, telemedicine physicians, residents, physician assistants, podiatrists, nutritionists, acupuncturists and emergency medical technicians.

The ability to practice in one of the licensed occupations is not an inherent right of an individual, but a privilege granted by the people of a state acting through their elected representatives. The public is protected from the unprofessional, improper and incompetent practice through laws and regulations. It is the duty of the Board of Medical Examiners to regulate the practice.

Medical Board Structure

Board membership is composed of volunteers who are charged with upholding the practice acts. Twelve voting members are appointed by the governor and one nonvoting member is selected by the Montana Academy of Physician Assistants. Most occupations licensed and regulated by the board have a representative member with the exception of acupuncturists.

The board is attached for administrative purposes to the Department of Labor and Industry. Funding comes from licensing fees. Any fines imposed are deposited into the general fund. There are six licensing and program staff, including an executive director.

Licensure

Assembling a quality health care workforce to meet the needs of the public begins with licensure. Through the licensure process, the state ensures that individuals have appropriate education and training, and that they abide by recognized standards of professional conduct.

Regulation

The board is charged with the responsibility of evaluating when a licensee's professional conduct or ability to practice medicine warrants modification, suspension or revocation of the license to practice. Board members meet on a monthly basis, devoting hours of time and attention, to oversee the practice by reviewing complaints from consumers, information from hospitals and other health care institutions, and reports from government agencies. The board has the power to further investigate a complaint and can impose some form of discipline, such as mandated continuing medical education, medical treatment, or seek to restrict, suspend or revoke a license.