



Texas Physician Health Program

GOVERNING BOARD MEETING
333 Guadalupe, Tower 2, Suite 520
Austin, Texas

May 17, 2019

The meeting was called to order on May 17, 2019 at 9:09 a.m. by Presiding Officer Anand Mehendale, M.D. Governing Board members present were: Eugene Boisaubin, M.D.; Mary Boone, LCSW, LCDC; Jeffery Butts, D.O.; Viki Chancellor, M.D.; Helaine Lane; Brian “Dean” McDaniel, D.O.; Vicki Waters, PA-C; George Willeford, III, M.D.; and Susan Wynne, M.D. Governing Board Member not present was Ronald Cook, D.O., MS. Staff present were: Executive Medical Director Russel Carter, M.D., MBA, PHP manager Rui Bernardo, Executive Director Brint Carlton, J.D.; Assistant General Counsel, Amy Swanholm, J.D.; Assistant General Counsel Wendy Pajak, J.D.; and various other staff.

Agenda Item #1: Call to order, roll call, welcome.

Agenda Item #2: Discussion, recommendations, and possible action regarding November 9, 2018 Governing Board meeting minutes.

Dr. Boisaubin moved to accept the minutes as presented, Dr. Chancellor seconded, and the motion passed unanimously.

Agenda Item #3: Discussion, recommendations, and possible action regarding the appointment of new PHP Governing Board members and election of officers.

New Governing Board members Dr. Butts, Dr. Willeford, and Dr. Wynne were introduced and all Governing Board members briefly introduced themselves.

Dr. Mehendale nominated Dr. McDaniel as Vice President and Ms. Lane as Secretary, both agreed to the positions. Dr. Chancellor seconded the nomination. The motion passed unanimously.

Agenda Item#4: Discussion, recommendations, and possible action regarding Memorandum of Understanding and other issues between the TXPHP and the Texas Medical Board.

TMB will continue to provide TXPHP with IT assistance, legal counsel, financial assistance, human resources, governmental affairs and communications, all while maintaining privacy for the participants. Ms. Swanholm discussed her two separate roles as counsel for both TMB and TXPHP and that there is a firewall between the two. Mr. Carlton discussed TMB’s support for TXPHP and various Governing Board members expressed support for a continuing positive relationship.

TMB's increased involvement occurred after a recent audit. Currently Mr. Bernardo is the temporary manager of TXPHP and is assisting with the program. Dr. Mehendale stated that he would like to provide additional training to assist the clinical coordinators in balancing probation and advocacy.

Agenda Item #5: Discussion, recommendations, and possible action regarding process of backlogged referrals.

Mr. Bernardo discussed pending referrals. The numbers that were provided in February were inaccurate. He is currently updating referrals in Recovery Trek to reflect the backlog for tracking purposes and taking over the intake process so that coordinators can focus more on the participants. TXPHP is collecting fees on the front end, and working on collecting past due fees. Dr. Carter discussed how he is processing the backlog.

Dr. Mehendale would like to have a dual program: one program for professionals and the other for SB202s. The SB202s would have a lower drug testing frequency and reduced cost.

Agenda Item# 6: Discussion, recommendations and possible action regarding performance of intake interviews by EMD.

The Board discussed and provided direction to Dr. Carter regarding the use of telephone interviews instead of in-person interviews. Telephone interviews are allowed by rule.

Agenda Item #7: Discussion, recommendations and possible action regarding the personnel structure of PHP.

Ms. Lane moved to go into executive session, Dr. Boone seconded and the motion passed unanimously.

At 10:15 a.m. the Board went into executive session.

The public meeting reconvened at 10:57 a.m.

Agenda Item #8: Discussion, recommendations, and possible action regarding rules review to 22 TAC Chapter 180.

Ms. Swanholm will review rules to determine if updates are needed. Dr. Mehendale requested that all Board members also review rules and plan to discuss TXPHP structure at the next Board meeting.

Agenda Item #9 Discussion, recommendations, Disciplinary Process Review Committee (DPRC) Disposition updates and possible action regarding Case Advisory Panels and case reviews.

Case No.	Board
1	This case has been emergently referred to the Texas Medical Board and will be presented to Disciplinary Process Review Committee for ratification.
2	This case has been emergently referred to the Texas Medical Board and will be presented to Discipline and Ethics committee of the Texas Board of Respiratory

3	This case has been emergently referred to the Texas Medical Board and will be presented to Disciplinary Process Review Committee for ratification.
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5	This case has been emergently referred to the Texas Medical Board and will be presented to Disciplinary Process Review Committee for ratification.
6	<p>Dr. Boisaubin moved to refer the participant to TMB, Dr. Chancellor seconded and the motion passed.</p> <p>By Rule, this case is being reported to the Disciplinary Process Review Committee of the Texas Medical Board, with the recommendation that this case remain with TXPHP under zero tolerance.</p>
7	<p>Ms. Lane moved for the participant to remain with PHP, Dr. Chancellor seconded, and the motion passed.</p> <p>By Rule, this case is being reported to the Disciplinary Process Review Committee of the Texas Medical Board, with the recommendation that this case remain with TXPHP under zero tolerance.</p>
8	<p>Dr. Boisaubin moved that the participant to be referred to TMB, Dr. Wynne seconded, and the motion passed.</p> <p>By Rule, this case is being reported to the Disciplinary Process Review Committee of the Texas Medical Board, with the recommendation that the case be referred to TMB.</p>
9	<p>Dr. Boisaubin moved that the participant be referred to TMB, Dr. Chancellor seconded, and the motion passed.</p> <p>By Rule, this case is being reported to the Disciplinary Process Review Committee of the Texas Medical Board, with the recommendation that the case be referred to TMB.</p>
10	<p>Ms. Lane moved that the participant to be referred to TMB, Dr. Chancellor seconded, and the motion passed.</p> <p>By Rule, this case is being reported to the Discipline and Ethics committee of the Texas Board of Medical Radiologic Technology, with the recommendation that the case be referred to TMB.</p>
11	<p>Dr. Wynne moved that the participant to be referred to TMB, Dr. Boisaubin seconded, and the motion passed.</p> <p>By Rule, this case is being reported to the Discipline and Ethics committee of the Texas Board of Respiratory Care, with the recommendation that the case be referred to TMB.</p>
12	<p>Dr. Chancellor moved that the participant to be referred to TMB, Dr. Boisaubin seconded, and the motion passed.</p> <p>By Rule, this case is being reported to the Discipline and Ethics committee of the Texas Board of Medical Radiologic Technology, with the recommendation that the case be referred back to TMB.</p>

13	<p>Ms. Lane moved that the participant to remain with PHP with increased testing, Dr. Chancellor seconded, and the motion passed.</p> <p>By Rule, this case is being reported to the Disciplinary Process Review Committee of the Texas Medical Board, with the recommendation that this case remain with TXPHP under zero tolerance.</p>
14	<p>Dr. Chancellor moved to refer the participant to TMB, Dr. Boone seconded, and the motion passed unanimously.</p> <p>By Rule, this case is being reported to the Disciplinary Process Review Committee of the Texas Medical Board, with the recommendation that this case remain with TXPHP under zero tolerance.</p>
15	<p>Dr. Wynne moved that the participant to be referred to TMB, Dr. Boisaubin seconded, and the motion passed.</p> <p>By Rule, this case is being reported to the Disciplinary Process Review Committee of the Texas Medical Board, with the recommendation that the case be referred to TMB.</p>
16	<p>Dr. McDaniel moved that the participant remain with PHP with zero tolerance, seconded by Dr. Butts. Dr. Wynne and Ms. Lane opposed. The motion carries.</p> <p>By Rule, this case is being reported to the Disciplinary Process Review Committee of the Texas Medical Board, with the recommendation that this case remain with TXPHP under zero tolerance.</p>
17	<p>Dr. Boisaubin moved that the participant to remain with PHP, Dr. Chancellor seconded, and the motion passed.</p> <p>By Rule, this case is being reported to the Disciplinary Process Review Committee of the Texas Medical Board, with the recommendation that this case remain with TXPHP.</p>
18	<p>Dr. Chancellor moved that the participant to be referred to TMB, Dr. Butts seconded, and the motion passed.</p> <p>By Rule, this case is being reported to the Disciplinary Process Review Committee (DPRC) of the Texas Medical Board (TMB), with the recommendation that the case be referred to TMB.</p>
19	<p>Ms. Lane moved that the participant to be referred to TMB, Dr. Wynne seconded, and the motion passed unanimously.</p> <p>By Rule, this case is being reported to the Disciplinary Process Review Committee (DPRC) of the Texas Medical Board (TMB), with the recommendation that the case be referred back.</p>
20	<p>Ms. Lane moved that this case to be emergently referred to TMB, Dr. Boisaubin seconded, and the motion passed.</p> <p>This case is being emergently referred to TMB and will be reported to the Disciplinary Process Review Committee of the Texas Medical Board for ratification.</p>

Agenda Item #10: Executive Medical Director Report:

Dr. Carter discussed the following.

- a. Report on program enrollment to date, program performance, program operations, and program policies.
- b. Personnel Report
- c. Budget Report

Agenda Item #11: Legislative and Sunset report (Mr. Carlton):

PHP has been approved for two additional positions.

Agenda Item #12: Legal Report

Ms. Swanholm reported on the Texas Attorney General's Opinion KP-0243 regarding legal protection for Advisory Committee members.

Agenda Item #13: Discussion, recommendations, and possible action regarding scheduling, procedures and upcoming Board meetings, member rotation, Case Advisory Panel (CAP) scheduling, and possible agenda topics.

Board members discussed the 2020 schedule. Dr. Boone will be rotating off the Board in November. Board members should check email at least once per week. Members can reach out to IT if assistance is needed.

Agenda Item #14: Presentation by Dr. Navjot Bedi, "Use of Controlled Substances in the Addicted Healthcare Population"

Agenda Item #15: Discussion, recommendations, and possible action regarding recommended monitoring standards for clinical issues including the use of benzodiazepines, stimulants, and opioids for people with substance use disorders.

Board members discussed the use of stimulants in persons with substance use disorders.

Dr. Boisabuin moved to create a subcommittee to discuss what parameters need to be put in place to monitor the use of opioids for health professionals. Ms. Lane seconded the motion and the motion carried. The subcommittee includes: Dr. Mehendale, Dr. McDaniel, Dr. Butts and Dr. Wynne.

Agenda Item #16: Open forum for public comments

No comments.

Agenda Item #17:

Dr. Wynne moved to adjourn the meeting, Ms. Lane seconded, and the motion carried.

Adjourned at 2:49 p.m.