

RESOLUTION 6 - 2008

Subject: Support an Evaluation of the State Medical Examining Board Funding and Functioning

Introduced by: Dane County Medical Society

Referred to: Quality and Clinical Outcomes

1 Whereas, The State Medical Examining Board (MEB) is a mechanism through which Wisconsin
2 and its physicians have accountability over the practice of physicians in the state of Wisconsin
3 and investigate complaints against physicians and take appropriate actions for those complaints;
4 and
5

6 Whereas, State MEB records show that less than 10% of complaints filed against physicians from
7 2002 to 2006 have resulted in some type of discipline and the Board chair admits that some
8 complaints are not adequately investigated or investigated in a timely fashion including cases
9 from 2004 that are still being adjudicated; and
10

11 Whereas, The State MEB member board is appointed by the governor and operates within the
12 state budget; and
13

14 Whereas, The stipend for physicians and public members for participation is small and funding of
15 the MEB functions and staff may be impacting on the ability of the State MEB to adequately
16 investigate complaints and rehabilitate physicians; and
17

18 Whereas, The Wisconsin Medical Society is the voice of physicians in the state of Wisconsin and
19 through its strategic initiatives, strives to improve the quality of care provided by physicians in
20 the state as well as provide a mechanism for accountability of physician practice; therefore be it
21

22 RESOLVED, That the Wisconsin Medical Society support the state of Wisconsin having a fully
23 funded and staffed State Medical Examining Board to be able to effectively perform its duty of
24 oversight of physician practice and investigation of complaints against physicians in a timely
25 manner to protect the health of the people of Wisconsin; and be it further
26

27 RESOLVED, That the Wisconsin Medical Society ask the Department of Regulation and
28 Licensing to: 1) evaluate the current funding and staffing level of the State Medical Examining
29 Board with regards to its ability to perform its duty of oversight of physician practice and
30 investigation of complaints against physicians in a timely manner, and 2) ask the legislature to
31 evaluate the feasibility of the State MEB returning to an independent board.

Fiscal note: Within current budget.

Relevant Policies

Society:

MEB-001

Dissemination of Information to the Public: The Wisconsin Medical Society supports the concept of providing the public with information on a physician's education, practice and disciplinary history. (BOD, 1299)*

MEB-002

Disciplinary Priorities for the Department of Regulation and Licensing: The Wisconsin Medical Society opposes identifying physicians who may warrant evaluation and investigation even though they are not the subject of a complaint filed with the Medical Examining Board unless such an identification is evidence-based and focuses on attributes that have been shown to impact patient outcomes. (BOD, 1299)*

MEB-005

Physician License Renewals and Student Loans: The Wisconsin Medical Society supports *Wisconsin Medical Society Policy Compendium 2007* Copyright © 2007 by the Wisconsin Medical Society

100 Practice, Organizational and Interprofessional Issues

* Policy currently under review.

the Department of Regulation and Licensing's ability to deny an application to renew a health care credential if the applicant is in default without cause on a student loan made, insured or guaranteed by a federal or state governmental entity. (HOD, 0405)

MEB-006

Centralized Credentials Verification Organizations: The Wisconsin Medical Society encourages

the use of certified credentials verification organizations (CVOs) by hospitals, managed care organizations and other health care facilities in Wisconsin. (HOD, 0405)

MEB-008

Issuance of Administrative Warnings by the Medical Examining Board: The Wisconsin Medical Society supports the issuance of Administrative Warnings by the disciplinary boards under the jurisdiction of the Department of Regulation and Licensing (including the Medical Examining Board) as a disciplinary measure when the board determines that there is substantial evidence of misconduct by the holder of the credential but determines that a disciplinary proceeding should not be commenced. An administrative warning may not be used as evidence that a credential holder is guilty of misconduct, but if a subsequent allegation of misconduct is made, the matter relating to the issuance of the administrative warning may be reopened or the administrative warning may be used in a subsequent disciplinary proceeding as evidence that the credential holder had actual knowledge that certain practices were contrary to law. (HOD, 0405)

MEB-010

Adequate Funding for the Wisconsin Medical Examining Board: The Wisconsin Medical Society

- Supports adequate funding for the Medical Examining Board to fulfill its responsibility.
- Offers its assistance for consultation purposes whenever questions of incompetence arise and asks that specialty societies in Wisconsin be consulted in a like manner. (HOD, 0405)

MEB-012

Medical Examining Board: The Wisconsin Medical Society (Society) strongly supports

the mission and activities of the Medical Examining Board of Wisconsin's Department of Regulation and Licensing (MEB), but has longstanding concerns regarding the staffing and workload of the MEB. The Society

- Expresses persistent concerns on the part of its membership regarding the MEB's ability to fulfill its legislative obligations, given the inadequate number of support staff assigned to carry out these obligations.
- Supports legislation to strengthen the physician discipline role of the MEB, in order to meet the goal of protecting Wisconsin physicians and patients.

The Society recommends

- That there should be an adequate number of support staff assigned to carry out the duties of the MEB.
- That all licensure fees collected by the MEB should be used exclusively to fund staff to carry out the functions of the MEB, and that staff be assigned exclusively to the MEB. (HOD, 0404)

Wisconsin Medical Society Policy Compendium 2007 Copyright © 2007 by the Wisconsin Medical Society

Practice, Organizational and Interprofessional Issues 101

AMA

H-275.949 Discrimination Against Physicians Under Supervision of Their Medical Examining Board

The AMA opposes the exclusion of otherwise capable physicians from employment, business opportunity, insurance coverage, specialty board certification or recertification, and other benefits, solely because the physician is either presently, or has been in the past, under the supervision of a medical licensing board in a program of rehabilitation. (Sub. Res. 3, A-92; Reaffirmed: BOT Rep. 18, I-93; Reaffirmed: CME Rep. 2, A-05)

E-9.05 Due Process

The basic principles of a fair and objective hearing should always be accorded to the physician or medical student whose professional conduct is being reviewed. The fundamental aspects of a fair hearing are a listing of specific charges, adequate notice of the right of a hearing, the opportunity to be present and to rebut the evidence, and the opportunity to present a defense. These principles apply when the hearing body is a medical society tribunal, medical staff committee, or other similar body composed of peers. The composition of committees sitting in judgment of medical students, residents, or fellows should include a significant number of persons at a similar level of training. These principles of fair play apply in all disciplinary hearings and in any other type of hearing in which the reputation, professional status, or livelihood of the physician or medical student may be negatively impacted. All physicians and medical students are urged to observe diligently these fundamental safeguards of due process whenever they are called upon to serve on a committee which will pass judgment on a peer. All medical societies and institutions are urged to review their constitutions and bylaws and/or policies to make sure that these instruments provide for such procedural safeguards. (II, III, VII) Issued prior to April 1977; Updated June 1994.