NBPME

Minutes National Harbor, MD July 14, 2018 Meeting Room: Chesapeake 7 Room

CALL TO ORDER

President Johnson called the meeting to order at 8:30 a.m. The following board members, liaison representatives, AACPM staff, FPMB staff, NBOME staff, Prometric staff and NBPME staff were present:

Dr. Judy Beto	Amy Lorion (Staff, NBOME)
Dr. Allan Boike (AACPM Liaison)	Dr. Paul Naylor
Diann Brady (Staff, Prometric)	Mori North (Staff, AACPM)
Dr. Gregory Davies	Phil Park (Staff)
Dr. Robert Eckles	Dr. Kathleen Pyatak-Hugar
Dr. Jaime Escalona	Dr. Roland Ramdass
Dr. Denise Freeman (COF Liaison)	Dr. Vivian Rodes
Christopher Girgis (APMSA Liaison)	Jennifer Romero (Staff, Prometric)
Dr. Gretta Gross (Staff, NBOME)	Samantha Sappington (Staff, Prometric)
Dr. Mary Jones Johnson	Dr. Alyssa Stephenson
Dr. Michael LaPan	Ellen Veruete (Staff)
Kerry Lingenfelter (Consultant)	

Dr. James Mahoney and Russell Stoner (Staff, FPMB) joined the meeting by conference call. Dr. Leslie Campbell (APMA Liaison) joined the meeting 9:30 a.m. Dr. Sanjay Sesodia (COF Liaison) was unable to attend the meeting. Liaisons and guests did not attend the Executive Session.

PROMETRIC

Diann Brady, Jennifer Romero and Samantha Sappington

Ms. Romero's presentation included business updates and a review of the NBPME program. A copy of the presentation is attached as Appendix A. Ms. Romero discussed the migration of the NBPME program to Surpass, which includes a snapshot of how it is performing with other programs that have migrated to Surpass. The LOFT support for the Part I and II is planned for the upcoming exams in October and December. Ms. Brady has been working on migrating the items banks for the Parts II and III to Surpass and early next year, Prometric will begin training the item writers on how to use Surpass.

the item writers to write their items directly in Surpass, and will work with a variety of types of computers.

Surpass will allow candidates to access their official score reports online. Candidates will no longer receive a paper copy of the report. With Surpass, there will be a new enhanced format of the score report which Prometric and Ms. Lingenfelter will work together to create.

ProScheduler is a new web registration and scheduling user interface that enables candidates to use their phone and tablets to register and schedule their exams. It also permits a candidate to search over a group of available geographically adjacent test centers in a single view. The transition is planned for Fall, 2018.

ProAdmin is a project that Prometric has been working on at the exam centers. It is a self-service kiosk that will allow candidates to check themselves in for an exam. This will speed up the process of check-in at the centers. Prometric does not have a time frame when NBPME will be using this platform but they will keep the board informed.

Ms. Romero gave a brief review of the June Part III and July Part I exam administrations. Ms. Romero stated that there was an issue during the July Part I administration at the Des Moines center and 20 candidates were displaced from that location due to an internet issue. Prometric was able to contact and reschedule all 20 candidates within a day. Ms. Romero also provided a snapshot of displacements that have occurred over the past two years and candidate volumes from 2014 through 2018.

Mr. Girgis raised a concern that some of the Des Moines displaced Part I candidates experienced an issue with communicating with Prometric. Some of these candidates were on hold for long periods when trying to contact a Prometric representative, and they also encountered long wait times for responses back from Prometric. Ms. Sappington said they would look into the matter and report back to the board.

Ms. Sappington asked why there was a dip in the Part I candidate volumes. Ms. North said enrollment numbers are down and that the enrollment numbers are provided to NBPME each year which provides an opportunity to know what is in the pipeline.

NBOME

Amy Lorion and Dr. Gretta Gross

Dr. Gross and Ms. Lorion presented a progress report for the Part II CSPE Examination. The presentation included details of the April 12-14, 2018 Case Development and Review Workshop, June 4th CSPE Committee Meeting, registration enhancements, 2018 -209 exam schedule, upcoming dates for 2018-2019 and 2019-2020 exam cycles, a new module for communication in healthcare for the candidates and a proposed survey of simulation in the podiatry schools.

Ms. Lorion described a new approach to resolve the dilemma of how much of the communication scoring rubric to publicize to avoid misunderstandings. They have developed a module that illustrates

some of the most common communication pitfalls, as well as good communication behavior with patients. The NBOME has presented a proposal for the board to consider.

The survey of simulation practices in the schools will assist in verifying the validity of the CSPE exam; the results will be available to all and published as podiatric literature; and it will also provide the schools with useful information for their own simulation. Dr. Gross commented that if NBPME approves the survey, all schools will need to participate since there are only a small amount of podiatry schools. On the other hand, the report would be presented in such a way that school identities would not be revealed and could not be inferred. The CSPE committee discussed the survey at its Friday meeting and Dr. Rodes reported that the survey will be a research project that will be standardized; it will meet the research protocol; and any bias of the schools will be removed. The committee feels that we should move forward with the survey but that all schools need to participate and if any opt out, we will not conduct the survey. Dr. Beto stated that if all the schools do not participate, the data will not be nearly as valuable or reliable. Dean Boike questioned what will be on the survey. Dr. Beto said that the deans will help us to define that by asking us what questions they need answered internally and what the deans think are missing from the process. Ms. Lorion gave examples of the types of items surveyed. Dean Boike requested that a copy of prior studies be made available.

A copy of the presentation is attached as Appendix B.

REGISTRATION AND SCORE REPORTING SYSTEMS

Kerry Lingenfelter informed the board that we are moving forward with the candidate bulletins as one online bulletin that will not be provided in a printable format. However, candidates will still be able to print the bulletin since the website is printer friendly. The electronic bulletin will require only one entry when a change is needed in the bulletin and it will be more user-friendly for the candidates.

Ms. Lingenfelter is also working with NBOME, Prometric and FPMB on creating similar score reports and standardized terms and processes for each of the APMLE exams and the reporting organizations.

ORGANIZATIONAL REPORTS

The formal APMA, FPMB, AACPM and APMSA reports were received and accepted. They are included as Appendices C, D, E and F.

FPMB

Russ Stoner presented the FPMB Report and Score Report update which are attached as Appendix C. Mr. Stoner highlighted several items in his reports including the FPMB executive board meeting, FPMB annual meeting webinar, Part III score report volumes, the communication, delivery and procedures for Part III score reports and the details regarding the enhancements, transition and process for FPMB to send all APMLE exam scores to the states.

APMA

Dr. Campbell reviewed her report which is attached as Appendix D. Dr. Campbell reported that they met for the 98th House of Delegates in March at DC. At the meeting they focused on updating their bylaws which included the composition of the board and some other categories that needed to be updated. The information from the meeting will be taken back to the committees and they will be voting on the issues in the assuming House.

Recruitment has been a difficult issue for APMA. APMA needs to continue to make sure that they have qualified podiatry candidates that are coming in and that podiatry is a viable profession moving forward in the future. The House passed Resolution 918 which mandates APMA to develop a strategic plan for student recruitment that will involve the devotion of staff time and financial resources. Dr. Campbell also was pleased to announce that ABFAS had committed to donate \$10,000 to student recruitment and ABPM is contributing \$25,000 to student recruitment. Dr. Pyatak-Hugar asked if the funding was going to be used for actual student recruitment programs. Dr. Campbell said that APMA is working on the strategic plan for student recruitment which APMA is funding and the donations will be used for student recruitment campaigns and programs.

AACPM

Dean Boike presented the report that provides relevant dates for AACPM and NBPME (Appendix E). He stated there has been a lot more coordination between the organizations and that things are working well. Dr. Boike said that they submitted the schedule for CRIP and the Match dates and that things seems to be working well with Prometric on trying to get the dates scheduled for an appropriate match date. Dr. Boike also said that the students still would like to have the same match date as medicine and that they are working on it. Ms. North thanked the board for having NBPME representatives attend the AACPM meeting on Wednesday. She said that the ability to meet in person is very important and is very much appreciated.

APMSA

Christopher Girgis presented the report and it was accepted as presented (Appendix F). Mr. Girgis thanked the board for having representatives attend their meeting yesterday and that many of the questions that he had for the board were answered at that time. One topic that was brought to his attention by the students was a concern about the Part I retake exam date. In previous years there were two months between the first exam and the retake exam and currently, students will only have one month to prepare for the exam. Mr. Park said that at the meeting he told the students that he would convey the concern to Prometric and Prometric will research to see if moving the date is possible. Mr. Park said that he would provide APMSA and AACPM with possible alternate dates and they could decide whether to move from the currently scheduled date.

Mr. Girgis discussed the second topic which a request was to add more questions in the sample exams. Mr. Park said that it's a continual effort to expand and enhance the item bank and since we are using LOFT, we use all of the items in the bank. Mr. Park said that it has taken some time for us to come up with the current sample tests which are actual real questions that were taken from the item bank. Previous sample tests were questions that the psychometricians didn't want to use in the item bank. The current sample tests are good questions and are questions that you would see in a test. Mr. Park said that we will need a year or two or more to come up with more questions for the sample tests. Dr. Beto stated that it's not the quantity of questions but the quality. She explained that it's better to have good questions that are not going to waste your time and that are going to be relevant.

The board thanked Mr. Girgis for his dedication and service on the board and wished him well in his future endeavors.

PRESIDENT'S REPORT

The President's report was accepted as presented.

EXECUTIVE SESSION

MINUTES

The March 17, 2018 minutes and conference call summary were accepted and approved as distributed.

FINANCE COMMITTEE

BUDGET

Dr. Stephenson presented the budget and reported that the committee met by conference call and proposed that we adopt the current budget as presented. Dr. LaPan made the motion to accept the budget, Dr. Johnson seconded the motion and the board passed it unanimously. The budget is attached as Appendix G.

AUDIT

The audit was distributed to the board by e-mail on July 10, 2018. Dr. Beto made the motion to accept the audit, Dr. Eckles seconded the motion and the board passed it unanimously. Mr. Park noted that some of the differences in budget categories between the budget and the audit were simply the result of differences in how calculations are made.

INVESTMENTS

Dr. Stephenson informed the board that the committee and a Vanguard representative participated in a conference call to discuss the current investments. The committee felt that the current investments were on target and recommended that we accept the current investment policies. Dr. Beto made the motion to maintain the current investment policies, Dr. LaPan seconded the motion and the board passed it unanimously.

BYLAWS

Dr. Pyatak-Hugar discussed the proposed bylaw changes that were presented in her report. Dr. Johnson made the motion to accept the changes, Dr. Escalona seconded the motion and the board passed it unanimously. The report is attached as Appendix H.

EXAMINATIONS COMMITTEE

Dr. Naylor said that the committee met on Friday and that they saw the same presentation that was given today. At this time, there were no big issues to report. Dr. Naylor said at the AACPM meeting, NBPME was asked if we could release information on a student's passing score which would assist the schools with their curriculum. Dr. Naylor said that it's not a good idea to do that due to the validity and reliability. Dr. Beto said that it's not NBPME's job to provide any other details regarding our exams other than to provide minimal competency. Dr. Pyatak-Hugar said that instead of having NBPME provide the details, the schools should have their students take the sample test as a mock test which the schools could use those results in advance to help the students and to help develop their curriculum. Dr. Mahoney stated that his experience is that sample exams tend to understate the difficulty of the real exam. Dr. Eckles mentioned that many of the schools are having the students and that they provide the deans with extensive details regarding each student's exam administration. Dr. Naylor, Dr. Beto and Kate Hill will draft a letter of response to AACPM.

CSPE COMMITTEE

Dr. Rodes said that the committee met yesterday and that there were items that they would like to share with the board.

- 1. The committee and CSPE are currently working on a condensed cycle report to share with the deans for transparency. The report is still in the works and it will be provided to the Deans once it's finished.
- 2. The committee discussed on Friday the Communication on Health Care proposal that was presented to the board earlier in the open session. The committee feels that the slide show will be very helpful to the students and that the board should move forward with it. NBOME sent a proposal with four options for the slide show and the committee discussed the option that was the simplest and the least expensive. The committee recommended option #3 of the proposal which is a non-interactive slide show that can be created for \$15,000.00 by NBOME. Dr. Ramdass made the motion to accept option #3, Dr. Stephenson seconded it and the board passed it unanimously.
- **3.** The third topic discussed was the State of the Art of Simulation Survey of all the schools. The committee recommended that the board move forward with the survey if all the schools would participate. Dr. Stephenson made the motion to move forward with the survey, Dr. Escalona seconded it and the board passed it unanimously. The board will send an inquiry to the schools

explaining the survey, its purpose and asking for their participation. The inquiry will stress that if any school opts out of participating, the survey will not be conducted.

NOMINATING COMMITTEE AND ELECTIONS

Dr. Davies presented the Board their recommendations for the board members and officers.

After the Board discussed the nominees, and votes on each position, the following were unanimously approved for the position or office indicated.

- a. FPMB Member Dr. La Russa
- b. State Board Member Dr. Escalona
- c. College Educator Dr. Mahoney
- d. Psychometrician Dr. Naylor
- e. State Board Member Dr. Rodes

Officers:

- a. President Dr. Pyatak-Hugar
- b. Vice President Dr. Stephenson
- c. Secretary/Treasurer Dr. Ramdass

Dr. Pyatak-Hugar again raised the issue that there will be five members age off the board in the near future, and this is an unusually large segment. She said that the Bylaws can be changed in order to avoid this from happening every nine years. The board requested that the Bylaws committee research the topic and report back to the full board by September to allow time to consider any proposed amendments in advance of the March meeting.

FUTURE BOARD MEETINGS:

- a. March 16, 2019, JW Marriott, Washington, DC (provided APMA can accommodate our meeting).
- b. July 13, 2019, Salt Palace Convention Center, Salt Lake City, UT (provided APMA can accommodate our meeting).

ADJOURNMENT

The meeting adjourned at 11:22 a.m.

Respectfully submitted:

Executive Director

Appendix A



NBPME Board Meeting

July 14, 2018

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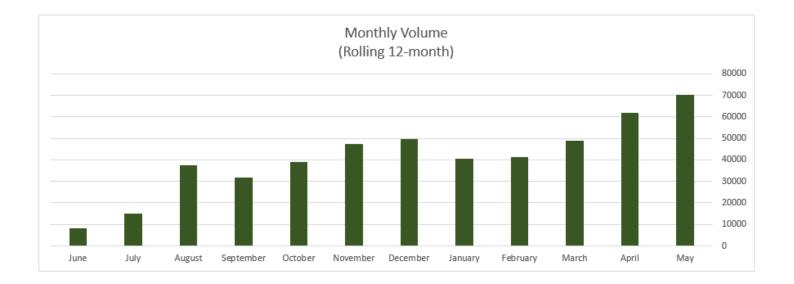


Business Updates and Investments

Surpass Migration



	May 2018	Past 90-days
Volume:	70,292	190,945
Displacement %:	0.03%	0.03%
Restart %:	1.90%	1.92%



Surpass Migration Continued



- + LOFT Support
 - Scheduled into 12.15 release currently planned for October
- + Item Bank Migration
 - Part III migration in process
 - Part II scheduled for the end of the month
- + Surpass item writing training TBD, early 2019



Surpass Migration Continued

- + Transition planned for Part II and Part III in December, 2018
 - Part I transition July, 2019
- Candidates will access electronic portal for official results
 - Paper mailing will be eliminated

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ProScheduler



- + New web registration and scheduling user interface that enables candidates to use their phones and tablets to register and schedule.
- + The new interface enables candidates to search over a group of geographically adjacent test centers.
- + Transition planned for Fall, 2018

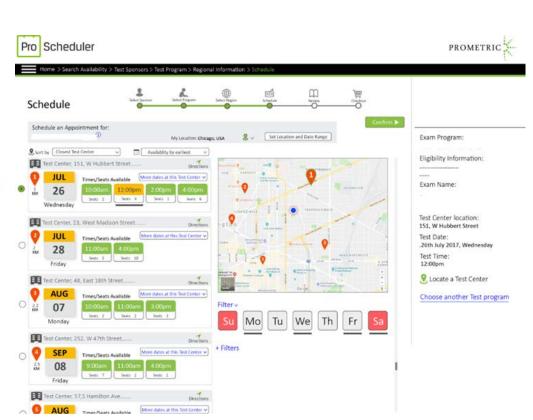
ProScheduler Continued











PROMETRIC

ProAdmin

- Self Service empowering candidates to start the check process using information they were provided or received when they registered for their exam.
- Mobility the ability for the TCA or the candidate to perform an administrative action without being tethered to a wired administration workstation using wirelessly technology.
- + Core administration functionality
 - Candidate check-in
 - Exam launch
 - Exam status tracking

ProAdmin Continued



- + ProAdmin 2.0
 - Image capture
 - Biometrics
 - Security infrastructure integration
 - Self-serve kiosk



Program Review

Admin Review



June Part III

- + 319 first-time test takers
 - 11 re-testers
- + First-time pass rate 98%
 - Up 0.6% over June, 2017

July Part I

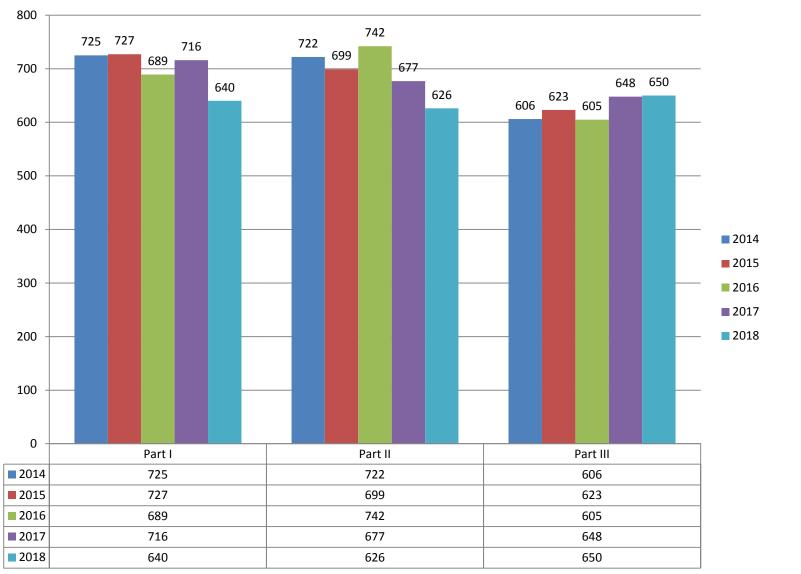
- + 581 candidates
- + 20 displaced from event location in Des Moines, IA
 - 19 rescheduled to alternate dates within 2 weeks of original date

NBPME CNATTs 2016-2018 YTD



- + NBPME Controllable Success Rate: 99.53%
- + Displacements
 - Center Environment Issues = 1
 - Inclement weather = 12
 - Hardware Issue = 20
 - TCA operational issue = 2
 - Power outage = 1

NBPME Volume 2014-2018









Appendix B

APMLE PART II CSPE PROGRESS REPORT

Gretta Gross, DO, Vice President for Clinical Skills Testing Amy Lorion, MA, Director for Clinical Skills Client Examinations & Standardized Patient Training

July 14, 2018



CASE DEVELOPMENT AND REVIEW: APRIL 13-14, 2018



- Committee: 22 podiatrists
- 8 new cases developed
- 1 case redeveloped based on 2017 pretest psychometrics
- All existing cases reviewed
 - $\,\circ\,$ Any issues/questions that arose during training or testing
 - Psychometric performance
 - Checklist
 - Patient note
 - Comparison to other cases



CASE DEVELOPMENT AND REVIEW: SUBCOMMITTEES



- Physical Exam Database
 - $\,\circ\,$ 3 existing items clarified
 - $_{\odot}$ 20 new items written
- Patient Note
 - $\,\circ\,$ Clarification to 1 bullet on patient note rating rubric
- Podiatric Communication Skills Assessment (PCSA)
 2 additional bullets recommended, 1 each in 2 dimensions
- Pulse cards
 - $\circ\,$ Recommended change in text and delivery



PART II CSPE COMMITTEE MEETING: JUNE 4, 2018



- Discussed 2017-2018 Cycle Report
- Reviewed IT enhancements & exam schedule
- Approved CDC-recommended changes
 - $\circ\,$ Patient note rating rubric clarification
 - $_{\odot}\,$ 1 PCSA bullet as recommended, 1 with an edit
 - Pulse card modifications
- Other key decisions
 - Per student request, clipboards and 128 Hz tuning forks will be provided
 - School identifying information on lab coats & stethoscopes will be covered for anonymity; plain coats & stethoscopes available
 - $\,\circ\,$ 4-6 new cases to be developed in 2019

IT ENHANCEMENTS



• Dean's Page

- $\,\circ\,$ Add administrative users with read/write permissions
- Direct upload of roster
- o Edit student information, change eligibility
- View student status, exam schedule, open seats

Student's Page

- o Edit contact information
- View available sessions
- Read & attest to Candidate Affidavit & Acknowledgement Statement
- Purchase a seat in a testing session
- $_{\odot}\,$ View confirmation letter
- Reschedule testing session

REGISTRATION



• Opened April 13, 2018

- 377 registrations on 1st day (65% of eligible students)
- \circ 485 registrations in 1st week (84% of eligible students)

• As of July 13, 2018

- $_{\odot}$ 558 registrations (96% of eligible students)
- $\,\circ\,$ No school below 93% first-time takers registered
- $\,\circ\,$ 7 students approved for ADA accommodation
- \circ 4 repeaters eligible to retake the examination



2018-2019 EXAM SCHEDULE: SUMMER/FALL

Testing Sessions: August 27 – November 16

- \circ 50 sessions
- o 600 seats
- \circ 12 weeks
- o 6 PM exams

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2018-2019 EXAM SCHEDULE: FEBRUARY



Testing Sessions: February 19-23

- \circ 5 sessions
- \circ 60 seats

FEBRUARY 2019						
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IMPORTANT UPCOMING DATES: 2018-2019 EXAM CYCLE

- August 6 Registration deadline
- August 27 Testing begins
- November 16 Testing ends
- February 1, 2019 Score release
 - \circ 18 days before 1st retake session
 - In those 18 days, failing candidates must
 - Schedule a retake
 - Make travel arrangements
 - Receive remediation
- February 8-9 Standard Setting
- February 19-23 Retakes
- March 8 Score release

LOOKING FORWARD



Communication in Healthcare module

- Competing priorities
 - Deans & students want more guidance regarding communication & interpersonal skills scoring
 - $\circ\,$ Publication of the rating rubric can lead to confusion, misinterpretation

NBOME experience

- Similar debates among stakeholders
- Current approach: Communication in Healthcare online module
 - > Brief tutorial on impact of communication on patient health & safety
 - Re-creation of clips from actual patient encounters
 - > Guidance regarding good & poor behaviors of note in the clips
 - Quizzes



COMMUNICATION IN HEALTHCARE



MenuTranscriptIntroductionProfessionalismEliciting InformationListening SkillsGiving InformationBeing RespectfulEmpathyResources

Communication in Healthcare

- 10

COMMUNICATION IN HEALTHCARE

NEXT >

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EXAMPLE CLIP – ELICITING INFORMATION (POOR)



Video removed due to email size restraints



EXAMPLE CLIP – ELICITING INFORMATION (GOOD)



Video removed due to email size restraints



COMMUNICATION IN HEALTHCARE

Menu Transcript	Communication in Healthcare	
Introduction Professionalism Eliciting Information	Eliciting Information is done well when (click all that apply):	
Listening Skills Giving Information Being Respectful Empathy Resources	Using lay language and avoiding jargon Asking one question at a time	
	Asking the right question Asking questions that are understandable and straightforward Avoiding writing down everything the patient is saying	
	SUBMI	гт



COMMUNICATION IN HEALTHCARE



Transcript Menu Introduction Professionalism Eliciting Information Listening Skills Giving Information Being Respectful Empathy Resources

- 11

Communication in Healthcare

Eliciting Information is done well when (click all that apply):

RATIONALE

Eliciting information appropriately is a communication skill. It is the ability to ask questions in an understandable, straightforward manner. Avoid jargon, ask questions one at a time, and avoid leading questions. Ask open-ended questions to get patients to elaborate on important topics, and closed-ended questions to clarify information.

Asking questions to determine, for example, a differential diagnosis, is not a communication skills issue but rather a clinical decision-making issue. It's possible to ask all the "right" questions in an inarticulate or convoluted way. It's also possible to ask very straightforward, understandable questions that will, however, yield very little useful information.

< PREV

NEXT >

LOOKING FORWARD



State of the Art of Simulation in Podiatry

- Proposed survey of simulation in podiatry schools
- Goals
 - Inform the NBPME on the prevalence of simulation exposure on campuses and at PG level, with implications for new testing approaches
 - $\,\circ\,$ Demonstrate access to simulation in schools
 - Supports validity of exam
 - May assist some schools in raising simulation funds
 - > May standardize use of simulation

STATE OF THE ART OF SIMULATION



- Similar surveys before/after COMLEX Level 2-PE was instituted for DO students
- Information gathered
 - $\circ~$ Schools using SPs
 - Department where administered
 - Clinical skill or topic, e.g. history-taking, PE, OMM/OMT, etc.
 - Clinical years (OMS 1 GY)
 - o Facilities and Equipment

Articles published

- Errichetti A, Gimpel JR, Boulet JR (2002). State of the art in standardized patient programs: A survey of osteopathic medical schools. JAOA, V 102, No 11.
- Gimpel JR, Weidner AC, Boulet JR, Wilson C, Errichetti, A (2007). Standardized patient and mechanical simulators in teaching and assessment at osteopathic medical schools. JAOA, V 107, No 12.



STATE OF THE ART OF SIMULATION



Next steps

- Decide whether to undertake survey all schools would need to participate
- Create survey
- Distribute survey to schools
- Analyze & publish results



Thank you!





12116 Flag Harbor Drive + Germantown, MD 20874 + 202-810-3762 + www.fpmb.org

Office of the Executive Director Russell J. Stoner

DATE:	July 14, 2018
TO:	National Board of Podiatric Medical Examiners
FROM:	Federation of Podiatric Medical Boards
SUBJECT:	NBPME Meeting Report

Mission

Quality		Licensure
Safety	19 36	Regulation
Integrity	ADDIATELY MOUNT	Practice

The Federation of Podiatric Medical Boards' mission is to be a leader in improving the **quality**, **safety** and **integrity** of podiatric medical health care by promoting high standards for podiatric physician licensure, regulation and practice.

April 2018 Executive Board Meeting

The Federation of Podiatric Medical Boards (FPMB) held its Executive Board Meeting on Friday, April 27 and Saturday, April 28, 2018 in Charlotte, North Carolina. The 2018-2019 Executive Board is as follows:

- Leonard R. La Russa, DPM (President)
- Judith A. Manzi, DPM (Vice President)
- Bruce R. Saferin, DPM (Secretary-Treasurer)
- Barbara A. Campbell, DPM (Director)
 - Newly elected board member from the Arizona Board of Podiatry Examiners
- Jay S. LeBow, DPM (Director)
- Russell J. Stoner (Executive Director)

The meeting topics included:

- Board Immunity (NC v. FTC)
- Occupational Licensure Reform (FTC, US Congress)
- Interstate Medical Licensure Compact
- Fostering Membership Engagement



The Executive Board also held a lunch meeting with leadership of the Federation of State Medical Boards (FSMB). The discussion focused on the FSMB's Interstate Medical Licensure Compact and the FPMB's progress, as well as the progress of the Professional Licensing Coalition (*board immunity & occupational licensure reform*) and the challenges faced in introducing a bill in the current legislative climate.



CAPRINE 2018 Annual Meeting

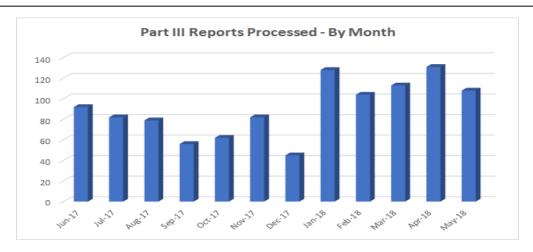
The FPMB held an Annual Meeting webinar on Friday, April 27, 2018. The amended bylaws were approved, and topics of discussion included:

- Score Reporting Announcement
- Interstate Podiatric Medical Licensure Compact (IPMLC)
- Occupational Licensing Reform / Restoring Board Immunity
- Increasing Engagement / Open Forum

Mission in Action – Licensure



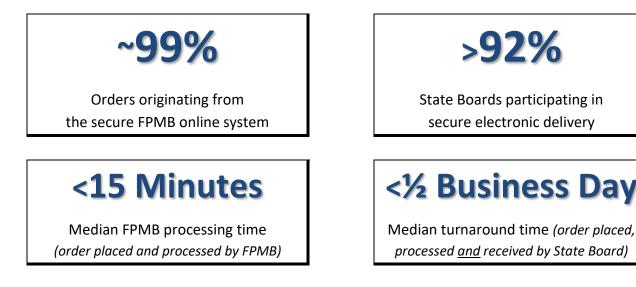
The FPMB processed 1,082 Part III reports in the past 12 months. Its Disciplinary Database tracks actions against more than 2,300 podiatrists.



The FPMB plays a critical role in the licensure process for State Boards by providing certified APMLE Part III score results (1,082 over the past 12 months) and disciplinary action reports. The disciplinary data bank is the largest in podiatry. It tracks actions against more than 2,300 podiatrists as reported by State Boards throughout the country on a continual basis. It is used by both State Boards and credentialing verification organizations.

The FPMB is the <u>easiest</u> and <u>fastest</u> part of the licensure process through its processing of Part III and Disciplinary reports.

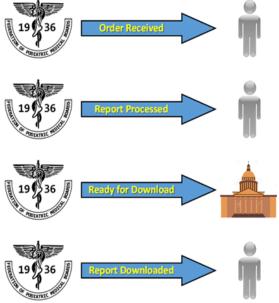
The FPMB continues its efforts to maintain its goal of "being the easiest and fastest part of the licensure process for both podiatrists and State Boards." The following are key data points highlighting our success:



The FPMB communicates with podiatrists and State Boards at <u>each</u> step of the Part III & Disciplinary ordering process.

As part of **FPMB communication procedures**, podiatrists and State Boards are kept informed of the progress of an order:

- The podiatrist receives an email notification / receipt that their order has been received with information of next steps.
- 2. When the FPMB processes the order:
 - a. the podiatrist receives an email notification with an estimate of when the State Board will download the report*; and
 - b. the State Board receives an email with a link and instructions to download the report.



 When the State Board downloads the report, the podiatrist receives an email notification that the process is complete.

<u>Secure</u> electronic delivery minimizes the types of situations that lead to customer service challenges.

First, the electronic documents are **encrypted** and **secured** from tampering. The documents also feature **watermarks**. Second, the secure electronic delivery functionality minimizes the types of situations that lead to customer service challenges by:

- Monitoring electronic delivery and proactively reaching out to any State Boards that delay downloading reports.
- Maintaining a delivery audit trail to confirm that State Boards did download the report, including the user name and date & time of the download.
- Enabling State Boards to electronically request that a misplaced report be re-posted.

The FPMB provides <u>exceptional</u> customer support.

The FPMB provides exceptional customer support to podiatrists and State Boards. Podiatrists seeking to place an order on the FPMB's website are provide answers to common questions, such as:

- How are reports sent to State Boards?
- How long is turnaround time?
- How will you know that the <u>FPMB received</u> your order?
- How will you know that the <u>FPMB processed</u> your order?
- How will you know that the <u>State Board received</u> your order?

The FPMB also provides **one-on-one** support to podiatrists with questions about placing an order or issues with State Board receipt of reports. The FPMB recognizes that this is a high-stress, time-sensitive situation for the podiatrist, and provides peace of mind in these situations.

The FPMB sets the bar high for report ordering services.

The FPMB is proud of the high level of service it offers in providing certified APMLE Part III score and Disciplinary action reports to support the podiatric licensure application process. It continues to receive frequent positive feedback from both podiatrists and State Boards.







FPMB to Report Transcript Scores for <u>All</u> Parts

The National Board of Podiatric Medical Examiners (NBPME) accepted a proposal to have the FPMB assume the responsibility of sending candidate scores for all three parts the APMLE examinations. Presently, candidates who are applying to a new state for a licensure application must request that Prometric send certified Part I and II scores, and FPMB send certified Part III scores to the state.



When completed, candidates applying for a licensure in a new state will only be required to contact the FPMB with their score requests. The new process will provide candidates with a **simplified** and **speedier** service that will deliver complete certified score reports within a half of business day (median) to licensing boards that accept electronic delivery.

The new process also includes, at no charge to the candidate, FPMB sending the initial Part III score to the state and Prometric releasing the initial score to the candidate. The new system is expected to be in place by the end of 2018.

FPMB Implementation Status

In preparation of having the new system in place by the end of 2018, the FPMB has:

- Office Information System
 - Updated to support adding new report types (Part I, II & II CSPE)
 - Modified processing workflow for additional efficiency
- Website Ordering
 - Modified to enable ordering of new report types (Part I, II & II CSPE)
- Accessing Score Data from Prometric
 - Acquired new resource with a static IP (security requirement)
 - Verified connectivity to Prometric's score data repository
- Staffing
 - Acquired an executive assistant to increase coverage of report processing tasks

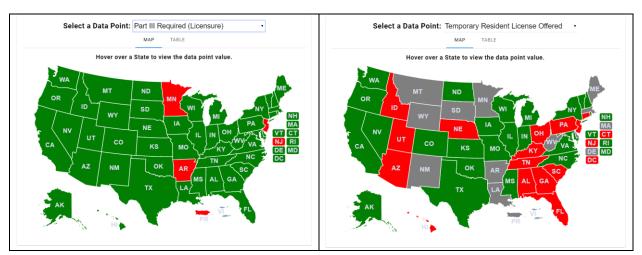
Data Inventory – In March 2018, the FPMB requested the following from Prometric regarding the Part I & II data:

- The dates covered for each storage format
- The storage format
- The quantity in that format (candidates and the storage format) quantity

Once Prometric reports back on the "data inventory", the results will help the FPMB and Prometric plan for reporting of older Part I & II score reports.

The FPMB website is a mobile-friendly valuable resource for the podiatric community.

The FPMB's **mobile-friendly** website is a valuable resource for the podiatric community. In addition to the popular online ordering page for Part III and Disciplinary reports, the <u>Member</u> <u>Boards Info / Compendium</u> webpage provides a wealth of information. Data for each State Board is provided in map, list and table format.



Example: Two of the 15+ Data Points Displayed in Map Format

The FPMB is pleased by the feedback it has received. For example: *"I love your Federation website! It is the most interesting, best thought-out, informative and colorful site I've seen!"*

The FPMB website also provides "info cards" for each State Board, and includes links to podiatric medical colleges.

	CONTACT	GENERAL	LICENSURE	REGULATORY	
New York S	tate Education	n Department	Seth Rockm	uller	
5	on Avenue, 2W	Education	Executive Se	,	
Building	2224		518-474-381		
Albany, NY 1	2234 p.nysed.gov/pr	- E ((fax) 518-402 podbd@mail.		
New York Co http://www.ny	llege of Podiatric /cpm.edu/	Medicine			
New York St	ate Podiatric Med	ical Association	212-996-4400		
http://www.ny	/spma.org/		mborden@nyspr ed: 4/21/2010		

Mission in Action – Regulation

The FPMB assists State Boards as they review and revise their regulations. In the past, this included a "Model Law" developed collaboratively with the State Boards.

Currently, this includes the FPMB enabling and fostering inter-State Board communication. For example, the FPMB recently submitted a "request for information" related to temporary licenses on behalf of the New Mexico Board of Podiatry.



Mission in Action – Practice

American Podiatric Medical Association (APMA) State Components (State Associations) serve a vital role in podiatry, particularly regarding podiatric practice. The FPMB supports State Associations via its website:

- Podiatry and Related Links webpage
 - Links in State Associations section
- Member Boards Info / Compendium webpage
 - \circ $\;$ Links in State Board info cards
- Prospective Member Referrals service
 - Connects podiatrists seeking licensure with their respective State Association(s)

North Carolina State Board of Dental Examiners v. Federal Trade Commission

Before the U.S. Supreme Court's February 2015 decision in North Carolina State Board of Dental Examiners v. Federal Trade Commission (FTC), state licensing boards were considered to be actors of the state. As such, federal antitrust laws did <u>not</u> apply to state licensing boards, so long as such actions were taken in accordance with state policy. However, the Supreme Court ruled in the NC Dental case that state



licensing boards, comprised of active market participants, can in fact be considered private organizations (not 'the state') and thus are subject to antitrust liability, if not actively supervised.

Specifically, state licensing boards, its volunteer members, and staff are now vulnerable to antitrust legal action in fulfilling their duties, which can result in trebled damage awards against the board and its members. Significant damages could threaten state treasuries and the personal finances of volunteer board members and staff. As a member of the Professional Licensing Coalition (PLC), the FPMB continues to seek a legislative approach that would eliminate the potential for antitrust damage liability against boards, their members, and employees for conduct within the scope of their official duties, as well as for persons acting at their direction, while permitting injunctive relief by government enforcers and private parties.

CINTERSTATE Podiatric Medical Licensure Compact

Over the last several years, the FPMB Executive Board has engaged with the **Federation of State Medical Boards (FSMB)** on the topic of interstate compacts. In August 2017, the FPMB formed an "Interstate Podiatric Medical Licensure Compact" committee.



The Interstate Podiatric Medical Licensure Compact (IPMLC) would offer a new, voluntary expedited pathway to licensure for qualified podiatric physicians who wish to practice in multiple states. The compact would increase access to health care for patients in underserved or rural areas and allowing them to more easily connect with podiatric medical experts using telemedicine technologies. While making it easier for podiatric physicians to obtain licenses to practice in multiple states, the compact strengthens public protection by enhancing the ability of states to share investigative and disciplinary information.

Further, the compact addresses occupational licensing concerns raised by the Federal government. For example, the **Federal Trade Commission (FTC)** is focusing on issues with interstate mobility and practice that may lead licensees to exit their occupations when they move to another state or adversely impact veterans and their spouses.

The Committee reviewed medicine's governing documents (guiding principles, bylaws, compact law, policies and rules. The Committee has also met with the **National Center for Interstate Compacts (NCIC)**, part of the **Council of State Governments (CSG)** who were directly engaged with the formation of the other medical compacts (medicine, nursing, psychology, physical therapy and emergency medical services). The Committee is seeking guidance regarding the steps towards creating our compact, as well as identifying and securing funding sources.

Respectfully submitted, Russell J. Stoner, Executive Director Federation of Podiatric Medical Boards

Licensure Regulation Practice



Part I, II & II CSPE Score Reporting Update



Quality

Integrity

Safety

National Board of Podiatric Medical Examiners

July 14, 2018





To be a leader in improving the quality, safety and integrity of podiatric medical health care by promoting high standards for podiatric physician licensure, regulation and practice.



Online Ordering and Electronic Delivery

The FPMB is the **easiest** and **fastest** part of the podiatric licensure

process through its processing of **APMLE Part III** Score reports.



the secure FPMB online system



State Boards participating in secure electronic delivery

<15 Minutes

Median FPMB processing time (order placed and processed by FPMB)

<1/2 Business Day

Median turnaround time (order placed, processed and received by State Board)



Order Communication: Podiatrist & State Board

Podiatrist Places Order

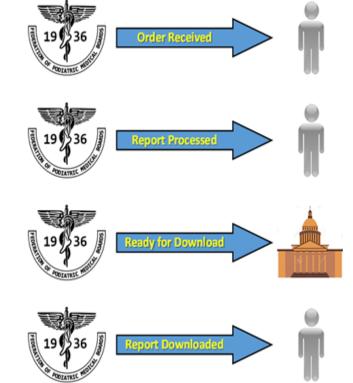
 Podiatrist receives email notification that order has been received and is informed of next steps

• FPMB Processes Order

- Podiatrist receives an email notification with an estimate of when the State Board will download the report
- State Board receives an email with a link and instructions to download the report

State Board Downloads Report(s)

Podiatrist receives an email notification that the process is complete





FPMB to Report Scores for <u>All</u> Parts

- NBPME accepted a proposal to have the FPMB assume the responsibility of sending candidate scores for <u>all</u> three parts of the APMLE examinations
- Presently, candidates who are applying to a <u>new</u> state for a licensure application must request that:
 - Prometric send certified Part I and II scores
 - FPMB send certified Part III scores



FPMB to Report Scores for <u>All</u> Parts (cont.)

- When completed, candidates applying for a licensure in a new state
 - will be required to only contact the FPMB with their score requests
- The new process will provide candidates with:
 - A simplified and speedier service for sending certified score reports to licensing boards
 - An <u>initial</u> Part III score, at no extra charge to the candidates, to one licensing board



FPMB Implementation Status

In preparation of having the new system in place by the end of 2018, the FPMB has:

- Updated its Website Ordering System 🧭
- Updated its Office Information System \checkmark
- Confirmed Access to Prometric's Secure FTP Server 🧭
- Increased Staffing



Part I, II & II CSPE Score Reporting Update

Implementation: Website Ordering System

- Approximately 99% of all score report orders originate from the FPMB website ordering system
 - Over 92% of State Boards download process reports from the website
- System has been updated to accept Part I, II & II CSPE requests in addition to the current Part III and Disciplinary report options
 - These new options are currently "hidden" until the transition is complete



Implementation: Website Ordering System (cont.)

Order Information

*Indicates a Required Field

*How many DESTINATIONS are in this order? (State Boards, Residencies, Fellowships, VA Hospitals, etc.) 0 1 0 2 0 3 0 4

DESTINATION #1:

*Destination Type	<pre>*Send Report(s) to:</pre>	*Report Types (select all desired)
• State Board (for licensure)	Oklahoma	Part I Score
O Other (Residency, Fellowship, VA Hospital, etc.)	Reports are sent to this State Board vi electronic delivery. You do <u>NOT</u> need t	
	provide any address or contact info.	Part II CSPE Score
		□ Part III (PMLexis) Score
		Disciplinary

DESTINATION #2:

*Destination Type State Board (for licensure)	*Send Report(s) to: Kentucky	*Report Types (select <u>all</u> desired)	
O Other (Residency, Fellowship, VA Hospital, etc.)	Reports are sent to this State Board via electronic delivery. You do <u>NOT</u> need to provide any address or contact info.	□ Part II Score □ Part II CSPE Score	
		Part III (PMLexis) Score	
		Disciplinary	
		►► NEXT	



Implementation: Office Information System

• All score reports are processed with the FPMB office information system



- Website orders are pulled into this system to ensure accuracy
- Updated to support processing Part I, II & II CSPE report requests
 - Integrated new report types into the process
 - Final integration <u>pending</u> receipt of data and determination of report layouts
- Modified processing workflow for additional efficiency



Implementation: Office Information System (cont.)

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Start Date		End Date		Orde					Processed Statu	IS	Order ID				C	C	2
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20150 🗉	20	18-05-03 ⁻	11:32 AN	M		I	3	Peck, Rober	t	Nev	w York [New Yor	k State Ec	ducatio	on Depai	rtment]	
20149 🗉	³ 20 ⁻	18-05-03 ⁻	11:34 AN	M		1	e a	Winters, Car	rolyn	Cal	ifornia [(California	a Board of	f Podia	atric Med	icine]	
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(C) 2018 Federation of Podiatric Medical Boards - [USER: Russell Stoner]



Implementation: Accessing Score Data

• Prometric makes their score data repository available to the

FPMB via a secure FTP site

• Prometric is finalizing the format of the data files



- FPMB acquired new resources to connect to the <u>secure</u> FTP site
- FPMB verified connectivity to the <u>secure</u> FTP site



Implementation: Staffing

The FPMB added an executive assistant to its staff on June 1, 2018



- - Increases "coverage" of the FPMB's report processing responsibilities

- Currently processing score report requests efficiently and effectively
 - Monitoring key order processing statistics



Part I, II & II CSPE Score Reporting Update

Implementation: NEXT STEPS

Prometric/NBOME – Data Inventory

• Prometric – Data File Format

• NBPME/NBOME/Prometric/FPMB – Report Layouts

• NBPME/FPMB – Final Implementation



NEXT STEPS: Data Inventory

- Prometric is performing a "Part I & II data reconciliation"
 - This will ensure that all exam data exists in an electronic (database or PDF format)
- FPMB will import current data in the next 2-4 weeks
 - Prometric will provide Part I & II data to FPMB for initial import
 - NBOME will provide Part II CSPE data to FPMB for initial import
- FPMB expects that procedures will be established with NBPME & Prometric to address any possible "data gap/edit" scenarios





<?xml version="1.0"?>

ho was the forty-second

William Jefferson Clinton

XML

<!-- Note: We need to add
more questions later -->

<quiz> <qanda seq="1"> <question>

</answer>

</auiz>

NEXT STEPS: Data File Format

- Prometric is developing the format of the data files for results of the <u>new</u> Part I & II examinations
 - The FPMB will also migrate to the new file format for Part III data
- Prometric will also transition to this new format for the Part III data
- Once finalized, the FPMB will implement a data file import routine to populate its score reporting database



NEXT STEPS: Report Layouts

NBPME, NBOME, Prometric & FPMB will work together to

develop templates for report layouts:

- Part I
- Part II
- Part II CSPE
- Part III

12116 Flag Barbor Drive • Germants	un, MD 20074 + 202-826-3762 + source, familiary
	Office of the Esecutive Director Russel J. Steerer
CERTIFICATION OF	NBPME PART III SCORES
Name:	RUSSELL J STONER
Social Security Number:	
Date of Birth:	431973
ID Number:	0008002
Examination Eligibility Determined by:	36 8
State where Part IS was Administered	18/10
Date of Administration:	DECEMBER 3, 2015
Scaled Score	ATTOIL WO IT
Recommended Status:	PASS
"NOTE: Scaled score of 75 is passing procedure is found in the Annual Part receive each Fall.	A more complete explanation of the scoring III bulletin of information which State Boards
vest Received. ef Store, CPM Cone	Ragion Mayland doard of Postonic Medical Eva A



NEXT STEPS: Final Implementation

• NPBME

- Update information in candidate bulletins and on website
- Set switchover date with NBOME, Prometric and FPMB

• FPMB

- Import score data (initial, recurring and corrections)
- Implement new report layouts
- Update website and inform State Boards
- Design initial transfer of Part III scores to designated State Boards (June 2019)





Licensure Regulation Practice



Quality Safety Integrity

The FPMB looks forward to bringing its easy, fast and exceptional score reporting services to the Part I, II & II CSPE exams.

FPMB Executive Office: fpmb@fpmb.org / 202-810-3762



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Appendix D



REPORT SUBMITTED BY LESLIE CAMPBELL, DPM, APMA BOT

ACCOMPLISHMENTS FEBRUARY 2018-JUNE 2018

ANNUAL SCIENTIFIC MEETING (THE NATIONAL)

This year, the Annual Scientific Meeting will be held at the Gaylord Resort, Washington, D.C... Representative Brad Wenstrup, DPM (R-OH) will be featured as the Keynote Speaker during the opening session. The distinguished Representative was instrumental in assisting APMA in their quest to pass the VA Equity Bill. Through his leadership, Representative Wenstrup facilitated APMA's efforts in navigating the Bill through the legislative process. His service and devotion to the profession, and his leadership within the U.S. Congress is acknowledged with gratitude by this profession. Representative Wenstrup will also be recognized at this year's Podiatry Hall of Fame luncheon.

After a successful launch of the **Podiatry School Student Quiz Bowl** last year, APMA will once again conduct the event at this year's National in Washington D.C. Nine contestants representing the nine colleges of podiatric medicine have registered to compete in this year's Quiz Bowl. APMA Past President, Phil Ward, DPM, will again serve as Master of Ceremonies. This event, sponsored by APMA, serves to highlight the talent of podiatric medical students around the country and provides well deserved and meaningful scholarships to the winning recipients.

APMA is hosting <u>Step into Podiatry</u> a free event to educate pre-med/pre-health undergraduates and health advisors about a career in podiatry, the "hidden gem" of health care. The event is being conducted from 11:00 a.m.-3 p.m. on July 13, 2018.

Once again, APMA's Educational Foundation is hosting the APMA 5K. The event coordinators include APMA staff and Cary Zinkin, DPM, a member of APMA's Communication Committee. Last year, the event raised almost \$10,000. Whether you are a Sleeper or Runner, we welcome all to contribute to this worthwhile cause that provides valuable scholarships to podiatric students.

CENTER FOR PROFESSION ADVOCACY

- The 2019 APMA State Advocacy Forum remains in the planning stages. The CPA Committee is expected to announce the selected hosting state in July.
- Applications for APMA's Innovation Grant will be considered from June 1-September 1, 2018. The Innovation Grants are provided on an annual basis to those State Components who apply and meet the designated criteria for advocacy assistance on the state level.
- BCBS of Michigan rescinded its proposed -25 Modifier Payment Policy that would have instituted a reduction in EM reimbursement when used in conjunction with a -25 Modifier for minor surgical procedures performed on the same day. This comes on the heels of a similar attempt by Anthem BCBS. With the collaborative efforts of the CPMA, CMA, APMA and AMA, Anthem's proposal was thwarted. This landmark collaboration is estimated to have saved our members over \$100 million annually.
- With the assistance of APMA's Center for Professional Advocacy/State Advocacy, South Carolina was victorious in its legislative efforts in becoming the 47th state with DPM ankle and broader scope of amputation privileges for its members.
- Massachusetts Podiatric Medical Society is using APMA's new **eAdvocacy website** to mobilize members to contact their state legislators about their scope bill.
- The newly revised <u>eAdvocacy website</u> has been launched and is available to members. The new website is posed to enhance and simplify members' involvement in legislative advocacy. Its new feature tracks members' advocacy activity and reports this information to the Department for their use in running the legislative arm of APMA.

COMMUNICATIONS

Marketing/Communications

- The Communications Department, under the direction of Peggy Treske, continues its efforts in guiding the association's presence among industry leaders in media, as well as within the public sector with their social media penetration. Traffic in social media accounts including Twitter, Facebook, Google+ and LinkedIn continue to appreciate with increased visibility. The result of using social media as a tool to disseminate information has produced a cost savings of nearly half a million dollars from APMA's Communication budget.
- In an effort to understand APMA members' use of social media, a recent digital survey was sent to APMA members in collaboration with the APMSA. The results revealed an increase in social media use by members from 57 percent to 68 percent. The survey suggests that members were most likely to use LinkedIn for professional purposes (81%), followed by Facebook (73%) and YouTube (26%). For personal use, the respondents affirmed that 94% use Facebook, 59% prefer YouTube and 37% utilize Instagram. Though results from the APMSA remain confidential, students look to Facebook, Snapchat and Instagram for personal use and LinkedIn and Facebook with YouTube a distant third for professional use.
- APMA has recently wrapped up APMA's *Today's Podiatrist* campaign with an ever-increasing market penetration.
- APMA promotes the profession with its earned media placements in numerous outlets and drew more than 1.8 billion impressions this year.

- The Communications Department is announcing APMA's new member benefit MyMIPSScore app to the membership.
- The Communications Department continues its efforts on the Brand Audit as dictated by the purview of APMA's House of Delegates.

Publications

Open rates for digital publications continue to be strong.

Public Relations

 Through its Public Relations efforts, the Department continues its support of Legislative Advocacy in its communications regarding the passage of the critically important VA Bill S 2372, the John S. McCain III, Daniel K. Akaka, and Samuel R. Johnson VA Maintaining Internal Systems and Strengthening Integrated Outside Networks act of 2018 or VA *MISSION Act*

COUNCIL ON PODIATRIC MEDICAL EDUCATION (CPME)

- CPME's Ad Hoc Advisory Committee met via conference call on June 5 to review the feedback received from the communities of interest and began building Draft II of CPME publications 120 and 130. Final changes and adoption of the documents could occur as soon as the April 2019 meeting of the Council.
- The JCRSB meeting is scheduled for Saturday, June 16. The original March meeting of the JCRSB had to be cancelled due to weather. The JCRSB will review the annual reports submitted by ABFAS and ABPM and review the ABPM certificate of added qualification.
- The CPME's Nominating Committee sought applications for four at-large CPME positions and one postsecondary educator position. The Council office has received letters from three individuals for consideration for the open at-large positions. The positions are for a three-year term renewable up to three consecutive terms. The deadline for submitting applications was June 15 and the Nominating Committee will determine the election slate by either mail ballot or conference call in August. CPME will hold a closed-ballot election to fill the positions at its October 2018 meeting.

EXECUTIVE DEPARTMENT

- James R. Christina instituted the **APMA Monday Minute**, a weekly broadcast which provides APMA members a brief update on the week's most important topics. It is provided through APMA's list serve and transmitted to all APMA members each Monday morning.
- Joint Task Force of Orthopaedic Surgeons & Podiatric Surgeons: On April 11, 2018, leaders from the American Podiatric Medical Association, the American College of Foot and Ankle Surgeons, the American Academy of Orthopaedic Surgeons and the American Orthopaedic Foot & Ankle Society came together for a first-of-its kind meeting of the Joint Task Force of Orthopaedic Surgeons and Podiatric Surgeons. The task force will work to enact policy initiatives at the state and federal level that are beneficial to both podiatric and orthopaedic surgeons and their patients. It will also examine the education and training from colleges of podiatric medicine with the goal of consensus on options for education, training and certification.

House of Delegates :

- The 98th House of Delegates convened in Washington, DC, March 17-19, 2018. Critical issues facing the House included a complete revision of the APMA Bylaws. In his address to the House, Executive Director James R. Christina conveyed these critical thoughts: "I urge you to make the necessary changes that will allow more efficient governance of your organization and make APMA relevant to every practicing podiatrist. Change is always difficult and often messy, but if done properly, these changes position your APMA to maintain its status and functionality well into the future. "
- A culmination of efforts over the years preceding this House include: a Governance Review conducted by an independent consulting firm who made recommendations to the House; a critical appraisal of these recommendations by APMA member Task Forces and surveys of APMA members and exhaustive efforts by the Bylaws and Procedures Committee throughout 2017 and 2018 leading up to the House. It was a highly anticipated House, and APMA Delegates engaged in a thorough discussion and debate of a comprehensive revision of the APMA Bylaws. Robust debate ensued on Member categories including the permanently disabled member category into the non-practicing member category; qualifications and privileges in the senior and life member categories; division of authority between the House and the Board as well as composition of the APMA Board of Trustees. The House recommended modification to the proposed revisions that were referred back to the Bylaws and Procedures Committee for final editorial review. The results of this review will be made available prior to the 2019 HOD. Additionally, the Committee is also charged with revisions to the following items: the Administrative Procedures, creation of an APMA Policy Manual and creation of a House of Delegates Operation Manual. These items will be considered at the 2019 HOD.
- <u>Election Outcomes</u>: President-Elect: David G. Edwards, DPM; Vice President: Seth A, Rubenstein; Treasurer: Jeffrey DeSantis, DPM; Trustee David B. Alper, DPM; Speaker of the House: J.D. Ferritto Jr., DPM; HOD liaison to the Joint Commission on the Recognition of Specialty Boards: William Chagares, DPM. Lawrence A, Santi, DPM and Patrick A. DeHeer, DPM were re-elected to the Board of Trustees. Dennis R. Frisch, DPM was installed as President.

Student Recruitment:

- Delegates at this year's House expressed concern regarding student recruitment. Resolution 9-18 directed APMA to develop a strategic plan for student recruitment and devote both staff and financial resources to this effort. Tiffany Kildale, formerly the association manager for the American Society for Podiatric Surgeons has been hired as APMA's Career Development Manager. In addition, the House passed Resolution 12-18 which addressed concern with an adequate pool of qualified applicants to the schools of podiatric medicine. This resolution stipulates that APMA create a plan to analyze and define academic, licensing, commercial, geographic, social, economic or other forces that challenge the promotion and protection of the profession.
- Edge Research has been contracted to perform and kick off student recruitment marketing research.
- ABFAS has committed \$10,000 to student recruitment efforts.
- Registration for APMA's student recruitment event at The National, <u>Step into Podiatry</u>, is open. Currently, there are 27 prospective students and one local pre-health advisor registered. This event will provide an opportunity to interact with current podiatric medical students, attend a cadaver lab and gain an overall feel for a career in Podiatry.

• APMA continues its initiative in Career Awareness with an annual budget of over \$250,000 focused on advertising and social media content aimed at prospective students. APMA has placed a high priority on career awareness and its collaboration with AACPM.

Scientific Affairs

This year's National will provide 27.5 CECH and several non-CECH learning opportunities. The lecture series is robust and this year, more Young Physicians will be engaged in didactic sessions. The General Lectures, Breakfast Symposiums and Non-CECH lunch symposiums are all free to registrants. The APMA booth (#633) will provide information regarding the Registry, the newly launched <u>MyMipsScore app</u>, the updated and ever-evolving Coding Resource Center and social medial seminars.

APMA Registry

- Dyane Tower, DPM, MPH, MS spearheads the Registry and has been updating documents and is in the process of ensuring that the Registry service desk is operational.
- **MyMIPSScore App**: A new member benefit, the <u>MyMipsScore app</u> will assist members in excelling under value based reimbursement models. The app will be available free of charge as a customized app exclusively for APMA members. The app will offer solutions to help understand, calculate, analyze and maximize your Merit-based Incentive Payment System (MIPS) scores. APMA members who have signed up to use the APMA Registry will be able to submit data to CMS through the Registry regardless of their EHR provider using the <u>MyMipsScore app</u>. Registration is now open!
- **2018 MIPS Eligibility Tool**: The low-volume threshold for MIPS participation changed for the 2018 reporting period. CMS released a MIPS Participation Lookup Tool (<u>http://app.cms.gov/participation-look-up</u>) in April that allows members to check their 2018 eligibility.
- <u>MIPS Performance Categories</u> (Quality, Improvement Activities, Promoting Interoperability and Cost) remain unchanged in 2018 however Weighting of these Categories has changed as reflected in the increase in the Cost Category from 0% in 2017 to 10% in 2018. The MIPS Final Score for 2018 determines whether or not clinicians will receive either an upward or downward payment adjustment in the Physician Fee Schedule in 2020.
- **<u>2018 Performance Year Resources</u>** are available for all MIPS needs.

APMA EDUCATIONAL FOUNDATION

- The APMA National Foundation exists to provide hundreds of deserving students' assistance as they contend with escalating student loan debt. Last year, through the efforts of the APMA Foundation and the generosity of APMA members, individual and corporate sponsors, the Foundation provided scholarships to every eligible third-and fourth-year podiatric medical student. The Foundation raised \$348,000 which was awarded to 278 students
- The 2018 Annual Giving Campaign kicked off at the APMA House of Delegates in March. This year's goal is to raise \$200,000. Year to date, the Foundation has raised \$141,000. PICA offered a matching grant in the amount of \$25,000, the Foot & Ankle Specialists of the Mid-Atlantic created

an endowment with their contribution of \$25,000 and Talar Medical increased its endowment from \$25,000 to \$50,000.

- The National will be the host of two fundraising events: the APMA 5K Run/Walk and the *Podiatry Management* Podiatry Hall of Fame Induction Ceremony and Reception. Representative Brad Wenstrup, R-OH and Daniel Vickers are this year's honored recipients.
- The process by which donations to the APMA Educational Foundation are accepted has grown and evolved in recent years. In addition to your direct gifts to the APMA Educational Foundation Student Scholarship Fund OR Educational Programs, additional avenues of contributing to the Foundation include: Memorials and Honors Program (donations made in recognition of life events); Named Endowment (an opportunity for donors to establish an endowment in one's family name OR in honor of or memorializing a loved one - established with a minimum donation of \$25,000 paid over the course of 5 years) as well as the Planned Giving and the Legacy Circle (individuals who include the Foundation in their estate planning).
- Once again, APMA's Educational Foundation is hosting the APMA 5K Walk/Run. The event coordinators include APMA staff and Cary Zinkin, DPM, a member of APMA's Communication Committee. Last year, the event raised nearly \$10,000. Whether you are a Sleeper or Runner, we welcome all to contribute to this worthwhile cause that provides scholarships to our students.
- Ramya Tadinada, a 2nd year student at the Midwestern University Arizona School of Podiatric Medicine was named the winner of the 32nd Annual American Podiatric Medical Writers (APMWA). She will receive a \$1,000 honorarium from a special endowment by Dr. & Mrs. Steven Berlin to the APMA Educational Foundation. The 2nd place recipient of \$750 was Adenie Sonaike, a 4th year NYCPM student and the 3rd place recipient of \$500 was Anna Stoypine, a 3rd year student from the Barry School of Podiatric Medicine.

HEALTH POLICY AND PRACTICE

- APMA submitted **comments** on proposed exemptions from state Medicaid proposal requirements on May 21, 2018. Comments were in response to CMS' proposed rule that would provide exemptions for states to bypass the heavy analysis required for any changes to the state Medicaid plan.
- APMA submitted **comments** to CMS on Direct Provider Contract Models in response to Request for Information (RFI) on May 24, 2018. APMA expressed support for testing models that empower beneficiaries to directly drive change in the health system as consumers. APMA recommended the following: CMS should consider expanding DPC models to include specialty-focused models; CMS must ensure that primary-care focused models include sufficient safeguard and accountability to promote patients' access to medically appropriate specialty services and that CMS should include a periodic comprehensive diabetic lower extremity evaluation/examination (CLEE).
- Jeffrey Lehrman, DPM has been appointed Consultant, APMA Health Policy and Practice. He succeeds our beloved Harry Goldsmith, DPM who lost his battle this year.
- MACRA Made Easy Webinar Series: To ensure successful MIPS participation for its members, APMA created the MACRA Made Easy Webinar Series. MACRA Made Easy: *MIPS 2018 Overview* was conducted on May 23, 2018 and MACRA Made Easy: *2018 Improvement Activities* will be conducted

on June 29, 2018. Webinars are recorded, and the library is archived and available on the APMA website. Presentations include MIPS generally, as well as in depth discussion into each of the 2018 performance categories and related topics like the APMA Registry and group versus individual reporting.

- A meeting is planned for collaboration with the American Academy of Family Physicians (AAFP) to discuss administrative simplification in documentation for the therapeutic shoe for persons with diabetes
- Sara Karamloo, DPM will be starting an internship with the Health Policy and Practice Department on June 19, 2018. Dr. Karamloo is a podiatrist who is completing degree requirements for a master's in health administration at Dartmouth. She requested an opportunity to work as a unpaid intern a APMA throughout the course of the summer.

LEGISLATIVE ADVOCACY

VA Provider Equity Act

A historic measure was achieved by APMA with the passage of the Veterans Affairs (VA) Bill S 2372, the John S. McCain III, Daniel K. Akaka, and Samuel R. Johnson VA Maintaining Systems and Strengthening Integrated Outside Networks Act – the "MISSION Act" which was signed into law by President Trump on June 6, 2018. Section 502, APMA's VA Provider Equity Act of the VA "Mission Act", was designed to provide our Veterans with increased access to lower extremity healthcare. Addressing the longstanding disparities in pay and administrative opportunities for our podiatric colleagues will address the inherent issue of attracting and retaining well qualified podiatrists within the VA system. This Bill has provided long, overdue recognition of our podiatric colleagues and placed them in the same league as our allopathic, osteopathic and dental colleagues who heretofore had been overlooked since 1963. This momentous achievement was accomplished by a culmination of efforts on many fronts. The vision of upholding APMA's mission by our ED, James Christina; years of exhaustive effort and guidance by APMA's Director of Legislative Advocacy and APMA Political Action Committee, Benjamin J. Wallner; APMA's PAC Chair, Barney Greenberg, DPM and PAC Board; the tenacity and endurance of APMA's Legislative Committee Chaired by, Patrick DeHeer, DPM, APMA, BOT; the vision of our APMA Presidents both current and past, with Dennis Frisch, DPM leading this year's charge and Immediate Past President Ira Kraus, DPM in possessing the art of opening and maintaining communication channels with the AOFAS and other influential organizations; those who testified in Congress including our own, Seth Rubenstein, DPM, APMA Vice-President and all of the fine individuals within the construct of APMA who through their efforts assisted in this process. Special recognition must be paid to Representative Brad Wenstrup DPM (R-OH) who was instrumental in navigating the APMA VA Provider Equity Act through Congress. As Representative Scalise kindly acknowledged, "he saved my life" and we too are indebted to Representative Wenstrup for his guidance. It is hoped that this achievement will catapult efforts in passage of the HELLP Act. As APMA forges ahead, this landmark decision provides the incentive to continue Legislative Advocacy efforts. APMA, its Board of Trustees, APMA Staff and devoted Committee members will continue our mission to attain our goal:

freedom for all podiatric physicians to practice commensurate with our education and training with recognition by the healthcare industry to provide parity with our MD and DO colleagues.

HELLPP Act (HR 1542/S 1533)

- Now that the Mission Act has been signed into law, efforts to ensure that podiatrists become recognized as physicians under Title XIX will remain a highpoint of the Legislative Advocacy staff, APMA's Legislative Committee and APMAPAC board members. This goal will best be accomplished if the CBO score is re-calculated to reflect a more appropriate and realistic number. This effort will require an enhanced grassroots effort by all members who may clearly benefit from this recognition. The newly re-launched *e*Advocacy Website should assist with this effort.
- APMA's Legislative Advocacy Committee is proud to announce the launch of the New eAdvocacy Website. This will assist our members in keeping abreast of important legislative issues and create an efficient method in which to conduct important communications with key legislators around the country in meeting APMA's professional goals. A new feature includes a *Log Interaction* which will allow members to share their experiences with their elected officials with the staff and leadership at APMA.

MEMBERSHIP SERVICES

• Year-end closing was successfully completed this week.

YOUNG PHYSICIANS

- Working to finalize the first phase of the Young Physician Transition Series before The National.
- The Young Physicians Institute will be held October 19-21 at the Holiday Inn Nashville Vanderbilt in Nashville, TN. The registration is open to a Young Physician sponsored by their state component and there is up to a \$500 in matching funds to support a sponsored attendee.

Appendix E

<u>aacpm</u>

American Association of Colleges of Podiatric Medicine 15850 Crabbs Branch Way, Suite 320 Rockville, Maryland 20855-2622 301-948-9760 Fax: 301-948-1928 www.aacpm.org

AACPM Report to the NBPME Allan M. Boike, DPM July 2018

Thank you for the opportunity to participate with the discussions of the NBPME.

The AACPM Board will be meeting on Wednesday, July 12. One item on the agenda is a conversation with NBPME representation. We will bring provide an oral update of any items as a result of that discussion

One important item is the issue of setting APMLE Part I and Part II (both written and CSPE) test dates. On behalf of the AACPM's Council of Teaching Hospitals (COTH), we are notifying NBPME of the prospective dates for CRIP in the years 2020 – 2022. We respectfully request that NBPME schedule dates for administration of Part II APMLE for the same years and to coordinate the dates with the following.

Year	CRIP	Ranking Begins	Ranking Closes	Match Week Begins
2020	Thursday, Jan. 9-	Wednesday	Thursday	Monday
	Tuesday, Jan. 14	January 15, 2020	Jan. 23, 2020	Mar. 15, 2020
2021	Thursday, Jan. 7-	Wednesday	Thursday	Monday
	Tuesday, Jan. 12	January 13, 2021	Jan. 21, 2021	Mar. 15, 2021
2022	Thursday, Jan. 6-	Wednesday	Thursday	Monday
	Tuesday, Jan. 11	January 12, 2022	Jan. 20, 2022	Mar. 14, 2022

Once test administration dates are established by NBPME for the specified years, we further request that we be notified of them. We will keep confidential all testing dates provided until they are published by NBPME.





APMSA Report to the NBPME

Liaison: Christopher Girgis SCPM 2019 Last Meeting: February 2018- Franklin, TN Next Meeting: July 2018- Washington DC

Report Includes:

- I. Match Day Change Inquiry
- II. Student Feedback

I. <u>Match Day Change Inquiry</u>

I have received some questions regarding the possibility of switching the DPM student match day to line up with the MD/DO student match day. From the NBPME stand point, is this something that is possible? If so, what steps would have to occur to make this happen? From my understanding, this was discussed in the last NBPME meeting in March, but it appears students would like additional feedback regarding this topic.

II. <u>Student Feedback</u>

There continues to be positive feedback in regards to this year's administration of the APMLE Part I and Part II Exams. Additionally, students appear to be pleased with the CSPE exam as well. As I have stated in previous liaison reports, on behalf of the students that I represent, thank you again for all of the hard work that is put into administering these exams.

On a personal note, this will be my last meeting while serving as the APMSA liaison to the NBPME. It certainly has been my distinct pleasure to work with this organization over the past two years, so thank you for making it an excellent experience. I will continue to be the liaison for the APMSA until February 2019. At that point, a new liaison will be elected.

Respectfully submitted,

Christopher Girgis SCPM 2019 APMSA Liaison to the NBPME Notice of Proposed Bylaws Change June 18, 2018

The Bylaws Committee has proposed that Section 6, paragraphs a and g be amended to require that the FPMB and COTH submit a slate of at least three names. The effect is to make a uniform requirement of three candidates from all nominating organizations. The proposed amendment will be considered by the board at its meeting July 14, 2018.

Article III

Board of Trustees

Section 6. Selection of Candidates for Trustees. The trustees shall be elected by the Board in accordance with Article VIII, from the candidates submitted to the Board by the Nominating Committee (as defined in Article VII, Section 4(a)), in accordance with the following:

- a) Two trustees shall be elected from candidates nominated by the Federation of Podiatric Medical Boards. Each such trustee shall be elected from a slate of at least two three candidates submitted to the Nominating Committee by the Federation of Podiatric Medical Boards. Such trustees shall be elected in such a manner that each of their terms shall begin in a different fiscal year.
- b) One trustee shall be elected who is currently an educator at one of the colleges or schools of podiatric medicine. The Nominating Committee shall solicit nominations for such trustee from the American Association of Colleges of Podiatric Medicine and from each of the individual colleges or schools of podiatric medicine.
- c) One trustee shall be elected who has had professional experience in statistics and testdevelopment (the "Psychometrician Trustee"). Neither the Psychometrician Trustee nor any person of the Psychometrician Trustee's immediate family shall be employed by, or have any affiliation with, any podiatric medical college or school, podiatric organization or program, or podiatric specialty board. The Psychometrician Trustee shall be elected from nominations which may be submitted by any interested party to the Nominating Committee or solicited by the Nominating Committee.
- d) One trustee shall be elected from and representing the consuming public (the "Consumer Trustee"). Neither the Consumer Trustee nor any person of the Consumer Trustee's immediate family shall be a podiatric health care provider or be employed by a provider of podiatric health care services. The Consumer Trustee shall be elected from nominations which may be submitted by any interested party to the Nominating Committee or solicited by the Nominating Committee.
- e) Three trustees shall be elected who have each had experience as a member of his or her State's professional licensing board within the five years prior to his or her initial term as a Trustee. The Nominating Committee shall solicit candidates for these trustees.

Such trustees shall be elected in such a manner that each of their terms shall begin in a different fiscal year.

- f) Four At Large trustees shall be elected from nominations submitted to the Nominating Committee by any interested party or solicited by the Nominating Committee. Each of the At Large trustees shall be elected to fill the respective seat on the Board held for a trustee with one of the following specific qualifications:
 - 1) An individual with experience as a member of the Council on Podiatric Medical Education;
 - An individual whose experience includes significant involvement in the development and administration of certification examinations by a specialty board which has been recognized by the Joint Commission on the Recognition of Specialty Boards;
 - 3) An individual currently serving, or having had experience within the five years prior to his or her term, as a director of a podiatric residency program approved by the Council on Podiatric Medical Education, and
 - 4) A podiatric physician currently in practice.
- g) One trustee shall be elected from a slate of at least two three candidates submitted to the Nominating Committee by the Council of Teaching Hospitals (COTH) of the American Association of Colleges of Podiatric Medicine.