



**Testimony of A.J. Groeber, Executive Director  
State Medical Board of Ohio  
February 22, 2017**

Chairman Romanchuk, Ranking Minority Member Sykes, and members of the House Finance Health and Human Services Subcommittee, my name is A.J. Groeber, and I am the Executive Director of the State Medical Board of Ohio. Thank you for the opportunity to present information on the State Medical Board's budget for fiscal years 2018 and 2019.

It is the mission of the State Medical Board to protect and enhance the health and safety of the public through effective medical regulation. All items requested in this budget will help us to fulfill that mission more effectively and efficiently.

The Board licenses and regulates more than 68,000 medical professionals – a growth in volume of over 6% in the past 5 years, and over 20% in the past decade.

The Medical Board defines the standards of care for safe medical practice. These standards ensure that licensees are qualified to provide medical care in this state, and are the basis for discipline when those standards are violated. When the Board receives complaints against its licensees, it investigates those alleged violations and takes disciplinary action - when necessary - to deny, revoke, or restrict a licensee's right to practice medicine in Ohio.

In addition to its routine licensure and regulatory activities, the Board has focused its efforts on two major initiatives in the current biennium:

First, the Board has continued in the fight against prescription drug misuse by partnering with health care boards and state agencies, legislators, and licensee associations to share information and collaborate on ways to better educate prescribers on the safe use of opioids. Specific initiatives have included the development and dissemination of the "Acute Prescribing Guidelines" video to all Ohio licensees with prescriptive authority. A knowledge shift has occurred from this exercise – prescribers now better understand the benefits of non-opioid therapies for relief of pain, and are increasingly pursuing those treatments before writing a prescription for an opioid.

In addition to preventive education, the Board recently began contacting all licensees who were reported to be out of compliance with laws and rules related to checking the Ohio Board of Pharmacy's OARRS prescription drug monitoring program. With the support of our licensees, partner boards, and professional associations, we have seen tremendous progress from this program.

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In the last six months:

- The number of opioid pills dispensed to unchecked patients has plummeted from 52 million a month to 7 million, and it continues to fall
- More than 6,000 new OARRS accounts have been created
- The number of OARRS checks happening each day has nearly doubled from approximately 80,000 per day to nearly 140,000

Every patient check reduces the risk of misuse and diversion. This program has undeniably saved lives, and we are very proud of the results.

The Board's second area of focus has been to support the continued growth in the number of licensed medical professionals in the state of Ohio. Everyone who lives and works in this state benefits from access to a large pool of qualified medical professionals. We have actively pursued opportunities to engage students and trainees, both physicians and allied medical practitioners. Our goal has been to improve the Board's processes, encourage earlier licensure, and ensure that every resident graduates with a full license stapled to their diploma; they trained here, and we want them to stay here.

These efforts have borne fruit: the Board saw an 11% increase in new physician licenses last year, and processed them nearly 10% faster. When you consider that the average physician sees 5,000 patients and brings in about \$1.6 million in billing revenue each year, the Medical Board's efforts are significantly improving patient access, and driving economic growth. By our estimates, the efficiencies and growth resulted in nearly 200,000 additional patient visits, \$40,000,000 in employer revenue, and nearly \$200,000 in extra state income tax revenue.

Looking toward the next biennium, the Medical Board will continue to focus on rigorous standards for licensure, faster processing and improved efficiency, and increased customer support. The primary driver of these objectives will be the full implementation of the new eLicense program. This online, cloud-based program will provide our licensees with real-time interaction and a system that is available 24/7. It eliminates antiquated paper processes that slow the time to licensure, and provides fast, transparent feedback to the applicant. The Board has already implemented this system with Massage Therapists, Physician Assistants, and other allied professions, and has seen double-digit decreases in processing times for these license types.

I'd like to share some statistics with you that will demonstrate the potential of the eLicense system: when we receive a physician's application for full licensure, that packet of information must physically move half a mile around the Medical Board's offices before it is fully approved. When you factor in US mail travel and delivery time, applications are spending weeks in transit. Once physicians are migrated into eLicense in June 2017, we will immediately strip hundreds of miles of staff movement and

approximately 10,000 days of paper waiting in the mail. The State Medical Board of Ohio is already among the fastest in the country, and the implementation of eLicense should put us squarely at the top.

In terms of regulation, the Board is looking to continue to educate and encourage licensees to be mindful when prescribing controlled substances. We see our licensees as the first line of defense against the heroin epidemic; whether directly prescribed or diverted from a patient, excess prescription opioids continue to be a significant driver for substance misuse, overdose, and death. Our charge in the next biennium is to instill the lessons of the Opioid Prescribing Guidelines to our licensees, continue to shrink pill counts, and encourage opioid use only when truly necessary.

Operationally, the Medical Board does not seek expansion of its headcount in this budget. Our process improvements have driven current caseloads down by over 60% in the past two years, and I have already detailed our improvements in licensure statistics. We are confident that we can continue to meet and exceed the expectations of our customers at current staff levels.

On the topic of the consolidation of the Dietetics and portions of the Respiratory Care Boards into the State Medical Board, I would like to assure this committee that we are confident that our board can provide excellent customer service to these licensees. The Medical Board is currently comprised of 9 physicians and 3 consumer members, yet we regulate over a dozen medical and allied professions. The Board's staff of 82 people issues nearly 35,000 new and renewal licenses per year, and investigates nearly 5,000 public complaints. The Board regularly relies on input from specialty committees and other parties to inform themselves on the standards of practice, and has the resources to hire specialized experts as needed. Given these factors, I firmly believe the public will be fully protected under a combined board. Should the consolidation become law, we would certainly be able to incorporate any staff from the consolidated boards into our existing infrastructure. Through cross-training of existing and new staff, we should be able to leverage efficiencies of scale, and serve all licensees more effectively.

In closing, we ask you to please support the budget that is proposed. The State Medical Board believes it can meet its goals in the next biennium with the modest budget increases as outlined in HB49. At this time, I am happy to answer any questions you may have.