

TABLE OF CONTENTS

	PAGE
Certification.....	4
I. LEGISLATIVE ACTION	
Budget Reports.....	5
II. AGENCY SUMMARY	
About the Board.....	13
Budget Summary Graphics.....	14
2013-2015 Organization Chart.....	15
2015-2017 Organization Chart.....	16
Mission Statement and Statutory Authority.....	17
Program Budget Over Time.....	18
Program Overview.....	19
Agency Strategic Plan.....	25
Agency Process Improvement Efforts.....	32
2015-17 Short Term Plan.....	35
Criteria for 2015-17 Budget Development.....	45
Major Information Technology Projects.....	46
BDV104 Summary of 2015-2017 Budget.....	47
107BF23 Program Prioritization for 2015-2017.....	53
107BF17 Reductions.....	54
BPR010 Agencywide Program Unit Summary.....	56
Operations Essential Packages Narrative/BPR013 Fiscal Impact Summaries.....	57

TABLE OF CONTENTS

	PAGE
III. REVENUES	
Revenue Discussion.....	65
BPR012 Agencywide Detail of Other Funds Revenue.....	68
107BF07 Agencywide Detail of Lottery, Other, and Federal Funds Revenue.....	70
 IV. IMPLEMENT ADMINISTRATIVE EFFICIENCIES- POLICY PACKAGE 101	
Package Narrative	71
 V. OFFICE SECURITY AND SPACE- POLICY PACKAGE 102	
Package Narrative	75
BPR013 Policy Package Fiscal Impact Summary	79
 VI. RULES COORDINATOR- POLICY PACKAGE 103	
Package Narrative	81
BPR013 Policy Package Fiscal Impact Summary	86
PPDPFISCAL Package Fiscal Impact Report.....	88

TABLE OF CONTENTS

VII. INVESTIGATIVE STAFFING- POLICY PACKAGE 104

Package Narrative 89
BPR013 Policy Package Fiscal Impact Summary 93
PPDPFISCAL Package Fiscal Impact Report..... 95

VIII. LICENSING STAFF ADJUSTMENT-POLICY PACKAGE 105

Package Narrative 97
BPR013 Policy Package Fiscal Impact Summary 100
PPDPFISCAL Package Fiscal Impact Report..... 101

IX. STATE-WIDE BOARD MEETINGS-POLICY PACKAGE 106

Package Narrative 103
BPR013 Policy Package Fiscal Impact Summary 105

X. SPECIAL REPORTS

Affirmative Action Report 107
Annual Performance Progress Report..... 109
Secretary of State Audit Report 132

XI. BUDGET SUPPORT DOCUMENTS

CERTIFICATION

I hereby certify that the accompanying summary and detailed statements are true and correct to the best of my knowledge and belief and that the accuracy of all numerical information has been verified.

Oregon Medical Board

1500 SW 1st Avenue, Suite 620, Portland, OR 97201

AGENCY NAME

AGENCY ADDRESS



Chair

SIGNATURE

TITLE

Notice: Requests of those agencies headed by a board or commission must be approved by those bodies of official action and signed by the board or commission chairperson. The requests of other agencies must be approved and signed by the agency director or administrator.

Agency Request

Governor's Recommended

Legislatively Adopted

Budget Page 4

77th OREGON LEGISLATIVE ASSEMBLY – 2013 Session
BUDGET REPORT AND MEASURE SUMMARY

MEASURE: HB 5026-A

Carrier – House: Rep. Nathanson

Carrier – Senate: Sen. Winters

JOINT COMMITTEE ON WAYS AND MEANS

Action: Do Pass as Amended and as Printed A-Engrossed

Vote: 18 – 7 – 1

House

Yeas: Barker, Buckley, Frederick, Hanna, Komp, McLane, Nathanson, Read, Tomei, Williamson

Nays: Freeman, Huffman, Jenson, Richardson, Smith

Exc:

Senate

Yeas: Burdick, Devlin, Edwards, Girod, Hansell, Rosenbaum, Steiner Hayward, Winters

Nays: Thomsen, Whitsett

Exc: Johnson

Prepared By: Dustin Ball, Department of Administrative Services

Reviewed By: Tim Walker, Legislative Fiscal Office

Meeting Date: May 17, 2013

Agency

Oregon Medical Board

Biennium

2013-15

Budget Summary*

	2011-13 Legislatively Approved Budget ⁽¹⁾	2013-15 Current Service Level	2013-15 Committee Recommendation	Committee Change from 2011-13 Leg. Approved	
				\$\$ Change	% Change
Other Funds	\$ 10,028,550	\$ 10,684,667	\$ 10,538,035	\$ 509,485	5.1%
Total	\$ 10,028,550	\$ 10,684,667	\$ 10,538,035	\$ 509,485	5.1%

Position Summary

Authorized Positions	40	40	40	0
Full-time Equivalent (FTE) positions	38.79	38.79	38.79	0.00

(1) Includes adjustments through December 2012.

* Excludes Capital Construction expenditures

Summary of Revenue Changes

The Oregon Medical Board is funded by revenue generated from license and registration fees. The Subcommittee approved increasing the Boards renewal fees, establishing a criminal background check fee, establishing a supervising physician’s application fee, and a one-time surcharge for physician assistants. The Board’s projected ending balance is \$3,263,836, approximately equivalent to 7.4 months operating expense.

Summary of Human Services Subcommittee Action

The Subcommittee recommended \$10,538,035 Other Funds budget for 2013-15, is 5.1 percent higher than the legislatively approved spending level for the 2011-13 biennium.

The Subcommittee approved the following recommendations:

- Package 091, Statewide Administrative Savings, eliminates \$123,898 Other Funds expenditure limitation. This package is a placeholder for administrative efficiencies in finance, information technology, human resources, accounting, payroll, and procurement expenditures. The Department of Administrative Services will continue to work on details of these reductions with agencies and report back during the 2014 session.
- Package 092, PERS Tax Policy, eliminates \$16,052 Other Funds expenditure limitation. This package reflects the policy change in SB 822 that eliminates the increased retirement benefits resulting from Oregon income taxation of payments if the person receiving payments

does not pay Oregon income tax on those benefits and is not an Oregon resident. This change reduces state employer contribution rates by approximately 0.30 percent.

- Package 093, Other PERS Adjustments, eliminates \$128,418 Other Funds expenditure limitation. This package reflects the policy change in SB 822 that modifies the cost-of-living adjustment under the Public Employees Retirement System. This change reduces state employer contribution rates by approximately 2.2 percent.

An administrative action by the PERS Board, as directed by a budget note in the SB 822 budget report, will reduce state employer contribution rates by up to an additional 1.9 percent. However, no employer rate is reduced below its 2011-13 biennium rate.

- Package 101; Renewal Fee adds \$743,917 Other Funds revenue to reflect an increase of 9% on licenses for medical doctors, doctor of osteopathy, podiatrists, physician's assistants and acupuncturists. The fee increase is needed to maintain current services and provide an adequate ending balance for Board operations. The fee increase will be used to bolster the ending balance of the Board. This will leave the Board with a projected 7.4 month ending balance. The Board collects renewal fees once every two years and a larger than normal ending balance is appropriate.
- Package 102; Criminal Background Check Fees adds \$103,610 Other Funds revenue. In the past, the Board has paid background check fees out of initial licensure fees. The Board can no longer absorb these costs. This fee is a pass through fee to the Oregon State Police (OSP) and reflects the projected actual cost of the background cost charged by OSP.
- Package 103; Physician Assistant Fees adds \$109,850 Other Funds revenue. SB 224 (2011) and SB 1565 (2012) modified the regulation and supervision of physician assistants and the dispensing authority of physician assistants. This is a one-time fee to recover costs for implementation of the referenced bills.
- Package 104, HPSP Increased Costs, adds \$121,736 Other Funds expenditure limitation. This package provides the Oregon Medical Board with the expenditure limitation necessary to fund continued participation in the Health Professionals' Services Program. The Oregon Health Authority administers the Health Professionals' Services Program and establishes the rates charged to participating agencies.

Summary of Performance Measure Action

See attached Legislatively Adopted 2013-15 Key Performance Measures form.

DETAIL OF JOINT COMMITTEE ON WAYS AND MEANS ACTION

HB 5026-A

Oregon Medical Board
Dustin Ball -- 503-378-3119

DESCRIPTION	GENERAL FUND	LOTTERY FUNDS	OTHER FUNDS		FEDERAL FUNDS		TOTAL ALL FUNDS	POS	FTE
			LIMITED	NONLIMITED	LIMITED	NONLIMITED			
2011-13 Legislatively Approved Budget at Dec 2012 *	\$ 0	\$ 0	\$ 10,028,550	\$ 0	\$ 0	\$ 0	\$ 10,028,550	40	38.79
2013-15 ORBITS printed Current Service Level (CSL)*	\$ 0	\$ 0	\$ 10,684,667	\$ 0	\$ 0	\$ 0	\$ 10,684,667	40	38.79
SUBCOMMITTEE ADJUSTMENTS (from CSL)									
SCR 015 - Operations									
Package 091: Statewide Administrative Savings									
Personal Services	\$ 0	\$ 0	\$ (83,277)	\$ 0	\$ 0	\$ 0	\$ (83,277)	0	0.00
Services and Supplies	\$ 0	\$ 0	\$ (40,621)	\$ 0	\$ 0	\$ 0	\$ (40,621)	0	0.00
Package 092: PERS Taxation Policy									
Personal Services	\$ 0	\$ 0	\$ (16,052)	\$ 0	\$ 0	\$ 0	\$ (16,052)	0	0.00
Package 093: Other PERS Adjustments									
Personal Services	\$ 0	\$ 0	\$ (128,418)	\$ 0	\$ 0	\$ 0	\$ (128,418)	0	0.00
Package 104: HPSP Increased Costs									
Special Payments	\$ 0	\$ 0	\$ 121,736	\$ 0	\$ 0	\$ 0	\$ 121,736	0	0.00
TOTAL ADJUSTMENTS	\$ 0	\$ 0	\$ (146,632)	\$ 0	\$ 0	\$ 0	\$ (146,632)	0	0.00
SUBCOMMITTEE RECOMMENDATION *	\$ 0	\$ 0	\$ 10,538,035	\$ 0	\$ 0	\$ 0	\$ 10,538,035	40	38.79
% Change from 2011-13 Leg Approved Budget	0.0%	0.0%	5.1%	0.0%	0.0%	0.0%	5.1%	0.0%	0.0%
% Change from 2013-15 Current Service Level	0.0%	0.0%	-1.4%	0.0%	0.0%	0.0%	-1.4%	0.0%	0.0%

Legislatively Approved 2013-2015 Key Performance Measures

Agency: OREGON MEDICAL BOARD

Mission: Protect the health, safety, and well being of Oregonians by regulating the practice of medicine in a manner that promotes quality care.

Legislatively Proposed KPMs	Customer Service Category	Agency Request	Most Current Result	Target 2014	Target 2015
1 - LICENSE APPROPRIATELY - Percentage of Board-Issued license denials that were upheld upon appeal.		Approved KPM	100.00		
2 - DISCIPLINE APPROPRIATELY - Percentage of disciplinary actions not overturned by appeal.		Approved KPM	100.00		
4 - MONITOR LICENSEES WHO ARE DISCIPLINED - Percentage of total probationers with a new complaint within 3 years.		Approved KPM	5.00		
6 - RENEW LICENSES EFFICIENTLY - Average number of calendar days to process and mail a license renewal.		Approved KPM	7.16		
7 - ASSESS CUSTOMER SATISFACTION WITH AGENCY SERVICES - Percent of customers rating satisfaction with the agency's customer service as "good" or "excellent" for: overall customer service, timeliness, accuracy, helpfulness, expertise, information availability.	Accuracy	Approved KPM	79.00	80.00	80.00
7 - ASSESS CUSTOMER SATISFACTION WITH AGENCY SERVICES - Percent of customers rating satisfaction with the agency's customer service as "good" or "excellent" for: overall customer service, timeliness, accuracy, helpfulness, expertise, information availability.	Availability of Information	Approved KPM	76.00	80.00	80.00
7 - ASSESS CUSTOMER SATISFACTION WITH AGENCY SERVICES - Percent of customers rating satisfaction with the agency's customer service as "good" or "excellent" for: overall customer service, timeliness, accuracy, helpfulness, expertise, information availability.	Expertise	Approved KPM	85.00	80.00	80.00
7 - ASSESS CUSTOMER SATISFACTION WITH AGENCY SERVICES - Percent of customers rating satisfaction with the agency's customer service as "good" or "excellent" for: overall customer service, timeliness, accuracy, helpfulness, expertise, information availability.	Helpfulness	Approved KPM	85.00	80.00	80.00

Agency: OREGON MEDICAL BOARD

Mission: Protect the health, safety, and well being of Oregonians by regulating the practice of medicine in a manner that promotes quality care.

Legislatively Proposed KPMs	Customer Service Category	Agency Request	Most Current Result	Target 2014	Target 2015
7 - ASSESS CUSTOMER SATISFACTION WITH AGENCY SERVICES - Percent of customers rating satisfaction with the agency's customer service as "good" or "excellent" for: overall customer service, timeliness, accuracy, helpfulness, expertise, information availability.	Overall	Approved KPM	82.00	80.00	80.00
7 - ASSESS CUSTOMER SATISFACTION WITH AGENCY SERVICES - Percent of customers rating satisfaction with the agency's customer service as "good" or "excellent" for: overall customer service, timeliness, accuracy, helpfulness, expertise, information availability.	Timeliness	Approved KPM	79.00	80.00	80.00
8 - BOARD BEST PRACTICES - Percent of total best practices met by the Board.		Approved KPM	100.00		
9 - LICENSE EFFICIENTLY - Average number of calendar days from receipt of completed license application to issuance of license.		Approved KPM	1.26		

LFO Recommendation:

LFO recommends no changes to KPM's.

Sub-Committee Action:

77th OREGON LEGISLATIVE ASSEMBLY – 2013 Regular Session
BUDGET REPORT AND MEASURE SUMMARY

MEASURE: HB 5008-A

JOINT COMMITTEE ON WAYS AND MEANS

Carrier – House: Rep. Buckley
Carrier – Senate: Sen. Devlin

Action: Do Pass as Amended and as Printed A-Engrossed

Vote: 22 – 2 – 2

House

Yeas: Barker, Buckley, Frederick, Huffman, Jenson, Komp, Nathanson, Read, Smith, Tomei, Williamson

Nays: Freeman, Hanna

Exc: McLane, Richardson

Senate

Yeas: Bates, Devlin, Edwards, Girod, Hansell, Johnson, Monroe, Steiner Hayward, Thomsen, Whitsett, Winters

Nays:

Exc:

Prepared By: Linda Ames, Legislative Fiscal Office

Reviewed By: Daron Hill, Legislative Fiscal Office

Meeting Date: July 8, 2013

Agency

Emergency Board

Various Agencies

Biennium

2013-15

2011-13

Adjustments to Approved 2013-15 Budgets

OMNIBUS ADJUSTMENTS

Omnibus adjustments reflect budget changes in multiple agencies based on reductions in Department of Administrative Services' assessments and charges for services, a reduction to the Attorney General rates, an increase resulting from a new Secretary of State Archives assessment, and debt service adjustments. Also included is a 5% reduction to services and supplies (excluding the fixed costs of State Government Service Charges, Attorney General charges, rent, and fuel and utilities) that is applied to General Fund and certain Lottery Funds only. Total savings are \$36.5 million General Fund, \$1.7 million Lottery Funds, \$5.7 million Other Funds, and \$1.6 million Federal Funds.

Omnibus adjustments also include a 2% supplemental ending balance holdback that is applied primarily to General Fund, and excludes debt service as well as selected programs. This reduction may be restored during the 2014 legislative session depending on statewide economic conditions. Agency detail for this adjustment is shown in Attachment A. Total budget reductions include \$154.9 million General Fund and \$1.4 million Lottery Funds.

Another statewide adjustment, which is included in agency budget bills and not in House Bill 5008, affects most state agencies. Package 091 (Statewide Administrative Savings) is a placeholder for administrative efficiencies and associated budget reductions in finance, information technology, human resources, accounting, payroll, and procurement expenditures. The Subcommittee affirmed that the reductions, at \$62.0 million total funds, are permanent and ongoing as they reflect fundamental changes in business processes. The Department of Administrative Services (DAS) will continue to work on details of these reductions with agencies and report to the Joint Committee on Ways and Means during the 2014 session. Agencies should direct concerns regarding permanency or implementation of the reductions to DAS. The Department will include a plan for resolving any issues related to these reductions as part of its 2014 report.

ORBITS Budget Narrative

Agency Summary

The Oregon Medical Board (“Board” or “OMB”) is an entirely other-funded agency established in 1889 to ensure that only qualified individuals are licensed to practice medicine in Oregon. The Board has only one program, the Operations Program, which consists of 37.79 FTE in several functional areas or departments. The Board is responsible for licensure and regulation of the professions of medical doctor (MD), doctor of osteopathic medicine (DO), podiatric physician (DPM), physician assistant (PA), and licensed acupuncturist (LAc).

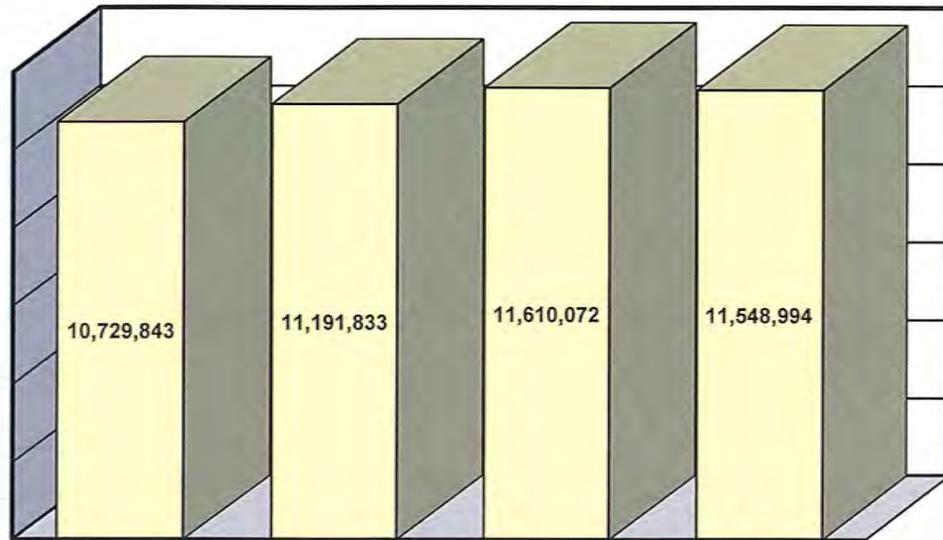
The 12 members of the Board (7 medical doctors, 2 doctors of osteopathic medicine, 1 podiatric physician, and 2 public members) are appointed by the Governor and confirmed by the Senate. The Board members have ultimate responsibility for decisions concerning licensure and discipline, and they guide administrative rules and philosophy statements on numerous medical and ethical issues. The Board members appoint, and review the work of, the Executive Director; review the findings and recommendations of the Physician Assistant, Acupuncture and Emergency Medical Services advisory committees; and study developing trends and issues in medical practice.

The Board’s purpose is public safety. Public protection is achieved through prevention, remediation, discipline, and ensuring the public is informed about their medical providers and Board processes. The Board operates in an atmosphere of constant change, particularly due to current developments in the medical profession.

ORBITS Budget Narrative

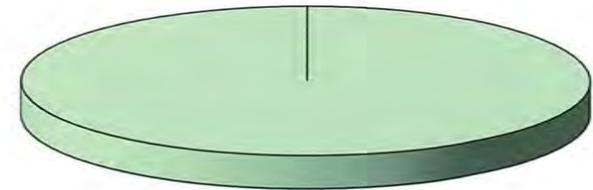
Budget Summary Graphics

Summary of 2015-17 Agency Budget



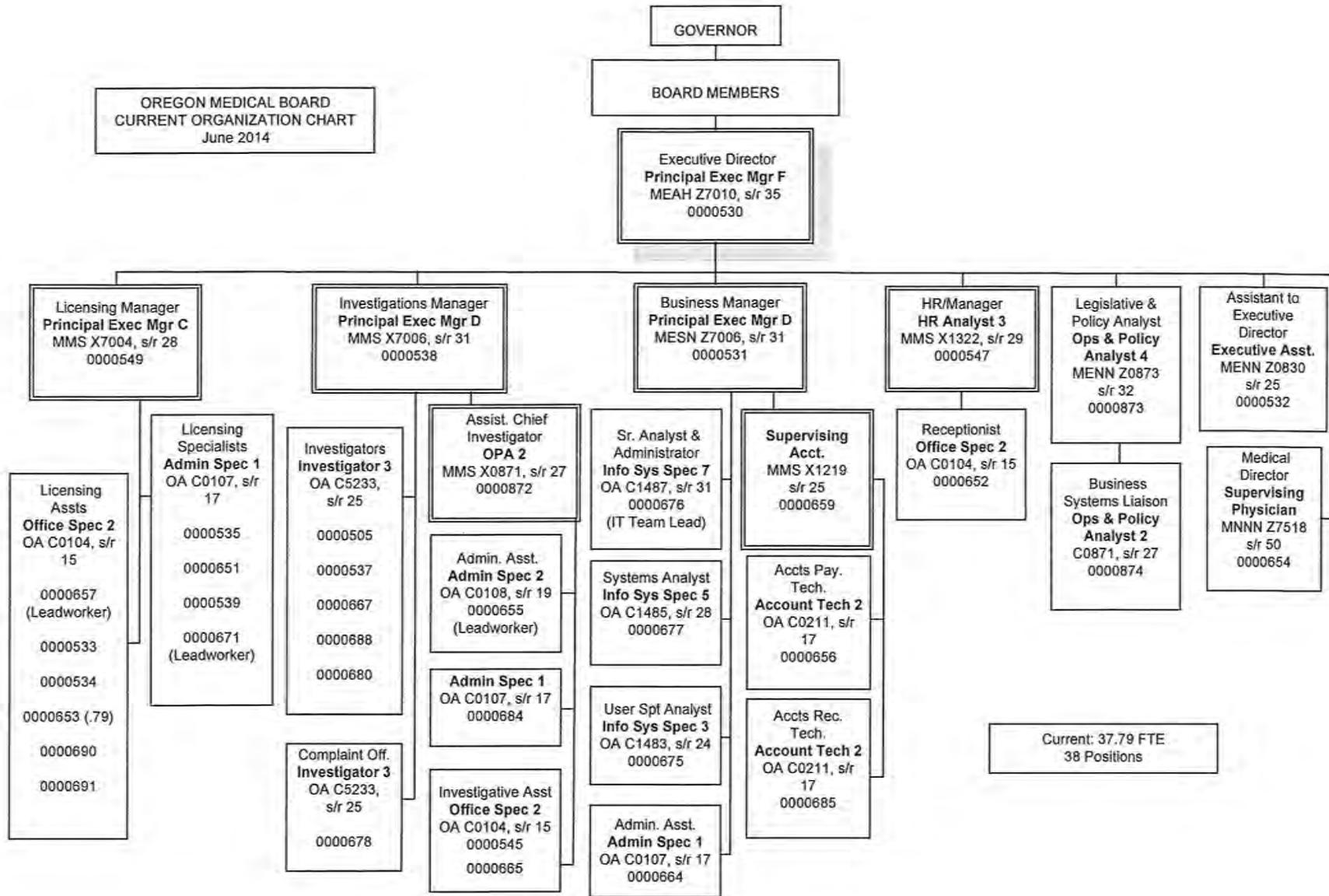
2013-15 LAB \$10,729,843
2015-17 CSL \$11,191,833
2015-17 Request \$11,610,072
2015-17 Governor's \$11,548,994

Source Of Funds



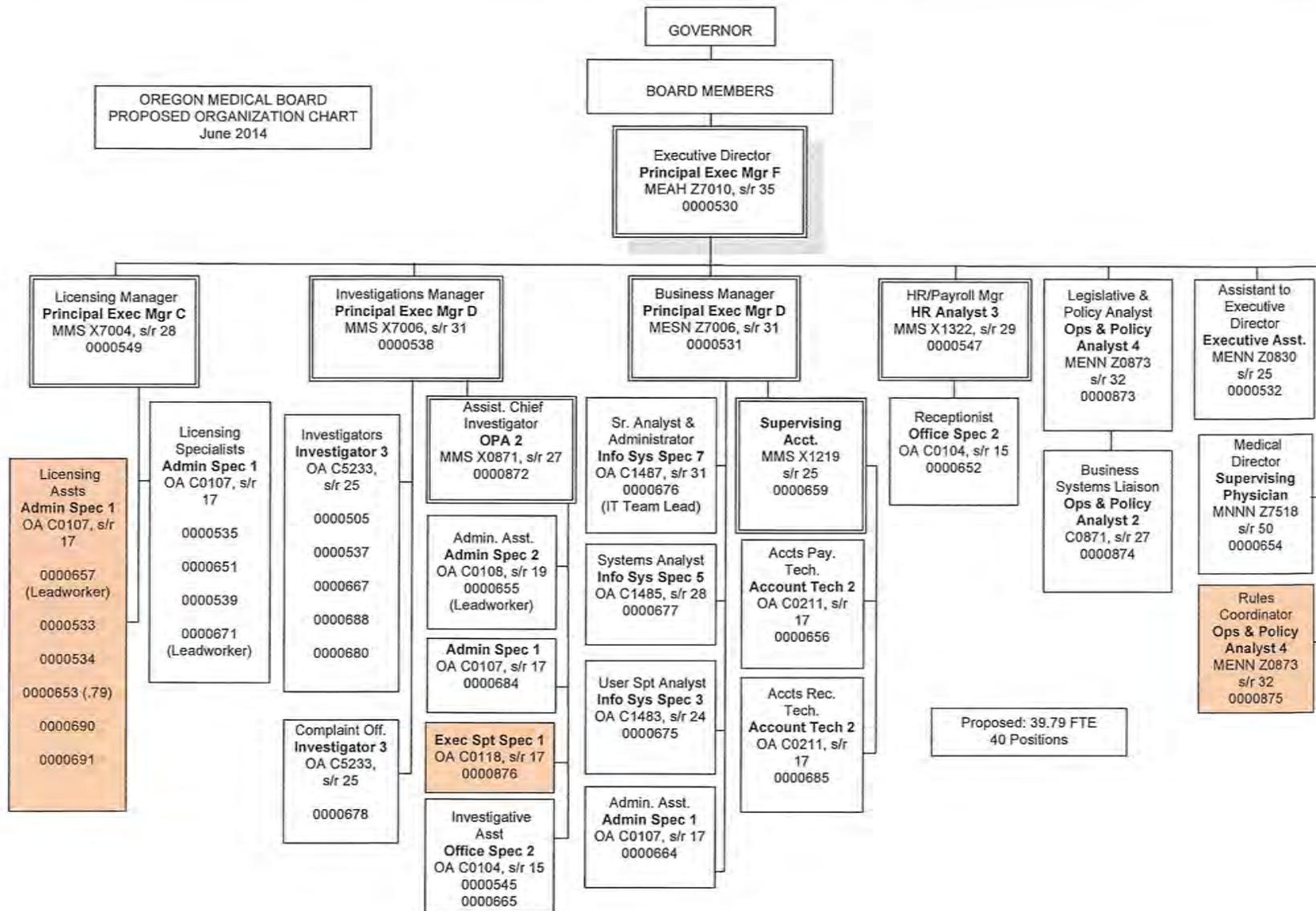
100% Other Funds

ORBITS Budget Narrative



Current: 37.79 FTE
38 Positions

ORBITS Budget Narrative



ORBITS Budget Narrative

Mission Statement & Statutory Authority

The mission of the Oregon Medical Board is to protect the health, safety, and wellbeing of Oregon's citizens by regulating the practice of medicine in a manner that promotes access to quality care.

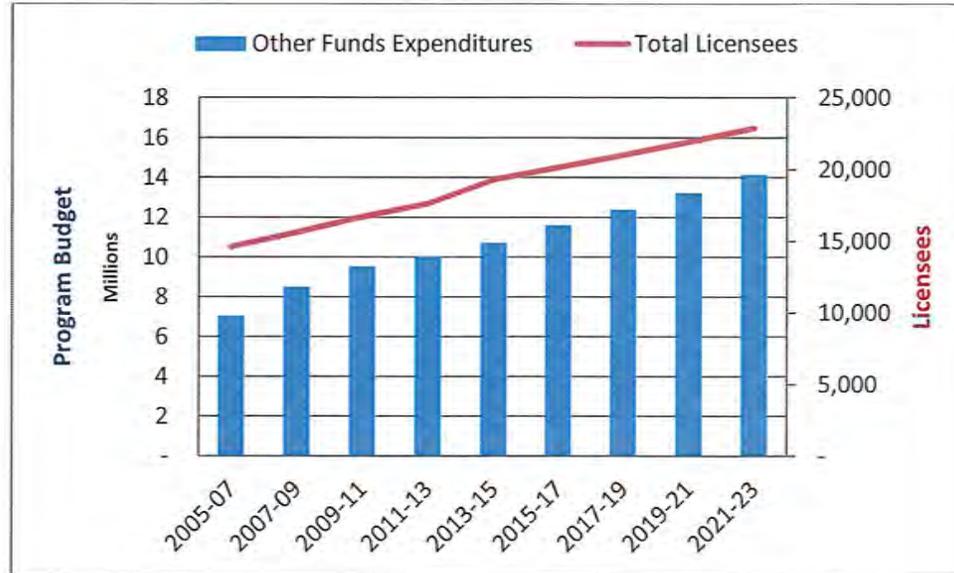
The Board's authority and duties are contained in ORS Chapter 677, known as the Medical Practice Act, and OAR Chapter 847.

Program Unit Executive Summary

Primary Outcome Area:	Safety
Secondary Outcome Area:	Healthy People
Program Contact:	Carol Brandt, 971-673-2679

ORBITS Budget Narrative

Program budget and performance over time



Percent of customer rating the OMB “Good” or “Excellent” for:

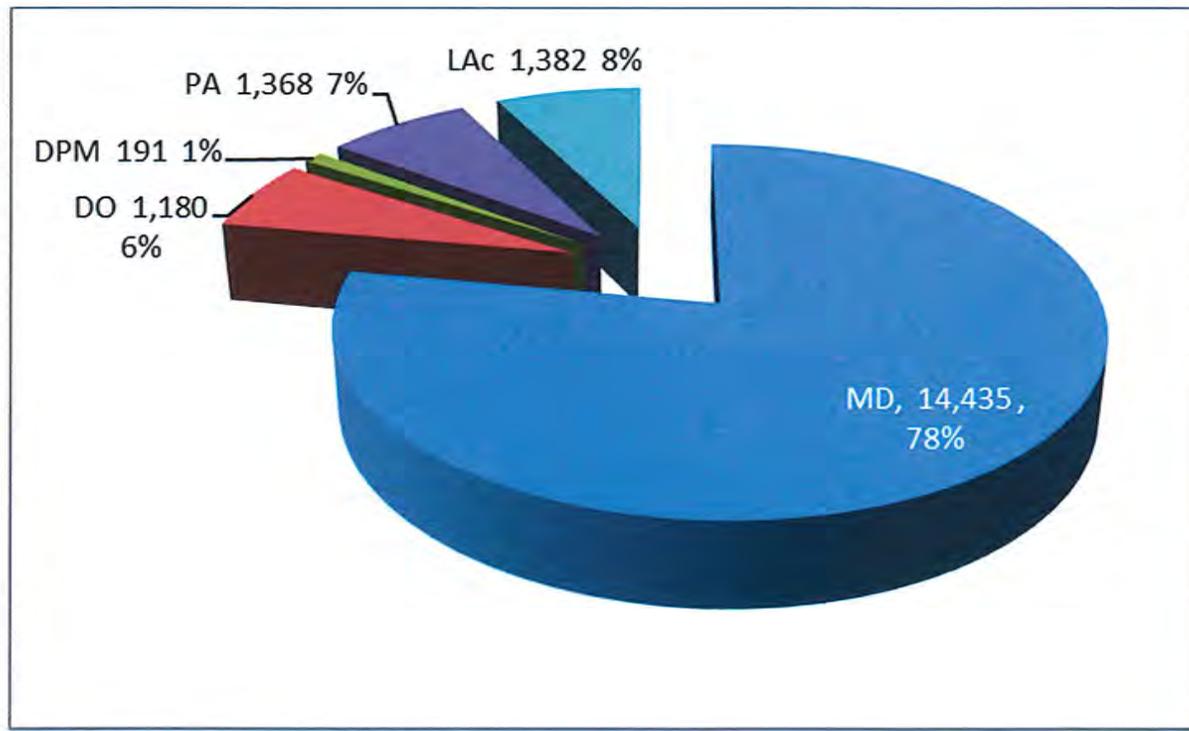
	Timeliness	Accuracy	Helpfulness	Expertise	Availability of information	Overall
FY 2014	84%	85%	89%	90%	84%	87%
FY 2013	80%	83%	88%	89%	76%	83%
FY 2012	79%	79%	85%	85%	76%	82%

All targets are 80%

ORBITS Budget Narrative

Program Overview

The Oregon Medical Board (“Board” or “OMB”) protects the health, safety, and wellbeing of Oregon citizens by regulating the practice of medicine in a manner that promotes quality care. The Board is responsible for licensing, regulating, and disciplining the professions of medical doctor (MD), doctor of osteopathic medicine (DO), podiatric physician (DPM), physician assistant (PA), and acupuncturist (LAc) to ensure that qualified individuals are licensed to practice.



ORBITS Budget Narrative

Program Funding Request

The 2015-17 requested budget is \$11,610,072. Funding the Board's requested budget will provide the resources needed to achieve the goal of improving public safety outcomes through prevention and remediation and will allow the Board to continue to meet performance measures efficiently, as described below. Estimated program costs through 2021-23 are provided in the chart above.

Program Description

The Board's purpose is public safety. Public protection is achieved through prevention, remediation, and ensuring the public is informed about their medical providers and Board processes.

The Board is composed of 10 physicians licensed by the agency and 2 members of the public, all appointed by the Governor and confirmed by the Senate. The members of the Board have ultimate responsibility for the activities of the agency.

The OMB grants licenses only after careful review of an applicant's education, training, employment history, and background and criminal history checks to ensure that the applicant qualifies to practice medicine safely in Oregon. Licensing requirements are consistent with the rigorous standards or "best practices" recommended by the Federation of State Medical Boards (FSMB) and aimed at preventing harm caused by the practice of medicine by unqualified persons. New licenses are issued weekly and renewed biennially.

The OMB's Investigations and Compliance Department responds to complaints against licensees for alleged violations of the Medical Practice Act, monitors disciplined licensees, reviews current licensees when questions arise during the renewal process, investigates applicants if there is a question regarding whether they meet licensing qualifications, and facilitates remediation. Disciplinary procedures are consistent with national standards and comply with state law to ensure licensees receive due process. Disciplinary orders are issued monthly after each full Board conference call.

Stakeholders include the public; applicants and licensees; other state and national boards and agencies; professional organizations; hospitals, public and private healthcare facilities; medical and osteopathic, physician assistant and

ORBITS Budget Narrative

acupuncture schools; and health insurance systems. The Board partners with professional associations and others to achieve common goals. The Board strives for transparency and ensures that stakeholders have access to its services and are informed of its processes and actions through interactions with agency staff, the agency website, and multiple channels of communication.

Program Justification and Link to 10-Year Outcome

The OMB provides the critical public service of ensuring that Oregon's citizens receive safe, quality medical care by allowing only qualified individuals to have the privilege to practice medicine, essential to Safety Strategy 5.

The OMB provides regulation that is focused on prevention and remediation. The Board's Licensing Department ensures that only applicants who meet the statutory standards are granted a license to practice medicine, thereby preventing practice by unauthorized or unqualified persons. The Board relies on its Investigations and Compliance Department to identify and assess licensees with competency issues or who may be impaired by substance use disorders or mental health issues and can be helped through the state's Health Professionals' Services Program (HPSP). Successful remediation can return experienced professionals to practices where they can continue to be vital additions to the state's healthcare systems. Public safety is enhanced by proactively evaluating, assessing the competency of, and treating licensees before they become a danger to themselves or patients.

Through its publications, presentations, and website, including access to public information about its licensees, the OMB educates the public, licensees, and other stakeholders by providing educational outreach. Access to the Board's information services creates more knowledgeable and responsible patients who understand the Board's role and services available to them. The public is empowered to make educated choices when faced with selecting a health care provider.

The OMB also improves access to safe, quality care for Oregonians by encouraging a larger pool of medical providers in the state. This is done by streamlining licensing processes without compromising its standards and by keeping health professionals safely in the workforce or helping them safely re-enter the workforce after ceasing practice for a period of time. For example, the OMB's expedited licensure process allows practitioners with a license to practice medicine in good standing in another state to bypass some of the formal documentation requirements, thereby speeding up the licensing process without lowering qualification standards. The OMB helps providers who have had time away from clinical practice

ORBITS Budget Narrative

to establish a re-entry program so that they are competent when they return to practice. Between 2003 and 2014, the Board assisted 50 practitioners return to practice.

Licensees Returned to Practice, January 2003 - July 2014

Profession	Number of Licensees	Average Time Out of Practice (Years)
Physician	28	5
Acupuncturist	16	5.2
Physician Assistant	6	3

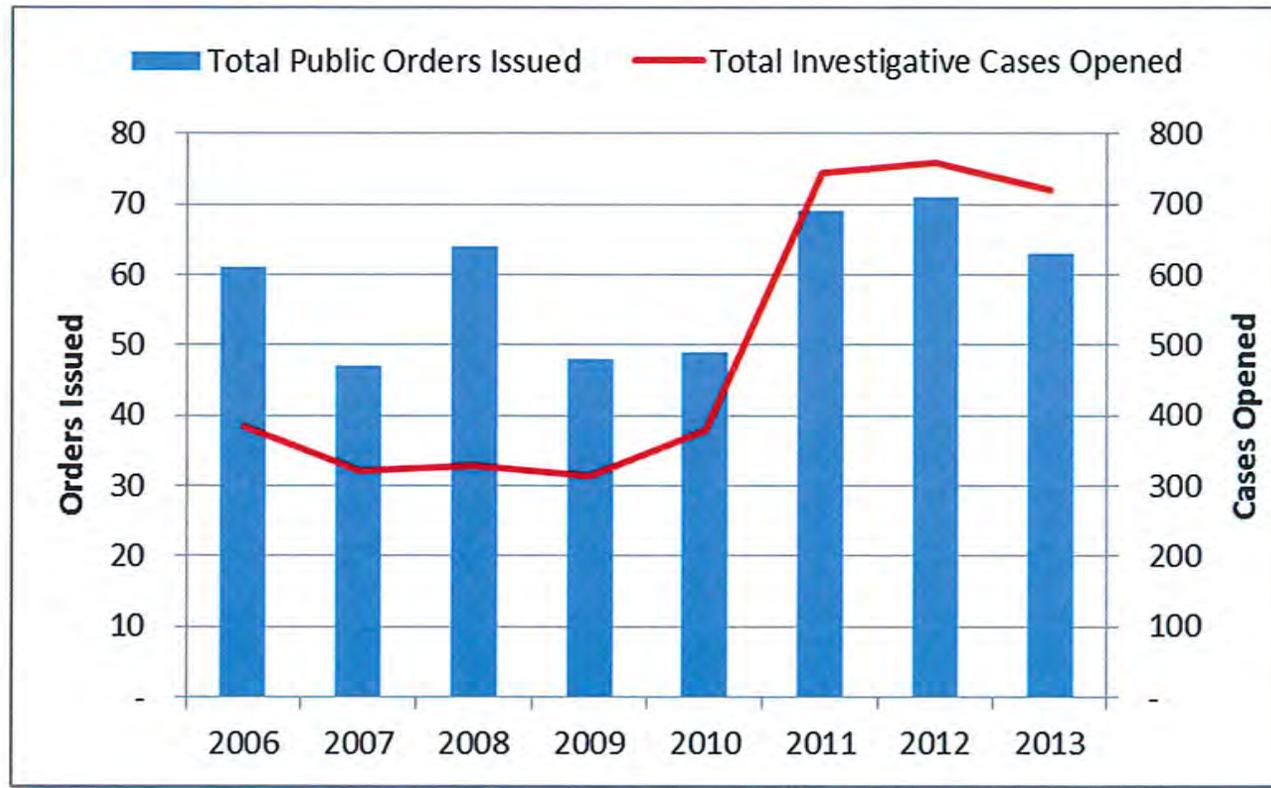
The Board also participates in a national pilot program through the Federation of State Medical Boards, encouraging continuous quality improvement and lifelong learning to ensure the continuing competence of licensees.

Consistent with the Safety outcome area vision, the OMB prevents harm and provides a remedy when harm does occur.

ORBITS Budget Narrative

Program Performance

The number of people served is illustrated in the graph of Total Licensees on the chart above. The Board also tracks the number of investigative cases and public orders issued per calendar year as shown in the graph below. The number of investigative cases opened increased significantly during 2011 due to a change in our tracking methodology.



ORBITS Budget Narrative

The quality of program performance is measured in several ways. A low percentage of license denials and disciplinary actions overturned on appeal demonstrates that the agency is appropriately licensing and disciplining. Note that during 2007 one disciplinary action was overturned by the Oregon Court of Appeals. Because few disciplinary actions are appealed, a single case has a great impact on the percentage outcome. The recidivism rate, the rate at which disciplined licensees re-offend, demonstrates the Board's ability to remediate and educate licensees, enabling them to continue to safely practice.

<i>Fiscal Year:</i>	2007	2008	2009	2010	2011	2012	2013	2014
% License Denials Overturned	0%	0%	0%	0%	0%	0%	0%	0%
% Disciplinary Actions Overturned	12%	0%	0%	0%	0%	0%	0%	0%
% Recidivism	4%	4%	4%	5%	5%	5%	5%	5.65%

Timeliness measures of program performance:

- Average number of calendar days from receipt of completed license application to issuance of license (Fiscal year 2014=1 day)
- Average number of calendar days to process and mail a license renewal (Fiscal year 2014=4 days)

ORBITS Budget Narrative

Enabling Legislation/Program Authorization

The Board is governed by Oregon Revised Statute 677. Recognizing that to practice medicine is not a right but a privilege, the Legislature established the Board in 1889, tasking it with the responsibility to protect the public from unauthorized or unqualified persons and unprofessional conduct by licensed persons. The Board is proud to commemorate 2014 as its 125th year of protecting the people of Oregon.

Funding Streams

The Board revenues and expenditures are entirely Other Funds. The agency's funds are paid by and dedicated to those who are regulated; ninety-eight percent of our revenue comes from the licensing and renewal activities of the agency. The other 2 percent of our funding is generated by various fees for services the agency provides.

Significant Proposed Program Changes from 2013-15

The requested budget includes no significant program changes from 2013-15.

OMB Strategic Plan

The Oregon Medical Board's long- and short-range planning is directed by both its mission and its Strategic Plan. The latter was formally completed in January 2001, and is revised regularly as objectives are met and new needs and issues arise. The plan and its goals were used as criteria for developing the Board's 2015-17 budget.

Goal 1: Streamline agency operations and implement cost efficiencies

Provide the most efficient and effective use of Board resources by assuming some independent functions while remaining accountable to state oversight and to the Board's stakeholders.

Benchmark/High-Level Outcome

Agency mission.

Intermediate Outcomes

ORBITS Budget Narrative

- Achieve greater flexibility to respond quickly to Board needs as they arise; to better achieve Board goals of protecting the public.
- Focus more of the Board's resources directly on issues affecting licensees, the public and other stakeholders.
- Eliminate rigidity in dealing with the constantly fluctuating technical, educational, and ethical matters which challenge the Board; create efficient means to accommodate a greatly varying workload.

Partnerships

- Oregon Medical Association (OMA).
- Osteopathic Physicians & Surgeons of Oregon, Oregon Society of Physician Assistants, Oregon Association of Acupuncture & Oriental Medicine.
- The Foundation for Medical Excellence.
- The Federation of State Medical Boards.
- Other state medical boards and related professional organizations such as Administrators in Medicine.

Goal 2: Improve access to quality care through efficiently managing licensure & renewal of licensure.

Process licensure applications and renewals efficiently, consistent with public safety. Perform careful background checks on all applicants for licensure.

Benchmark/High-Level Outcome

Agency mission.

Intermediate Outcomes

- Ensure that only qualified applicants receive licensure.
- Identify national/federal trends and requirements for licensure.
- Ensure that both the application process and the license renewal process are designed to minimize or eliminate the potential for error.
- Streamline the license application and renewal process.

Partnerships

- The Federation of State Medical Boards and The National Practitioner Data Bank. These organizations maintain national databases that facilitate information sharing between state licensing boards to ensure each state has access to information about providers who have been disciplined in another state.
- Other state medical boards and related professional organizations such as Administrators in Medicine (AIM).
- The National Board of Medical Examiners.
- The American Board of Medical Specialties.

ORBITS Budget Narrative

Goal 3: Provide coordinated outreach and education to the public and licensees.

Promote public awareness of services available through the Board and serve as a resource for complaints or concerns about a provider. Educate licensees through the *OMB Report*, the OMB website, and presentations by staff and board members. Emphasize changes in rules, positions of the Board, and new problem areas.

Benchmark/High-Level Outcome

Agency mission and Benchmark 46.

Intermediate Outcomes

- Ensure public awareness of the Board as a resource for information and services and provide ready access.
- Ensure appropriate handling of both public and confidential information.
- Ensure that Board information is available to all segments of the population.
- Produce and disseminate the Board's newsletter, the OMB Report, as a vehicle for informing licensees about policy, rule changes, ways of avoiding certain practice problems, and the Board's position on certain medical issues.
- Promote statewide adherence to recognized standards of practice and ethics.
- Act as a resource for various issues involving the definition of the practice of medicine between different licensed professions.
- Make information regarding the Board's expectations for standards of care available on the Board's website.
- Assist the Legislature in its assessment of scope of practice questions.
- Encourage licensees to appropriately and safely manage pain issues in their patient population.
- Work with the medical community to resolve questions of medical ethics and to build and encourage medical excellence.

Partnerships

- Administrators in Medicine, through whose DocFinder website the Board provides information on licensees electronically.
- VeriDoc, an online verification service accessed directly by licensees to provide electronic verifications to state medical boards.
- Oregon Medical Association.
- Osteopathic Physicians and Surgeons of Oregon.
- Oregon Association of Hospitals and Health Systems.

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- Medical Society of Metropolitan Portland.
- Oregon Acupuncture Association and the Acupuncture and Oriental Medicine Society of Oregon.
- Oregon Podiatric Medical Association.
- Oregon Association for Physician Assistants.
- The Foundation for Medical Excellence.
- Professional schools, hospitals, and residency programs, such as Oregon Health Sciences University, College of Osteopathic Medicine of the Pacific Northwest, Pacific University, Legacy Health System, and Providence Medical Center.

The above entities work with the Board to promote medical excellence in Oregon and serve licensees and the public, especially through exchanging ideas and disseminating information.

Goal 4: Investigate complaints against licensees and applicants; ensure that Board members have sufficient information to take appropriate action based on the facts of the case.

Promote public safety through investigation of complaints involving licensees and applicants in a manner that is responsive to the needs of the public and is fair to licensees and applicants.

Benchmark/High-Level Outcome

Benchmarks 45 and 46.

Intermediate Outcomes

- Investigate complaints against licensees promptly, and provide the Board with information needed to take appropriate action to protect the public when violations of the Medical Practice Act occur.
- Help protect Oregon's citizens from medical negligence and unprofessional conduct.
- Maintain a panel of consultants possessing the knowledge and expertise needed to review cases.
- Ensure that the investigative process is "user friendly" for complainants.
- Ensure that due process requirements are followed for licensees and applicants under investigation.

Partnerships

- Hospitals, pharmacies.
- Law enforcement agencies.
- Oregon health-related licensing boards.
- Medical boards of other states.

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- The Graduate Medical Education Program (GMEC), with the Oregon Health and Science University residency programs, which alerts the Board when medical residents have problems which could become serious with time.

Goal 5: Remediate licensees to safe, active, useful service to Oregon's citizens.

Monitor licensees who come under disciplinary action to ensure compliance with their orders. Take an active stance in preventing practice problems utilizing educational outreach and participating in a health professionals program for licensees with substance use and mental health diagnoses.

Benchmark/High-Level Outcome

Benchmark 46.

Intermediate Outcomes

- Utilize a network of rehabilitative services; design and negotiate early remedial interventions when appropriate.
- Ensure that licensees under Board disciplinary action comply with their terms of probation.

Partnerships

- The Health Professionals' Services Program (HPSP) is a statewide confidential monitoring program. There is regular communication between the Board and the HPSP-contracted service provider regarding any issues relating to the licensees referred to HPSP because of substance abuse or mental health issues. The goal is to protect the public from impaired professionals by ensuring that appropriate treatment and monitoring are available and that health professionals who are impaired are not allowed to practice. The OMB communicates on a regular basis with HPSP regarding these individual health professionals as well as having on-going communications regarding the process of referring these licensees and the delivery of service. This partnership is instrumental to this Board's mission.

Goal 6: Ensure staffing, facilities, processes and tools are optimal in meeting dynamic OMB customer needs and providing resources that enable the agency to succeed in its mission.

Promote employee growth, enrichment and diversity, ensuring that each staff member is equipped to serve as a responsible and innovative member of the Oregon Medical Board team. Continue to attract and retain employees with the necessary skills to carry out the Board's mission. Ensure all staff have access to the tools and resources necessary to effectively accomplish their work.

Benchmark/High-Level Outcome

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Agency mission.

Intermediate Outcomes

- Attract, train and retain qualified staff; support employee growth and development.
- Maintain updated Technology Plan and investigate ways to simplify and streamline agency functions.
- Ensure a safe, healthy and professional working environment.
- Ensure efficient and effective use of agency resources in compliance with Oregon Revised Statutes, Oregon Administrative Rules, the Oregon Accounting Manual, state and agency policies, and labor contracts.
- Explore operational efficiencies by partnering with other entities to enhance shared functions; foster an environment of continuous process improvement.

Partnerships

- Numerous state offices, primarily with the Department of Administrative Services.

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Associated Performance Measures

The Board has created a comprehensive set of key performance measures to help assess and manage our performance. The Board strives to ensure that its performance measures support the Board's goals, improve the business environment through applications of technology, and align with the agency mission. Our key performance measures are linked to our mission and our Strategic Plan. Performance measure results are reviewed regularly to quickly identify and respond to variances. The Board has met or exceeded its performance measure targets on all measures since fiscal year 2010 and is on track to do so in the current biennium. The Board expects to continue to meet or exceed its key performance measures in 2015-17 and beyond, through streamlining and process improvement.

Full performance measure results can be found within the Special Reports tab of these budget materials.

Key Performance Measure	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
License Appropriately	✓	✓	✓	✓	✓
Discipline Appropriately	✓	✓	✓	✓	✓
Monitor Licensees who are Disciplined	✓	✓	✓	✓	✓
License Efficiently	✓	✓	✓	✓	✓
Renew Licenses Efficiently	✓	✓	✓	✓	✓
Customer Satisfaction	✓	✓	✓	✓	✓
Board Best Practices	✓	✓	✓	✓	✓

✓ Target met or exceeded

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Agency Process Improvement Efforts

The Board's Strategic Plan Goals provide the agency with operational guideposts and promote a culture of continuous improvement throughout the agency.

Simplifying Regulations

The OMB strives to ensure that its regulations are consistent with the "best practices" for licensing as recommended by the Federation of State Medical Boards (FSMB). Most recently, this has included adopting rules that require criminal history background checks for all applicants. In some instances, regulation has increased due to growing complexity in the practice of medicine. However, the OMB has worked to make all of its regulations simpler to understand and easier to comply with and that they are focused on achieving public safety.

Assessing Regulations

Rules are continually checked for consistency, comprehension, and conformance to the latest standards for medical licensure. Rules that may be inconsistent are brought to the attention of the Board. In addition, pursuant to ORS 183.405, the agency performs assessments of all new rules within 5 years of adoption to make sure the rule meets its intended effect.

The rule on continuing medical education requirements for licensees is a good example of how staff review was used to make rule improvements. Following the Board's implementation of continuing medical education requirements for all renewing licensees in 2011, staff members formed subcommittees and identified areas of the rule that required additional clarification or revision. Staff outlined a proposal with changes to the rules for the Board members' consideration; the Board adopted the recommendations.

In addition, as technology and other methods of obtaining information change, existing rules are examined to see if licensee requirements can be simplified or reduced while ensuring the agency still receives the critical information necessary to properly license the applicant. For example, the Board receives E-transcripts and electronic copies of medical examination transcripts from the Federation of State Medical Boards daily. Board staff electronically checks disciplinary reports from the Federation of State Medical Boards, specialty board certification for physicians, and certification for physician assistants and acupuncturists. This use of available technology speeds up and simplifies the licensure process for applicants.

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Improving Customer Service

Feedback from applicants, licensees and the public is continually reviewed for ways to improve customer service. Staff work to implement these on an ongoing basis. The Board's primary method for assessing customer satisfaction is the Customer Service Performance Measure Survey. This survey has provided invaluable information for improving service to customers. The Performance Measure Survey rates performance on six attributes: timeliness, correct service, helpfulness, expertise, information availability, and overall quality of service.

Achievements

The Board has identified the following initiatives and accomplishments:

- Pursuant to 2011 SB 224, the physician assistant licensing process has been streamlined. The physician assistant is no longer required to have a practice description approved by the Oregon Medical Board. This eliminates time previously required for OMB approval, allowing physician assistants to practice sooner than they previously could, thereby improving access to healthcare. During 2014 the Board performed a review of the Supervising Physician and Physician Assistant relationships to continue educating physician supervisors about their responsibilities.
- The Board regularly improves the usability of its website and web-based services. The addition of on-line application and renewal services has been of great benefit, and the Board will continue to enhance these functions. Other processes and services are refined as technology and customer needs change. Forms on the website have been combined and simplified for easier access; online checklists are provided for the application process; and website itself was revamped in 2013 to decrease unnecessary redundancies and improve access to information. The agency has received numerous accolades for the revised website, including this from The Wall Street Journal: "The Oregon Medical Board improves customer access to information and services with streamlined content and mobile-first design."
- The Board has continued to improve its process for public comment. Information regarding proposed rules is easily available on the OMB Web site. Public hearing dates and instructions for providing written or oral comments at the hearing are clearly identified.

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- The Customer Satisfaction Online Survey has been broadened and is now incorporated into the online application and renewal process. For its licensees, the OMB has transitioned over 7,000 *OMB Report* recipients to online delivery and, internally, the Board has implemented an employee newsletter to help improve internal communication.
- The Board hosted a Lewis & Clark Law School extern to research the issue of OMB disciplinary outcomes. The resulting study determined that the Board maintained a historically consistent level of discipline for behavioral malfeasance and competency. The Board also newly formed the Board-Attorney Committee, comprised of two Board members and three attorneys, created to provide greater transparency and communication with the legal community.
- The Board works with the Office for Oregon Health Policy and Research in support of its task to establish and maintain health care workforce data. Specifically, ORS 442.468 requires the creation and maintenance of a healthcare workforce database that will provide information upon request to state agencies and to the Legislative Assembly about Oregon's healthcare workforce, including: demographics, practice status, background, economic indicators and incentives to attract qualified individuals.

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2015-17 Short-Term Plan

Agency Programs

The Oregon Medical Board (OMB) is responsible for licensure and regulation of the professions of physician, physician assistant, podiatric physician, and acupuncturist. It performs its mission by doing careful background and criminal history checks on applicants for licensure; investigating complaints involving licensees and monitoring disciplined licensees.

Administration and Communication Department (5 FTE)

The Administration and Communication Department is responsible for all internal and external Board operations and for ensuring that the Board carries out the goals and objectives of the agency as mandated by law. This department is composed of the Executive Director (who is appointed by the twelve-member Board), an Operations and Policy Analyst 4 (Legislative & Policy Analyst), an Operations and Policy Analyst 2 (Business Systems Liaison), a Human Resources Manager, and an Executive Assistant.

Chief responsibilities include but are not limited to:

- Provide oversight and direction to all agency departments and operations, with direct supervision of managers and overall supervisory responsibility for the Board's 37.79 FTE; advise and recommend changes to internal policies and procedures.
- Serve as liaison with individuals and organizations outside the Board, including the Governor's Office, other health-related boards, the Legislature, professional associations, professional schools, and hospitals.
- Represent the Board at meetings of partners and stakeholders.
- Ensure that the 12 Board members and the 15 members of advisory committees for the various health professions under the Board's jurisdiction have all information necessary to make sound decisions in the public's best interests.
- Monitor and provide information about agency impacts from proposed legislation.
- Oversee development of rules and policies for approval by Board members, oversee promulgation and interpretation of laws and rules administered by the Board, and develop operational policies to support Legislative changes.
- Draft, or coordinate the drafting of, all administrative rules of the Board, file with the Secretary of State, and track all rules filed for amendment, repeal, or adoption. Provide copies to the public as requested.

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- Undertake, research and lead special projects; assist in long- and short-range planning and development projects.
- Develop agendas for quarterly Board meetings.
- Administer biennial budget; develop and draft legislative concepts and proposals.
- Serve as Public Information Officer, which includes providing information to national and international media; oversee internal and external communications of Board activities, notices and newsletters.
- Provide education to licensees by making presentations at hospitals and professional associations; advise of rule changes; publish a quarterly newsletter; and promote adherence to recognized standards of practice and ethics.
- Ensure the agency website content is consistent and easily accessible for users of varying levels of experience.
- Provide human resource services, including recruiting and OPEU contract management, training for staff, and new employee orientations.
- Administer office security and safety programs.

Medical Director (1 FTE)

The Medical Director provides medical expertise for OMB Program activities. Responsibilities include but are not limited to:

- Review all complaints of malpractice, incompetence, or unprofessional conduct investigated by the Board, largely through review of medical records pertaining to each case.
- Prepare medical summaries of investigative findings for review by Board members.
- Provide medical expertise to investigative staff.
- Serve as a liaison to physician organizations and licensees.
- Serve as a resource in evaluating the credentials of applicants for licensure, particularly those with potential problems.
- Analyze medical malpractice claims for evidence of negligence, incompetence, or impairment.
- Provide education to licensees by making presentations at hospitals and professional associations to identify problem areas, advise of rule changes, and promote adherence to recognized standards of practice and ethics.

Investigations and Compliance Department (12 FTE)

While decisions regarding disciplinary matters are made by the twelve-member Board, this department is responsible for gathering and supplying the information on which those decisions are based. This department receives approximately 2,500 complaint and investigation-related contacts annually, receives 700-800 written complaints annually against

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licensees and applicants, and conducts investigations as required by statute. This department provides assistance to the public and Board licensees when problems arise with medical providers or medical practice and monitors licensees who are on probation to ensure that it is safe for them to continue practicing.

Approximately 50% of complaints come from patients or their associates. The rest come from review of malpractice cases, pharmacies, insurance companies, hospitals, nursing homes, physicians, nurses, and others in the healthcare field. Cases generated by the OMB's Licensing Department through its application and renewal processes and criminal background checks are also forwarded to the department. Investigations works closely with OHA's Health Professionals' Services Program (HPSP), which is a monitoring program for healthcare licensees with chemical abuse/dependency or mental health diagnoses. As a result of careful long-term monitoring, combined with referral to treatment programs where indicated, many disciplined licensees are successfully remediated and eventually restored to full practice.

Department tasks include but are not limited to:

- Receive complaints, and determine whether they involve a possible violation of the Medical Practice Act (ORS 677).
- Provide the services of a Complaint Resource Officer, who assists the public with questions and problems concerning their medical providers and who assists providers with questions about Oregon law.
- Conduct thorough investigations of apparent violations, including gathering extensive medical records, interviewing complainants, licensees and witnesses, and working with the Medical Director and medical consultants on the development of the investigation.
- Present findings to the monthly Investigative Committee (comprised of five Board members) and to the full twelve-member Board.
- Perform investigations to determine appropriateness of a licensee's participation in the Health Professionals' Services Program.
- Follow up on Health Professionals' Services Program participants.
- Work with the Assistant Attorney General to draft stipulated orders for licensees found to be in violation of the Medical Practice Act.
- Work with the Assistant Attorney General in preparing for contested case hearings as needed.
- Prepare materials for disciplinary appeals and other legal actions.

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- Monitor licensees who are under disciplinary action to ensure that all conditions of probation are being met and that it is safe for them to practice.
- Assist licensees under disciplinary action with questions regarding compliance.
- Follow up on malpractice reviews conducted by the Medical Director.
- Provide public disciplinary information to the public.
- Review applications and renewals in support of Licensing.

License Services Department (10.79 FTE)

The License Services Department is responsible for both initial licensure and license renewal of all healthcare providers under the jurisdiction of the Board. Its mission is to ensure that only providers who meet all requirements for education, clinical training, examinations, and conduct obtain the privilege to practice medicine in Oregon.

Tasks performed by this department include but are not limited to:

- Assist applicants for initial licensure, license reactivation, or license renewal with the processes involved, and answer questions about practicing in Oregon.
- Perform thorough background checks on all applicants to ensure that they meet all Oregon standards for licensure, reactivation, or renewal.
- Work with the Federation of State Medical Boards for purposes of portability and for establishing core documents that are required for initial licensure applications.
- Work with the Investigations and Compliance Department, the Medical Director, the Executive Director, and the Administrative Affairs Committee in reviewing applicants for licensure, reactivation, or renewal whose eligibility for Oregon licensure is in question due to areas of concern in their application or background.
- Maintain a licensee database using information from renewal forms and other sources to ensure that current information is available on addresses, phone numbers, name changes, changes of specialty, and other important data.
- Maintain an updated orientation manual, the *Handbook for New Physicians*, which this department provides to all newly licensed physicians to inform them about the regulations and responsibilities for medical practice in Oregon.
- Continuously develop ways to provide information to the Board's public on how to apply for a license and information on its licensees through its website, publications, and presentations to interested groups.
- Develop additions and revisions to licensure laws, rules and policies as needed, and work with staff and the Board in their establishment.

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- Provide research to the Executive Director, Operations & Policy Analyst, Business Manager, and members of the Board on topics of discussion at Committee and Board meetings regarding licensure and registration issues that may result in a rule change or a proposed legislative concept (statute change).

Administrative and Business Services Department (9 FTE)

The Administrative Services Department is organized into two main sections: Fiscal Services and Information Systems. Together, these sections support the Board's mission by providing information on licensees to the public and by providing business and technical support to all other departments and activities. Administrative and Business Services Department responsibilities include:

- Advise the Executive Director on all administrative matters.
- Develop and implement biennial budgets.
- Perform all accounting functions, including receipting \$11 million of revenue and controlling \$10.7 million in expenditures in the 2013-2015 biennium.
- Purchase goods and services from state contractors and private vendors.
- Ensure accurate payroll and assist staff with employee benefits.
- Contract for medical consultants and other professional services.
- Provide reception desk services and public information about licensees.
- Administer information systems, including hardware and software installation and maintenance, programming, database development, network administration, security, and website maintenance.
- Provide mailing lists and other information in electronic form to a variety of customers; provide approximately 2,000 written verifications of licensure per year.
- Coordinate facilities and office equipment rental and maintenance.
- Coordinate telecommunications for agency.

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Revenue Sources

The Board is an entirely Other-funded agency, generating all of its own revenues. The agency's funds are paid by and dedicated to regulating Board licensees. Ninety-eight percent of its revenue comes from the licensing and renewal activities of the agency. The other 2 percent of funding is generated by various fees for services the agency provides.

Customers and Stakeholders

- The general public
- Applicants and licensees
- Hospitals, pharmacies, and laboratories
- Insurance companies
- Professional organizations
- Local and national media
- Other Oregon health-related licensing boards
- Law enforcement agencies
- Medical and osteopathic, physician assistant, and acupuncture schools
- Licensing boards of other states
- Medical placement and credentialing services

The Board ensures that stakeholders have access to its services and are informed of its processes and actions. The OMB quarterly newsletter provides licensees and other interested subscribers with current information regarding the Board and the medical field in general. Licensees, applicants, medical or credentialing organizations and the public have access to a wide variety of information and helpful links on the OMB Web site. Board staff give presentations about the Board's mission and functions at hospitals, professional schools, and other medical facilities throughout the state.

Environmental Factors

Some of the major factors influencing the environment in which the Board operates are:

1. Evolution of the Medical Profession

The regulation of the medical profession is affected by the state of the health care industry. Financial pressures are causing the health care industry to evolve from a profession into a business model. Changing technology provides new

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means of electronic health care delivery. In addition, federal and state regulations, demands of third-party payers and medical malpractice compete for the physicians' time with their clinical practice. The phase in of the Affordable Care Act continues to transform the health care system. These factors contribute to:

- Higher public expectations and demands.
- Physicians experiencing increased workload, accountability and documentation demands with decreasing autonomy and reimbursement.
- Investigative and disciplinary matters receiving much wider media attention increasing demands on the Board and its staff.
- Professions and organizations attempting to expand their scope of practice increase the Board's responsibility for oversight.
- Increasing costs and decreasing federal reimbursements resulting in a shortage of medical care in certain specialties.

2. Societal Factors

The regulation of medical practice occurs in the context of broader societal factors, often with ethical implications. Some major societal factors currently impacting agency operations are:

- Confidentiality and increased needs for data security.
- Definition of the scope of medical practice.
- Access to rural populations.
- The needs of an aging population challenges the system to provide adequate quantity and quality of geriatric services.
- A public more informed about medical matters.
- An increased demand for medical services that are considered cosmetic, complementary or alternative.
- Pain management issues.
- Increased public expectations for medical care and a strong tendency to use the legal system to resolve conflicts when expectations for medical care are not met.
- Public access to information on and outcomes for various providers increases interest in regulatory activity.
- The formation of special interest groups and their political activity have created an additional set of expectations on the delivery and cost of medical care.

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- The diversity of the population raises expectations that medical providers will exercise greater cultural awareness in delivering health care.
- National and international events may require licensees to leave their communities when called up to active service in the armed forces.
- Medical boards are also dealing with an increasing need to ensure the physical security of the Board and its staff.

3. Impact of Technology

Technology affects the way health care is delivered and regulated. New technology brings new benefits to patients, and it also brings potential new hazards, thus affecting the regulation of medical care. These benefits and hazards include:

- The advent of on-line access to medical records and utilization of electronic communication in the provision of care is changing the relationships and documentation (e.g., electronic medical records) between licensees and their patients, licensee staff and pharmacies.
- Patients may have access to illicit sources of medical care and prescription drugs via the Internet.
- Telemedicine has allowed medicine to be more globally practiced.
- Innovations in medical technology require an increasing emphasis on multi-disciplinary approaches to diagnosis and therapy. Development of novel medical treatments hold potential for great advances in patient care and require increased specialty medical training to make them widely available to patients.
- The immediate and interactive nature of the Internet raises public expectations that healthcare providers and regulators make information more easily available. It also leads to the unrealistic expectation that every physician will have "up to the minute" knowledge about every aspect of medical care and research.
- Federal regulations such as the Health Insurance Portability and Accountability Act (HIPAA) have placed special requirements on licensees regarding the electronic transmission of private medical information.

Within the Board, other technological advances, especially in information management and communications, allow the OMB to accomplish its work and provide services to the public and its licensees in innovative new ways. The Board automates internal procedures where it can, and uses modern technology to deliver services to people outside the agency by making licensing and disciplinary information and forms available electronically and has implemented online license applications and license renewals.

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4. Agency Issues

As a highly-visible state agency, the Board must be responsive to multiple private and governmental entities, which have diverse needs and expectations, while maintaining its focus on its mission of public protection. Environmental factors arising from and affecting the Board's position as a state agency include:

- A responsibility to operate in a manner fair to all stakeholders, and as openly as is consistent with Oregon and federal confidentiality laws and the demands of public protection.
- Continued debate among the entities to which the Board responds, and between those entities and the Board itself, over what records and proceedings should or should not be confidential.
- An increased demand for flexible licensing regulations that would readily allow out-of-state physicians to practice in Oregon during times of local or national emergency.
- Agency staff must respond to increasingly disgruntled applicants and licensees. Licensees' frustration and dissatisfaction with medicine in general may affect their interactions with colleagues, staff, the public or in other areas such as medical regulation. The OMB is also facing an increasing need to ensure the physical security of both the Board and its staff.
- As a state agency:
 - a) The Board is tied to the State in matters such as budgeting and human resources, creating both opportunities and constraints.
 - b) Political and legal decisions affect the Board's ability to raise fees, license, investigate, and discipline.
 - c) The Board must meet ever-rising demands for services while operating within legislatively-determined budgetary constraints.
 - d) The Board must attempt to achieve optimum productivity, striving to attract and retain highly skilled and reliable staff.
 - e) The Board must respond to ever-increasing and unfunded demands to develop and implement new policies and diversion of OMB resources to cover other statewide initiatives, such as credentialing.

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Agency Initiatives

The Board's two-year plan for progressing toward its long range goals is demonstrated by its proposed packages for the 2015-2017 biennium. For 2015-17, the Board's proposed packages serve to provide the Board with the expenditure authority to enable the agency to continue to fulfill its mission and to continue to meet its performance measures. Details about proposed packages may be found later in this budget document.

Proposed Packages:

- 101 Implement Administrative Efficiencies
- 102 Office Security and Space
- 103 Rules Coordinator
- 104 Investigative Staffing
- 105 Licensing Staff Adjustment
- 106 State-wide Board meetings

Legislation

For 2015, the Board has proposed legislative concept 642, which proposes that the Oregon Medical Board transition to a semi-independent state agency as defined by ORS 182.454.

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Criteria for 2015-17 Budget Development

In developing its 2015-2017 budget, the Board determined the amount of money needed to maintain its current level of service to the public and clients, and identified ways in which it could best improve this service. The Board identified both high level and medium level goals in developing its packages.

High-level goal evaluation:

1. Does this package support the Board's fundamental mission or an Oregon benchmark?
2. Is this package essential for the Board to continue its current level of service?
3. Does the package solve or reduce a serious current problem, or will it prevent or reduce future problems?
4. Will the package result in the saving or more efficient use of time or money?
5. Will the package result in a substantial improvement in Board services?

Medium-level goal evaluation:

6. Does the package fund something that is needed but cannot be done within the budget for the current biennium?
7. Is the package important to the Board's major stakeholders?
8. Does the package support or improve infrastructure viability?

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Major Information Technology Projects \$500,000+

Not applicable to agency.

Information Technology Projects \$150,000+

Not applicable to agency.

Summary of 2015-17 Biennium Budget

Oregon Medical Board
 Oregon Medical Board
 2015-17 Biennium

Governor's Budget
 Cross Reference Number: 84700-000-00-00-00000

<i>Description</i>	<i>Positions</i>	<i>Full-Time Equivalent (FTE)</i>	<i>ALL FUNDS</i>	<i>General Fund</i>	<i>Lottery Funds</i>	<i>Other Funds</i>	<i>Federal Funds</i>	<i>Nonlimited Other Funds</i>	<i>Nonlimited Federal Funds</i>
2013-15 Leg Adopted Budget	40	38.79	10,453,997	-	-	10,453,997	-	-	-
2013-15 Emergency Boards	(1)	(0.46)	275,846	-	-	275,846	-	-	-
2013-15 Leg Approved Budget	39	38.33	10,729,843	-	-	10,729,843	-	-	-
2015-17 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	(1)	(0.54)	62,064	-	-	62,064	-	-	-
Estimated Cost of Merit Increase			-	-	-	-	-	-	-
Base Debt Service Adjustment			-	-	-	-	-	-	-
Base Nonlimited Adjustment			-	-	-	-	-	-	-
Capital Construction			-	-	-	-	-	-	-
Subtotal 2015-17 Base Budget	38	37.79	10,791,907	-	-	10,791,907	-	-	-
Essential Packages									
010 - Non-PICS Pers Svc/Vacancy Factor									
Vacancy Factor (Increase)/Decrease	-	-	(20,538)	-	-	(20,538)	-	-	-
Non-PICS Personal Service Increase/(Decrease)	-	-	23,518	-	-	23,518	-	-	-
Subtotal	-	-	2,980	-	-	2,980	-	-	-
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase-in	-	-	-	-	-	-	-	-	-
022 - Phase-out Pgm & One-time Costs	-	-	-	-	-	-	-	-	-
Subtotal	-	-	-	-	-	-	-	-	-
030 - Inflation & Price List Adjustments									
Cost of Goods & Services Increase/(Decrease)	-	-	250,154	-	-	250,154	-	-	-
State Gov't & Services Charges Increase/(Decrease)			85,714	-	-	85,714	-	-	-

Summary of 2015-17 Biennium Budget

Oregon Medical Board
 Oregon Medical Board
 2015-17 Biennium

Governor's Budget
 Cross Reference Number: 84700-000-00-00-00000

<i>Description</i>	<i>Positions</i>	<i>Full-Time Equivalent (FTE)</i>	<i>ALL FUNDS</i>	<i>General Fund</i>	<i>Lottery Funds</i>	<i>Other Funds</i>	<i>Federal Funds</i>	<i>Nonlimited Other Funds</i>	<i>Nonlimited Federal Funds</i>
Subtotal	-	-	335,868	-	-	335,868	-	-	-
040 - Mandated Caseload									
040 - Mandated Caseload	-	-	-	-	-	-	-	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	-	-	-	-	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	-	-	-	-	-	-	-	-	-
Subtotal: 2015-17 Current Service Level	38	37.79	11,130,755	-	-	11,130,755	-	-	-

Summary of 2015-17 Biennium Budget

Oregon Medical Board
Oregon Medical Board
2015-17 Biennium

Governor's Budget
Cross Reference Number: 84700-000-00-00-00000

<i>Description</i>	<i>Positions</i>	<i>Full-Time Equivalent (FTE)</i>	<i>ALL FUNDS</i>	<i>General Fund</i>	<i>Lottery Funds</i>	<i>Other Funds</i>	<i>Federal Funds</i>	<i>Nonlimited Other Funds</i>	<i>Nonlimited Federal Funds</i>
Subtotal: 2015-17 Current Service Level	38	37.79	11,130,755	-	-	11,130,755	-	-	-
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2015-17 Current Service Level	38	37.79	11,130,755	-	-	11,130,755	-	-	-
080 - E-Boards									
080 - May 2014 E-Board	-	-	-	-	-	-	-	-	-
081 - September 2014 E-Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	-	-	-	-	-	-	-	-	-
Policy Packages									
090 - Analyst Adjustments	-	-	-	-	-	-	-	-	-
101 - Implement Administrative Efficiencies	-	-	-	-	-	-	-	-	-
102 - Office Security and Space	-	-	50,000	-	-	50,000	-	-	-
103 - Rules Coordinator	1	1.00	222,109	-	-	222,109	-	-	-
104 - Investigative Staffing	1	1.00	126,326	-	-	126,326	-	-	-
105 - Licensing Staff Adjustment	-	-	5,954	-	-	5,954	-	-	-
106 - State-wide Board Meetings	-	-	13,850	-	-	13,850	-	-	-
Subtotal Policy Packages	2	2.00	418,239	-	-	418,239	-	-	-
Total 2015-17 Governor's Budget	40	39.79	11,548,994	-	-	11,548,994	-	-	-
Percentage Change From 2013-15 Leg Approved Budget	2.56%	3.81%	7.63%	-	-	7.63%	-	-	-
Percentage Change From 2015-17 Current Service Level	5.26%	5.29%	3.76%	-	-	3.76%	-	-	-

Summary of 2015-17 Biennium Budget

Oregon Medical Board
Operations
2015-17 Biennium

Governor's Budget
Cross Reference Number: 84700-015-00-00-00000

<i>Description</i>	<i>Positions</i>	<i>Full-Time Equivalent (FTE)</i>	<i>ALL FUNDS</i>	<i>General Fund</i>	<i>Lottery Funds</i>	<i>Other Funds</i>	<i>Federal Funds</i>	<i>Nonlimited Other Funds</i>	<i>Nonlimited Federal Funds</i>
2013-15 Leg Adopted Budget	40	38.79	10,453,997	-	-	10,453,997	-	-	-
2013-15 Emergency Boards	(1)	(0.46)	275,846	-	-	275,846	-	-	-
2013-15 Leg Approved Budget	39	38.33	10,729,843	-	-	10,729,843	-	-	-
2015-17 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	(1)	(0.54)	62,064	-	-	62,064	-	-	-
Estimated Cost of Merit Increase			-	-	-	-	-	-	-
Base Debt Service Adjustment			-	-	-	-	-	-	-
Base Nonlimited Adjustment			-	-	-	-	-	-	-
Capital Construction			-	-	-	-	-	-	-
Subtotal 2015-17 Base Budget	38	37.79	10,791,907	-	-	10,791,907	-	-	-
Essential Packages									
010 - Non-PICS Pers Svc/Vacancy Factor									
Vacancy Factor (Increase)/Decrease	-	-	(20,538)	-	-	(20,538)	-	-	-
Non-PICS Personal Service Increase/(Decrease)	-	-	23,518	-	-	23,518	-	-	-
Subtotal	-	-	2,980	-	-	2,980	-	-	-
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase-in,	-	-	-	-	-	-	-	-	-
022 - Phase-out Pgm & One-time Costs	-	-	-	-	-	-	-	-	-
Subtotal	-	-	-	-	-	-	-	-	-
030 - Inflation & Price List Adjustments									
Cost of Goods & Services Increase/(Decrease)	-	-	250,154	-	-	250,154	-	-	-
State Gov't & Services Charges Increase/(Decrease)			85,714	-	-	85,714	-	-	-

Summary of 2015-17 Biennium Budget

Oregon Medical Board
 Operations
 2015-17 Biennium

Governor's Budget
 Cross Reference Number: 84700-015-00-00-00000

<i>Description</i>	<i>Positions</i>	<i>Full-Time Equivalent (FTE)</i>	<i>ALL FUNDS</i>	<i>General Fund</i>	<i>Lottery Funds</i>	<i>Other Funds</i>	<i>Federal Funds</i>	<i>Nonlimited Other Funds</i>	<i>Nonlimited Federal Funds</i>
Subtotal	-	-	335,868	-	-	335,868	-	-	-
040 - Mandated Caseload									
040 - Mandated Caseload	-	-	-	-	-	-	-	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	-	-	-	-	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	-	-	-	-	-	-	-	-	-
Subtotal: 2015-17 Current Service Level	38	37.79	11,130,755	-	-	11,130,755	-	-	-

Summary of 2015-17 Biennium Budget

Oregon Medical Board
Operations
2015-17 Biennium

Governor's Budget
Cross Reference Number: 84700-015-00-00-00000

<i>Description</i>	<i>Positions</i>	<i>Full-Time Equivalent (FTE)</i>	<i>ALL FUNDS</i>	<i>General Fund</i>	<i>Lottery Funds</i>	<i>Other Funds</i>	<i>Federal Funds</i>	<i>Nonlimited Other Funds</i>	<i>Nonlimited Federal Funds</i>
Subtotal: 2015-17 Current Service Level	38	37.79	11,130,755	-	-	11,130,755	-	-	-
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2015-17 Current Service Level	38	37.79	11,130,755	-	-	11,130,755	-	-	-
080 - E-Boards									
080 - May 2014 E-Board	-	-	-	-	-	-	-	-	-
081 - September 2014 E-Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	-	-	-	-	-	-	-	-	-
Policy Packages									
090 - Analyst Adjustments	-	-	-	-	-	-	-	-	-
101 - Implement Administrative Efficiencies	-	-	-	-	-	-	-	-	-
102 - Office Security and Space	-	-	50,000	-	-	50,000	-	-	-
103 - Rules Coordinator	1	1.00	222,109	-	-	222,109	-	-	-
104 - Investigative Staffing	1	1.00	126,326	-	-	126,326	-	-	-
105 - Licensing Staff Adjustment	-	-	5,954	-	-	5,954	-	-	-
106 - State-wide Board Meetings	-	-	13,850	-	-	13,850	-	-	-
Subtotal Policy Packages	2	2.00	418,239	-	-	418,239	-	-	-
Total 2015-17 Governor's Budget	40	39.79	11,548,994	-	-	11,548,994	-	-	-
Percentage Change From 2013-15 Leg Approved Budget	2.56%	3.81%	7.63%	-	-	7.63%	-	-	-
Percentage Change From 2015-17 Current Service Level	5.26%	5.29%	3.76%	-	-	3.76%	-	-	-

PROGRAM PRIORITIZATION FOR 2015-17

Agency Name: Oregon Medical Board 2015-17 Biennium		Agency Number: 84700																			
Agency-Wide Priorities for 2015-17 Biennium																					
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
Priority (ranked with highest priority first)	Agency Initials	Program or Activity Initials	Program Unit/Activity Description	Identify Key Performance Measure(s)	Primary Purpose Program- Activity Code	GF	LF	OF	NL-OF	FF	NL-FF	TOTAL FUNDS	Pos.	FTE	New or Enhanced Program (Y/N)	Included as Reduction Option (Y/N)	Legal Req. Code (C, D, FM, FO, S)	Legal Citation	Explain What is Mandatory (for C, FM, and FO Only)	Comments on Proposed Changes to CSL Included in Agency Request	
Agcy	Prgm/ Div																				
1	1	License Services	1) Process new license applications 2) Renew existing licenses 3) Answer questions from licensees and applicants 4) Work with investigators on problem applications 5) Update database records (addresses, license status, etc.) 6) Develop license policy	1, 6, 7, 9	3, 10			2,090,223				\$ 2,090,223	11	10.79	N	Y	S	ORS 677			
2	1	Investigations and Compliance	1) Investigate complaints 2) Assist Board in developing remedies. 3) Coordinate contested case hearings. 4) Monitor licensees under probation 5) Provide required information to national databases 6) Work with License staff on problem applications 7) Perform triage and investigative services for the Health Professionals' Services Program.	2, 4, 7	3, 10			5,728,601				\$ 5,728,601	13	13.00	N	Y	S	ORS 677			
3	1	Administration and Communication	1) Provide information for board members and advisory committee decision-making 2) Represent the agency to outside entities including the media. 3) Oversee the agency's 4 departments. 4) Coordinate development and promulgation of laws and rules. 5) Ensure provision of legal expertise. 6) Provide education and publish newsletter on regulatory and disciplinary issues. 7) Provide Human Resources. 8) Includes per diem for 12 Board Members and 15 Committee members, totaling \$126,364	7, 8	4, 10			1,325,847				\$ 1,325,847	5	5.00	N	Y	S	ORS 677			
	1	Administrative and Business Services	1) Provide public information including: written verifications of licensure, telephoned inquiries, and electronic data requests. 2) Agency network, database, and web site development and maintenance. 3) Budgeting, cash receipts, and disbursement. 4) Payroll and Benefits. 5) Purchasing and general services. 6) Contracting of medical consultants, legal, and other services. 7) Office facilities rental, equipment maintenance, and telecommunications.	6, 7, 8, 9	4, 10			2,465,400				\$ 2,465,400	9	9.00	N	Y	S	ORS 677			
								11,610,071					\$11,610,071	38	37.79						

7. Primary Purpose Program/Activity Exists

- 1 Civil Justice
- 2 Community Development
- 3 Consumer Protection
- 4 Administrative Function
- 5 Criminal Justice
- 6 Economic Development
- 7 Education & Skill Development
- 8 Emergency Services
- 9 Environmental Protection
- 10 Public Health
- 11 Recreation, Heritage, or Cultural
- 12 Social Support

19. Legal Requirement Code

- C Constitutional
- D Debt Service
- FM Federal - Mandatory
- FO Federal - Optional (once you choose to participate, certain requirements exist)
- S Statutory

Prioritize each program activity for the Agency as a whole

Document criteria used to prioritize activities:

- Activities were prioritized based on the following criteria:
- 1) Does the activity fulfill a statutory mandate?
 - 2) Does the activity support Oregon Benchmarks?
 - 3) Does the activity support the mission of the Oregon Medical Board?
 - 4) What activities will serve the most Oregonians?

ACTIVITY OR PROGRAM	DESCRIBE REDUCTION	AMOUNT AND FUND TYPE	RANK AND JUSTIFICATION
(WHICH PROGRAM OR ACTIVITY WILL NOT BE UNDERTAKEN)	(DESCRIBE THE EFFECTS OF THIS REDUCTION. INCLUDE POSITIONS AND FTE IN 2015-17 AND 2017-19)	(GF, LF, OF, FF. IDENTIFY REVENUE SOURCE FOR OF, FF)	(RANK THE ACTIVITIES OR PROGRAMS NOT UNDERTAKEN IN ORDER OF LOWEST COST FOR BENEFIT OBTAINED)
1. Agency wide	Eliminate printing and mailing of agency newsletter. Lessens the effectiveness of agency outreach and educational efforts in support of agency strategic plan goals.	\$ 72,000 (OF)	Activities/programs are identified in rank order. Rankings were based on public safety impact.
2. Licensing	Eliminate 1.0 FTE Administrative Specialist position. Increases processing time for applicants to receive a license. Decreases agency staff available to assist applicants, licensees, and the public. Agency databases may not be kept current, negatively impacting the information available to the public and other stakeholders. The agency mission of public protection may not be fulfilled.	\$ 102,780 (OF)	
3. Administrative Services	Eliminate 1.0 FTE Information Support Specialist 3 position. Reduces staffing in Information Technology, deteriorating agency internal operating efficiencies. Licensing services will be impacted, slowing the time for applicants to be licensed. Services to the public and protection of the public are affected. The agency mission of public protection may not be fulfilled.	\$ 138,448 (OF)	
4. Investigations	Eliminate 1.0 FTE Administrative Specialist position. Reduces staffing in Investigations. Public protection is diminished. Time to complete investigations is increased. The public may not be protected from unsafe practitioners. The agency mission of public protection may not be fulfilled.	\$ 137,501 (OF)	

ACTIVITY OR PROGRAM	DESCRIBE REDUCTION	AMOUNT AND FUND TYPE	RANK AND JUSTIFICATION
(WHICH PROGRAM OR ACTIVITY WILL NOT BE UNDERTAKEN)	(DESCRIBE THE EFFECTS OF THIS REDUCTION. INCLUDE POSITIONS AND FTE IN 2015-17 AND 2017-19)	(GF, LF, OF, FF. IDENTIFY REVENUE SOURCE FOR OF, FF)	(RANK THE ACTIVITIES OR PROGRAMS NOT UNDERTAKEN IN ORDER OF LOWEST COST FOR BENEFIT OBTAINED)
5. Administrative Services	Eliminate 1.0 FTE Accounting Technician 2 position. Reduces staffing in accounting functions, deteriorating agency internal operating efficiencies and weakening accounting controls.	\$ 108,734 (OF)	
6. Investigations	Eliminate use of national practitioner databank proactive disclosure service. Threatens the Board's ability to properly protect the public through investigation and prosecution of licensees. Eliminates tools that help agency staff operate with maximum efficiency.	\$ 204,472 (OF)	
7. Licensing and Investigations	Eliminate fingerprint criminal background checks for applicants and licensees under investigation. Threatens the Board's ability to properly protect the public through investigation of potential criminal history. Eliminates tools that help agency staff operate with maximum efficiency.	\$ 181,586 (OF)	
9. Investigations	Reduce funds budgeted for Attorney General Services. Reduced legal advice leaves the agency with fewer resources with which to protect the public.	\$ 173,662 (OF)	

Summary Cross Reference Number	Cross Reference Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
015-00-00-00000	Operations						
	Other Funds	8,989,112	10,453,997	10,729,843	11,610,072	11,548,994	-
TOTAL AGENCY							
	Other Funds	8,989,112	10,453,997	10,729,843	11,610,072	11,548,994	-

ORBITS Budget Narrative

010 Vacancy Factor and Non-PICS Personal Services

The total increase for Non-PICS Personal Services is \$2,980. Package details are as follows:

\$	<	20,538	>	Vacancy Factor
		1,006		Premium Pay
		983		Temporary Help & Overtime
		421		OPE Related to Premium Pay, Temporary Help, and Overtime
		193		Mass Transit
		20,915		Pension Bond Contributions
\$		<u>2,980</u>		TOTAL

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Oregon Medical Board
Pkg: 010 - Non-PICS Psnl Svc / Vacancy Factor

Cross Reference Name: Operations
Cross Reference Number: 84700-015-00-00-00000

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Personal Services							
Temporary Appointments	-	-	776	-	-	-	776
Overtime Payments	-	-	207	-	-	-	207
All Other Differential	-	-	1,006	-	-	-	1,006
Public Employees' Retire Cont	-	-	192	-	-	-	192
Pension Obligation Bond	-	-	20,915	-	-	-	20,915
Social Security Taxes	-	-	152	-	-	-	152
Unemployment Assessments	-	-	77	-	-	-	77
Mass Transit Tax	-	-	193	-	-	-	193
Vacancy Savings	-	-	(20,538)	-	-	-	(20,538)
Total Personal Services	-	-	\$2,980	-	-	-	\$2,980
Total Expenditures							
Total Expenditures	-	-	2,980	-	-	-	2,980
Total Expenditures	-	-	\$2,980	-	-	-	\$2,980
Ending Balance							
Ending Balance	-	-	(2,980)	-	-	-	(2,980)
Total Ending Balance	-	-	(\$2,980)	-	-	-	(\$2,980)

ORBITS Budget Narrative

031 Standard Inflation and State Government Service Charge

The package 031 Costs of Goods and Services increase totals \$272,707. This increase is based on the price list's 13.6% rate increase in Attorney General fees and the standard 3% biennial inflation factor increase in Services and Supplies Expenditures.

The Board has a net increase of \$85,714 for State Government Service Charges, based on the price list's estimates.

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Oregon Medical Board
Pkg: 031 - Standard Inflation

Cross Reference Name: Operations
Cross Reference Number: 84700-015-00-00-00000

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Services & Supplies							
Instate Travel	-	-	1,599	-	-	-	1,599
Out of State Travel	-	-	28	-	-	-	28
Employee Training	-	-	1,597	-	-	-	1,597
Office Expenses	-	-	7,226	-	-	-	7,226
Telecommunications	-	-	1,931	-	-	-	1,931
State Gov. Service Charges	-	-	85,714	-	-	-	85,714
Data Processing	-	-	554	-	-	-	554
Publicity and Publications	-	-	155	-	-	-	155
Professional Services	-	-	21,907	-	-	-	21,907
IT Professional Services	-	-	3,590	-	-	-	3,590
Attorney General	-	-	84,726	-	-	-	84,726
Employee Recruitment and Develop	-	-	1,456	-	-	-	1,456
Dues and Subscriptions	-	-	142	-	-	-	142
Facilities Rental and Taxes	-	-	22,480	-	-	-	22,480
Agency Program Related S and S	-	-	5,289	-	-	-	5,289
Other Services and Supplies	-	-	6,386	-	-	-	6,386
Expendable Prop 250 - 5000	-	-	620	-	-	-	620
IT Expendable Property	-	-	3,696	-	-	-	3,696
Total Services & Supplies	-	-	\$249,096	-	-	-	\$249,096
Capital Outlay							
Other Capital Outlay	-	-	568	-	-	-	568
Total Capital Outlay	-	-	\$568	-	-	-	\$568

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Oregon Medical Board
Pkg: 031 - Standard Inflation

Cross Reference Name: Operations
Cross Reference Number: 84700-015-00-00-00000

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Special Payments							
Spc Pmt to Oregon Health Authority	-	-	23,043	-	-	-	23,043
Total Special Payments	-	-	\$23,043	-	-	-	\$23,043
Total Expenditures							
Total Expenditures	-	-	272,707	-	-	-	272,707
Total Expenditures	-	-	\$272,707	-	-	-	\$272,707
Ending Balance							
Ending Balance	-	-	(272,707)	-	-	-	(272,707)
Total Ending Balance	-	-	(\$272,707)	-	-	-	(\$272,707)

ORBITS Budget Narrative

032 Above standard inflation with BAM analyst approval

The Costs of Goods and Services above standard inflation is \$62,802 for professional services and \$359 for IT professional services.

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Oregon Medical Board
 Pkg: 032 - Above Standard Inflation

Cross Reference Name: Operations
 Cross Reference Number: 84700-015-00-00-00000

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Services & Supplies							
Professional Services	-	-	62,802	-	-	-	62,802
IT Professional Services	-	-	359	-	-	-	359
Total Services & Supplies	-	-	\$63,161	-	-	-	\$63,161
Total Expenditures							
Total Expenditures	-	-	63,161	-	-	-	63,161
Total Expenditures	-	-	\$63,161	-	-	-	\$63,161
Ending Balance							
Ending Balance	-	-	(63,161)	-	-	-	(63,161)
Total Ending Balance	-	-	(\$63,161)	-	-	-	(\$63,161)

BUDGET NARRATIVE

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ORBITS Budget Narrative

Revenue Discussion

Source

All revenue received by the Oregon Medical Board (OMB) is classified as Other Funds. The Board receives approximately 98% of its revenue from fees for licensure and registration of the following groups:

- Medical Doctors
- Doctors of Osteopathic Medicine
- Podiatric Physicians
- Physician Assistants
- Acupuncturists

Approximately 2% of the Board's revenue is derived from sales of lists, directories or labels; from fees for license verification; and from fines or penalties imposed as disciplinary measures.

Matching Funds

The OMB receives no revenue subject to matching rates.

General Limits on Use

In the powers granted to the Oregon Medical Board under ORS 677.265 (1)(a), the Board has the power of "Establishing fees and charges to carry out its legal responsibilities, subject to prior approval by the Oregon Department of Administrative Services and a report to the Emergency Board prior to adopting the fees and charges." It also states that: The fees and charges shall be within the budget authorized by the Legislative Assembly as that budget may be modified by the Emergency Board. The fees and charges established under this section may not exceed the cost of administering the program or the purpose for which the fee or charge is established.

In addition to the fees the Board has established to support Board programs, the Board collects several pass-through fees from its licensees for the Oregon Health Authority and Oregon Health Sciences University.

ORBITS Budget Narrative

ORS 677.290 (3) requires the following revenue transfer:

Each year \$10 shall be paid to the Oregon Health and Science University for each in-state physician licensed under this chapter, which amount is continuously appropriated to the Oregon Health and Science University to be used in maintaining a circulating library of medical and surgical books and publications for the use of providers of medicine in this state, and when not so in use to be kept at the library of the School of Medicine and accessible to its students.

Per ORS 431.972 (2)(a), "... a board shall adopt rules imposing a fee of \$25 per year on each person licensed by the board who is authorized to prescribe or dispense controlled substances." The fee is collected at the time the Board collects other license renewal fees.

Per ORS 676.410 (7), "In addition to licensing fees that may be imposed by a healthcare workforce regulatory board, the Oregon Health Policy Board shall establish fees to be paid by applicants for issuance or renewal of licenses reasonably calculated to reimburse the actual cost of obtaining or reporting information [for the state workforce database]."

Basis for 2015-2017 Estimates

Eighty-six percent of agency revenue comes from licensure and renewal of Medical and Osteopathic physicians. This license group increases on a net basis approximately 2% per year. This figure can be used for realistic projections of future revenue. The estimate for 2015-2017 revenue is based on the current trend in fee income which shows that between 2010 and 2014, fee receipts increased by 2% per year.

Changes in Revenue

There are no significant changes in revenue. The Board is not proposing to increase fees during the 2015-17 Biennium.

ORS 677.205 provides the Board the authority to take disciplinary action that may include assessment of a civil penalty. During the 2013-15 biennium, the Board employed its rule-making authority to establish standardized civil penalties for minor infractions of the Medical Practices Act (MPA). The civil penalty of \$195 is comparable to the issuance of a traffic

ORBITS Budget Narrative

ticket. This simplifies and streamlines the process for matters that, while a violation of the MPA, do not constitute a significant threat to public safety. The Board expects insignificant revenue from these fees.

Legislation

For 2015, the Board has proposed legislative concept 642, which proposes that the Oregon Medical Board transition to a semi-independent state agency as defined by ORS 182.454. If this becomes law, it is not anticipated to impact agency revenues.

DETAIL OF LOTTERY FUNDS, OTHER FUNDS, AND FEDERAL FUNDS REVENUE

Oregon Medical Board
2015-17 Biennium

Agency Number: 84700
Cross Reference Number: 84700-000-00-00-00000

<i>Source</i>	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
Other Funds						
Business Lic and Fees	10,218,117	11,288,573	11,288,573	12,090,130	12,090,130	-
Charges for Services	71,386	73,053	73,053	72,070	72,070	-
Fines and Forfeitures	146,930	72,351	72,351	120,359	120,359	-
Sales Income	47,100	47,435	47,435	46,950	46,950	-
Transfer to Other	-	(248,160)	(248,160)	(264,045)	(264,045)	-
Tsfr To Oregon Health Authority	(784,380)	(784,943)	(784,943)	(854,061)	(854,061)	-
Tsfr To Or Health & Science U	(242,490)	-	-	-	-	-
Total Other Funds	\$9,456,663	\$10,448,309	\$10,448,309	\$11,211,403	\$11,211,403	-

DETAIL OF LOTTERY FUNDS, OTHER FUNDS, AND FEDERAL FUNDS REVENUE

Oregon Medical Board
2015-17 Biennium

Agency Number: 84700
Cross Reference Number: 84700-015-00-00-00000

Source	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
Other Funds						
Business Lic and Fees	10,218,117	11,288,573	11,288,573	12,090,130	12,090,130	-
Charges for Services	71,386	73,053	73,053	72,070	72,070	-
Fines and Forfeitures	146,930	72,351	72,351	120,359	120,359	-
Sales Income	47,100	47,435	47,435	46,950	46,950	-
Transfer to Other	-	(248,160)	(248,160)	(264,045)	(264,045)	-
Tsfr To Oregon Health Authority	(784,380)	(784,943)	(784,943)	(854,061)	(854,061)	-
Tsfr To Or Health & Science U	(242,490)	-	-	-	-	-
Total Other Funds	\$9,456,663	\$10,448,309	\$10,448,309	\$11,211,403	\$11,211,403	-

DETAIL OF LOTTERY FUNDS, OTHER FUNDS, AND FEDERAL FUNDS REVENUE

Source	Fund	ORBITS Revenue Acct	2011-2013 Actual	2013-15 Legislatively Adopted	2013-15 Estimated	2015-17		
						Agency Request	Governor's	Legislatively Adopted
Business Licenses & Fees	OF	0205	10,218,117	11,288,573	11,679,992	12,090,130	12,090,130	
Charges for Services	OF	0410	71,386	73,053	72,070	72,070	72,070	
Fines & Forfeitures	OF	0505	146,930	72,351	120,359	120,359	120,359	
Sales Income	OF	0705	47,100	47,435	46,950	46,950	46,950	
Transfer to Other	OF	2050	<784,380>	<248,160>	<253,038>	<264,045>	<264,045>	
Transfer to Oregon Health Authority	OF	2443	<242,490>	<784,943>	<818,459>	<854,061>	<854,061>	

Agency Request

Governor's Budget

Legislatively Adopted

Budget Page 70

ORBITS Budget Narrative

101 Implement Administrative Efficiencies *Not Recommended*

Purpose

This package ensures that the Oregon Medical Board (OMB or Board) continues to fulfill its mission of protecting the citizens of Oregon by providing the expenditure limitation to support necessary agency functions. The actions outlined in this package will allow the agency to meet the following strategic plan goals:

- Streamline agency operations and implement cost efficiencies
- Optimize staffing, facilities, processes and tools to meet dynamic OMB customer needs and provide resources to enable the agency to succeed in its mission

This package is the companion to legislative concept 642, which proposes to transition the OMB into a semi-independent state agency.

How Achieved

Legislative concept 642 proposes to add the Oregon Medical Board to the existing semi-independent agencies defined by ORS 182.454. Although semi-independent state agencies are state entities exempt from some administrative statutes, they remain transparent and are subject to robust oversight by the state and their stakeholders. The semi-independent model would benefit the OMB, its licensees, the State, and the public, by achieving the most efficient and effective use of resources.

Efficiencies and Effectiveness

The semi-independent form of governance saves both time and money by streamlining administrative and operational functions, exempting the agency from statutes intended for larger agencies, shortening the budget cycle, and allowing the agency to perform comparison shopping when spending agency funds. These agencies save the state resources, freeing up resources for health care, education, and public safety. The model is ideal for the OMB, an Other-Funded agency that

ORBITS Budget Narrative

already performs book keeping, financial reporting, accounts payable, contracting, human resources, payroll and benefits, and information and technical systems and services.

Applying one centralized set of standards to every state agency, regardless of the agency's purpose, or resources, leads to increased costs and lower efficiency. This ultimately impairs the valuable services provided to the citizens of Oregon. The Oregon Medical Board is completely self-funded and its operation and quality of service depend on the ability to respond to the requests and changing needs of internal and external customers in a timely manner. Although the Board is self-funded, the state government incurs administrative costs.

The OMB worked with several agencies already included in ORS 182.454 to identify and evaluate potential efficiencies and to learn from their experience. This collaboration will ensure that a transition to the semi-independent model will not negatively impact public safety. Established as semi-independent in 1997, these agencies have a proven track record and demonstrate that the change in organizational structure enhanced their effectiveness.

The semi-independent model finds a balance between minimizing costs and providing valuable services by utilizing a more streamlined approach. Under this model, Board would work more effectively and efficiently, benefitting the public, the Board's licensees, and the State as follows:

- Time and state resources will be saved by removing the need for resources supporting the Board; support services allocated to the Board can be made available to other agencies.
- With less bureaucracy involved, the Board's processing and response times will be decreased, resulting in better and faster customer service for licensees and the public.
- Ability to purchase goods and services on the open market rather than through state contracting will allow the Board to comparison shop for cost, performance, and convenience. This will provide for more timely procurements and faster responses to Agency needs.

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Accountability

As a semi-independent agency, administrative processes are tailored for other-funded agencies. While the Board will be exempt from requirements that were designed for the management of larger agencies, it will continue to be an agent of state government and subject to the state's oversight and accountability. The OMB has also worked closely with its partners and stakeholders to ensure their needs will continue to be met. These groups were closely involved in the development of the legislative concept and will be key collaborators in the biennial budget process.

Under this model, the Board would remain transparent and accountable, continuing to be subject to robust State oversight and increasing the oversight of its stakeholders:

- The budget is reviewed and approved through notice and public hearings, which will provide more transparency and allow stakeholders to have more access and involvement while streamlining and simplifying the process.
- The budget is also subject to State reporting requirements, which includes Legislative review.
- The Secretary of State performs an audit or financial review of the biennial budget.
- Fees are limited by statute to "amounts necessary for the purpose of carrying out the functions of the board."
- Public records and meetings laws are unchanged, providing for transparency and public access to the agency.
- The Department of Justice provides advice and counsel.

Staffing Impact

There are no changes to positions or full-time equivalent required.

Quantifying Results

While not directly tied to agency performance measure results, the above actions will allow the agency to meet the following strategic plan goals:

- Streamline agency operations and implement cost efficiencies
- Optimize staffing, facilities, processes and tools to meet dynamic OMB customer needs and provide resources to enable the agency to succeed in its mission

ORBITS Budget Narrative

Revenue Source

Should this bill become law, the OMB expects a decrease in expenses. Semi-independent agencies are able to purchase goods and services on the open market rather than through state contracting. Semi-independent agencies also have a tailored system for oversight that decreases the staff time required for some administrative processes.

The potential savings are not fully known. Other state agencies who have shifted to this model have saved time, resources, and operational costs. Based on the transition timeline, the OMB does not expect to realize savings until the 2017-19 biennium.

The agency is entirely funded through its charges for services; the Board receives no General or Federal Funds. The approval of this package will not require an increase in fees.

ORBITS Budget Narrative

102 Office Security and Space

Purpose

This package ensures that the Oregon Medical Board (OMB or Board) continues to fulfill its mission of protecting the citizens of Oregon by providing the expenditure limitation to support necessary agency functions. The actions outlined in this package improve agency security, supporting the agency's Strategic Plan Goal 6, to ensure efficient internal operations to accomplish the Board's mission.

This package proposes to provide the OMB with expenditure limitation sufficient to fund the lease negotiated by the Department of Administrative Services (DAS) Enterprise Asset Management Division.

How Achieved

As a regulatory agency, the Board's actions are under constant public scrutiny. Many of these actions, though taken in the best interests of the citizens of Oregon, are not always well received. Public bodies are becoming more and more concerned with the personal security of their staff. A member of the Arkansas Medical Board was maimed and nearly killed by a disgruntled licensee and there have been occasions where this agency has found its staff threatened while carrying out their work. The Board has found it necessary to make changes to the agency office space for the safety of its staff and Board members.

The Board strives to fulfill its functions in a transparent and legal manner through due process governed by the Oregon Revised Statutes and Administrative Rules. The Board prides itself on conducting professional and efficient public meetings. The Board meetings, the meetings of the Board's seven subcommittees, rules hearings, and all contested case hearings are hosted by the agency in a hearing room within the Board's office space rather than in off-site meeting spaces. This provides maximum efficiency for staff while allowing ready access to their work and agency resources.

ORBITS Budget Narrative

The Board's central location is convenient for interested public and professional parties wishing to attend these meetings which allows for greater transparency in agency operations. The result is that the Board continues to see high attendance at its meetings, stretching the capacity of its current hearing room beyond its original intent. The Board has also had an increase in the number of Board members since the hearing room was initially designed. This has contributed to the need to enlarge the space to accommodate more people.

Also, as the number of Board licensees expands, the agency's legal proceedings are becoming more complex and more frequent. OMB staff and counsel strive to maintain the same level of professional work product while licensees' defense counsel are requesting private rooms for confidential client discussions and separate space for defense witnesses during Board proceedings.

The Board's previous lease for this location expired at the end of June, 2014. The Board recognized that the lease renewal was the opportune time to absorb adjacent vacant office space. The agency worked closely with the Department of Administrative Services Enterprise Asset Management Division and our landlord to design the vacant space into an expansion of the existing hearing room and one additional confidential conference room. The Department of Administrative Services approved the plan and negotiated extremely favorable lease renewal terms. In addition, the landlord paid for all the approved construction.

These changes are expected to achieve the following:

1. Improve public access to agency meetings

The Board hearing room is used for Board and Committee meetings and for any rule-making hearings. Stakeholder attendance at meetings frequently exceeded room capacity. Enlarging the hearing room provides essential space for members of the public to attend these meetings, allowing the agency to foster transparency and public engagement. The Board is committed to promoting openness and easy public access to its many meetings.

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2. Ensure the safety of the public and our stakeholders

The agency has attempted to accommodate the public at meetings by bringing in extra seating. The original hearing room size and design made it difficult to provide for attendees and keep emergency exits clear. Meetings consistently exceeded the fire marshal's posted room capacity. The expanded room provides space for clear exits and safe evacuation, should the need arise.

3. Ensure the safety of our Board members

Violence against members of professional licensing boards is becoming more and more common. In a recent survey for the Federation of State Medical Boards Research and Education Foundation, 73% of responding boards reported that their board members and/or staff had experienced either explicit or implied threats of violence. Many of the threats occurred after board meetings and/or hearings and were made by either a physician or a family member of a physician. We've experienced an increasing number of disciplined licensees routinely attending meetings. The additional space provides a safety buffer for the members of our board.

Staffing Impact

There are no changes to positions or full-time equivalent required for the above measures.

Quantifying Results

While not directly tied to agency performance measure results, the requested expenditure limitation will support agency Strategic Plan Goal 6, ensure efficient internal operations to accomplish the Board's mission by protecting the safety of the Board and agency members.

Sufficient expenditure limitation is essential to ensure that the OMB can continue to fulfill its mission of protecting the public and to continue to meet its performance measures. The Board has met its performance measure targets since

ORBITS Budget Narrative

fiscal year 2010. This is, in part, because the Board has had the financial resources to provide the personnel and services to meet the needs and expectations of its stakeholders and the citizens of Oregon.

The Board anticipates this space will meet agency needs for the duration of the lease period.

Revenue Source

The total requested ongoing limitation increase is \$50,000.

This package adds no new revenue sources to the Board, which generates all of its own revenues through fees for licensure and services. The agency is entirely funded through its charges for services; the Board receives no General, Lottery, or Federal funds. This package is funded through agency reserves; approval will not require an increase in fees.

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Oregon Medical Board
 Pkg: 102 - Office Security and Space

Cross Reference Name: Operations
 Cross Reference Number: 84700-015-00-00-00000

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Services & Supplies							
Facilities Rental and Taxes	-	-	50,000	-	-	-	50,000
Medical Services and Supplies	-	-	-	-	-	-	-
Total Services & Supplies	-	-	\$50,000	-	-	-	\$50,000
Total Expenditures							
Total Expenditures	-	-	50,000	-	-	-	50,000
Total Expenditures	-	-	\$50,000	-	-	-	\$50,000
Ending Balance							
Ending Balance	-	-	(50,000)	-	-	-	(50,000)
Total Ending Balance	-	-	(\$50,000)	-	-	-	(\$50,000)

BUDGET NARRATIVE

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ORBITS Budget Narrative

103 Rules Coordinator

Purpose

This package ensures that the Oregon Medical Board (OMB or Board) continues to fulfill its mission of protecting the citizens of Oregon by providing the expenditure limitation and new position authority to support necessary agency functions. Adding the position described in this package will help the agency meet the following strategic plan goals:

- Improve access to quality care through efficiently managing licensure and renewal of licensure
- Provide coordinated outreach and education to the public and licensees
- Optimize staffing, facilities, processes and tools to meet dynamic OMB customer needs and provide resources that enable the agency to succeed in its mission

How Achieved

The Board proposes the addition of a new Rules Coordinator (Operations and Policy Analyst 4) position to perform several important functions.

1. **Manage the agency administrative rules, Oregon Administrative Rules (OAR), chapter 847.** The process is currently managed by an existing Operations and Policy Analyst 4 position but rule-making responsibilities have been increasing over time to the point that this position can no longer manage rule-making with other responsibilities. OAR 847 is complex and ever-changing to meet the needs of our stakeholders as the medical profession, society, and technology rapidly evolve. During 2013 alone, the agency submitted approximately 55 separate rule filings to the Secretary of State Archives Division. Five filings included amendments of entire Divisions of rules. Nine were temporary rules, which required immediate adoption, most often due to legislation that altered agency licensing procedures.

ORBITS Budget Narrative

The new position can better focus on managing the administrative rules process to make sure that OAR 847 is updated as necessary due to changes in Oregon legislation. Besides responding to statutory changes affecting OARs, the Board is continually monitoring rules for ways to streamline and simplify agency procedures. Historically, efforts to streamline OARs have involved time-consuming and costly legal review. The Board anticipates this position will serve as a first step in the legal review process by performing a thorough analysis of a rule before suggestions are submitted to our Assistant Attorney General (AAG). This analysis will streamline the process of AAG review, making the review more efficient and less costly.

Each rule filing requires analysis of the regulatory need as directed by the Legislature, Board or management. Next, a thorough review of any existing statutes and rules must be performed. Occasionally, the rulemaking process also requires examining other Oregon agency regulations or out-of-state regulations to determine best practices. The rules are then carefully drafted and reviewed with management, the Board, and the Board's advisory committees. Notices of proposed rulemaking are filed with the Secretary of State Archives Division. Public input is accepted, evaluated, and incorporated as appropriate. Rulemaking hearings are held if necessary, and the corresponding hearing officer report is prepared. Finally, the Board reviews the recommendations of the advisory committees and adopts rules. The rulemaking is completed by filing the permanent rules with the Secretary of State Archives Division. These are published on the Board's website, newsletters, and other educational materials.

Some of the anticipated duties related to administrative rules management are:

- a) Analyze and track state and federal legislation that impact the operations of the Board
- b) Explain the effect of proposed legislation to the Board, legislators, committee members, lobbyists and task forces
- c) Monitor the implementation of legislation and write administrative rules
- d) Develop and draft Administrative Rules as necessary to respond to agency changes
- e) Ensure rules are clear and concise
- f) Review rules to make sure they are accurate, necessary, and achieving the intended effect
- g) Manage the publication and public hearings on proposed rules to ensure rules are adopted in as transparent a manner as possible and in compliance with Oregon rule-making requirements and public hearings
- h) Educate staff, licensees, stakeholders, and the public on rules and regulations adopted

ORBITS Budget Narrative

2. **Review and respond to increasingly complex public information requests.** In recent years, the Board has experienced an increase in both the number and complexity of public information requests. This position will work with the AAG to be sure we provide all the appropriate public information in as timely a manner as possible. Again, performing a thorough analysis of the request before it is submitted to our AAG provides a faster review and more timely response to the public records request while limiting the expense to the Board and the requestor.

The Board has never had a position dedicated to providing public records; the duties have been split between several staff members. Consolidating duties within one dedicated position will make fulfillment of public records requests faster and more efficient.

3. **Assist with internal and external questions about Oregon statutes and administrative rules,** working with the AAG as appropriate. This includes:
- a) Field and respond to incoming regulatory and policy inquiries from staff and stakeholders
 - b) Investigate and analyze information to draw conclusions and prepare opinions as appropriate
 - c) Draft briefs, position statements, news items, educational materials, and regulatory and policy responses

Fostering internal expertise creates efficiencies and saves the agency money.

Among other benefits, the above efficiencies are expected to help the agency save money on legal fees. These savings will be passed to our customers by helping to keep fees low while providing faster, more efficient services.

The shift of the responsibilities outlined above relieves workload from our existing Operations and Policy Analyst 4, position number 0000873. The growing number of bills and legislatively created workgroups and committees, such as Credentialing and the Prescription Monitoring Program, has had a significant impact on the workload of the current Operations and Policy Analyst 4. The responsibilities of this existing position include but are not limited to the following:

- a) Perform organizational research, analysis, and change leadership in response to legislative direction and business needs
- b) Represent the Board through participation in a variety of committees and meetings with various stakeholder groups, both on a state-wide and national level
- c) Analyze and educate the Board and stakeholders about the impacts of complex legislation
- d) Develop and draft legislative concepts

ORBITS Budget Narrative

- e) Prepare and present testimony on proposed legislation and Administrative Rules
- f) Serve as Communications Team lead, overseeing internal and external communications and educational endeavors as well as monitoring the content of the agency website and collaborating on the production of the Board's quarterly newsletter.

An additional position will allow the Board to better manage the workload and improve services provided to customers.

Staffing Impact

This package adds a new Operations and Policy Analyst 4, position number 0000875.

Quantifying Results

While not directly tied to agency performance measure results, the above position is proposed to streamline Administrative Rulemaking, improve customer service and fulfillment of public records requests, and implement cost efficiencies.

Sufficient expenditure limitation is essential to ensure that the OMB can continue to fulfill its mission of protecting the public and to continue to meet its performance measures. The Board has met its performance measure targets since fiscal year 2010. This is, in part, because the Board has had the financial resources to provide the personnel and services required to meet the needs and expectations of its stakeholders and the citizens of Oregon.

ORBITS Budget Narrative

Revenue Source

The total requested ongoing limitation increase is \$19,876 in Services and Supplies in addition to position authority and funding of \$202,233 for 2015-17.

This package adds no new revenue sources to the Board, which generates all of its own revenues through fees for licensure and services. The agency is entirely funded through its charges for services; the Board receives no General, Lottery, or Federal funds. This package is funded through agency reserves; approval will not require an increase in fees.

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Oregon Medical Board
Pkg: 103 - Rules Coordinator

Cross Reference Name: Operations
Cross Reference Number: 84700-015-00-00-00000

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Personal Services							
Class/Unclass Sal. and Per Diem	-	-	138,336	-	-	-	138,336
Empl. Rel. Bd. Assessments	-	-	44	-	-	-	44
Public Employees' Retire Cont	-	-	21,843	-	-	-	21,843
Social Security Taxes	-	-	10,583	-	-	-	10,583
Worker's Comp. Assess. (WCD)	-	-	69	-	-	-	69
Mass Transit Tax	-	-	830	-	-	-	830
Flexible Benefits	-	-	30,528	-	-	-	30,528
Total Personal Services	-	-	\$202,233	-	-	-	\$202,233
Services & Supplies							
Office Expenses	-	-	6,850	-	-	-	6,850
Telecommunications	-	-	1,750	-	-	-	1,750
Facilities Rental and Taxes	-	-	4,776	-	-	-	4,776
Expendable Prop 250 - 5000	-	-	5,500	-	-	-	5,500
IT Expendable Property	-	-	1,000	-	-	-	1,000
Total Services & Supplies	-	-	\$19,876	-	-	-	\$19,876
Total Expenditures							
Total Expenditures	-	-	222,109	-	-	-	222,109
Total Expenditures	-	-	\$222,109	-	-	-	\$222,109

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Oregon Medical Board
Pkg: 103 - Rules Coordinator

Cross Reference Name: Operations
Cross Reference Number: 84700-015-00-00-00000

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Ending Balance							
Ending Balance	-	-	(222,109)	-	-	-	(222,109)
Total Ending Balance	-	-	(\$222,109)	-	-	-	(\$222,109)
Total Positions							
Total Positions							1
Total Positions	-	-	-	-	-	-	1
Total FTE							
Total FTE							1.00
Total FTE	-	-	-	-	-	-	1.00

12/29/14 REPORT NO.: PDPFISCAL
 REPORT: PACKAGE FISCAL IMPACT REPORT
 AGENCY:84700 OREGON MEDICAL BOARD
 SUMMARY XREF:015-00-00 Operations

DEPT. OF ADMIN. SVCS. -- PPDB PICS SYSTEM

2015-17
 PICS SYSTEM: BUDGET PREPARATION

PAGE 1
 PROD FILE

PACKAGE: 103 - Rules Coordinator

POSITION NUMBER	CLASS COMP	CLASS NAME	POS CNT	FTE	MOS	STEP	RATE	GF SAL/OPE	OF SAL/OPE	FF SAL/OPE	LF SAL/OPE	AF SAL/OPE
0000875	MENN20873	AA OPERATIONS & POLICY ANALYST 4	1	1.00	24.00	02	5,764.00		138,336 63,067			138,336 63,067
TOTAL PICS SALARY									138,336			138,336
TOTAL PICS OPE									63,067			63,067
TOTAL PICS PERSONAL SERVICES =			1	1.00	24.00				201,403			201,403

ORBITS Budget Narrative

104 Investigative Staffing

Purpose

This package ensures that the Oregon Medical Board (OMB or Board) continues to fulfill its mission of protecting the citizens of Oregon by providing the expenditure limitation and new position authority to support necessary agency functions. Adding the position described in this package will help the agency meet the following strategic plan goals:

- Investigate complaints against licensees and applicants; ensure that Board members have sufficient information to take appropriate action based on the facts.
- Optimize staffing, facilities, processes and tools to meet dynamic OMB customer needs and provide resources that enable the agency to succeed in its mission.

How Achieved

The Board proposes the addition of a new Executive Support Specialist 1 position. The position is expected to perform several important functions.

1. **Serve as a confidential administrative assistant to the Board's Medical Director, Chief Investigator, and Assistant Chief Investigator**, freeing these individuals from administrative tasks, allowing them to utilize their skills and training to best benefit the agency.
 - a) Responsible for the Medical Director's, Chief Investigator's and Assistant Chief Investigator's correspondence: research and assemble information needed for composing or replying to correspondence; draft correspondence for the Medical Director's, Chief Investigator's or Assistant Chief Investigator's signature; handle limited types of correspondence independently over own signature.
 - b) Research, assemble, and edit information and data utilized in referrals made by the Chief Investigator in closing investigative cases.

ORBITS Budget Narrative

- c) Serve as communications link (through telephone, e-mail, writing, and in person) between the Chief Investigator and Attorneys, licensees, complainants, the general public and other enforcement or regulatory agencies.
 - d) Receive and screen telephone calls for the Chief Investigator. Assist callers when the Chief Investigator is not available and refer callers to other agencies or individuals as appropriate.
 - e) Maintain Chief Investigator's calendar and contact list. Make appointments for the Chief Investigator and keep Chief Investigator apprised of commitments. Enter and edit contact information as needed in the Chief Investigator's contacts list.
 - f) Prepare and edit presentations made by the Medical Director and Chief Investigator and assemble supplemental material needed for those presentations.
 - g) Develop, edit and maintain letter templates for use by the Medical Director and Chief Investigator on routine matters.
 - h) Monitor voicemail and e-mail for the Medical Director, Chief Investigator and Assistant Chief Investigator at their direction when they are absent.
 - i) Research and draft memos, reports and other informational documents.
 - j) Maintain database of legal opinions, meeting minutes and legal bills for the Chief Investigator.
2. **Coordinate malpractice reporting program.** The minimal necessary activities of the malpractice reporting program are currently handled by existing position 0000545. With this package, the Board proposes to expand the duties around malpractice reporting to allow the Board to be more thorough in reviewing malpractice information and more proactive in investigating reports that may indicate a practice problem.
- a) Responsible for maintaining database of malpractice reports made to the Board.
 - b) Serves as the primary point of contact for attorneys, credentialing bodies, insurance companies and providers that make inquiries regarding malpractice reporting.
 - c) Coordinates the review of malpractice cases with the Assistant Chief Investigator so determinations may be made regarding the need for an investigation.
 - d) Tracks and reviews malpractice reports for compliance with statutory reporting requirements.
 - e) Conducts audits of malpractice reporting by comparing license renewal information with reported cases of malpractice and works with insurers to gain compliance.
 - f) Maintain, edit and distribute malpractice reporting form to comply with statutory requirements and Board rules and policies.
 - g) Maintain an e-mail list for distribution of malpractice reports.

ORBITS Budget Narrative

- h) Produce and distribute monthly and quarterly malpractice reports.
 - i) Prepare and distribute correspondence as needed in regard to malpractice reporting requirements or deficiencies.
3. **Coordinate civil penalties that arise from investigative actions.** The Board has recently implemented the use of civil penalties in lieu of discipline in situations where an investigation reveals a rule violation that does not impact patient safety. This has proven to be a successful means of efficiently resolving violations without having a detrimental consequence upon the availability of patient care.
- a) Responsible for reviewing cases related to the ability to require civil penalty action.
 - b) Manage data entry related to civil penalty cases through the investigations section.
 - c) Coordinate meetings with case investigators and Chief Investigator related to civil penalty cases.
 - d) Coordinates civil penalty cases and works with the Executive Director, Chief Investigator and representatives from other OMB departments so processes are the same across departments.
 - e) Tracks timelines related to civil penalty cases and makes referrals as necessary.
 - f) Coordinates any hearings that may occur related to civil penalty cases originating in the Investigations Section.
4. **Compile draft orders for review by Board staff and legal counsel.** Use of internal staff resources is expected to help the agency save time in order preparation and money on legal fees.
- a) Maintain and apply detailed knowledge of laws, rules, policies and procedures pertaining to the confidentiality of Board records and violations of the Medical Practice Act for the Board's license programs.
 - b) Attend all portions of quarterly board meetings that pertain to investigative or disciplinary matters. Capture Board decisions pertaining to investigations and legal orders.
 - c) Working with department manager, investigators, and legal counsel, draft appropriate language for consent agreements for review by Board staff and legal counsel. Track responses and coordinate revisions.
 - d) Coordinate with legal counsel to ensure perfection of legal orders and to facilitate immediate drafting and/or processing of orders once approved by Board.
 - e) Distribute copies of signed orders to appropriate entities, including Board staff, licensees, and attorneys.
 - f) In compliance with state and federal laws, notify hospitals where licensee has privileges and others when requested.
 - g) Update Board database with information on new or modified orders. (This information is used in various public reports available in hard-copy or electronic formats.) Ensure that final/signed Board orders are scanned into the computer for use by agency staff and to post on the Board's web site.

ORBITS Budget Narrative

- h) Notify Licensing Services Department to enter changes in status for affected licensees.
- i) Direct clerical staff to update Public Information Files.

Staffing Impact

This package adds a new Executive Support Specialist 1, position number 0000876.

Quantifying Results

While not directly tied to agency performance measure results, the above position is proposed to support and improve agency investigative functions by providing critical support staff.

Sufficient expenditure limitation is essential to ensure that the OMB can continue to fulfill its mission of protecting the public and to continue to meet its performance measures. The Board has met its performance measure targets since fiscal year 2010. This is, in part, because the Board has had the financial resources to provide the personnel and services to meet the needs and expectations of its stakeholders and the citizens of Oregon.

Revenue Source

The total requested ongoing limitation increase is \$17,212 in Services and Supplies in addition to position authority and funding of \$109,114 for 2015-17.

This package adds no new revenue sources to the Board, which generates all of its own revenues through fees for licensure and services. The agency is entirely funded through its charges for services; the Board receives no General, Lottery, or Federal funds. This package is funded through agency reserves; approval will not require an increase in fees.

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Oregon Medical Board
Pkg: 104 - Investigative Staffing

Cross Reference Name: Operations
Cross Reference Number: 84700-015-00-00-00000

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Personal Services							
Class/Unclass Sal. and Per Diem	-	-	63,264	-	-	-	63,264
Empl. Rel. Bd. Assessments	-	-	44	-	-	-	44
Public Employees' Retire Cont	-	-	9,989	-	-	-	9,989
Social Security Taxes	-	-	4,840	-	-	-	4,840
Worker's Comp. Assess. (WCD)	-	-	69	-	-	-	69
Mass Transit Tax	-	-	380	-	-	-	380
Flexible Benefits	-	-	30,528	-	-	-	30,528
Total Personal Services	-	-	\$109,114	-	-	-	\$109,114
Services & Supplies							
Office Expenses	-	-	6,850	-	-	-	6,850
Telecommunications	-	-	1,750	-	-	-	1,750
Employee Recruitment and Develop	-	-	2,112	-	-	-	2,112
Expendable Prop 250 - 5000	-	-	5,500	-	-	-	5,500
IT Expendable Property	-	-	1,000	-	-	-	1,000
Total Services & Supplies	-	-	\$17,212	-	-	-	\$17,212
Total Expenditures							
Total Expenditures	-	-	126,326	-	-	-	126,326
Total Expenditures	-	-	\$126,326	-	-	-	\$126,326

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Oregon Medical Board
Pkg: 104 - Investigative Staffing

Cross Reference Name: Operations
Cross Reference Number: 84700-015-00-00-00000

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Ending Balance							
Ending Balance	-	-	(126,326)	-	-	-	(126,326)
Total Ending Balance	-	-	(\$126,326)	-	-	-	(\$126,326)
Total Positions							
Total Positions							1
Total Positions	-	-	-	-	-	-	1
Total FTE							
Total FTE							1.00
Total FTE	-	-	-	-	-	-	1.00

PACKAGE: 104 - Investigative Staffing

POSITION NUMBER	CLASS COMP	CLASS NAME	POS CNT	FTE	MOS	STEP	RATE	GF SAL/OPE	OF SAL/OPE	FF SAL/OPE	LF SAL/OPE	AF SAL/OPE	
0000876	OA	C0118 AA EXECUTIVE SUPPORT SPECIALIST	1	1	1.00	24.00	02	2,636.00	63,264	45,470		63,264	45,470
TOTAL PICS SALARY									63,264			63,264	
TOTAL PICS OPE									45,470			45,470	
TOTAL PICS PERSONAL SERVICES =			1	1.00	24.00				108,734			108,734	

BUDGET NARRATIVE

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ORBITS Budget Narrative

105 Licensing Staff Adjustments

Purpose

This package ensures that the Oregon Medical Board (OMB or Board) continues to fulfill its mission of protecting the citizens of Oregon by providing the expenditure limitation and new position authority to support necessary agency functions. Modifying the positions as described in this package will help the agency meet the following strategic plan goals:

- Improve access to quality care through efficiently managing licensure and renewal of licensure.
- Optimize staffing, facilities, processes and tools to meet dynamic OMB customer needs and provide resources that enable the agency to succeed in its mission

How Achieved

The Board's licensing department includes six Licensing Assistants who review and process applications for licensure. During the recent managerial classification and compensation analysis, the Department of Administrative Services recommended that our six Licensing Assistants be reclassified from Office Specialist 2 to Administrative Specialist 1. This classification would better reflect the level of decision-making responsibility required of these employees.

Each legislative session brings new bills leading to new or revised administrative rules relating to medical practice. These staff must interpret, apply, and often explain incredibly stringent and changing standards for issuing a medical license. New fields of medicine, such as telemedicine, also add to the increasing complexity in determining if an applicant is qualified to safely practice medicine in a manner that protects the safety of the public.

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With the safety of the public at stake, our expectations for work quality in these positions is exceedingly high. The work is exacting, with significant pressure to make sure only qualified applicants are licensed but also to provide licensure quickly to ensure citizens have access to care.

The Board has recently experienced repeated difficulties in the recruitment of quality candidates and continues to experience unprecedented vacancies within these positions. We have been fortunate to have dedicated staff who can work overtime to minimize the impact these vacancies have on the services we provide. This is not a cost-effective long term solution.

In evaluating the situation, the Agency considered the duties of the positions and alternatives to reclassification. The agency reviewed the organizational structure to assess the need to maintain so many positions with like responsibilities. The Board determined that it is appropriate for these six positions to be classified alike and have similar duties. This provides the agency with the resources to provide cross-coverage and staffing for contingencies. The workload and performance among the positions is continually monitored and adjusted as necessary.

Reclassification of all six positions provides a salary range that will help the Board recruit and retain the quality staff necessary for this important work.

Staffing Impact

This package will reclassify six positions. No new positions were added with this package.

Quantifying Results

While not directly tied to agency performance measure results, these position reclassifications are proposed to support agency Strategic Plan Goals as described above and improve customer service.

Sufficient expenditure limitation is essential to ensure that the OMB can continue to fulfill its mission of protecting the public and to continue to meet its performance measures. The Board has met its performance measure targets since

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fiscal year 2010. This is, in part, because the Board has had the financial resources to provide the personnel and services to meet the needs and expectations of its stakeholders and the citizens of Oregon.

Revenue Source

The total requested limitation increase is \$ 5,954 for 2015-17.

This package adds no new revenue sources to the Board, which generates all of its own revenues through fees for licensure and services. The agency is entirely funded through its charges for services; the Board receives no General, Lottery, or Federal funds. This package is funded through agency reserves; approval will not require an increase in fees.

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Oregon Medical Board
 Pkg: 105 - Licensing Staff Adjustment

Cross Reference Name: Operations
 Cross Reference Number: 84700-015-00-00-00000

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Personal Services							
Class/Unclass Sal. and Per Diem	-	-	4,824	-	-	-	4,824
Public Employees' Retire Cont	-	-	761	-	-	-	761
Social Security Taxes	-	-	369	-	-	-	369
Total Personal Services	-	-	\$5,954	-	-	-	\$5,954
Total Expenditures							
Total Expenditures	-	-	5,954	-	-	-	5,954
Total Expenditures	-	-	\$5,954	-	-	-	\$5,954
Ending Balance							
Ending Balance	-	-	(5,954)	-	-	-	(5,954)
Total Ending Balance	-	-	(\$5,954)	-	-	-	(\$5,954)

PACKAGE: 105 - Licensing Staff Adjustment

POSITION NUMBER	CLASS COMP	CLASS NAME	POS CNT	FTE	MOS	STEP	RATE	GF SAL/OPE	OF SAL/OPE	FF SAL/OPE	LF SAL/OPE	AF SAL/OPE
0000533	OA C0104 AA	OFFICE SPECIALIST 2	1-	1.00-	24.00-	02	2,435.00		58,440- 44,340-			58,440- 44,340-
0000533	OA C0107 AA	ADMINISTRATIVE SPECIALIST 1	1	1.00	24.00	02	2,636.00		63,264 45,470			63,264 45,470
0000534	OA C0104 AA	OFFICE SPECIALIST 2	1-	1.00-	24.00-	08	3,139.00		75,336- 48,300-			75,336- 48,300-
0000534	OA C0107 AA	ADMINISTRATIVE SPECIALIST 1	1	1.00	24.00	06	3,139.00		75,336 48,300			75,336 48,300
0000653	OA C0104 AA	OFFICE SPECIALIST 2	1-	.79-	18.90-	05	2,756.00		52,088- 42,851-			52,088- 42,851-
0000653	OA C0107 AA	ADMINISTRATIVE SPECIALIST 1	1	.79	18.90	03	2,756.00		52,088 42,851			52,088 42,851
0000657	OA C0104 AA	OFFICE SPECIALIST 2	1-	1.00-	24.00-	09	3,290.00		78,960- 49,150-			78,960- 49,150-
0000657	OA C0107 AA	ADMINISTRATIVE SPECIALIST 1	1	1.00	24.00	07	3,290.00		78,960 49,150			78,960 49,150
0000690	OA C0104 AA	OFFICE SPECIALIST 2	1-	1.00-	24.00-	08	3,139.00		75,336- 48,300-			75,336- 48,300-
0000690	OA C0107 AA	ADMINISTRATIVE SPECIALIST 1	1	1.00	24.00	06	3,139.00		75,336 48,300			75,336 48,300
0000691	OA C0104 AA	OFFICE SPECIALIST 2	1-	1.00-	24.00-	06	2,873.00		68,952- 46,804-			68,952- 46,804-
0000691	OA C0107 AA	ADMINISTRATIVE SPECIALIST 1	1	1.00	24.00	04	2,873.00		68,952 46,804			68,952 46,804
TOTAL PICS SALARY									4,824			4,824
TOTAL PICS OPE									1,130			1,130
TOTAL PICS PERSONAL SERVICES =				.00					5,954			5,954

BUDGET NARRATIVE

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ORBITS Budget Narrative

106 State-wide Board Meetings

Purpose

This package ensures that the Oregon Medical Board (OMB or Board) continues to fulfill its mission of protecting the citizens of Oregon by providing the expenditure limitation to support necessary agency functions. The actions outlined in this package promote public awareness and improve agency transparency in support of the agency's Strategic Plan Goal 3 by providing coordinated outreach and education to the public and licensees. This package will create an opportunity for the Board to host diverse groups and stakeholders who might not ordinarily have firsthand knowledge of the Board's processes and operations.

How Achieved

Historically, the Board has held its regular quarterly meetings at its Portland office. However, the Board believes that holding one meeting per year outside of Portland would help increase its transparency and accessibility to a broader public. The Board proposes holding one meeting in Salem and another in the Bend-Redmond area during the 2015-17 biennium. By staging these Board meetings outside of Portland, healthcare professionals, local legislators, licensees, and members of the public will be able to see the Board at work, and meet with Board members and staff. The Board would work with local healthcare institutions or medical societies to plan the off-site meetings, which could conceivably be held at hospitals in these localities. This will present the Board with an ideal opportunity to establish open dialogs with healthcare providers, licensees and the general public alike.

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Staffing Impact

There are no changes to positions or full-time equivalent required.

Quantifying Results

While not directly tied to agency performance measure results, state-wide Board meetings are proposed to support agency Strategic Plan Goal 3, provide coordinated outreach and education to the public and licensees.

Sufficient expenditure limitation is essential to ensure that the OMB can continue to fulfill its mission of protecting the public and to continue to meet its performance measures. The Board has met its performance measure targets since fiscal year 2010. This is, in part, because the Board has had the financial resources to provide the personnel and services to meet the needs and expectations of its stakeholders and the citizens of Oregon.

Revenue Source

The total requested ongoing limitation increase is \$13,850. This includes travel and meeting related expenses for our 12 Board members and the staff essential to the meeting.

This package adds no new revenue sources to the Board, which generates all of its own revenues through fees for licensure and services. The agency is entirely funded through its charges for services; the Board receives no General, Lottery, or Federal funds. This package is funded through agency reserves; approval will not require an increase in fees.

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Oregon Medical Board
 Pkg: 106 - State-wide Board Meetings

Cross Reference Name: Operations
 Cross Reference Number: 84700-015-00-00-00000

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Services & Supplies							
Instate Travel	-	-	12,250	-	-	-	12,250
Attorney General	-	-	900	-	-	-	900
Facilities Rental and Taxes	-	-	700	-	-	-	700
Total Services & Supplies	-	-	\$13,850	-	-	-	\$13,850
Total Expenditures							
Total Expenditures	-	-	13,850	-	-	-	13,850
Total Expenditures	-	-	\$13,850	-	-	-	\$13,850
Ending Balance							
Ending Balance	-	-	(13,850)	-	-	-	(13,850)
Total Ending Balance	-	-	(\$13,850)	-	-	-	(\$13,850)

BUDGET NARRATIVE

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BUDGET NARRATIVE

AFFIRMATIVE ACTION/EQUAL EMPLOYMENT OPPORTUNITY REPORT

A review of the current report (NAAPRGS) through June 30, 2014 shows the work force for the Oregon Medical Board includes 71% women, 31% people of color, and 3% people with disabilities. When compared with the report used for the 2013-15 Budget, the current report shows that employment of protected classes has held steady in almost every category, with the loss of one woman, and an increase in employment of people of color.

The under-goals summary report (AAPRGRS-02) below shows that the Oregon Medical Board is still below parity by two women, one Hispanic and fractionally below parity in three other protected-group categories.

AFFIRMATIVE ACTION UNDER-GOALS SUMMARY REPORT

EEO JOB CATEGORY	W	AF	H	A	NA	D
A-Official/Administrator	.0	.1	.1	.0	.0	.1
B-Professionals	2.7	.0	.3	.2	.0	.6
F-Administrative Support	.0	.0	.0	.0	.0	.0
PROGRAM TOTALS	2.7	.1	.4	.2	.0	.7

KEY: W=Women, AF=African American, H=Hispanic, A=Asian, NA=Native American, D=Disabled

BUDGET NARRATIVE

AFFIRMATIVE ACTION/EQUAL EMPLOYMENT OPPORTUNITY REPORT continued

The Oregon Medical Board will follow the practices outlined in the Board's Affirmative Action Plan. In order to fulfill its commitment to a diverse work force, the Board's Affirmative Action goals are:

1. The Oregon Medical Board will continue creating applicant pools and interviewing processes that are welcoming to all people, and helping staff understand the benefits of a diverse workforce.
2. The Oregon Medical Board will utilize creative means to advertise vacancies to people of color, disabled individuals and women. These may include attendance at job fairs, community and specialized organizations, various web sites, and using the services of the Governor's Affirmative Action Office. Rotation and mentorship opportunities will be offered to increase current employee growth options.
3. The Oregon Medical Board will support activities that develop a work environment that is attractive to a diverse pool of applicants, retains employees, and is accepting and respectful of employees' differences. An inclusive environment will be created a number of ways - by sharing e-mail activity notices from the Governor's Affirmative Action Office, posting posters and flyers in the break room, encouraging employees to share their thoughts and ideas, responding to issues quickly and efficiently, etc.
4. The Oregon Medical Board will continue to offer and encourage career development, mentorship and training opportunities for all employees particularly those of color, employees with disabilities and female employees to prepare them for advancement. The Board will utilize employee retention ideas that include offering flexible schedules, having open door policies, listening respectfully and responding quickly to problems.
5. The Oregon Medical Board will continue to encourage managers to use interns when they have projects that fit within an intern's timeframe. Using interns will bring a fresh perspective to the way we conduct business.

OREGON MEDICAL BOARD

Annual Performance Progress Report (APPR) for Fiscal Year (2013-2014)

Original Submission Date: 2014

Finalize Date: 7/30/2014

2013-2014 KPM #	2013-2014 Approved Key Performance Measures (KPMs)
1	LICENSE APPROPRIATELY - Percentage of Board-Issued license denials that were upheld upon appeal.
2	DISCIPLINE APPROPRIATELY - Percentage of disciplinary actions not overturned by appeal.
4	MONITOR LICENSEES WHO ARE DISCIPLINED - Percentage of total probationers with a new complaint within 3 years.
6	RENEW LICENSES EFFICIENTLY - Average number of calendar days to process and mail a license renewal.
7	ASSESS CUSTOMER SATISFACTION WITH AGENCY SERVICES - Percent of customers rating satisfaction with the agency's customer service as "good" or "excellent" for: overall customer service, timeliness, accuracy, helpfulness, expertise, information availability.
8	BOARD BEST PRACTICES - Percent of total best practices met by the Board.
9	LICENSE EFFICIENTLY - Average number of calendar days from receipt of completed license application to issuance of license.

New Delete	Proposed Key Performance Measures (KPM's) for Biennium 2015-2017
	Title: Rationale:

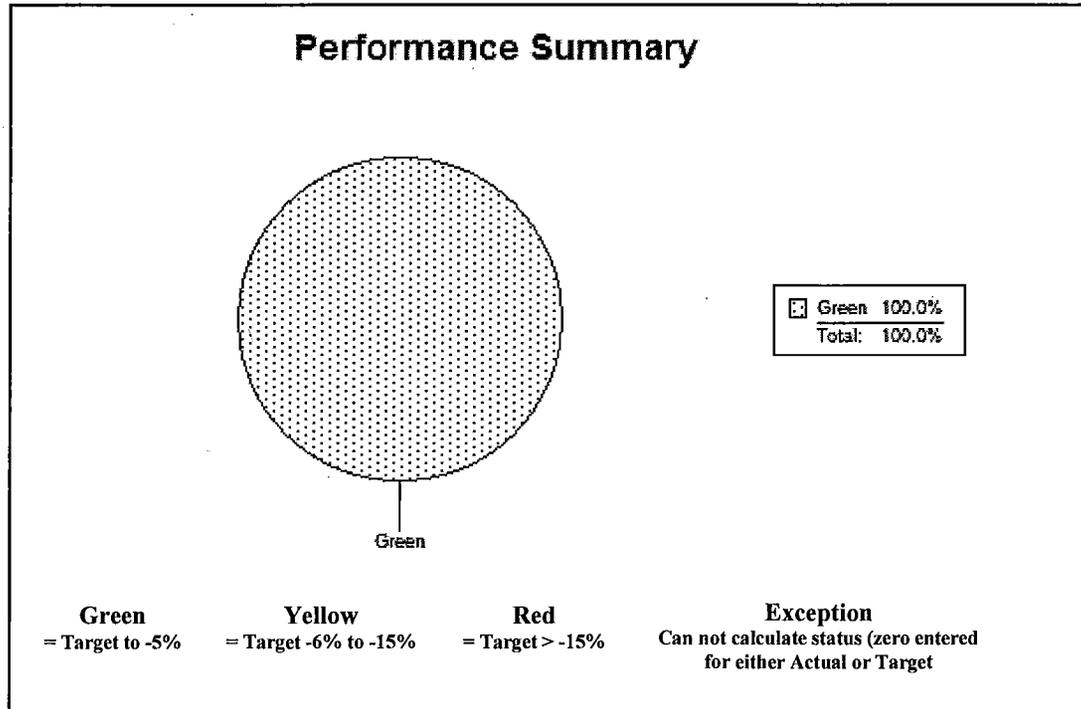
Agency Mission: Protect the health, safety, and well-being of Oregonians by regulating the practice of medicine in a manner that promotes access to quality care.

Contact: Kathleen Haley, JD

Contact Phone: 971-673-2700

Alternate: Carol Brandt

Alternate Phone: 971-673-2700



1. SCOPE OF REPORT

Our key performance measures cover our Licensing, Investigations, and Administrative functions. The measures are representative of overall agency functioning and performance.

2. THE OREGON CONTEXT

Two of our measures directly influence Oregon Benchmark #45, Premature death: years of life lost before age 70. These measures have to do with discipline of licensees and compliance with Board orders. Absent the Boards rehabilitative effect on problematic licensees, more Oregonians would experience premature death. These two measures also directly influence a second Oregon Benchmark, #46, The percentage of adults whose self-perceived health status is very good or excellent. Confidence in one's doctor is essential to confidence in one's health. To enable Oregonians to be assured that their primary care providers meet minimal levels of competency at the time of licensure, the Oregon Medical Board does careful background checks on each applicant, and follows up on each complaint regarding care. The Oregon Medical Board also encourages the public to check out their doctors' malpractice and disciplinary history on our website. The Board's other five measures are linked to the agency mission or have been legislatively mandated.

3. PERFORMANCE SUMMARY

The Board is meeting or exceeding targets on 100% of its measures.

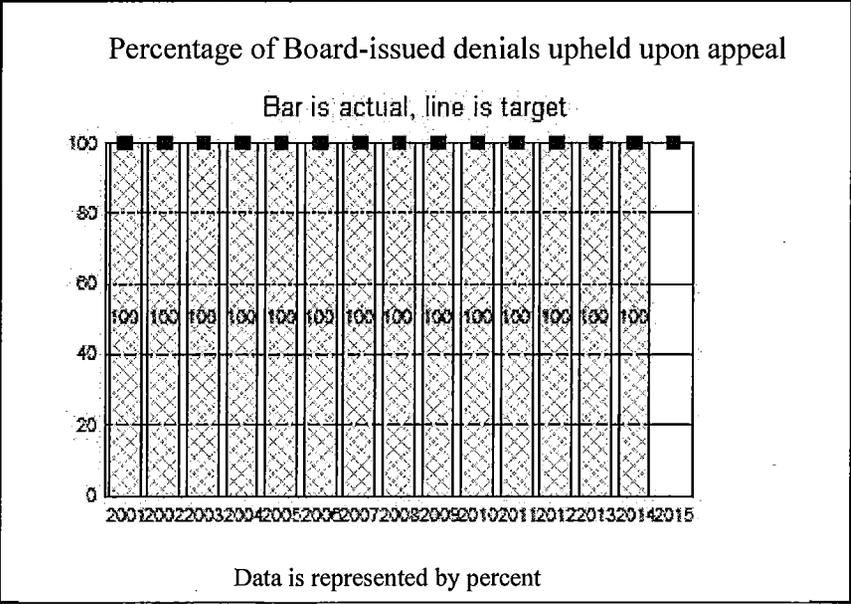
4. CHALLENGES

The Board is tied to the State in matters such as budgeting and human resources. Political and legal decisions affect the board's ability to raise fees, license, investigate, and discipline. The Board has experienced a diversion of its resources to cover other statewide initiatives while responding to ever-increasing and unfunded demands to develop and implement new policies. The agency's funds are paid by and dedicated to those who are regulated; ninety-eight percent of our revenue comes from the licensing and renewal activities of the agency. As such, our licensees and stakeholders expect their service needs to be met. The Board has worked hard to continue to meet licensee and stakeholder expectations within the legislatively determined budget constraints. The Board's processes, procedures, and technology are constantly evolving to incorporate efficiencies and service improvements.

5. RESOURCES AND EFFICIENCY

Our budget amount for the fiscal year, measured as one-half of our biennial Legislatively Adopted expenditure limitation, is \$5,014,275. Our measures of efficiency are #6- Renew Licenses Efficiently, #7- Assess Customer Satisfaction with Agency Services and KPM #9-License Efficiently. Efficiency improvements are detailed within the individual Key Measure Analysis (Part II) which follows.

KPM #1	LICENSE APPROPRIATELY - Percentage of Board-Issued license denials that were upheld upon appeal.	2002
Goal	Improve access to quality care through efficiently managing licensure and renewal of licensure	
Oregon Context	Relates to agency mission	
Data Source	Agency Investigative and Licensing Databases	
Owner	Board Members (971) 673-2700	



1. OUR STRATEGY

Determine requirements for Oregon licensure as a Medical Doctor (MD), Doctor of Osteopathic Medicine (DO), Podiatric Physician (DPM), Physician Assistant (PA) and Acupuncturist (LAc). Process licensure applications and renewals efficiently and consistently with public safety. Perform careful background checks on all applicants for licensure.

2. ABOUT THE TARGETS

Targets are set at 100% based on past history and the expectation that there will continue to be no successful appeals of our licensure decisions. The higher the percentage, the better we are doing at licensing appropriately.

3. HOW WE ARE DOING

The measure demonstrates that we are appropriately licensing as there have been no successful challenges to the Boards licensing decisions since the measure was enacted in 2002. For fiscal year 2014, we had 1,361 license applications of which two were denied but not appealed.

4. HOW WE COMPARE

There is no comparative data available.

5. FACTORS AFFECTING RESULTS

The Board provides extensive due process to all applicants, ensuring an appropriate outcome.

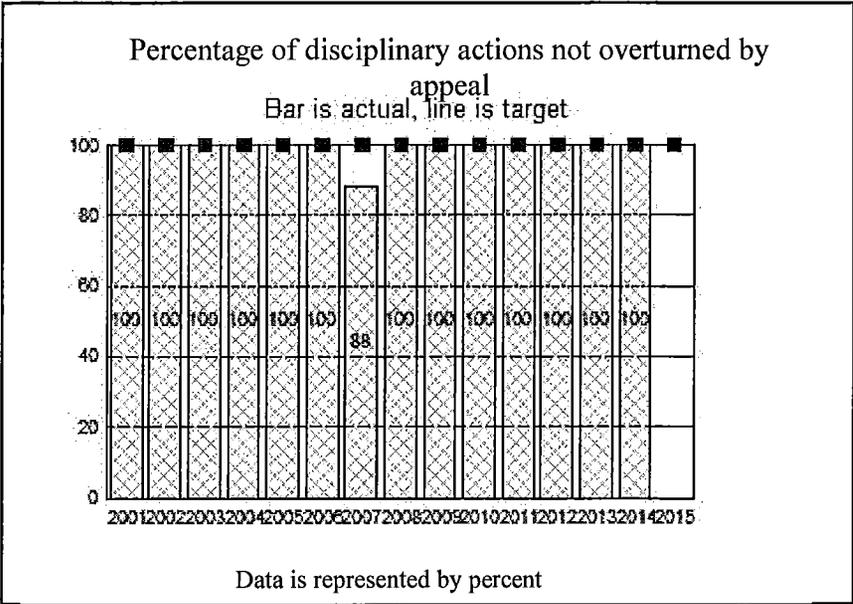
6. WHAT NEEDS TO BE DONE

Continue with our current successful practices.

7. ABOUT THE DATA

Reporting cycle is Oregon's fiscal year.

KPM #2	DISCIPLINE APPROPRIATELY - Percentage of disciplinary actions not overturned by appeal.	2002
Goal	Investigate complaints against licensees and applicants; ensure that Board members have sufficient information to take appropriate action based on the facts of the case	
Oregon Context	OBM 45: PREVENTABLE DEATH and OBM 46: PERCEIVED HEALTH STATUS	
Data Source	Agency Investigative Database	
Owner	Board members (971) 673-2700	



1. OUR STRATEGY

Investigate complaints of potential violations of state law, in a manner that is responsive to the needs of the public and is fair to licensees and applicants and that provides the Board with the information it needs to resolve complaints.

2. ABOUT THE TARGETS

Targets are set at 100% based on past history and the expectation that a successful appeal of our disciplinary decisions is highly undesirable. The higher the percentage, the better the Board is doing at disciplining appropriately.

3. HOW WE ARE DOING

The measure demonstrates that the Board is appropriately disciplining. In addition to this measure, the Board partnered with Lewis and Clark Law School's externship program in 2013 to engage an extern to examine the consistency of Board disciplinary actions. The research indicates that the Board is highly consistent in its disciplinary actions- 97% of the outcomes were consistent and the remaining 3% had explainable inconsistencies. The Board tailors the outcome to the facts of the case. Discipline is defined as any case closed with a public order that is reportable to the National Practitioner Databank. These orders include any Stipulated Orders, Voluntary Limitations, Corrective Action Orders reportable to the National Practitioner Databank or Final Orders. In fiscal year 2014, 22 orders were issued for 38 cases. Of these, no orders were appealed. There were three other appeals pending at the close of fiscal year 2013 that are still pending at the close of fiscal year 2014.

4. HOW WE COMPARE

There is no comparative data available.

5. FACTORS AFFECTING RESULTS

The Board provides extensive due process to all applicants, ensuring an appropriate outcome. Achieving this goal is disproportionately affected by the small population of disciplinary action appeals. With a small data set, a single successful appeal has a great effect on the percentage outcome.

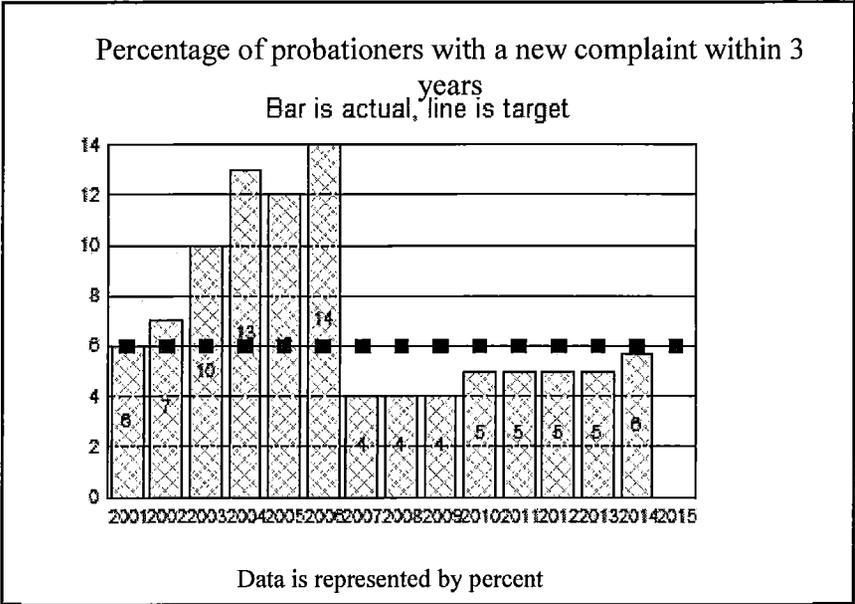
6. WHAT NEEDS TO BE DONE

Although we did not meet our target for fiscal year 2007, the Board considers a single successful appeal during the last 14 years to be evidence that it is disciplining appropriately. We intend to continue with our current successful practices.

7. ABOUT THE DATA

Reporting cycle is Oregon's fiscal year.

KPM #4	MONITOR LICENSEES WHO ARE DISCIPLINED - Percentage of total probationers with a new complaint within 3 years.	2002
Goal	Restore and remediate licensees to active, useful service to Oregon's citizens while protecting public safety	
Oregon Context	OBM 45: PREVENTABLE DEATH and OBM 46: PERCEIVED HEALTH STATUS	
Data Source	Agency Investigative Database	
Owner	Investigations, Eric Brown (971) 673-2700	



1. OUR STRATEGY

When possible, address practice problems through remedial actions. Monitor licensees who come under disciplinary action to ensure compliance with their terms of probation. Take an active stance in preventing practice problems that endanger patients, utilizing educational outreach, and participating in

a monitoring program for licensees with chemical abuse/dependency and mental health diagnoses. Probationer is defined as a licensee or applicant who, due to the existence of an order issued by the Board, requires some degree of monitoring by the Board's compliance officer. Monitoring is done through meetings and interviews by the agency Compliance Officer and Board members.

2. ABOUT THE TARGETS

A target of 6% was established in 2002 based on the results available at that time. We had been unable to achieve the target since the measure was established until fiscal year 2007 when we added a second compliance officer. The lower the percentage, the better we are doing to protect patient safety.

3. HOW WE ARE DOING

This measure reflects how well we are doing ensuring that our licensees are safe to practice medicine. For fiscal year 2014, we had 177 probationers, 10 of whom had a new investigation opened within 3 years of the original Board order, a recidivism rate of 5.65%. We have been able to meet our target for an eighth straight year.

4. HOW WE COMPARE

There is no comparative data available.

5. FACTORS AFFECTING RESULTS

The target of 6% was established when the measure was instituted in 2002 based on results available at that time. During the years that followed, we were unable to achieve the target, in part due to staff turnover. The Board has reorganized workload and is now able to consistently meet the target. There are relatively few licensees with Board orders. Thus, results are significantly impacted by one or two cases.

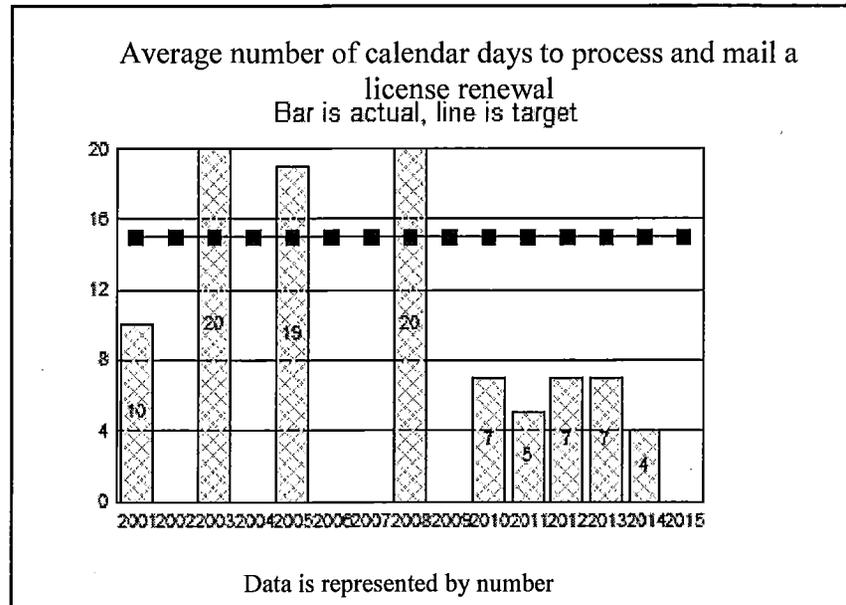
6. WHAT NEEDS TO BE DONE

Continue with our current successful practices.

7. ABOUT THE DATA

The reporting cycle is Oregon's fiscal year.

KPM #6	RENEW LICENSES EFFICIENTLY - Average number of calendar days to process and mail a license renewal.	2000
Goal	Improve access to quality care through efficiently managing licensure and renewal of licensure	
Oregon Context	Relates to agency mission	
Data Source	Agency Licensing Database	
Owner	Licensing, Netia Miles (971) 673-2700	



1. OUR STRATEGY

Determine requirements for Oregon licensure as a Medical Doctor (MD), Doctor of Osteopathic Medicine (DO), Podiatric Physician (DPM), Physician Assistant (PA) and Acupuncturist (LAc). Process licensure applications and renewals efficiently and consistently with public safety. Perform careful background checks on all applicants for licensure.

2. ABOUT THE TARGETS

Our original results ranged from 10 to 20 days. Thus, we selected a mid-range target of 15 days.

3. HOW WE ARE DOING

The measure demonstrates our efficiency in renewing a health care professional's license. With the launch of online license renewal in October, 2009, there was a significant decrease in the time it took to process a renewal.

4. HOW WE COMPARE

There is no comparative data available.

5. FACTORS AFFECTING RESULTS

While operating efficiency is our goal, rushing licensure renewal, and possibly compromising patient care, is not. Preparing a thorough check of all information provided is essential to ensuring the licensee meets state requirements and will continue to practice safely. The data presented includes those renewals that are outliers and have problems/concerns that need to be reviewed by staff which can add significant time to the renewal process. The renewal of most of our MD, DO, DPM and PA licenses (approximately 17,270 in all) occurs biennially. This results in a 3-month period of high activity for all agency staff but the majority of the renewal tasks are performed by a small team of permanent staff plus a few seasonal temporary staff.

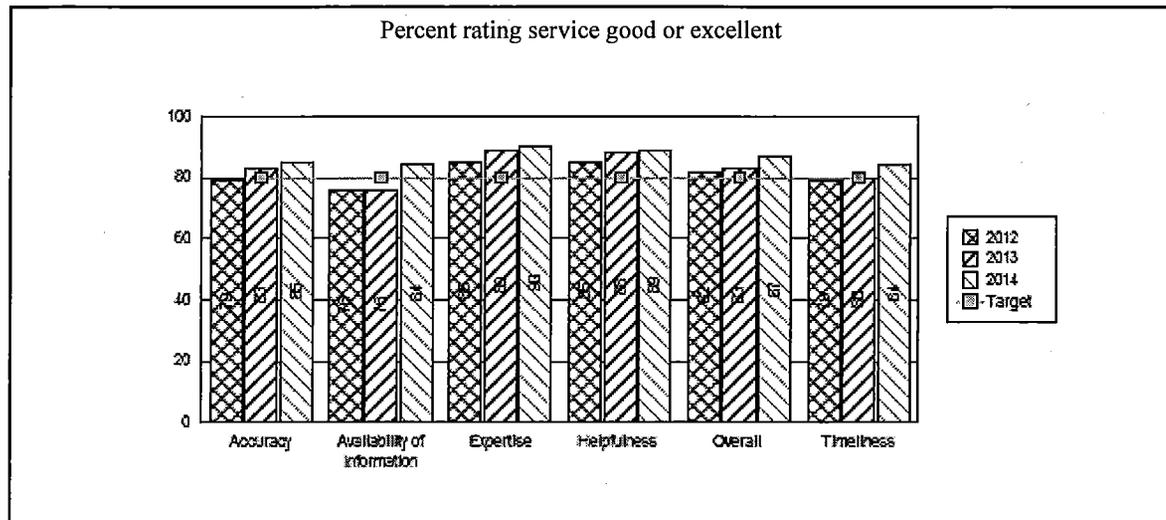
6. WHAT NEEDS TO BE DONE

The agency continues to modify its internal organization and procedures to ensure that licensees are given timely and complete information about their responsibilities towards completing the renewal process. The agency replaced its entire database to modernize our processes. This licensing and case management system was implemented in June, 2009. We implemented online renewal in October, 2009. Online license renewals and a more efficient computer system have helped us to meet our targets.

7. ABOUT THE DATA

The reporting cycle is fiscal year and calendar days. Most licenses are renewed every other year. In the past, data has only been available during the final months of odd-numbered years. A change to the reporting cycle from calendar year to fiscal year resulted in a gap in data availability for 2006 and 2007. As of fiscal year 2010, our new database provides the ability to report results for the few licensees who renew on an annual basis.

KPM #7	ASSESS CUSTOMER SATISFACTION WITH AGENCY SERVICES - Percent of customers rating satisfaction with the agency's customer service as "good" or "excellent" for: overall customer service, timeliness, accuracy, helpfulness, expertise, information availability.	2006
Goal	CUSTOMER SATISFACTION- Statewide customer satisfaction measures	
Oregon Context	Legislatively mandated	
Data Source	Data from anonymous post-card surveys and SurveyMonkey internet surveys	
Owner	Licensing, Investigations. Kathleen Haley, JD (971) 673-2700	



1. OUR STRATEGY

This measure was added to all state agencies in 2006.

2. ABOUT THE TARGETS

Targets have been established at 80%. Higher percentages reflect higher customer satisfaction.

3. HOW WE ARE DOING

This measure demonstrates our customers' opinions on their level of satisfaction with the services we provide. We began our continuous survey process in January, 2006.

4. HOW WE COMPARE

There is little comparative data available. We did perform some comparisons of customer satisfaction results of other licensing Boards. However, we found that Boards are surveying in different ways and including different customers.

5. FACTORS AFFECTING RESULTS

It's important to understand the role of the Oregon Medical Board in the lives of those responding to the survey. The Oregon Medical Board is a regulatory agency. As such, our customers, be they licensees or complainants, may not agree with the Board's actions. Customers may not receive desired outcomes. This could tend to lower our customer satisfaction rating. The Board works to temper this effect through continued improvements in the services we provide and in our communication with our customers.

6. WHAT NEEDS TO BE DONE

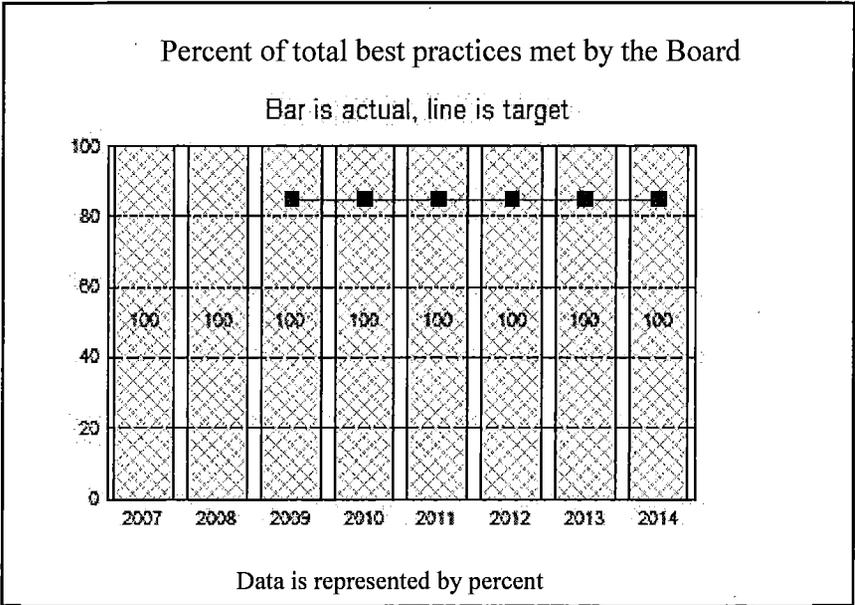
We have used these results to focus our attention on areas within the agency whose responses show less satisfaction than do others. Our Management Council monitors the survey results on a continuous basis and we continue to improve our perceived quality of services in all areas. One area in which we have consistently struggled is availability of information. The state of Oregon has recently had the opportunity to work with professional website designers to redesign and restructure our website. This project was completed within fiscal year 2014. The revised website provides our stakeholders better access to the information they need from the Board and has improved our results for this measure.

7. ABOUT THE DATA

Our survey is a continuous survey. For fiscal year 2014, we had a population (surveys sent) of 19,879. We provided a survey to each new licensee, each

licensee who had recently renewed their license, and all complainants whose complaints resulted in an investigation (surveys were sent at the close of the case). We received 2,356 total responses, a 12% response rate, a 1% margin of error at a 95% confidence level. SurveyMonkey, an Internet survey tool, was used for all new licenses and renewals and an anonymous post-card for all investigations. Results for each individual group sampled are retained by the agency and the information that these results provide is used at a management level. We have combined the results for all groups to reach an agency wide result for reporting as the results for each group contain too few responses to produce meaningful data. Equal weighting was given to each response.

KPM #8	BOARD BEST PRACTICES - Percent of total best practices met by the Board.	2008
Goal	BOARD BEST PRACTICES- Statewide Board Best Practices measure	
Oregon Context	Relates to Agency Mission	
Data Source	Survey of agency Board members	
Owner	Board Members, (971) 673-2700	



1. OUR STRATEGY

This measure was added to all Boards and Commissions in 2008.

2. ABOUT THE TARGETS

A target of 85% has been established. While the Agency has been able to achieve 100% since the measure was introduced, a single dissenting Board member would have a significant effect on the percentage outcome.

3. HOW WE ARE DOING

The measure demonstrates that we are meeting best management practices with respect to governance oversight by our board. The criteria being evaluated includes Executive Director performance expectations and feedback, strategic management and policy development, fiscal oversight and board management. The Board instituted this measure in 2007; it was mandated for Boards and Commissions by the Legislature in 2008.

4. HOW WE COMPARE

Results are comparable with other licensing boards.

5. FACTORS AFFECTING RESULTS

The Oregon Medical Board engages in an ongoing strategic planning process that addresses several of the issues that are evaluated in this measure. Board members discuss oversight and governance activities at the Administrative Affairs Committee and Board meetings. The Board Chair is in constant communication with the agency Executive Director on management issues.

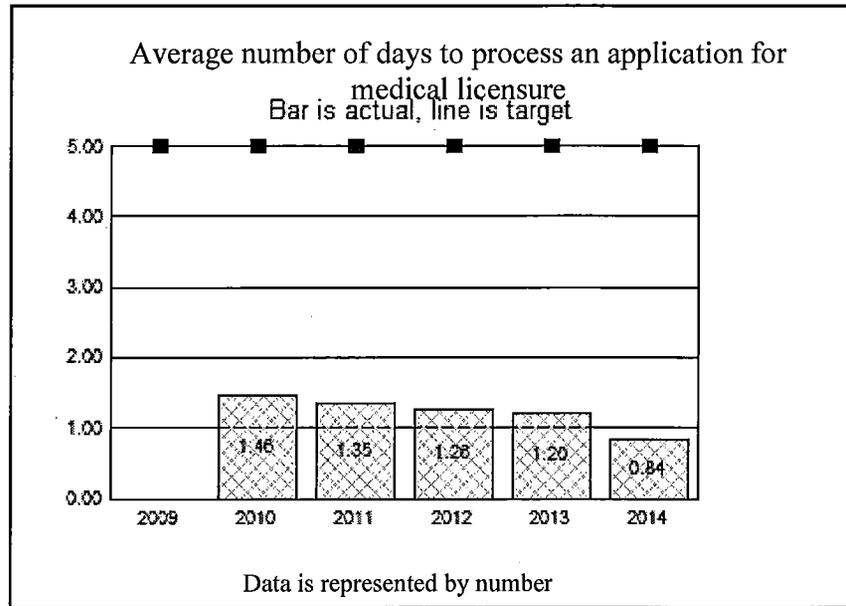
6. WHAT NEEDS TO BE DONE

We will continue with our current successful practices and use these results to focus our attention on areas that may need attention in the future.

7. ABOUT THE DATA

Reporting cycle is Oregon's fiscal year.

KPM #9	LICENSE EFFICIENTLY - Average number of calendar days from receipt of completed license application to issuance of license.	2009
Goal	Improve access to quality care through efficiently managing licensure and renewal of licensure	
Oregon Context	Relates to agency mission	
Data Source	Agency Licensing Database	
Owner	Licensing, Netia Miles (971) 673-2700	



1. OUR STRATEGY

Determine requirements for Oregon licensure as a Medical Doctor (MD), Doctor of Osteopathic Medicine (DO), Podiatric Physician (DPM), Physician Assistant (PA) and Acupuncturist (LAc). Process licensure applications and renewals efficiently and consistently with public safety. Perform careful background checks on all applicants for licensure.

2. ABOUT THE TARGETS

The target is set at 5 days based on the agency weekly approval schedule. The fewer days required, the more efficiently we are licensing.

3. HOW WE ARE DOING

The measure demonstrates our efficiency in licensing health care professionals and the customer service we provide to the citizens of Oregon. While operating efficiency is our goal, rushing licensure for applicants, and possibly compromising patient care, is not. Preparing a thorough check of all credentials provided by applicants is essential to making sure the applicant meets state requirements for providing medical care. This measure reflects the time to licensure within direct control of the agency- the number of days to license after the applicant has submitted all necessary documents.

4. HOW WE COMPARE

There is no comparable data at this time.

5. FACTORS AFFECTING RESULTS

None have been identified.

6. WHAT NEEDS TO BE DONE

The agency continues to modify its internal organization and procedures to ensure that applicants are given timely and complete information about their responsibilities towards completing the licensing process. The agency replaced its entire database with a new licensing and case management software solution in June, 2009. This new system reduced redundant data entry and improved efficiency. This new system also has an online component now implemented for all license applications and renewals.

7. ABOUT THE DATA

Results are based on actual number of calendar days to issue an unlimited license between the date an applicant has submitted all necessary documentation and the date the license was issued.

Agency Mission: Protect the health, safety, and well-being of Oregonians by regulating the practice of medicine in a manner that promotes access to quality care.

Contact: Kathleen Haley, JD

Contact Phone: 971-673-2700

Alternate: Carol Brandt

Alternate Phone: 971-673-2700

The following questions indicate how performance measures and data are used for management and accountability purposes.

1. INCLUSIVITY

- * **Staff :** Each of the managers of the 4 divisions within the Board (Administration and Communications, Investigations, Licensing, and Administrative and Business Services) was tasked with developing performance measures for their division. Staff within the division assisted by refining definitions and identifying reliable data sources.
- * **Elected Officials:** The Legislature approved these performance measures during our budget hearing during the 2013 Legislative Assembly.
- * **Stakeholders:** The Oregon Medical Association, the Osteopathic Physicians and Surgeons of Oregon, the Oregon Podiatric Medical Association, the Oregon Society of Physician Assistants and the Oregon Association of Acupuncture and Oriental Medicine review our budget and performance measures.
- * **Citizens:** The stakeholder public as represented by the Legislature approved these performance measures during our budget hearing during the 2013 Legislative Assembly.

2 MANAGING FOR RESULTS

In 2001, the Board created its first formal Strategic Plan. This document integrates the Boards' goals, strategies for attaining goals, action plans, and performance measures. The Plan is updated regularly by managers and staff with Board oversight. Action plans and performance measure results are regularly reviewed by managers and the Board to ensure the agency is making progress towards goals identified.

3 STAFF TRAINING

The Board's Business Manager has received formal training in Performance Measurement development through Department of Administrative Services and Oregon Progress Board classes. Staff have received training in gathering data for these measures and are involved in meeting measurement targets as well as correctly entering data that will affect measure calculations.

4 COMMUNICATING RESULTS

- * **Staff :** Performance measure results are communicated to Board staff at management and staff meetings.
- * **Elected Officials:** The Board communicates results to the Legislature during budget presentations and annual

Performance Progress Reports. Results are also communicated biennially during formal presentations to the Boards' assigned Department of Administrative Services Budget Analyst and the Legislative Fiscal Officer.

* **Stakeholders:** The Executive staff of the Board meet with representatives of the Oregon Medical Association, the Osteopathic Physicians and Surgeons of Oregon, the Oregon Podiatric Medical Association, the Oregon Society of Physician Assistants and the Oregon Association of Acupuncture and Oriental Medicine to review the agency's budget and performance measures.

* **Citizens:** Results are communicated to the public on the Boards website at <http://www.oregon.gov/omb/board/about/Pages/Annual-Performance-Measures.aspx>

Secretary of State Audit Report

Kate Brown, Secretary of State

Gary Blackmer, Director, Audits Division



Health Professional Regulatory Boards: General Review

Summary

Oregon has over 250 boards, commissions, and councils to help protect the health, welfare, and safety of the public. Board members are often subject matter experts and represent diverse stakeholder views. This allows boards to better fulfill governmental functions and engage interested citizens in state government. Boards offer varying perspectives and expertise that can help government be more effective in specialized areas.

Oregon has 20 health professional regulatory boards that license and regulate healthcare professionals. Seventeen operate with their own staff as autonomous agencies, while three operate as a part of larger state agencies. The general mission of health professional regulatory boards is to protect the public and promote the quality of health services.

The objective of this audit was to determine if the governance and delivery of services provided by Oregon's health professional regulatory boards can be improved to better promote the quality of health services, and protect the public health, safety and welfare. We performed broad scale audit work to examine the management efforts of the 17 autonomous boards in the areas of professional licensing, complaint-handling and investigation, and governance. Of these boards, 15 licensed 5,000 or fewer professionals and facilities, while the Pharmacy Board licensed about 24,000 and the Nursing Board about 44,000 in 2012.

In general, boards have policies and procedures in place to address their core functions and appear to be actively engaged in promoting quality health services through their efforts. We verified that activities were performed and processes were in place at the 17 autonomous boards, but because of the broad scale of the audit, we did not evaluate how well each process was carried out.

We found that most boards perform initial criminal background checks of applicants, except for the Veterinary, Occupational Therapy, and Speech Pathology and Audiology Boards. Of the boards that do initial background checks, most perform a national fingerprint-based FBI check. However, most boards do not conduct subsequent checks upon renewal, and some professionals have never been checked.

We examined the complaint-handling, investigative and disciplinary processes of the boards. We found that most boards documented and informed board members of complaints received, and followed procedures for investigating them. Most boards had investigators on staff or under contract to investigate complaints, some of whom had expertise in the health profession. Boards generally separate the investigative process from the disciplinary decision making process. Boards receive assistance from the Attorney General's Office, and a process for licensees to contest board decisions is available through the Office of Administrative Hearings. Disciplinary decisions are reported as required by state and federal law.

We also examined the governance structures and processes of health professional regulatory boards. Studies indicate there is no single most effective governance model to achieve a board's objectives. A third of states have governance structures where boards operate as autonomous agencies. Other states have structures with varying degrees of board collaboration with a central agency and several states have centralized licensing agencies that limit boards to an advisory capacity.

Health professional regulatory boards are responsible for developing policy and enforcing regulations. We found that board members were actively engaged on key matters such as licensing, complaint investigations and discipline, and practice-related issues. In addition, boards delegate many functions to the executive director and staff to carry out, and provide feedback on their efforts. For example, 16 chairpersons reported that they conduct annual evaluations of the executive director.

We found that the boards made reasonable efforts to demonstrate transparency through website content, newsletters, and outreach efforts. This content informs licensing applicants, practitioners, and the public.

To assess board efforts, the 2009 Legislature required boards undergo a periodic peer review. The five board reviews completed to date identified board strengths and made recommendations for improvement.

The Legislature provides some board oversight, as it establishes priorities and sets public policy through the state's budget process. However, boards reported they have experienced difficulty in receiving legislative approval to increase staff and the associated fees to handle increases in workload.

The boards use various methods to obtain specialized services and support. For example, boards rely upon the Attorney General's Office for legal services, and many use the Department of Administrative Services for payroll and purchasing. In addition, 12 of the boards share a location with at least one other board, which allows them to share space and facilitates collaboration. Nonetheless, some benefits could result from more state-sponsored training for board members and a stronger operational connection to the Governor's Office.

We recommend boards give further consideration to background check policies for professionals who handle drugs or interact with vulnerable

populations. In addition, we recommend the Governor consider more operational support and board member training on roles and responsibilities.

Agency Response

The agency response is attached at the end of the report.

Background

Oregon state boards, commissions, and councils incorporate subject matter experts and diverse stakeholder views to fulfill governmental functions and engage interested citizens in Oregon government. Boards offer varying perspectives and expertise that can help government be more effective in specialized areas. Like government in general, boards help protect the health, welfare, and safety of the public.

Oregon has over 250 boards and commissions, or similar entities, which may be either policy-making or advisory boards. Policy-making boards create policies and enforce rules. They can also be governing boards, which are responsible for directing an agency and/or appointing the director. Advisory boards research and advise on policy matters, but do not have authority to make or enforce rules. Licensing boards, which can be either policy making or advisory boards, examine and license members of a profession or occupation to practice in Oregon. Some also have the power to discipline members of the regulated profession or occupation, and to suspend or revoke licenses.

Health professional regulatory boards

Among the State's many boards and commissions are 20 health professional regulatory boards that license professionals and facilities. Seventeen of these boards are policy-making boards and operate as autonomous entities, while three function as advisory boards to larger state agencies. Our audit focused on the 17 autonomous boards, which create policies, license professionals, investigate complaints, make disciplinary decisions, and are responsible for directing the board and appointing its Director. Two of these boards also license and inspect facilities. Figure 1 lists the boards included in the audit.

The mission of health professional regulatory boards (hereafter referred to as boards) is to promote the quality of health services and protect the public's health, safety and welfare. They do this by maintaining a scope of practice, verifying initial qualifications for licensure, ensuring that licensees practice with professional skill and safety, regularly inspecting licensed facilities, and by addressing impairment among licensees. Boards promote the quality of services and protect the public through the licensing and complaint investigation processes. Several key activities of boards include testing licensees to ensure competency, regulating services, handling complaints against licensees, holding hearings to decide the outcome of complaints, and imposing discipline up to and including license revocation. These boards help ensure citizens receive honest, competent, and safe services from licensed health professionals. They also provide an objective way for consumers to seek resolution of grievances.

Boards license health professionals and regulate professions through rule enforcement and policy development. Boards play an important role in

policy development by recommending legislation and preparing rules applicable to the board's profession.

Figure 1: Health Professional Regulatory Boards

	2013-15 Adopted Budget*	Full Time Equivalent Employees	Number of Licenses Issued in 2012***	Number of Licensees as of 12/31/2013
State Board of Chiropractic Examiners (Chiropractic)	\$1,455,000	4.88	3,967	3,388
Oregon Board of Licensed Professional Counselors and Therapists (Counselors and Therapists)	\$1,097,000	3.5	3,842	3,715
Oregon Board of Dentistry (Dentistry)	\$2,581,000	7	3,970	7,892
State Board of Massage Therapists ✓ (Massage Therapists)	\$1,746,000	5	3,951	7,353
Oregon Medical Board*** (Medical)	\$10,454,000	38.79	3,848	18,331
Board of Medical Imaging (Medical Imaging)	\$837,000	3	3,017	6,045
State Mortuary and Cemetery Board** (Mortuary and Cemetery)	\$1,409,000	5.71	1,052	2,116
Oregon Board of Naturopathic Medicine (Naturopathic)	\$631,000	2.5	1,029	1,029
Oregon Board of Nursing (Nursing)	\$14,196,000	47.8	44,132	80,092
Occupational Therapy Licensing Board (Occupational Therapy)	\$368,000	1.25	1,820	2,082
Oregon Board of Optometry ✓ (Optometry)	\$699,000	2.2	1,276	1,232
Oregon Board of Pharmacy** (Pharmacy)	\$5,783,000	19	24,438	24,496
Physical Therapist Licensing Board ✓ (Physical Therapist)	\$1,000,000	2.8	4,664	5,002
State Board of Psychologist Examiners (Psychologist)	\$1,006,000	3.5	873	1,716
State Board of Licensed Social Workers (Social Workers)	\$1,350,000	6	4,770	5,024
State Board of Examiners for Speech-Language Pathology and Audiology (Speech Pathology and Audiology)***	\$530,000	2	2,011	2,331
Oregon State Veterinary Medical Examining Board (Veterinary)	\$740,000	2.75	3,465	3,365

✓Semi-independent board

*Budget figures are rounded to the nearest \$1,000.

**Board also license facilities; count includes number of licensed facilities.

*** The Medical and Speech Pathology and Audiology boards conduct renewals biennially. In 2011, these boards reported issuing 18,664 and 212 licenses, respectively.

In Oregon, members of boards are comprised largely of practitioners from the professions they represent. The Governor appoints, and the Oregon Senate confirms, the members of the 17 autonomous boards included in this audit. Board members are selected based on their ability, professional experience, and interest in serving. The Governor can also remove board members under certain circumstances.

The primary responsibility of boards is to work for the benefit of the public first, before the good of a certain profession or industry. Health boards are separate entities from professional associations. However, professional associations may recommend individuals for board appointments based on their technical expertise or point of view.

The boards we reviewed are responsible for making policy decisions and enforcing regulations as outlined in statute and rule. Chairpersons reported several responsibilities as chair such as conducting board meetings, communicating regularly and working closely with the board's Executive Director (director), and addressing practice related issues. Board members regularly schedule 4 to 11 sessions per year to meet publicly, depending on the board, to accomplish board business. In

addition, boards hold committee meetings. Certain matters, such as investigations, are discussed in confidential executive session as required by law.

Each board is required to appoint a director who serves at the pleasure of the Governor under the direct supervision of the appointing board. The principal role of the director and staff is to carry out the rules, policies and programs developed by the board. The director is charged with keeping all records of the board, completing duties as delegated by the board, and preparing a report on the monitoring and investigative activities of the board. The board can delegate additional duties to the director and board staff.

The number of staff and licensees at the boards we reviewed varies. Half of the boards have less than four full-time equivalent staff (FTE), while three have 18 or more staff. Figure 1 shows the FTE by board. All have a director, and some have licensing and investigative staff. While most of these boards issued less than 5,000 licenses in 2012, the Nursing and Pharmacy Boards together issued more than 68,000 new and renewal licenses, which was more than all the other boards combined. Two of the boards, Pharmacy and Mortuary and Cemetery, also license and inspect facilities. Figure 1 shows the number of staff and licenses issued at each board.

Although some aspects of health boards are governed by the same statute, each board also has its own specific statutes. Individual board statutes delineate the scope of practice for the profession, identify specific sanction authority, as well as specify the composition of the board, including the number and professional background of board members. Board policies and procedures are often outlined in the board's governing statutes and administrative rules. These include qualifications of applicants for licensure and grounds for license denial, suspension and revocation. Governing statutes also define board jurisdiction, which spells out those activities within the board's scope of authority to regulate.

Boards are funded with license fees and fines paid primarily by license holders; they do not receive state General Funds. The 2013-15 adopted budget for each board is shown in Figure 1. The Legislature approves each board's biennial budget, except for semi-independent boards which have a different budget process.

In 2009, the Legislature passed a bill requiring Oregon's health professional regulatory boards to receive periodic peer reviews focusing on the board's public safety mission. Since then, five boards have had a detailed peer review identifying strengths, weaknesses, opportunities for improvement, and challenges within the board's core functions. The peer review reports are distributed to the Governor's Office and each board director.

In 2009, Governor Kulongoski established a Reset Cabinet for restructuring State government. A number of subcommittees were formed to identify barriers, efficiencies, and best practices, and to suggest changes specific to

health professional regulatory boards. In 2010, the health professional regulatory board subcommittees produced reports on background checks, complaint investigations, board member training, budget reporting, Department of Justice services, human resources issues, and information technology.

In 2012, we conducted an audit of boards and commissions that provided an overview of the structure, operations, and functions of state boards in Oregon, and identified opportunities for improvement in the governance and operations of boards to promote accountability. This audit is a continuation of our examination of state boards.

Audit Results

We performed audit work to examine processes at the 17 autonomous health professional licensing boards in the areas of licensing, complaint investigation, and governance. In general, boards appear to be actively engaged in efforts to regulate their professions and protect the public. We verified certain activities were performed by the 17 boards and staff, but because of the broad scale of the audit, we did not evaluate how well each was carried out.

All of the boards have licensing processes and procedures in place guided by state statutes and administrative rules specific to each profession and board, some of which are similar across boards. We found that most boards perform initial background checks of applicants, and less than half perform background checks of renewing licensees. Some boards have licensed professionals who have never received a background check. The number of licenses issued varies widely by board.

All of the boards have complaint investigation processes and procedures in place to protect the public and maintain professional standards. Most boards have staff dedicated to complaint investigation. The investigative files we reviewed at most boards included complete information, including an indication that tasks or processes were completed and an investigative report or summary. Board disciplinary decisions follow established procedures and disciplinary actions were reported to the public.

While all of the boards included in our audit operate autonomously, they are subject to legislative and executive oversight. Boards use a variety of methods to foster transparency. Boards share some services and many have realized the benefits of formal and informal collaboration.

There are opportunities for additional oversight, advocacy and training for boards. Staffing for board oversight and support, at the Governor's Office remains limited. Boards reported a desire for improved contact, communications, and clarity of direction from the Governor's Office. Some boards reported challenges associated with obtaining approval from the Legislature to increase staffing and the associated fee increases. We also noted additional opportunities for board member training on roles and responsibilities.

Boards evaluate credentials and license health professionals

Health professional regulatory boards protect the public through the licensing process, ensuring licensees practice with professional skill and safety. Boards are responsible for ensuring applicants have the appropriate education, experience, and skills to perform their professional duties. Two boards also license related facilities.

Licensing process

The licensing process at each board is guided by state statutes and administrative rules specific to each profession and board. For example, Oregon's Veterinary Practice Act outlines procedures for obtaining a license or permit, which include: graduation from a veterinary department of a college or university, completion of an application, passing several exams, and verification of experience. Oregon statutes regulating medical doctors list similar requirements for licensure of physicians: graduation from a school of medicine, post-graduate training, and an examination.

Boards can issue multiple types of licenses through similar processes. For example, the Nursing Board issues seven different types of nursing licenses, such as Registered Nurse, Nurse Practitioner, and Certified Nursing Assistant. Two boards also license facilities. The Mortuary & Cemetery Board inspect and licenses funeral homes, cemeteries, and other related facilities. The Pharmacy Board licenses drug outlets. Pharmacies are inspected annually; other drug outlets are inspected as time allows. Licenses are valid for one to two years, depending on the profession.

Boards use similar processes for licensing health professionals. Generally, new applicants fill out a manual application for initial licensing, which board staff enters into the board's electronic database. Applicants pay a fee to the board for licensure, which varies based on the license. Applicants must also provide documentation of required education, such as official higher education transcripts and/or certifications.

Applicants are often required to demonstrate their professional competence through a national and state exam. Most boards (16 of 17) reported having national licensing standards such as an exam. The Massage Therapists board reported not having a national uniform licensing standard. Two boards, the Dentistry and the Board of Massage Therapists Boards, also conduct state practical exams. In addition, most boards require applicants to demonstrate their knowledge of state laws and rules regarding their profession through a jurisprudence exam.

As discussed in more detail below, most boards (14 of 17) require a criminal background check for initial licensure. Boards may also consult the U.S. Department of Health and Human Services' National Health Practitioner Data Bank (Data Bank) for instances of professional misconduct or discipline in other states. For example, the Dentistry Medical, Nursing, and Optometry boards receive continuous updates of incidents pertaining to their licensees through the Data Bank. Boards can also receive similar notifications from their affiliated national organizations.

Applicants who are in good standing and have been licensed in another state may apply for license by endorsement at some boards. For example, Registered Nurses and Licensed Practical Nurses may apply for licensure by endorsement at the Nursing Board if they have met certain requirements for education, practice hours, and verification of current or

most recent licensure. Similar to initial applicants, individuals applying by endorsement must also complete an application, pass a background check, and pay a fee.

Boards often use checklists to ensure applications are processed consistently and standards are met, and to show a review and/or receipt of application materials. Often these are manual checklists. For example, the Speech Pathology and Audiology Board uses a manual checklist to ensure all required documentation for licensing has been received. Alternately, the Nursing and Pharmacy Boards reported having checklists for each license type built into their databases, and the Medical Board has an interactive checklist that is updated and accessible by both staff and the individual applicant at any time.

Generally, staff or board members reported they review the completed applications or a selection of the applications. For example, Psychologists Board members review basic information on all license applications before approving them. At the Chiropractic Board, the director reviews all license applications, while at the Nursing Board the Licensing Manager reviews a random sample of applications.

Like initial applicants, licensed professionals must apply and pay a fee to renew their license. Boards typically conduct annual or biennial renewals. In addition, some boards set a standard renewal date for all licensees, while other boards distribute the renewals over the year. For example, the Nursing Board uses the license holder's birthday as the renewal date.

When they apply for a license renewal, applicants are required by statute to self-report criminal or professional violations that occurred since the last licensing period. Board investigators or compliance staff may follow up on reported incidents.

Nearly all boards (16 of 17) require continuing education and that renewal applicants attest to meeting the requirements. Several boards reported auditing a percentage of license holders' adherence to continuing education requirements, including the Counselors and Therapists, Massage Therapists, Medical, Naturopathic, Nursing, Occupational Therapy, Pharmacy, Physical Therapists, and Speech Pathology and Audiology Boards. The Optometry Board reported conducting a complete review of each licensee's continuing education at renewal. The Mortuary and Cemetery Board is the only board that does not currently require continuing education. However, the board reported they are developing a continuing education program that they plan to implement by the end of 2014.

License numbers varies by board

The number of new and renewed licenses issued varies dramatically among the 17 boards. In 2012, the total number of new and renewed licenses issued ranged from 873 at the Psychologist Board to over 44,000 at the Nursing Board. All boards have issued an increasing number of licenses

since 2007, except the Mortuary and Cemetery Board, which had a slight decline from 2007 to 2012. Appendix C at the end of our report shows the number of new and renewal licenses issued per board between 2007 and 2012. Figure 2 shows the number of new and renewal licenses issued per board in 2012.

Figure 2: Number of new and renewal licenses issued per board in 2012

	New Licenses	Renewal Licenses	Total Licenses Issued
Chiropractic	579	3,388	3,967
Counselors and Therapists	665	3,187	3,842
Dentistry	364	3,606	3,970
Massage Therapists	574	3,377	3,951
Medical**	2,132	1,716	3,848
Medical Imaging	681	2,336	3,017
Mortuary and Cemetery*	258	794	1,052
Naturopathic	78	951	1,029
Nursing	8,011	36,121	44,132
Occupational Therapy	192	1,628	1,820
Optometry	47	1,229	1,276
Pharmacy*	3,360	21,078	24,438
Physical Therapist	359	4,305	4,664
Psychologist	62	811	873
Social Workers	1,736	3,034	4,770
Speech Pathology and Audiology**	305	1,706	2,011
Veterinary	248	3,217	3,465

*Board also license facilities; count includes number of licensed facilities.

** The Medical and Speech Pathology and Audiology boards conduct biennial renewals. In 2011, these boards reported issuing 18,664 and 212 licenses, respectively.

Six boards reported an increase over 15% in new licenses from 2007 to 2012:

- Chiropractic
- Counselors and Therapists
- Physical Therapists
- Medical
- Social Workers
- Speech Pathology and Audiology

Renewal licenses constitute the bulk of licenses issued at each board, although initial licensure can be a greater workload. In 2012, renewals accounted for over 80% of the licenses issued at most of the boards. Boards reported the number of renewal licenses issued in 2012 ranged from 794 at Mortuary and Cemetery Board to over 36,000 at the Nursing Board.

Efficiencies from online licensing

Most boards (14 of 17) reported having an online process for license renewal. Boards noted the online renewal process is generally more efficient, saves staff resources and money, improves customer service,

minimizes hard copy documentation, and increases accuracy. Staff at the Counselors and Therapists and Physical Therapist Boards also reported the online renewal process makes the workload more manageable. For example, the Physical Therapists Board eliminated the need to hire temporary staff during the renewal processing period after switching to an online process. The three boards without an online process - the Chiropractic, Psychologist, and Optometry Boards - use a manual process for renewal applications and reported looking to move to an online process in the future.

In contrast to renewals, initial licensing is a manual process for nearly all boards. Only the Medical Board reported having a complete online application process for initial licenses. However, the majority of boards reported having considered using an online application for initial licensing. Boards noted various challenges to moving to an online licensing system, including information technology or database capabilities, a lack of funding for development and implementation, and the need for primary source or notarized documentation. One board also cited the need to review individual transcripts and exam scores, along with needing a photograph of the applicant.

Extent of criminal background checks varies

In addition to professional requirements, boards also ensure public safety through criminal background checks. We found most boards (14 of 17) perform criminal background checks at initial licensing; only the Veterinary, Occupational Therapy, and Speech Pathology and Audiology Boards do not. More than half of boards do not regularly perform subsequent criminal background checks after initial licensing. In addition, many boards have some portion of their licensees who have never received a criminal background check since they were initially licensed before such checks were implemented.

Criminal background checks, especially national checks, permit boards to look into the past of applicants and judge if they meet the ethical standards of the profession. For example, these checks identify criminal incidents that might compromise a professional's ability to perform their job and therefore put the public at risk. Healthcare professionals are often in a position of power with their clients who trust and depend on them for care. Licensees of the health regulatory boards' work with inherently vulnerable populations and many licensed professionals are mandatory reporters of abuse and neglect of children, the elderly, and those with developmental disabilities. For example, Occupational Therapists work on-on-one with individuals with physical, mental, emotional, and cognitive limitations. Licensees at the Board of Psychologist Examiners work with those afflicted with behavioral, emotional, and mental disorders. In addition, some licensees of the Mortuary and Cemetery Board work with loved ones of the recently deceased.

FBI criminal background checks are the most comprehensive

The Oregon Legislature granted health boards the authority to conduct national fingerprint-based criminal records checks through the Federal Bureau of Investigations (FBI) beginning in January, 2010. While health boards were given the authority for criminal background checks, state law does not require the boards to perform them.

The two most common types of criminal background checks the boards perform are a fingerprint-based FBI background check, and an Oregon Law Enforcement Data System (LEDS) background check. Two boards check the Oregon Judicial Information Network (OJIN) in addition to a LEDS background check. An FBI fingerprint-based background check is the most comprehensive type of check performed by the boards. Below are common types of criminal background checks:

- A fingerprint-based FBI background check is a national criminal history check across all 50 states and includes information provided by the FBI, as well as federal, military, state, local and foreign criminal justice agencies and authorized courts.
- A LEDS background check is a check of an individual's criminal history in Oregon using name and date of birth within several databases. LEDS includes current criminal history records, fingerprints, and court case outcomes of individuals in Oregon. It does not include criminal history outside of the state, military records, or federal criminal history.
- OJIN is Oregon's electronic court case system that can be used to check an individual's history within Oregon, such as the outcomes of proceedings in trial and appellate courts. It does not include an individual's arrest history and is not an official case record. OJIN staff reported it should not be used as the only tool while performing a criminal background check.

A review of selected states' health licensing entities across the country revealed variations in the types of criminal backgrounds checks. Most licensing entities we reviewed required background checks for initial licensure, but not for renewals. A fingerprint-based FBI background check was the most common background check found for the boards reviewed.

In September 2010, a subcommittee comprised of health professional regulatory boards recommended the state align the process requirements for fingerprint-based background checks across all licensing boards. However, we noted that the type of background checks boards perform still varies across the boards, for both the initial and subsequent background checks. Currently, 10 of the 17 boards perform a fingerprint-based FBI criminal background check on initial licensure applicants. Figure 3 shows the type of criminal background checks performed at each board.

Most boards perform initial criminal background checks

Most boards (14 of 17) perform a criminal background check on initial applicants. Of these, 12 perform a national background check and two

perform a state background check. Nearly all boards performing a national background check use a fingerprint-based FBI check. However, the Mortuary and Cemetery, and Physical Therapist Boards reported performing a national background check through private firms.

We noted that the Occupational Therapy, Speech Pathology and Audiology, and Veterinary Boards do not perform initial criminal background checks on applicants despite the possibility of past criminal incidents that could compromise a licensee's ability to perform their job and put the public at risk. Occupational Therapists and Speech-Language Pathologists and Audiologists work with vulnerable populations, including children and the elderly. However, professionals who work in facilities such as schools and may be subject to criminal background checks. Veterinarians have prescribing power and access to medications that are at risk for misuse. Yet applicants for these licenses do not undergo any type of criminal background check. In contrast, pharmacists, who also have access to medications, undergo criminal background checks for both initial and renewal licensure.

Figure 3: Criminal Background Checks by Board

	Initial background check type	Renewal background check type
Chiropractic	FBI*	None
Counselors and Therapists	FBI	None
Dentistry	FBI	None
Massage Therapists	FBI	LEDS
Medical	FBI	None
Medical Imaging	LEDS and OJIN	LEDS
Mortuary and Cemetery	LEDS and National	None
Naturopathic	FBI	None
Nursing	FBI	LEDS
Occupational Therapy	None	None
Optometry	LEDS and OJIN	LEDS
Pharmacy	FBI	LEDS
Physical Therapist	National	LEDS
Psychologist	FBI	None
Social Workers	FBI	None
Speech Pathology and Audiology	None	None
Veterinary	None	None

* Chiropractic Assistants receive an OJIN background check.

Most boards do not routinely perform subsequent criminal background checks

Subsequent criminal background checks are a tool boards can use to provide additional protection to the public. These checks may be performed after the initial licensure to detect criminal incidents or patterns of behavior. Checks can occur in conjunction with renewal applications or when issues or complaints against a licensee arise. However, most boards do not regularly perform subsequent background checks.

Only six of 17 boards reported routinely performing criminal background checks of renewal applicants. Five boards check all license holders at

renewal – the Massage Therapists, Medical Imaging, Nursing, Optometry, and Pharmacy Boards. The Physical Therapist Board performs background checks on 10% of their license holders at renewal. Beginning in 2010, the Counselors and Therapists Board began performing criminal background checks on all license holders every five years. Appendix B at the end of our report shows the boards who perform renewal criminal background checks and the percent of licensees checked.

While six boards perform criminal background checks of renewal applicants, the other 11 boards rely on complaints or peer and self-reporting to identify subsequent issues. Beginning in 2010, state law requires health professionals to report prohibited or unprofessional conduct of peers within 10 days. Licensees are also required by state law to self-report felony arrests, and felony or misdemeanor convictions to their board within 10 days.

Most boards have not performed criminal background checks on all licensees

Eleven boards have some portion of their licensees who have never had a background check conducted by their licensing board. Only six boards have performed criminal background checks on their entire population of licensees and have policies to maintain a population where all licensees have received a criminal background check:

- Counselors and Therapists
- Massage Therapists
- Medical Imaging
- Nursing
- Optometry
- Pharmacy (Note: does not include facilities)

The Occupational Therapy Board performed a LEADS criminal background check on its entire population in 2013, but it does not currently have policies in place to perform background checks on initial applicants, so new license holders will not be checked. The board requested funding for the 2009-11 biennium to conduct FBI fingerprint-based criminal background checks, but the request was denied. The Occupational Therapy Board reported it will conduct future LEADS criminal background checks and is in the process of developing policies.

In addition, the boards that have checked all licensees performed a LEADS criminal background check, which is limited to Oregon and does not capture national criminal histories. Six of these boards perform LEADS checks as part of the license renewal process. One additional board, the Counselors and Therapists Boards, elected to perform a one-time LEADS check on their entire population and has policies in place to perform background checks on initial applicants and all licensees every five years.

Board staff described several factors limiting their ability to perform criminal background checks. These factors included: workload and strained resources, growth in the number of licensees, cost of implementation, inconvenience to licensees, and timeliness of initial and renewal licensing processes. The Speech Pathology and Audiology Board requested, but was denied funding for an investigator in the 2013-15 budget and as a result reported it lacks the infrastructure needed to handle the records and investigate incidents discovered in criminal background checks.

Complaints are investigated to protect the public and maintain professional standards

Investigating complaints and making disciplinary decisions are two of the primary functions of health professional regulatory boards and are central to their mission of regulating the profession and protecting the public. State law requires these boards to assign one or more people to investigate complaints against licensees, applicants or others alleged to be practicing in violation of law.

Complaints originate from a variety of sources, including the public, other licensed professionals, employers and insurance companies. However, most complaints originate from the public. Although complaints can be brought to the board through various means, boards reported a preference for written complaints using a complaint form, email, or letter. Boards can also initiate investigations for reasons such as claims of unlicensed practice, information self-disclosed by applicants and licensees, or information obtained through the criminal background check process.

When a complaint is received, it is generally recorded in a database or logging sheet. Boards typically assess the complaints for jurisdiction, which means they determine if the board has the authority to investigate the complaint, determine a course of action, or impose discipline. Boards also assess whether or not the issue at hand, if true, would constitute a violation. Figure 4 shows the number of investigations opened by each of the 17 boards in 2012. Appendix D at the end of our report shows the number of investigative cases between 2007 and 2012.

Figure 4: Opened Investigative Cases by Board, 2012

	Investigations Opened
Chiropractic	143
Counselors and Therapists	65
Dentistry	231
Massage Therapists	217
Medical	756
Medical Imaging	73
Mortuary and Cemetery	101
Naturopathic	38
Nursing	2,451
Occupational Therapy	9
Optometry	11
Pharmacy	611
Physical Therapist	44
Psychologist	73
Social Workers	73
Speech Pathology and Audiology	78
Veterinary	14

Boards record the complaint assessment in a variety of ways. For example, the Social Workers Board uses a detailed form to document the complaint and guide the investigative staff in determining jurisdiction. The Medical Board incorporates the assessment into its complaint form with user-friendly check boxes. The Dentistry Board has developed a series of codes to indicate the type of investigation.

Boards may receive complaints outside their jurisdiction. Some boards inform the complainant the issue is outside the board's jurisdiction, or refer these complaints to the proper agency. For example, Veterinary Board staff keeps track of complaints that are not within the board's jurisdiction or do not constitute a rule violation and reports this information to the board. According to board staff, most of the boards receive a report or are otherwise informed of all complaints received, including those not investigated.

Generally, complaints within the board's jurisdiction are assigned to an investigator employed by the board. An investigator is required to collect evidence, interview witnesses, and make a confidential report to the board describing the results of the investigation and any prior disciplinary history of the licensee. Our review of complaint files showed a majority of boards (14 of 17) created an investigative report summarizing the actions taken during the investigation and the facts gathered. Board staff generally includes a licensee's prior disciplinary history in reports to board. After receiving an investigative report, members of the board can vote on a disciplinary decision or request further investigation.

Instead of investigative reports, the Speech Pathology and Audiology and Optometry Boards use case tracking reports and provide a summary of the issues and evidentiary documents to board members for review. The

Optometry Board also maintains investigative actions in a confidential activity log. The file review at the Chiropractic Board revealed files that did not consistently contain investigative reports or similar indication of investigative tasks or processes completed. The director has since instructed staff to add tracking reports to future case files.

Health expertise aids complaint investigations

Investigating complaints often requires professional experts who can evaluate and investigate the technical aspects of the complaint. For example, a pharmacist can evaluate prescriptions, records, and drug interactions and more easily uncover violations. A dentist can evaluate dental records and x-rays to determine if a bridge properly fits a patient's mouth and adequate patient care was provided. In addition, a nurse can determine whether a practitioner properly administered drugs to a patient. Other complaints which are not practice-related, such as billing irregularities, may not require this type of technical expertise.

Health professional regulatory boards obtain expertise for evaluating and investigating complaints in a variety of ways, including using investigators with a background in the field, consultants, and board members. Most boards (14 of 17) have dedicated investigative staff. Six boards have one or more staff investigators who are also practitioners:

- Chiropractic
- Dentistry
- Medical Imaging
- Nursing
- Pharmacy
- Physical Therapist

Three of these boards, the Chiropractic, Dentistry, and Nursing Boards, have both practitioner-investigators who can handle practice related complaints and non-practitioner investigators with law enforcement or investigative backgrounds who handle non-practice related complaints. For example, the Nursing Board has five nurse investigators and five non-nurse investigators, and assigns cases based on type of complaint. The investigations that are specific to the practice of nursing are assigned to nurse investigators, while non-practice related issues, such as drug theft, are assigned to investigators with law enforcement or investigative backgrounds. Eight other boards have dedicated investigative staff with backgrounds in law enforcement or investigations.

Three boards do not have dedicated investigative staff positions: Optometry, Speech Pathology and Audiology, and Occupational Therapy. In lieu of dedicated staff, the Speech Pathology and Audiology Board contracts with investigators with a background in law enforcement or investigations and utilizes the director, who is trained in complaint investigation. The Occupational Therapy Board contracts with practitioner-investigators and the Optometry Board utilizes its director and administrative staff to

complete investigations. Many directors and staff have prior experience and/or received training in complaint investigation such as training offered by the Oregon Department of Justice and/or the Council on Licensure, Enforcement & Regulation (CLEAR), which is an international professional body.

Boards with non-practitioner investigators obtain technical expertise in complaint investigations through various means. Most boards reported they contract with consultants or peer professionals as needed to aid investigations. Some, such as the Optometry Board, utilize the technical expertise of board members. However, any board members involved in investigations should recuse themselves from board deliberations of those cases. Other boards, like the Social Workers and Psychology Boards, use both a board committee and contracted professionals to provide expertise. The Naturopath Board requires their investigative staff to have experience in investigations of a medical nature to include charting, medical records, and knowledge of prescription drugs. The Mortuary and Cemetery Board requires industry training in addition to investigative expertise. The Medical Board's Medical Director reviews the investigative work of all practice-related complaints and a board committee also reviews investigative cases.

Having an investigator with a background in the field could be more efficient and save boards time and money, as they may not need to contract with consultant professionals for investigations as often. One board received legislative approval to hire an additional investigator with a health background in the 2013-15 biennium. However, another board reported pressure from the Legislature to justify investigators with professional backgrounds in the field. Boards also cited challenges to hiring health practitioners as investigators which can be more expensive and more difficult to staff because a health professional may be able to earn a greater wage working as a professional in the field.

Board disciplinary decisions follow established procedures

Board disciplinary decisions follow established procedures such as separating the investigative process from decision-making, imposing sanctions based on the specific laws or rules violated, utilizing assistance from the Oregon Attorney General's Office, and handling of contested investigative cases.

Boards make disciplinary decisions based on the investigative information presented as well as the laws and rules governing violations and penalties. Board members generally separate decision-making and discipline from the complaint investigation process. Boards have a variety of sanctions available to them for discipline of licensees or individuals practicing without a license. The sanctions largely depend on the severity of the infraction committed and include reprimand, probation, fines, education, license restrictions, license suspension and license revocation. Boards may also issue a confidential letter of concern to a licensee when the

investigative process has not revealed or substantiated a specific rule violation, but the board is concerned about an area of the licensee's practice or behavior.

The Oregon Attorney General's office assists boards in the investigative and disciplinary process. Boards reported using the Attorney General's services in a variety of ways, including reviewing investigative work, performing background checks, training investigative staff and board members, attending investigative interviews, and advising the board on potential rule or law violations. The Attorney General's office also represents the board during contested case hearings and appeals of board decisions.

There are established procedures in place for boards to make disciplinary decisions and for disciplined parties to contest such decisions. Boards can resolve disputes through a consent order or stipulated agreement, which is a voluntary binding agreement between the board and disciplined party. However, if the board and disciplined party are unable to come to an agreement, the board can make a judgment and the disciplined party has the right to accept or contest the board's decision. Contested decisions are referred to the Office of Administrative Hearings and which assigns an independent Administrative Law Judge. During the contested case hearing, disciplined parties have the opportunity to retain counsel, present evidence, and respond to evidence presented by the board. The Board or Administrative Law Judge issues findings and an order. The disciplined party has the right to appeal the final order to the Oregon Court of Appeals.

Disciplinary actions are reported

By statute, board final orders are public records which are subject to disclosure. These public records include disciplinary sanctions, emergency suspensions, and consent or stipulated agreements involving licensee or applicant conduct. Boards reported disclosing these records through various means including board meeting minutes, posting on the board's website, through a licensee look-up feature, in agency newsletters, and in separate discipline reports.

Federal law also requires reporting of disciplinary actions taken by boards. Specifically, all state health licensing and certification authorities are required to report disciplinary actions to the U.S. Department of Health and Human Services' National Practitioner Data Bank (Data Bank), except for decisions by the Mortuary and Cemetery Board and the Veterinary Board, which reports its decisions to the American Association of State Veterinary State Boards. Some boards report to a national board or entity, which in turn reports to the Data Bank. For example, the Nursing Board reports discipline to a profession-specific entity called NURSIS, the national database for nurses, which reports to the Data Bank.

Board governance, oversight and support

As public entities, boards must exercise proper stewardship of the resources entrusted to them and ensure they are accountable and transparent. Oregon's Governor has pledged to maintain a system of boards and commissions that is both transparent and accountable to the citizens of Oregon. Accountability to the public and healthcare professionals can be achieved in part through oversight functions of the boards and board staff, and through public transparency. Board activities are also subject to both legislative and executive oversight. Overall policy guidance and direction are provided by the Governor, as the state's chief executive officer, and by the Legislature, which writes laws and appropriates operating funds. The Department of Administrative Services (DAS) provides certain administrative services and support.

Models for governance of health boards vary in other states

The governance models of health regulatory boards across the country range from autonomous boards to centralized licensing agencies. Oregon's model of predominantly autonomous health professional regulatory boards is similar to 16 other states. The remaining states have governance models with less board autonomy and more coordination with a central agency, or have boards consolidated within a central agency. Three states have boards that share administrative functions through a central agency. Twenty-one states operate under a model in which autonomous boards share authority with a central agency in matters such as budgets, personnel management, and complaint investigations. Six states operate within a structure where there is limited board authority for decision-making and board actions, and decisions are subject to central agency review. The remaining three states have completely centralized licensing agencies where boards serve in an advisory capacity and decision-making is carried out by a central licensing agency.

Studies indicate there is no single most effective model or common set of best practices for governance models of health licensing boards. Experts disagree on which models may provide superior public protection, efficiency, customer service, or accountability. One study suggests that resources, rather than structure, have a bigger impact on board performance. Similarly, some experts have concluded that structure may matter less than funding, staffing, or leadership. Another study states the best practices of boards are not dependent on governance structure. Some studies suggest autonomous boards may have advantages in disciplinary matters, customer service, and processing time for applications. Other experts suggest an oversight entity may be beneficial in working with the Legislature on rule or law changes and resolving conflicts with the public and disputes among professions. In addition, a 1997 DAS evaluation of the organizational structure of credentialing entities in Oregon found there was no one best model even within the state.

Most Oregon health professional licensing boards operate autonomously

In Oregon, 17 of the 20 health professional regulatory boards are policy-making boards that are regulatory in nature and operate autonomously under their governing statutes. These boards are independent of one another, and are not part of a centralized agency. Three of the 17 boards we reviewed operate as semi-independent agencies within state government. Semi-independent boards do not have all of the same regulations as other state agencies, and have differences in the budget process, administrative support structure, and degree of legislative review.

The other three health professional licensing boards not included within the scope of our audit operate as advisory boards within two larger state agencies: the Oregon Health Authority (OHA) and the Oregon Health Licensing Agency (OHLA). In July 2014, OHLA will transition to become an office within the Oregon Health Authority. There are notable differences between regulatory and advisory boards. For example, advisory boards do not have final decision making authority in matters such as whether to take disciplinary action against a licensed professional, while regulatory boards such as those we reviewed do have this authority.

Boards delegate authority for key functions

Boards have delegated authority to directors and staff to carry out key board functions. Each board is required to appoint a director who serves under the direct supervision of the board, at the pleasure of the Governor. The director is charged with duties delegated by the board, keeping all records of the board, and reporting on the monitoring and investigative activities of the board. Delegated functions include: preparing for board meetings, supervising staff, processing complaints, conducting investigations, reviewing applications for licensure and renewal, preparing budget requests, and coordinating testimony before legislative committees. Although the director and staff perform administrative functions, the board makes final decisions regarding disciplinary actions.

Delegation of authority requires board members to be actively engaged with board staff to provide oversight and ensure board staff is accountable. Effective board members ensure proper oversight through regular attendance, preparation, and engagement at board meetings and by thoroughly reading and reviewing reports, proposals, and other documents prepared by board staff. In addition, boards are required by administrative rule to complete an annual performance evaluation of their director. Sixteen of the 17 board chairpersons reported their board conducted an annual evaluation of their executive director. These evaluations aid in ensuring proper oversight of delegated authority. However, there is no formal process in place to annually evaluate the performance of the Veterinary Board's director.

Active communication with board staff by board members can help to keep the board informed of day-to-day operations and provide oversight of delegated functions. We found board members were actively involved with

communicating and working with directors, and were attentive to matters regarding licensing, discipline, and topics concerning the board's profession.

Boards use a variety of methods to create transparency

Health professional regulatory boards can create transparency by communicating their role in public safety, the complaint process, disciplinary actions, and regulatory requirements of the board's profession. Board transparency promotes accountability to health professionals, lawmakers, and the public.

We found that boards demonstrated transparency through website content, newsletters, and other outreach efforts. Our review of boards' websites found that most make information available to the public through posting notifications of upcoming board meetings and agendas, and past board meeting minutes. Also, boards' websites generally include instructions on how to apply for and obtain a professional license or renewal, how to file a complaint against a licensee, and a description of the complaint investigation process. Boards reported that information about disciplinary actions was included on board websites and in board meeting minutes, newsletters, and through an online look-up of health professionals' license status and discipline.

Boards also create transparency through outreach to practitioners, such as communicating regulatory requirements of the boards' profession. For example, boards reported going to colleges and universities to connect with future practitioners, such as Dentistry Board staff who explain the application procedure and hand out fingerprint cards to students close to graduation. Among other boards, the Massage, Social Work, Speech Pathology and Audiology Board speak with students about the licensing process, and laws and rules of the profession. Some boards also reported being involved with their professional organization on a state and national level. For instance, the Physical Therapist Board's director is on the Federation of State Board's of Physical Therapy's board of directors and previously served on numerous workgroups charged with setting national physical therapy standards.

Peer reviews focus on public safety mission

In 2009, the Legislature passed a bill requiring Oregon's health professional regulatory boards to undergo periodic peer reviews focusing on the boards' public safety mission. Since then, the following five boards have undergone a detailed peer review:

- Speech Pathology and Audiology (2013)
- Nursing (2013)
- Massage Therapists (2012)
- Optometry (2011)
- Occupational Therapy (2010)

The peer reviews identified areas of strengths, weaknesses, opportunities, and challenges within the boards' operations. Strengths included a convenient and timely renewal process for one board and outreach and transparency efforts of other boards. One peer review identified a weakness related to the composition of the board, with the report stating it may not be best for the board's mission. Another found that administrative staff and board members involvement in the investigative process was a weakness, stating that trained investigators have certain skills laypeople lack. Yet another raised doubts about the presumption that applicants are truthful when reporting past criminal behavior. The rising number of complaints, heavy workloads, staffing constraints, and process issues in investigations were other challenges the peer reviews reported. The opportunity to network and share ideas and processes with other health licensing boards was identified as an opportunity.

Challenges in obtaining additional staffing

The Legislature establishes priorities and sets public policy through its administration of the state's budget. Fourteen of the boards we reviewed go through the standard state agency budget process, but none are funded through General Funds. Rather, all 17 boards are funded entirely through Other Funds, primarily fees paid by licensees, such as those for licensure or as part of disciplinary action. The 2013-15 budgets for the boards vary widely, from about \$368,000 at the Occupational Therapy Board to about \$14,196,000 at the Nursing Board.

The budget process is one of the Legislature's accountability mechanisms for health boards. The Legislature sets their budget and number of staff positions through the standard state agency budget process. Because board budgets are primarily made up of fees, any budgetary increase necessitates a fee increase, which must be approved by the Legislature.

Semi-independent health boards go through a different process and do not present their budgets in legislative hearings. Instead, they prepare their budgets through public hearings, with the results adopted by administrative rule. Unlike the other boards, semi-independent boards may adjust fees without legislative approval. Semi-independent boards submit a report to the Legislative Fiscal Office (LFO) biennially and obtain a financial review or financial audit conducted by a certified public accountant.

Nearly half of the boards reported challenges in obtaining legislative approval for additional staff positions. For instance, the Speech Pathology and Audiology Board requested a part-time investigator in the 2011-13 and 2013-15 biennia, but both requests were denied. The Legislature approved the Board's request to charge licensees for the cost of FBI criminal background checks for the 2013-15 biennium, but the Board reported it is challenged to begin without investigative staff to follow up on the checks. This board reported a 333% increase in the number of complaints and a 24% increase in licensees from 2007 to 2012. In addition, the Naturopathic

Board requested an investigator position for three biennia before obtaining legislative approval for a limited duration investigator in the 2013-15 biennium. It has also reported significant increases, with an increase of 124% in the number of complaints and 33% increase of licensees from 2007 to 2012.

A number of boards included in our audit reported they found the budget process burdensome, and wanted more control over their budgets through a simplified process such as that of semi-independent boards. For instance, a 2010 subcommittee on health professional regulatory boards proposed that the legislative presentation portion of the budgetary process be streamlined, but the recommendation was not approved.

Board members could benefit from additional training

Audits in Oregon and other states have found members of boards may not fully understand their role in creating and upholding the board's system of internal controls. For example, our 2012 report on boards and commissions noted the need for board member training regarding internal controls, compliance and performance. As representatives of public entities, board members need adequate training in order to exercise proper stewardship of the resources entrusted to them.

Currently, DAS offers online training for state board and commission members based on the Governor's Membership Handbook for Boards and Commissions. However, more than half of board chairs we spoke with were unsure if the state offered any training for board members. In previous years, DAS provided in-person training for board members. Some board chairs and directors reported the previous DAS training was valuable and reinstatement of such training would benefit boards. The Governor's Office is currently working with DAS to arrange a meeting of board administrators to provide them with a general overview of the executive appointments process, board member expectations and to clarify the roles and responsibilities of board members.

To compensate for a lack of state sponsored, in-person training, some boards have utilized other training resources such as training offered by national organizations. In addition, some boards offer training to new members through on-the-job training or new member orientation provided by board staff or other board members.

Benefits of shared services and collaboration

In Oregon, health professional regulatory boards utilize a number of support services including DAS Shared Client Services, information technology (IT), Department of Justice (DOJ) legal services, and Oregon State Police background checks. Thirteen boards use the same private vendor for IT services and support, such as secondary database support, and database management. Twelve boards rely on DAS' Shared Client Services division to provide services such as payroll and accounting. Board directors also attend agency head meetings conducted by the DAS Chief

Operating Officer, budget meetings held by the DAS Chief Financial Officer, and Legislative Coordinators meetings.

All of the boards utilize the DOJ for legal services. Boards reported using their Assistant Attorney General within DOJ to review investigative work, provide training for investigative staff and board members, advise boards on potential rule or law violations, and assist in background checks. Boards requiring FBI fingerprint background checks utilize the Oregon State Police to perform the checks. Several boards have also contracted over the last several years with the Nursing Board to perform LEDS background checks.

In addition to sharing services, boards have formed collaborative networks through which they are able to share information and benefit from each other's experiences. Health board directors meet monthly in a workgroup for peer learning, mentoring, and sharing best practices and challenges. The workgroup discusses matters such as peer review audits, legislative session updates, and updates from the Governor's Office. Semi-independent boards participate in the Semi-Independent Boards Agencies group (SIBA) to address the unique challenges associated with their semi-independent status. Some directors reported these groups were also valuable to new directors in learning about their role and responsibilities, and in facilitating their on-the-job training.

In addition to formal avenues for coordination, informal cooperation and peer mentoring was evident from speaking with board staff and observations at boards that are co-located. Eight of the seventeen boards are located in the same building in Portland and four other boards are located in the same building in Salem. Co-locating allows boards to share office supplies and equipment, build social capital, and share best practices. Board staff who are co-located regularly converse with each other, ask questions, and share experiences to better address board issues and concerns. The effects of co-location were cited in a 2003 national study of health professional regulatory boards, including boards in Oregon, which noted that co-location was perceived as beneficial for boards, and allowed staff to share information and experiences.

Additional opportunities for oversight and advocacy

While mechanisms exist for board accountability, the Governor's Office does not currently have the resources to ensure consistent oversight. The Governor's Executive Appointment's Office, which is responsible for appointments to boards and commissions, only has two staff, the Director and a part-time Program Representative, who is charged with filling over 1,900 appointments to over 200 boards, as well as other responsibilities.

Boards reported they faced challenges and suggested opportunities for improved communication and clarity of direction from the Governor's Office. For example, directors reported not always being informed of hearings for new board members. One board reported their request to include a health professional licensee on their board was denied, despite the board members' desire to include what they believed to be a valuable

licensee perspective. Boards noted that their involvement in developing legislation impacting board regulatory responsibilities or licensees can be an afterthought. For instance, the new law requiring electronic fingerprinting to go into effect in 2014 has a significant impact on boards' licensing processes, but they were not included in the process until just before the bill was passed. Directors also suggested it would be valuable for a representative from the Governor's Office to attend the monthly executive director workgroup meetings, as well as those of individual boards.

In our 2012 report on Oregon boards and commissions, we recommended the Governor's Office establish a periodic and systematic monitoring and reporting structure all for boards and commissions. The Governor's Office staff reported that they are currently developing a template for a quarterly report that will be used by all boards. The report will contain information about ongoing work of the board, any notable fiscal issues and an assessment of the board's overall performance. In addition, the Governor's Office has also stated they will work with DAS to determine who will review and respond to the information provided by boards, as there is no current system in place to manage and respond to issues that might arise from these reports. Because of this gap, the Governor's Office is including this issue in the 2015-17 budget discussions.

Recommendations

We recommend boards give further consideration to background check policies for professionals who handle drugs or interact with vulnerable populations. In addition, we recommend the Governor consider providing more operational support and board member training on roles and responsibilities.

Objectives, Scope and Methodology

Our audit objective was to determine if governance and delivery of services provided by Oregon's Health Professional Boards can be improved to better promote the quality of health services provided, protect the public health, safety and welfare. The scope of our audit included 17 of Oregon's Health Professional Regulatory Boards:

- State Board of Examiners for Speech-Language Pathology and Audiology
- State Board of Chiropractic Examiners
- State Board of Licensed Social Workers
- Oregon Board of Licensed Professional Counselors and Therapists
- Oregon Board of Dentistry
- State Board of Massage Therapists (semi-independent, ORS 182.45)
- State Mortuary and Cemetery Board
- Oregon Board of Naturopathic Medicine
- Oregon Board of Nursing
- Oregon Board of Optometry (semi-independent, ORS 182.45)
- State Board of Pharmacy
- Oregon Medical Board
- Occupational Therapy Licensing Board
- Physical Therapist Licensing Board (semi-independent, ORS 182.45)
- State Board of Psychologist Examiners
- Board of Medical Imaging
- Oregon State Veterinary Medical Examining Board

To answer the audit objective, we gained an understanding of the Boards' licensing processes, the complaint, investigations and discipline processes, as well as the boards' governance and oversight. We performed site visits at all 17 boards and conducted interviews of each Board Chair and Executive Director. We also interviewed board staff and Governor's office staff. We reviewed a limited number of licensing and investigation files to gain an understanding of the boards processes and obtain documentation. We reviewed Oregon Revised Statutes, Oregon Administrative Rules pertaining Boards' authorities, duties, and responsibilities. We surveyed boards for pertinent information, including the number of complaints and licenses issued between 2007 and 2012. We performed internet research and reviewed budget documentation and reports.

We performed limited research on health licensing boards from other states to determine governance structures. To determine which states and boards require background checks, fourteen health licensing agencies in ten states were chosen to get a sample of the spectrum of board governance types from autonomous boards through consolidated state agencies.

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

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The courtesies and cooperation extended by officials and employees of the health professional regulatory boards during the course of this audit were commendable and sincerely appreciated.

Appendix A – General Information

	Year Established	Semi- Independent	Number of Board Members	Number of Time Board Meets per Year*	Adopted Budget 2013-2015	Full Time Equivalent Employees
Chiropractic	1915		7	8	\$1,454,717	4.88
Counselors and Therapists	1989		8	6	\$1,096,822	3.5
Dentistry	1887		10	6	\$2,581,266	7
Massage Therapists	1971	✓	7	6	\$1,746,000	5
Medical	1889		12	4	\$10,453,997	38.79
Medical Imaging	1977		12	4	\$836,832	3
Mortuary and Cemetery	1921		11	7	\$1,409,105	5.71
Naturopathic	1927		7	6	\$631,110	2.5
Nursing	1911		9	11	\$14,196,228	47.8
Occupational Therapy	1977		5	4	\$367,857	1.25
Optometry	1905	✓	5	4	\$698,511	2.2
Pharmacy	1891		7	7	\$5,783,198	19
Physical Therapist	1971	✓	8	6	\$1,00,000	2.8
Psychologist	1963		9	6	\$1,005,553	3.5
Social Workers	1979		7	11	\$1,350,215	6
Speech Pathology and Audiology	1973		7	5	\$529,895	2
Veterinary	1903		8	6	\$740,203	2.75

*These are the regularly scheduled sessions. Boards may conduct additional meetings.

Appendix B – Background Checks

	Background Checks Performed	Initial Background Check Type	Renewal Background Check Type	Percent of Population Checked at Renewal	Background Checks Completed on all License Holders
Chiropractic	✓	FBI*	None		
Counselors and Therapists	✓	FBI	None		✓
Dentistry	✓	FBI	None		
Massage Therapists	✓	FBI	LEDS	All	✓
Medical	✓	FBI	None		
Medical Imaging	✓	LEDS and OJIN	LEDS	All	✓
Mortuary and Cemetery	✓	LEDS and National	None		
Naturopathic	✓	FBI	None		
Nursing	✓	FBI	LEDS	All	✓
Occupational Therapy		None	None		
Optometry	✓	LEDS and OJIN	LEDS	All	✓
Pharmacy	✓	FBI	LEDS	All	✓
Physical Therapist	✓	National	LEDS	10%	
Psychologist	✓	FBI	None		
Social Workers	✓	FBI	None		
Speech Pathology and Audiology		None	None		
Veterinary		None	None		

* Chiropractic Assistants receive an OJIN check.

Appendix C – Licenses Issued, 2007-2012

	New Licenses Issued					
	2007	2008	2009	2010	2011	2012
Chiropractic	443	427	427	465	474	579
Counselors and Therapists	167	170	211	324	451	655
Dentistry	364	328	291	335	358	364
Massage Therapists	734	610	603	603	568	574
Medical	1,801	1,934	1,964	1,930	2,087	2,132
Medical Imaging	665	722	595	1,669	779	681
Mortuary and Cemetery	285	267	249	288	191	258
Naturopathic	77	72	82	80	80	78
Nursing	7,657	7,314	7,998	7,889	8,134	8,011
Occupational Therapy	243	124	236	162	372	192
Optometry	56	44	48	46	53	47
Pharmacy	3,452	5,266	3,622	3,748	3,191	3,360
Physical Therapist	283	308	352	346	403	359
Psychologist	69	87	97	90	100	62
Social Workers	725	764	768	964	1,506	1,736
Speech Pathology and Audiology	198	229	185	230	212	305
Veterinary	258	225	206	223	204	248

	Renewal Licenses Issued					
	2007	2008	2009	2010	2011	2012
Chiropractic	2,624	2,651	2,823	2,976	3,032	3,388
Counselors and Therapists	2,468	2,506	2,628	2,769	2,833	3,187
Dentistry	3,166	3,296	3,343	3,482	3,417	3,606
Massage Therapists	2,645	3,089	2,957	3,325	3,310	3,377
Medical	13,618	1,833	15,757	1,636	16,577	1,716
Medical Imaging	1,791	1,714	1,887	1,584	1,773	2,336
Mortuary and Cemetery	822	720	724	768	781	794
Naturopathic	695	750	785	850	875	951
Nursing	29,934	31,478	32,523	33,187	33,929	36,121
Occupational Therapy	1,330	1,429	1,437	1,488	1,649	1,628
Optometry	1,168	1,223	1,213	1,217	1,228	1,229
Pharmacy	15,766	12,505	17,543	18,435	19,585	21,078
Physical Therapist	3,767	3,723	3,850	3,948	4,112	4,305
Psychologist	693	731	728	1,558	908	811
Social Workers	2,649	2,750	2,864	2,840	2,885	3,034
Speech Pathology and Audiology	-	1,423	-	1,570	-	1,706
Veterinary	2,594	2,127	3,897	2,945	3,526	3,217

*Some boards renew licenses annually and some biennially.

	Total Licenses Issued					
	2007	2008	2009	2010	2011	2012
Chiropractic	3,067	3,078	3,250	3,441	3,506	3,967
Counselors and Therapists	2,635	2,676	2,839	3,093	3,284	3,842
Dentistry	3,530	3,624	3,634	3,817	3,775	3,970
Massage Therapists	3,379	3,699	3,560	3,928	3,878	3,951
Medical	15,419	3,767	17,721	3,566	18,664	3,848
Medical Imaging	2,456	2,436	2,482	3,253	2,552	3,017
Mortuary and Cemetery	1,107	987	973	1,056	972	1,052
Naturopathic	772	822	867	930	955	1,029
Nursing	37,591	38,792	40,521	41,076	42,063	44,132
Occupational Therapy	1,573	1,553	1,673	1,650	2,021	1,820
Optometry	1,224	1,267	1,261	1,263	1,281	1,276
Pharmacy	19,218	17,771	21,165	22,183	22,776	24,438
Physical Therapist	4,050	4,031	4,202	4,294	4,515	4,664
Psychologist	762	818	825	1,648	1,008	873
Social Workers	3,374	3,514	3,632	3,804	4,391	4,770
Speech Pathology and Audiology	198	1,652	185	1,800	212	2,011
Veterinary	2,852	2,352	4,103	3,168	3,730	3,465

*Some boards renew licenses annually and some biennially.

Appendix D – Investigations

	Dedicated Investigative Staff	Boards with Practitioner-Investigators	Number of Investigative Cases Opened					
			2007	2008	2009	2010	2011	2012
Chiropractic	✓	✓	95	72	78	69	130	143
Counselors and Therapists	✓		37	28	38	59	65	65
Dentistry	✓	✓	307	293	255	258	228	231
Massage Therapists	✓		61	145	197	157	173	217
Medical	✓		572	573	552	711	746	756
Medical Imaging	✓	✓	38	32	37	47	35	73
Mortuary and Cemetery	✓		113	211	142	117	146	101
Naturopathic	✓		17	30	25	30	37	38
Nursing	✓	✓	2,111	2,416	2,617	2,777	2,724	2,451
Occupational Therapy			5	5	7	13	7	9
Optometry			26	20	23	23	24	11
Pharmacy	✓	✓	499	652	675	598	698	611
Physical Therapist	✓	✓	32	46	45	37	39	44
Psychologist	✓		54	84	77	124	74	73
Social Workers	✓		36	47	57	55	69	73
Speech Pathology and Audiology			18	16	41	57	100	78
Veterinary	✓		37	39	46	34	41	14

February 28, 2014

Mr. Will Garber, CGFM, MPA
Deputy Director, Audits Division
Oregon Secretary of State Audits Division
255 Capitol Street NE, Suite 500
Salem, OR 97310

RE: Health Professional Regulatory Boards Report

Dear Mr. Garber,

The Health Professional Regulatory Boards thank the Secretary of State Audits Division for its comprehensive review of the governance and delivery of services by the 17 boards reviewed. As concluded in the team's report, all boards are actively engaged in promoting quality health services while providing an objective way for consumers to seek resolution of grievances. The boards also regularly collaborate with one another and achieve transparency through outreach efforts.

Board members are actively involved in key board business and contribute significantly to patient safety in Oregon. The public and professional members of these health boards contribute an important public service on an essentially volunteer basis.

The boards agree with the report's recommendations and are taking the following actions.

Give Further Consideration to Criminal Background Checks

Thorough background checks represent one of the many important methods boards use to ensure that applicants meet the ethical and safety standards of the profession. The report finds that most boards perform thorough initial administrative and criminal background checks of applicants, including a fingerprint-based FBI criminal background check; and the few that do not will continue to explore the feasibility.

In checking with other entities around the country the reviewers found that the Oregon boards' criminal background checks are similar to those of other states; however, the boards will continue to evaluate the benefits and challenges of performing additional checks on professionals at license renewal. Boards will seek any necessary increase in budget limitations, fees or legislation in the 2015 session.

Consider More Operational Support and Board Member Training

Health regulatory boards have the benefit of actively engaged board members. There are a dozen accountability mechanisms in place for boards through the executive and legislative branches as well as the Secretary of State Audits Division. Accountability

begins with enabling legislation and the appointment process for board members as identified in the report. The boards agree that additional resources and better coordination with the Governor's Office, supporting the role of boards and commissions in the State overall, would be of benefit. New members are given board-specific orientations. However, given the scope and complexity of these roles, the health regulatory boards welcome additional training and support.

In reviewing best practices and operations and in comparing the effectiveness of various agency models, several boards have voted to move to a semi-independent model if the option is available. The semi-independent model offers a nimble and cost-effective way of administering health regulatory boards while ensuring accountability. The boards would like to further explore this model and its potential benefits for the state, licensees and the public.

In closing, thank you for your Division's work, insights and openness. We appreciate the collaborative approach in achieving the audit's objective.

Sincerely,

Oregon Board of Chiropractic Examiners
Oregon Board of Dentistry
Oregon Board of Examiners for Speech-Language Pathology and Audiology
Oregon Board of Licensed Professional Counselors and Therapists
Oregon Board of Licensed Social Workers
Oregon Board of Massage Therapists
Oregon Board of Medical Imaging
Oregon Board of Naturopathic Medicine
Oregon Board of Optometry
Oregon Board of Pharmacy
Oregon Health Licensing Agency
Oregon Medical Board
Oregon Mortuary and Cemetery Board
Oregon Occupational Therapy Licensing Board
Oregon Physical Therapist Licensing Board
Oregon State Board of Nursing
Oregon Veterinary Medical Examining Board



JOHN A. KITZHABER, MD
Governor

March 4, 2014

Secretary Kate Brown
State Capitol Building
900 Court Street NE, Suite 136
Salem, Oregon 97310

The Governor's Office would like to thank the Secretary of State Audits Division for their detailed and comprehensive audit of Oregon health licensing boards and commissions.

As noted in the report, health licensing boards, commissions, councils, and similar entities play a vital role here in Oregon, as they allow for direct public participation in the administration of health care policy areas. The opportunity for subject matter expertise and direct stakeholder engagement in government makes the end result better. Therefore, it is essential that we pay close attention to the overall purpose and function of health licensing boards, so that they—like all public entities—are accountable, effective and transparent. This importance is highlighted by the regular focus on the creation, structure and function of boards in administration after administration, for over a hundred years. Simply put, boards are an essential part of what makes for effective government.

The Governor's Office agrees with and is prepared to continue addressing the underlying recommendation in the report. The Governor's Office is actively working to develop a "deliberate and cohesive" governance structure for Oregon boards in partnership with the Department of Administrative Services (DAS) and the Legislature, as well as other stakeholders. The following are a few examples of ways in which the Governor's Office is actively working to address the audit's recommendations:

In response to the issue related to the flow of information from the Governor's Office to the Administrators of health licensing boards, the Governor's Office is very open to a collaborative approach to recruitment with the understanding that the decision to appoint is ultimately up to the Governor. While appointments that are made by the Governor may not always provide Administrators with their preferred candidate, the Governor's Office has established a process of information sharing that creates opportunities for Administrators to provide the Governor with their perspective on their particular needs for specialists, skill sets and work styles for new board members.

Since moving from a strictly paper-based appointments process to a largely electronic-based appointments process, the Governor's Office can now provide Administrators with complete electronic folders that includes all applications to their respective boards or commissions. Administrators have been invited to make suggestions about current applicants as well as providing the Governor's Office with additional candidates who are a better fit for their needs. Board Administrators are now invited to and encouraged to contact the final candidate prior to their confirmation hearings.

The Governor's Office has also begun including Administrators who are receiving new board members in all information that is sent to board candidates during and after their confirmation process. This includes

the board candidate's confirmation packet, dates and times of confirmation hearings, and information regarding the required paperwork that follows confirmation.

As noted in the audit report, the Governor's Office is currently developing a template for a quarterly report that will be used by all boards so that accurate and consistent information regarding the performance and expectations of boards and commissions can be tracked and documented. Additionally, the Governor's Office, in partnership with the Department of Administrative services, will gather a group of four Administrators for two meetings to help create the report template. We are working to generate these meetings before April 11, 2014 in order to consolidate information and prepare documents for large trainings for board administrators and Commission Chairs in late April. These trainings are designed to provide an understanding of Executive Appointment process and clarify board expectations by all Executive Directors and Commission Chairs. This will include issues that are:

Procedural: Relating to appointments and board members

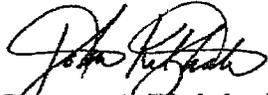
Operational: Relating to Executive Directors and the agencies

Policy: Relating to an agency's rules or procedures

Finally, regarding issues related to increasing the oversight of boards and commissions, the Governor's Office is in the process of determining the most appropriate and efficient pathway to solving this issue. Because over 50% of the Governor's appointments require Senate confirmation, it is critical that our office works in concert with the Oregon Legislature and the Department of Administrative Services to make decisions about this issue. As noted in the audit report, the Governor's Office currently has a significant staff capacity issue which will need to be thoughtfully analyzed as we examine oversight questions. We will work with legislative and administrative partners to determine the right procedural and fiscal fixes to providing greater oversight to our health licensing and other boards in the future.

The Governor's Office will also work with DAS and the Legislature, as well as stakeholders, to clarify or establish enabling legislation and practices that accomplish the recommended outcomes contained in the audit. We look forward to this process, and the outcomes of our responses to the Secretary of State's audit.

Sincerely,



Governor A. Kitzhaber M.D.
Governor

BUDGET NARRATIVE

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Oregon Medical Board

Summary Cross Reference Listing and Packages
2015-17 Biennium

Agency Number: 84700
BAM Analyst: Clark, Clair
Budget Coordinator: Brandt, Carol - (971)673-2679

Cross Reference Number	Cross Reference Description	Package Number	Priority	Package Description	Package Group
015-00-00-00000	Operations	010	0	Non-PICS Psnl Svc / Vacancy Factor	Essential Packages
015-00-00-00000	Operations	021	0	Phase-in	Essential Packages
015-00-00-00000	Operations	022	0	Phase-out Pgm & One-time Costs	Essential Packages
015-00-00-00000	Operations	031	0	Standard Inflation	Essential Packages
015-00-00-00000	Operations	032	0	Above Standard Inflation	Essential Packages
015-00-00-00000	Operations	033	0	Exceptional Inflation	Essential Packages
015-00-00-00000	Operations	081	0	September 2014 E-Board	Policy Packages
015-00-00-00000	Operations	090	0	Analyst Adjustments	Policy Packages
015-00-00-00000	Operations	101	1	Implement Administrative Efficiencies	Policy Packages
015-00-00-00000	Operations	102	2	Office Security and Space	Policy Packages
015-00-00-00000	Operations	103	3	Rules Coordinator	Policy Packages
015-00-00-00000	Operations	104	4	Investigative Staffing	Policy Packages
015-00-00-00000	Operations	105	5	Licensing Staff Adjustment	Policy Packages
015-00-00-00000	Operations	106	6	State-wide Board Meetings	Policy Packages

Oregon Medical Board

**Policy Package List by Priority
2015-17 Biennium**

Agency Number: 84700

BAM Analyst: Clark, Clair

Budget Coordinator: Brandt, Carol - (971)673-2679

<i>Priority</i>	<i>Policy Pkg Number</i>	<i>Policy Pkg Description</i>	<i>Summary Cross Reference Number</i>	<i>Cross Reference Description</i>
0	081	September 2014 E-Board	015-00-00-00000	Operations
	090	Analyst Adjustments	015-00-00-00000	Operations
1	101	Implement Administrative Efficiencies	015-00-00-00000	Operations
2	102	Office Security and Space	015-00-00-00000	Operations
3	103	Rules Coordinator	015-00-00-00000	Operations
4	104	Investigative Staffing	015-00-00-00000	Operations
5	105	Licensing Staff Adjustment	015-00-00-00000	Operations
6	106	State-wide Board Meetings	015-00-00-00000	Operations

Budget Support - Detail Revenues and Expenditures

Cross Reference Number: 84700-000-00-00-00000

2015-17 Biennium

Oregon Medical Board

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
BEGINNING BALANCE						
0025 Beginning Balance						
3400 Other Funds Ltd	3,773,106	3,353,562	3,353,562	4,357,323	4,357,323	-
REVENUE CATEGORIES						
LICENSES AND FEES						
0205 Business Lic and Fees						
3400 Other Funds Ltd	10,218,117	11,288,573	11,288,573	12,090,130	12,090,130	-
CHARGES FOR SERVICES						
0410 Charges for Services						
3400 Other Funds Ltd	71,386	73,053	73,053	72,070	72,070	-
FINES, RENTS AND ROYALTIES						
0505 Fines and Forfeitures						
3400 Other Funds Ltd	146,930	72,351	72,351	120,359	120,359	-
SALES INCOME						
0705 Sales Income						
3400 Other Funds Ltd	47,100	47,435	47,435	46,950	46,950	-
REVENUE CATEGORIES						
3400 Other Funds Ltd	10,483,533	11,481,412	11,481,412	12,329,509	12,329,509	-
TOTAL REVENUE CATEGORIES	\$10,483,533	\$11,481,412	\$11,481,412	\$12,329,509	\$12,329,509	-
TRANSFERS OUT						
2050 Transfer to Other						
3400 Other Funds Ltd	-	(248,160)	(248,160)	(264,045)	(264,045)	-
2443 Tsfr To Oregon Health Authority						

Budget Support - Detail Revenues and Expenditures

Cross Reference Number: 84700-000-00-00-00000

2015-17 Biennium

Oregon Medical Board

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
3400 Other Funds Ltd	(784,380)	(784,943)	(784,943)	(854,061)	(854,061)	-
2590 Tsfr To Or Health & Science U						
3400 Other Funds Ltd	(242,490)	-	-	-	-	-
TRANSFERS OUT						
3400 Other Funds Ltd	(1,026,870)	(1,033,103)	(1,033,103)	(1,118,106)	(1,118,106)	-
TOTAL TRANSFERS OUT	(\$1,026,870)	(\$1,033,103)	(\$1,033,103)	(\$1,118,106)	(\$1,118,106)	-
AVAILABLE REVENUES						
3400 Other Funds Ltd	13,229,769	13,801,871	13,801,871	15,568,726	15,568,726	-
TOTAL AVAILABLE REVENUES	\$13,229,769	\$13,801,871	\$13,801,871	\$15,568,726	\$15,568,726	-
EXPENDITURES						
PERSONAL SERVICES						
SALARIES & WAGES						
3110 Class/Unclass Sal. and Per Diem						
3400 Other Funds Ltd	3,520,473	4,129,515	4,313,558	4,587,726	4,587,726	-
3160 Temporary Appointments						
3400 Other Funds Ltd	139,763	32,853	25,853	26,629	26,629	-
3170 Overtime Payments						
3400 Other Funds Ltd	28,288	6,897	6,897	7,104	7,104	-
3190 All Other Differential						
3400 Other Funds Ltd	73,043	33,540	33,540	34,546	34,546	-
SALARIES & WAGES						
3400 Other Funds Ltd	3,761,567	4,202,805	4,379,848	4,656,005	4,656,005	-
TOTAL SALARIES & WAGES	\$3,761,567	\$4,202,805	\$4,379,848	\$4,656,005	\$4,656,005	-

Oregon Medical Board

Agency Number: 84700

Budget Support - Detail Revenues and Expenditures
2015-17 Biennium
Oregon Medical Board

Cross Reference Number: 84700-000-00-00-00000

<i>Description</i>	<i>2011-13 Actuals</i>	<i>2013-15 Leg Adopted Budget</i>	<i>2013-15 Leg Approved Budget</i>	<i>2015-17 Agency Request Budget</i>	<i>2015-17 Governor's Budget</i>	<i>2015-17 Leg Adopted Budget</i>
OTHER PAYROLL EXPENSES						
3210 Empl. Rel. Bd. Assessments						
3400 Other Funds Ltd	1,260	1,600	1,560	1,760	1,760	-
3220 Public Employees' Retire Cont						
3400 Other Funds Ltd	483,480	594,510	620,951	712,447	712,447	-
3221 Pension Obligation Bond						
3400 Other Funds Ltd	208,186	257,525	252,820	273,735	273,735	-
3230 Social Security Taxes						
3400 Other Funds Ltd	278,986	313,516	327,595	347,445	347,445	-
3240 Unemployment Assessments						
3400 Other Funds Ltd	41,871	2,553	2,553	2,630	2,630	-
3250 Worker's Comp. Assess. (WCD)						
3400 Other Funds Ltd	1,879	2,360	2,302	2,760	2,760	-
3260 Mass Transit Tax						
3400 Other Funds Ltd	21,656	25,217	26,504	27,907	27,907	-
3270 Flexible Benefits						
3400 Other Funds Ltd	1,007,238	1,190,592	1,207,955	1,221,120	1,221,120	-
OTHER PAYROLL EXPENSES						
3400 Other Funds Ltd	2,044,556	2,387,873	2,442,240	2,589,804	2,589,804	-
TOTAL OTHER PAYROLL EXPENSES	\$2,044,556	\$2,387,873	\$2,442,240	\$2,589,804	\$2,589,804	-
P.S. BUDGET ADJUSTMENTS						
3455 Vacancy Savings						
3400 Other Funds Ltd	-	(18,977)	(18,977)	(39,515)	(39,515)	-

Budget Support - Detail Revenues and Expenditures

Cross Reference Number: 84700-000-00-00-00000

2015-17 Biennium

Oregon Medical Board

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
3465 Reconciliation Adjustment						
3400 Other Funds Ltd	-	165,308	165,308	-	-	-
3470 Undistributed (P.S.)						
3400 Other Funds Ltd	-	(83,277)	-	-	-	-
3991 PERS Policy Adjustment						
3400 Other Funds Ltd	-	(144,470)	(144,470)	-	-	-
P.S. BUDGET ADJUSTMENTS						
3400 Other Funds Ltd	-	(81,416)	1,861	(39,515)	(39,515)	-
TOTAL P.S. BUDGET ADJUSTMENTS	-	(\$81,416)	\$1,861	(\$39,515)	(\$39,515)	-
PERSONAL SERVICES						
3400 Other Funds Ltd	5,806,123	6,509,262	6,823,949	7,206,294	7,206,294	-
TOTAL PERSONAL SERVICES	\$5,806,123	\$6,509,262	\$6,823,949	\$7,206,294	\$7,206,294	-
SERVICES & SUPPLIES						
4100 Instate Travel						
3400 Other Funds Ltd	64,257	63,295	63,295	67,144	67,144	-
4125 Out of State Travel						
3400 Other Funds Ltd	672	929	929	957	957	-
4150 Employee Training						
3400 Other Funds Ltd	55,767	53,231	53,231	54,828	54,828	-
4175 Office Expenses						
3400 Other Funds Ltd	210,666	260,523	260,523	261,780	261,780	-
4200 Telecommunications						
3400 Other Funds Ltd	70,558	64,374	64,374	69,805	69,805	-

Budget Support - Detail Revenues and Expenditures
 2015-17 Biennium
 Oregon Medical Board

Cross Reference Number: 84700-000-00-00-00000

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
4225 State Gov. Service Charges						
3400 Other Funds Ltd	194,697	136,725	136,725	225,015	198,715	-
4250 Data Processing						
3400 Other Funds Ltd	185	18,479	18,479	19,033	19,033	-
4275 Publicity and Publications						
3400 Other Funds Ltd	1,299	5,167	5,167	5,322	5,322	-
4300 Professional Services						
3400 Other Funds Ltd	390,210	809,683	730,221	814,930	814,930	-
4315 IT Professional Services						
3400 Other Funds Ltd	112,465	119,658	119,658	123,607	123,607	-
4325 Attorney General						
3400 Other Funds Ltd	355,415	622,416	622,416	742,820	708,042	-
4375 Employee Recruitment and Develop						
3400 Other Funds Ltd	52,267	43,582	43,582	52,098	52,098	-
4400 Dues and Subscriptions						
3400 Other Funds Ltd	5,535	4,736	4,736	4,878	4,878	-
4425 Facilities Rental and Taxes						
3400 Other Funds Ltd	487,665	510,902	510,902	588,858	588,858	-
4575 Agency Program Related S and S						
3400 Other Funds Ltd	136,543	149,162	149,162	181,586	181,586	-
4650 Other Services and Supplies						
3400 Other Funds Ltd	196,273	191,566	191,566	219,262	219,262	-
4675 Undistributed (S.S.)						

Oregon Medical Board

Agency Number: 84700

Budget Support - Detail Revenues and Expenditures
2015-17 Biennium
Oregon Medical Board

Cross Reference Number: 84700-000-00-00-00000

<i>Description</i>	<i>2011-13 Actuals</i>	<i>2013-15 Leg Adopted Budget</i>	<i>2013-15 Leg Approved Budget</i>	<i>2015-17 Agency Request Budget</i>	<i>2015-17 Governor's Budget</i>	<i>2015-17 Leg Adopted Budget</i>
3400 Other Funds Ltd	-	(40,621)	-	-	-	-
4700 Expendable Prop 250 - 5000						
3400 Other Funds Ltd	2,774	20,667	20,667	32,287	32,287	-
4715 IT Expendable Property						
3400 Other Funds Ltd	78,414	123,207	123,207	128,903	128,903	-
SERVICES & SUPPLIES						
3400 Other Funds Ltd	2,415,662	3,157,681	3,118,840	3,593,113	3,532,035	-
TOTAL SERVICES & SUPPLIES	\$2,415,662	\$3,157,681	\$3,118,840	\$3,593,113	\$3,532,035	-
CAPITAL OUTLAY						
5900 Other Capital Outlay						
3400 Other Funds Ltd	-	18,948	18,948	19,516	19,516	-
SPECIAL PAYMENTS						
6443 Spc Pmt to Oregon Health Authority						
3400 Other Funds Ltd	767,327	768,106	768,106	791,149	791,149	-
EXPENDITURES						
3400 Other Funds Ltd	8,989,112	10,453,997	10,729,843	11,610,072	11,548,994	-
TOTAL EXPENDITURES	\$8,989,112	\$10,453,997	\$10,729,843	\$11,610,072	\$11,548,994	-
ENDING BALANCE						
3400 Other Funds Ltd	4,240,657	3,347,874	3,072,028	3,958,654	4,019,732	-
TOTAL ENDING BALANCE	\$4,240,657	\$3,347,874	\$3,072,028	\$3,958,654	\$4,019,732	-
AUTHORIZED POSITIONS						
8150 Class/Unclass Positions	40	40	39	40	40	-
TOTAL AUTHORIZED POSITIONS	40	40	39	40	40	-

Oregon Medical Board

Agency Number: 84700

Budget Support - Detail Revenues and Expenditures

Cross Reference Number: 84700-000-00-00-00000

2015-17 Biennium

Oregon Medical Board

<i>Description</i>	<i>2011-13 Actuals</i>	<i>2013-15 Leg Adopted Budget</i>	<i>2013-15 Leg Approved Budget</i>	<i>2015-17 Agency Request Budget</i>	<i>2015-17 Governor's Budget</i>	<i>2015-17 Leg Adopted Budget</i>
AUTHORIZED FTE						
8250 Class/Unclass FTE Positions	38.79	38.79	38.33	39.79	39.79	-
TOTAL AUTHORIZED FTE	38.79	38.79	38.33	39.79	39.79	-

Budget Support - Detail Revenues and Expenditures
 2015-17 Biennium
 Operations

Cross Reference Number: 84700-015-00-00000

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
BEGINNING BALANCE						
0025 Beginning Balance						
3400 Other Funds Ltd	3,773,106	3,353,562	3,353,562	4,357,323	4,357,323	-
REVENUE CATEGORIES						
LICENSES AND FEES						
0205 Business Lic and Fees						
3400 Other Funds Ltd	10,218,117	11,288,573	11,288,573	12,090,130	12,090,130	-
CHARGES FOR SERVICES						
0410 Charges for Services						
3400 Other Funds Ltd	71,386	73,053	73,053	72,070	72,070	-
FINES, RENTS AND ROYALTIES						
0505 Fines and Forfeitures						
3400 Other Funds Ltd	146,930	72,351	72,351	120,359	120,359	-
SALES INCOME						
0705 Sales Income						
3400 Other Funds Ltd	47,100	47,435	47,435	46,950	46,950	-
REVENUE CATEGORIES						
3400 Other Funds Ltd	10,483,533	11,481,412	11,481,412	12,329,509	12,329,509	-
TOTAL REVENUE CATEGORIES	\$10,483,533	\$11,481,412	\$11,481,412	\$12,329,509	\$12,329,509	-
TRANSFERS OUT						
2050 Transfer to Other						
3400 Other Funds Ltd	-	(248,160)	(248,160)	(264,045)	(264,045)	-
2443 Tsfr To Oregon Health Authority						

Budget Support - Detail Revenues and Expenditures
 2015-17 Biennium
 Operations

Cross Reference Number: 84700-015-00-00-00000

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
3400 Other Funds Ltd	(784,380)	(784,943)	(784,943)	(854,061)	(854,061)	-
2590 Tsfr To Or Health & Science U						
3400 Other Funds Ltd	(242,490)	-	-	-	-	-
TRANSFERS OUT						
3400 Other Funds Ltd	(1,026,870)	(1,033,103)	(1,033,103)	(1,118,106)	(1,118,106)	-
TOTAL TRANSFERS OUT	(\$1,026,870)	(\$1,033,103)	(\$1,033,103)	(\$1,118,106)	(\$1,118,106)	-
AVAILABLE REVENUES						
3400 Other Funds Ltd	13,229,769	13,801,871	13,801,871	15,568,726	15,568,726	-
TOTAL AVAILABLE REVENUES	\$13,229,769	\$13,801,871	\$13,801,871	\$15,568,726	\$15,568,726	-
EXPENDITURES						
PERSONAL SERVICES						
SALARIES & WAGES						
3110 Class/Unclass Sal. and Per Diem						
3400 Other Funds Ltd	3,520,473	4,129,515	4,313,558	4,587,726	4,587,726	-
3160 Temporary Appointments						
3400 Other Funds Ltd	139,763	32,853	25,853	26,629	26,629	-
3170 Overtime Payments						
3400 Other Funds Ltd	28,288	6,897	6,897	7,104	7,104	-
3190 All Other Differential						
3400 Other Funds Ltd	73,043	33,540	33,540	34,546	34,546	-
SALARIES & WAGES						
3400 Other Funds Ltd	3,761,567	4,202,805	4,379,848	4,656,005	4,656,005	-
TOTAL SALARIES & WAGES	\$3,761,567	\$4,202,805	\$4,379,848	\$4,656,005	\$4,656,005	-

Budget Support - Detail Revenues and Expenditures
 2015-17 Biennium
 Operations

Cross Reference Number: 84700-015-00-00-00000

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
OTHER PAYROLL EXPENSES						
3210 Empl. Rel. Bd. Assessments						
3400 Other Funds Ltd	1,260	1,600	1,560	1,760	1,760	-
3220 Public Employees' Retire Cont						
3400 Other Funds Ltd	483,480	594,510	620,951	712,447	712,447	-
3221 Pension Obligation Bond						
3400 Other Funds Ltd	208,186	257,525	252,820	273,735	273,735	-
3230 Social Security Taxes						
3400 Other Funds Ltd	278,986	313,516	327,595	347,445	347,445	-
3240 Unemployment Assessments						
3400 Other Funds Ltd	41,871	2,553	2,553	2,630	2,630	-
3250 Worker's Comp. Assess. (WCD)						
3400 Other Funds Ltd	1,879	2,360	2,302	2,760	2,760	-
3260 Mass Transit Tax						
3400 Other Funds Ltd	21,656	25,217	26,504	27,907	27,907	-
3270 Flexible Benefits						
3400 Other Funds Ltd	1,007,238	1,190,592	1,207,955	1,221,120	1,221,120	-
OTHER PAYROLL EXPENSES						
3400 Other Funds Ltd	2,044,556	2,387,873	2,442,240	2,589,804	2,589,804	-
TOTAL OTHER PAYROLL EXPENSES	\$2,044,556	\$2,387,873	\$2,442,240	\$2,589,804	\$2,589,804	-
P.S. BUDGET ADJUSTMENTS						
3455 Vacancy Savings						
3400 Other Funds Ltd	-	(18,977)	(18,977)	(39,515)	(39,515)	-

Budget Support - Detail Revenues and Expenditures
 2015-17 Biennium
 Operations

Cross Reference Number: 84700-015-00-00-00000

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
3465 Reconciliation Adjustment						
3400 Other Funds Ltd	-	165,308	165,308	-	-	-
3470 Undistributed (P.S.)						
3400 Other Funds Ltd	-	(83,277)	-	-	-	-
3991 PERS Policy Adjustment						
3400 Other Funds Ltd	-	(144,470)	(144,470)	-	-	-
P.S. BUDGET ADJUSTMENTS						
3400 Other Funds Ltd	-	(81,416)	1,861	(39,515)	(39,515)	-
TOTAL P.S. BUDGET ADJUSTMENTS	-	(\$81,416)	\$1,861	(\$39,515)	(\$39,515)	-
PERSONAL SERVICES						
3400 Other Funds Ltd	5,806,123	6,509,262	6,823,949	7,206,294	7,206,294	-
TOTAL PERSONAL SERVICES	\$5,806,123	\$6,509,262	\$6,823,949	\$7,206,294	\$7,206,294	-
SERVICES & SUPPLIES						
4100 Instate Travel						
3400 Other Funds Ltd	64,257	63,295	63,295	67,144	67,144	-
4125 Out of State Travel						
3400 Other Funds Ltd	672	929	929	957	957	-
4150 Employee Training						
3400 Other Funds Ltd	55,767	53,231	53,231	54,828	54,828	-
4175 Office Expenses						
3400 Other Funds Ltd	210,666	260,523	260,523	261,780	261,780	-
4200 Telecommunications						
3400 Other Funds Ltd	70,558	64,374	64,374	69,805	69,805	-

Budget Support - Detail Revenues and Expenditures
 2015-17 Biennium
 Operations

Cross Reference Number: 84700-015-00-00-00000

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
4225 State Gov. Service Charges						
3400 Other Funds Ltd	194,697	136,725	136,725	225,015	198,715	-
4250 Data Processing						
3400 Other Funds Ltd	185	18,479	18,479	19,033	19,033	-
4275 Publicity and Publications						
3400 Other Funds Ltd	1,299	5,167	5,167	5,322	5,322	-
4300 Professional Services						
3400 Other Funds Ltd	390,210	809,683	730,221	814,930	814,930	-
4315 IT Professional Services						
3400 Other Funds Ltd	112,465	119,658	119,658	123,607	123,607	-
4325 Attorney General						
3400 Other Funds Ltd	355,415	622,416	622,416	742,820	708,042	-
4375 Employee Recruitment and Develop						
3400 Other Funds Ltd	52,267	43,582	43,582	52,098	52,098	-
4400 Dues and Subscriptions						
3400 Other Funds Ltd	5,535	4,736	4,736	4,878	4,878	-
4425 Facilities Rental and Taxes						
3400 Other Funds Ltd	487,665	510,902	510,902	588,858	588,858	-
4575 Agency Program Related S and S						
3400 Other Funds Ltd	136,543	149,162	149,162	181,586	181,586	-
4650 Other Services and Supplies						
3400 Other Funds Ltd	196,273	191,566	191,566	219,262	219,262	-
4675 Undistributed (S.S.)						

Budget Support - Detail Revenues and Expenditures

Cross Reference Number: 84700-015-00-00-00000

2015-17 Biennium

Operations

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
3400 Other Funds Ltd	-	(40,621)	-	-	-	-
4700 Expendable Prop 250 - 5000						
3400 Other Funds Ltd	2,774	20,667	20,667	32,287	32,287	-
4715 IT Expendable Property						
3400 Other Funds Ltd	78,414	123,207	123,207	128,903	128,903	-
SERVICES & SUPPLIES						
3400 Other Funds Ltd	2,415,662	3,157,681	3,118,840	3,593,113	3,532,035	-
TOTAL SERVICES & SUPPLIES	\$2,415,662	\$3,157,681	\$3,118,840	\$3,593,113	\$3,532,035	-
CAPITAL OUTLAY						
5900 Other Capital Outlay						
3400 Other Funds Ltd	-	18,948	18,948	19,516	19,516	-
SPECIAL PAYMENTS						
6443 Spc Pmt to Oregon Health Authority						
3400 Other Funds Ltd	767,327	768,106	768,106	791,149	791,149	-
EXPENDITURES						
3400 Other Funds Ltd	8,989,112	10,453,997	10,729,843	11,610,072	11,548,994	-
TOTAL EXPENDITURES	\$8,989,112	\$10,453,997	\$10,729,843	\$11,610,072	\$11,548,994	-
ENDING BALANCE						
3400 Other Funds Ltd	4,240,657	3,347,874	3,072,028	3,958,654	4,019,732	-
TOTAL ENDING BALANCE	\$4,240,657	\$3,347,874	\$3,072,028	\$3,958,654	\$4,019,732	-
AUTHORIZED POSITIONS						
8150 Class/Unclass Positions	40	40	39	40	40	-
TOTAL AUTHORIZED POSITIONS	40	40	39	40	40	-

Budget Support - Detail Revenues and Expenditures
2015-17 Biennium
Operations

Cross Reference Number: 84700-015-00-00-00000

<i>Description</i>	<i>2011-13 Actuals</i>	<i>2013-15 Leg Adopted Budget</i>	<i>2013-15 Leg Approved Budget</i>	<i>2015-17 Agency Request Budget</i>	<i>2015-17 Governor's Budget</i>	<i>2015-17 Leg Adopted Budget</i>
AUTHORIZED FTE						
8250 Class/Unclass FTE Positions	38.79	38.79	38.33	39.79	39.79	-
TOTAL AUTHORIZED FTE	38.79	38.79	38.33	39.79	39.79	-

Description	Agency Request Budget (V-01) 2015-17 Base Budget	Governor's Budget (Y-01) 2015-17 Base Budget	Column 2 minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
BEGINNING BALANCE				
0025 Beginning Balance				
3400 Other Funds Ltd	4,357,323	4,357,323	0	-
REVENUE CATEGORIES				
LICENSES AND FEES				
0205 Business Lic and Fees				
3400 Other Funds Ltd	12,090,130	12,090,130	0	-
CHARGES FOR SERVICES				
0410 Charges for Services				
3400 Other Funds Ltd	72,070	72,070	0	-
FINES, RENTS AND ROYALTIES				
0505 Fines and Forfeitures				
3400 Other Funds Ltd	120,359	120,359	0	-
SALES INCOME				
0705 Sales Income				
3400 Other Funds Ltd	46,950	46,950	0	-
TOTAL REVENUES				
3400 Other Funds Ltd	12,329,509	12,329,509	0	-
TRANSFERS OUT				
2050 Transfer to Other				
3400 Other Funds Ltd	(264,045)	(264,045)	0	-
2443 Tsfr To Oregon Health Authority				
3400 Other Funds Ltd	(854,061)	(854,061)	0	-
TOTAL TRANSFERS OUT				

Description	Agency Request Budget (V-01) 2015-17 Base Budget	Governor's Budget (Y-01) 2015-17 Base Budget	Column 2 minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
3400 Other Funds Ltd	(1,118,106)	(1,118,106)	0	-
AVAILABLE REVENUES				
3400 Other Funds Ltd	15,568,726	15,568,726	0	-
EXPENDITURES				
PERSONAL SERVICES				
SALARIES & WAGES				
3110 Class/Unclass Sal. and Per Diem				
3400 Other Funds Ltd	4,381,302	4,381,302	0	-
3160 Temporary Appointments				
3400 Other Funds Ltd	25,853	25,853	0	-
3170 Overtime Payments				
3400 Other Funds Ltd	6,897	6,897	0	-
3190 All Other Differential				
3400 Other Funds Ltd	33,540	33,540	0	-
TOTAL SALARIES & WAGES				
3400 Other Funds Ltd	4,447,592	4,447,592	0	-
OTHER PAYROLL EXPENSES				
3210 Empl. Rel. Bd. Assessments				
3400 Other Funds Ltd	1,672	1,672	0	-
3220 Public Employees' Retire Cont				
3400 Other Funds Ltd	679,662	679,662	0	-
3221 Pension Obligation Bond				
3400 Other Funds Ltd	252,820	252,820	0	-
3230 Social Security Taxes				

Version / Column Comparison Report - Detail
 2015-17 Biennium
 Operations

Cross Reference Number:84700-015-00-00-00000

Description	Agency Request Budget (V-01) 2015-17 Base Budget	Governor's Budget (Y-01) 2015-17 Base Budget	Column 2 minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
3400 Other Funds Ltd	331,501	331,501	0	-
3240 Unemployment Assessments				
3400 Other Funds Ltd	2,553	2,553	0	-
3250 Worker's Comp. Assess. (WCD)				
3400 Other Funds Ltd	2,622	2,622	0	-
3260 Mass Transit Tax				
3400 Other Funds Ltd	26,504	26,504	0	-
3270 Flexible Benefits				
3400 Other Funds Ltd	1,160,064	1,160,064	0	-
TOTAL OTHER PAYROLL EXPENSES				
3400 Other Funds Ltd	2,457,398	2,457,398	0	-
P.S. BUDGET ADJUSTMENTS				
3455 Vacancy Savings				
3400 Other Funds Ltd	(18,977)	(18,977)	0	-
TOTAL PERSONAL SERVICES				
3400 Other Funds Ltd	6,886,013	6,886,013	0	-
SERVICES & SUPPLIES				
4100 Instate Travel				
3400 Other Funds Ltd	53,295	53,295	0	-
4125 Out of State Travel				
3400 Other Funds Ltd	929	929	0	-
4150 Employee Training				
3400 Other Funds Ltd	53,231	53,231	0	-
4175 Office Expenses				

Version / Column Comparison Report - Detail
2015-17 Biennium
Operations

Cross Reference Number:84700-015-00-00-00000

Description	Agency Request Budget (V-01) 2015-17 Base Budget	Governor's Budget (Y-01) 2015-17 Base Budget	Column 2 minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
3400 Other Funds Ltd	240,854	240,854	0	-
4200 Telecommunications				
3400 Other Funds Ltd	64,374	64,374	0	-
4225 State Gov. Service Charges				
3400 Other Funds Ltd	113,001	113,001	0	-
4250 Data Processing				
3400 Other Funds Ltd	18,479	18,479	0	-
4275 Publicity and Publications				
3400 Other Funds Ltd	5,167	5,167	0	-
4300 Professional Services				
3400 Other Funds Ltd	730,221	730,221	0	-
4315 IT Professional Services				
3400 Other Funds Ltd	119,658	119,658	0	-
4325 Attorney General				
3400 Other Funds Ltd	622,416	622,416	0	-
4375 Employee Recruitment and Develop				
3400 Other Funds Ltd	48,530	48,530	0	-
4400 Dues and Subscriptions				
3400 Other Funds Ltd	4,736	4,736	0	-
4425 Facilities Rental and Taxes				
3400 Other Funds Ltd	510,902	510,902	0	-
4575 Agency Program Related S and S				
3400 Other Funds Ltd	176,297	176,297	0	-
4650 Other Services and Supplies				

Description	Agency Request Budget (V-01) 2015-17 Base Budget	Governor's Budget (Y-01) 2015-17 Base Budget	Column 2 minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
3400 Other Funds Ltd	212,876	212,876	0	-
- 4700 Expendable Prop 250 - 5000				
3400 Other Funds Ltd	20,667	20,667	0	-
4715 IT Expendable Property				
3400 Other Funds Ltd	123,207	123,207	0	-
TOTAL SERVICES & SUPPLIES				
3400 Other Funds Ltd	3,118,840	3,118,840	0	-
CAPITAL OUTLAY				
5900 Other Capital Outlay				
3400 Other Funds Ltd	18,948	18,948	0	-
SPECIAL PAYMENTS				
6443 Spc Pmt to Oregon Health Authority				
3400 Other Funds Ltd	768,106	768,106	0	-
TOTAL EXPENDITURES				
3400 Other Funds Ltd	10,791,907	10,791,907	0	-
ENDING BALANCE				
3400 Other Funds Ltd	4,776,819	4,776,819	0	-
AUTHORIZED POSITIONS				
8150 Class/Unclass Positions	38	38	0	-
AUTHORIZED FTE				
8250 Class/Unclass FTE Positions	37.79	37.79	0	-

Package Comparison Report - Detail
 2015-17 Biennium
 Operations

Cross Reference Number: 84700-015-00-00-00000
 Package: Non-PICS Psnl Svc / Vacancy Factor
 Pkg Group: ESS Pkg Type: 010 Pkg Number: 010

Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		

EXPENDITURES

PERSONAL SERVICES

SALARIES & WAGES

3160 Temporary Appointments

3400 Other Funds Ltd 776 776 0 0.00%

3170 Overtime Payments

3400 Other Funds Ltd 207 207 0 0.00%

3190 All Other Differential

3400 Other Funds Ltd 1,006 1,006 0 0.00%

SALARIES & WAGES

3400 Other Funds Ltd 1,989 1,989 0 0.00%

TOTAL SALARIES & WAGES

\$1,989 \$1,989 \$0 0.00%

OTHER PAYROLL EXPENSES

3220 Public Employees Retire Cont

3400 Other Funds Ltd 192 192 0 0.00%

3221 Pension Obligation Bond

3400 Other Funds Ltd 20,915 20,915 0 0.00%

3230 Social Security Taxes

3400 Other Funds Ltd 152 152 0 0.00%

Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
3240 Unemployment Assessments				
3400 Other Funds Ltd	77	77	0	0.00%
3260 Mass Transit Tax				
3400 Other Funds Ltd	193	193	0	0.00%
OTHER PAYROLL EXPENSES				
3400 Other Funds Ltd	21,529	21,529	0	0.00%
TOTAL OTHER PAYROLL EXPENSES	\$21,529	\$21,529	\$0	0.00%
P.S. BUDGET ADJUSTMENTS				
3455 Vacancy Savings				
3400 Other Funds Ltd	(20,538)	(20,538)	0	0.00%
PERSONAL SERVICES				
3400 Other Funds Ltd	2,980	2,980	0	0.00%
TOTAL PERSONAL SERVICES	\$2,980	\$2,980	\$0	0.00%
EXPENDITURES				
3400 Other Funds Ltd	2,980	2,980	0	0.00%
TOTAL EXPENDITURES	\$2,980	\$2,980	\$0	0.00%
ENDING BALANCE				
3400 Other Funds Ltd	(2,980)	(2,980)	0	0.00%
TOTAL ENDING BALANCE	(\$2,980)	(\$2,980)	\$0	0.00%

Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		

EXPENDITURES

SERVICES & SUPPLIES

4100 Instate Travel

3400 Other Funds Ltd 1,599 1,599 0 0.00%

4125 Out of State Travel

3400 Other Funds Ltd 28 28 0 0.00%

4150 Employee Training

3400 Other Funds Ltd 1,597 1,597 0 0.00%

4175 Office Expenses

3400 Other Funds Ltd 7,226 7,226 0 0.00%

4200 Telecommunications

3400 Other Funds Ltd 1,931 1,931 0 0.00%

4225 State Gov. Service Charges

3400 Other Funds Ltd 112,014 85,714 (26,300) (23.48%)

4250 Data Processing

3400 Other Funds Ltd 554 554 0 0.00%

4275 Publicity and Publications

3400 Other Funds Ltd 155 155 0 0.00%

4300 Professional Services

Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
3400 Other Funds Ltd	21,907	21,907	0	0.00%
4315 IT Professional Services				
3400 Other Funds Ltd	3,590	3,590	0	0.00%
4325 Attorney General				
3400 Other Funds Ltd	119,504	84,726	(34,778)	(29.10%)
4375 Employee Recruitment and Develop				
3400 Other Funds Ltd	1,456	1,456	0	0.00%
4400 Dues and Subscriptions				
3400 Other Funds Ltd	142	142	0	0.00%
4425 Facilities Rental and Taxes				
3400 Other Funds Ltd	22,480	22,480	0	0.00%
4575 Agency Program Related S and S				
3400 Other Funds Ltd	5,289	5,289	0	0.00%
4650 Other Services and Supplies				
3400 Other Funds Ltd	6,386	6,386	0	0.00%
4700 Expendable Prop 250 - 5000				
3400 Other Funds Ltd	620	620	0	0.00%
4715 IT Expendable Property				
3400 Other Funds Ltd	3,696	3,696	0	0.00%

Oregon Medical Board

Agency Number: 84700

Package Comparison Report - Detail
 2015-17 Biennium
 Operations

Cross Reference Number: 84700-015-00-00-00000
 Package: Standard Inflation
 Pkg Group: ESS Pkg Type: 030 Pkg Number: 031

Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
SERVICES & SUPPLIES				
3400 Other Funds Ltd	310,174	249,096	(61,078)	(19.69%)
TOTAL SERVICES & SUPPLIES	\$310,174	\$249,096	(\$61,078)	(19.69%)
CAPITAL OUTLAY				
5900 Other Capital Outlay				
3400 Other Funds Ltd	568	568	0	0.00%
SPECIAL PAYMENTS				
6443 Spc Pmt to Oregon Health Authority				
3400 Other Funds Ltd	23,043	23,043	0	0.00%
EXPENDITURES				
3400 Other Funds Ltd	333,785	272,707	(61,078)	(18.30%)
TOTAL EXPENDITURES	\$333,785	\$272,707	(\$61,078)	(18.30%)
ENDING BALANCE				
3400 Other Funds Ltd	(333,785)	(272,707)	61,078	18.30%
TOTAL ENDING BALANCE	(\$333,785)	(\$272,707)	\$61,078	18.30%

Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
EXPENDITURES				
SERVICES & SUPPLIES				
4300 Professional Services				
3400 Other Funds Ltd	62,802	62,802	0	0.00%
4315 IT Professional Services				
3400 Other Funds Ltd	359	359	0	0.00%
SERVICES & SUPPLIES				
3400 Other Funds Ltd	63,161	63,161	0	0.00%
TOTAL SERVICES & SUPPLIES	\$63,161	\$63,161	\$0	0.00%
EXPENDITURES				
3400 Other Funds Ltd	63,161	63,161	0	0.00%
TOTAL EXPENDITURES	\$63,161	\$63,161	\$0	0.00%
ENDING BALANCE				
3400 Other Funds Ltd	(63,161)	(63,161)	0	0.00%
TOTAL ENDING BALANCE	(\$63,161)	(\$63,161)	\$0	0.00%

Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
EXPENDITURES				
SERVICES & SUPPLIES				
4425 Facilities Rental and Taxes				
3400 Other Funds Ltd	50,000	50,000	0	0.00%
SERVICES & SUPPLIES				
3400 Other Funds Ltd	50,000	50,000	0	0.00%
TOTAL SERVICES & SUPPLIES	\$50,000	\$50,000	\$0	0.00%
EXPENDITURES				
3400 Other Funds Ltd	50,000	50,000	0	0.00%
TOTAL EXPENDITURES	\$50,000	\$50,000	\$0	0.00%
ENDING BALANCE				
3400 Other Funds Ltd	(50,000)	(50,000)	0	0.00%
TOTAL ENDING BALANCE	(\$50,000)	(\$50,000)	\$0	0.00%

Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		

EXPENDITURES

PERSONAL SERVICES

SALARIES & WAGES

3110 Class/Unclass Sal. and Per Diem

3400 Other Funds Ltd	138,336	138,336	0	0.00%
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SALARIES & WAGES

3400 Other Funds Ltd	138,336	138,336	0	0.00%
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TOTAL SALARIES & WAGES	\$138,336	\$138,336	\$0	0.00%
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OTHER PAYROLL EXPENSES

3210 Empl. Rel. Bd. Assessments

3400 Other Funds Ltd	44	44	0	0.00%
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3220 Public Employees Retire Cont

3400 Other Funds Ltd	21,843	21,843	0	0.00%
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3230 Social Security Taxes

3400 Other Funds Ltd	10,583	10,583	0	0.00%
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3250 Workers Comp. Assess. (WCD)

3400 Other Funds Ltd	69	69	0	0.00%
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3260 Mass Transit Tax

3400 Other Funds Ltd	830	830	0	0.00%
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Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
3270 Flexible Benefits				
3400 Other Funds Ltd	30,528	30,528	0	0.00%
OTHER PAYROLL EXPENSES				
3400 Other Funds Ltd	63,897	63,897	0	0.00%
TOTAL OTHER PAYROLL EXPENSES	\$63,897	\$63,897	\$0	0.00%
PERSONAL SERVICES				
3400 Other Funds Ltd	202,233	202,233	0	0.00%
TOTAL PERSONAL SERVICES	\$202,233	\$202,233	\$0	0.00%
SERVICES & SUPPLIES				
4175 Office Expenses				
3400 Other Funds Ltd	6,850	6,850	0	0.00%
4200 Telecommunications				
3400 Other Funds Ltd	1,750	1,750	0	0.00%
4425 Facilities Rental and Taxes				
3400 Other Funds Ltd	4,776	4,776	0	0.00%
4700 Expendable Prop 250 - 5000				
3400 Other Funds Ltd	5,500	5,500	0	0.00%
4715 IT Expendable Property				
3400 Other Funds Ltd	1,000	1,000	0	0.00%

Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
SERVICES & SUPPLIES				
3400 Other Funds Ltd	19,876	19,876	0	0.00%
TOTAL SERVICES & SUPPLIES	\$19,876	\$19,876	\$0	0.00%
EXPENDITURES				
3400 Other Funds Ltd	222,109	222,109	0	0.00%
TOTAL EXPENDITURES	\$222,109	\$222,109	\$0	0.00%
ENDING BALANCE				
3400 Other Funds Ltd	(222,109)	(222,109)	0	0.00%
TOTAL ENDING BALANCE	(\$222,109)	(\$222,109)	\$0	0.00%
AUTHORIZED POSITIONS				
8150 Class/Unclass Positions	1	1	0	0.00%
AUTHORIZED FTE				
8250 Class/Unclass FTE Positions	1.00	1.00	0.00	0.00%

Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		

EXPENDITURES

PERSONAL SERVICES

SALARIES & WAGES

3110 Class/Unclass Sal. and Per Diem

3400 Other Funds Ltd	63,264	63,264	0	0.00%
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SALARIES & WAGES

3400 Other Funds Ltd	63,264	63,264	0	0.00%
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TOTAL SALARIES & WAGES	\$63,264	\$63,264	\$0	0.00%
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OTHER PAYROLL EXPENSES

3210 Empl. Rel. Bd. Assessments

3400 Other Funds Ltd	44	44	0	0.00%
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3220 Public Employees Retire Cont

3400 Other Funds Ltd	9,989	9,989	0	0.00%
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3230 Social Security Taxes

3400 Other Funds Ltd	4,840	4,840	0	0.00%
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3250 Workers Comp. Assess. (WCD)

3400 Other Funds Ltd	69	69	0	0.00%
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3260 Mass Transit Tax

3400 Other Funds Ltd	380	380	0	0.00%
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Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
3270 Flexible Benefits				
3400 Other Funds Ltd	30,528	30,528	0	0.00%
OTHER PAYROLL EXPENSES				
3400 Other Funds Ltd	45,850	45,850	0	0.00%
TOTAL OTHER PAYROLL EXPENSES	\$45,850	\$45,850	\$0	0.00%
PERSONAL SERVICES				
3400 Other Funds Ltd	109,114	109,114	0	0.00%
TOTAL PERSONAL SERVICES	\$109,114	\$109,114	\$0	0.00%
SERVICES & SUPPLIES				
4175 Office Expenses				
3400 Other Funds Ltd	6,850	6,850	0	0.00%
4200 Telecommunications				
3400 Other Funds Ltd	1,750	1,750	0	0.00%
4375 Employee Recruitment and Develop				
3400 Other Funds Ltd	2,112	2,112	0	0.00%
4700 Expendable Prop 250 - 5000				
3400 Other Funds Ltd	5,500	5,500	0	0.00%
4715 IT Expendable Property				
3400 Other Funds Ltd	1,000	1,000	0	0.00%

Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
SERVICES & SUPPLIES				
3400 Other Funds Ltd	17,212	17,212	0	0.00%
TOTAL SERVICES & SUPPLIES	\$17,212	\$17,212	\$0	0.00%
EXPENDITURES				
3400 Other Funds Ltd	126,326	126,326	0	0.00%
TOTAL EXPENDITURES	\$126,326	\$126,326	\$0	0.00%
ENDING BALANCE				
3400 Other Funds Ltd	(126,326)	(126,326)	0	0.00%
TOTAL ENDING BALANCE	(\$126,326)	(\$126,326)	\$0	0.00%
AUTHORIZED POSITIONS				
8150 Class/Unclass Positions	1	1	0	0.00%
AUTHORIZED FTE				
8250 Class/Unclass FTE Positions	1.00	1.00	0.00	0.00%

Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
EXPENDITURES				
PERSONAL SERVICES				
SALARIES & WAGES				
3110 Class/Unclass Sal. and Per Diem				
3400 Other Funds Ltd	4,824	4,824	0	0.00%
SALARIES & WAGES				
3400 Other Funds Ltd	4,824	4,824	0	0.00%
TOTAL SALARIES & WAGES	\$4,824	\$4,824	\$0	0.00%
OTHER PAYROLL EXPENSES				
3220 Public Employees Retire Cont				
3400 Other Funds Ltd	761	761	0	0.00%
3230 Social Security Taxes				
3400 Other Funds Ltd	369	369	0	0.00%
OTHER PAYROLL EXPENSES				
3400 Other Funds Ltd	1,130	1,130	0	0.00%
TOTAL OTHER PAYROLL EXPENSES	\$1,130	\$1,130	\$0	0.00%
PERSONAL SERVICES				
3400 Other Funds Ltd	5,954	5,954	0	0.00%
TOTAL PERSONAL SERVICES	\$5,954	\$5,954	\$0	0.00%

Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
EXPENDITURES				
3400 Other Funds Ltd	5,954	5,954	0	0.00%
TOTAL EXPENDITURES	\$5,954	\$5,954	\$0	0.00%
ENDING BALANCE				
3400 Other Funds Ltd	(5,954)	(5,954)	0	0.00%
TOTAL ENDING BALANCE	(\$5,954)	(\$5,954)	\$0	0.00%

Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
EXPENDITURES				
SERVICES & SUPPLIES				
4100 Instate Travel				
3400 Other Funds Ltd	12,250	12,250	0	0.00%
4325 Attorney General				
3400 Other Funds Ltd	900	900	0	0.00%
4425 Facilities Rental and Taxes				
3400 Other Funds Ltd	700	700	0	0.00%
SERVICES & SUPPLIES				
3400 Other Funds Ltd	13,850	13,850	0	0.00%
TOTAL SERVICES & SUPPLIES	\$13,850	\$13,850	\$0	0.00%
EXPENDITURES				
3400 Other Funds Ltd	13,850	13,850	0	0.00%
TOTAL EXPENDITURES	\$13,850	\$13,850	\$0	0.00%
ENDING BALANCE				
3400 Other Funds Ltd	(13,850)	(13,850)	0	0.00%
TOTAL ENDING BALANCE	(\$13,850)	(\$13,850)	\$0	0.00%

12/29/14 REPORT NO.: PPDPLBUDCL
 REPORT: SUMMARY LIST BY PKG BY SUMMARY XREF
 AGENCY:84700 OREGON MEDICAL BOARD
 SUMMARY XREF:015-00-00 000 Operations

DEPT. OF ADMIN. SVCS. -- PPDB PICS SYSTEM

PKG	CLASS	COMP	DESCRIPTION	POS CNT	FTE	MOS	AVERAGE RATE	GF SAL	OF SAL	FF SAL	LF SAL	AF SAL
000	B	Y7500	AE BOARD AND COMMISSION MEMBER		.00	.00	0.00		117,382			117,382
000	MEAHZ7010	HA	PRINCIPAL EXECUTIVE/MANAGER F	1	1.00	24.00	9,506.00		228,144			228,144
000	MENNZ0830	AA	EXECUTIVE ASSISTANT	1	1.00	24.00	4,111.00		98,664			98,664
000	MENNZ0873	AA	OPERATIONS & POLICY ANALYST 4	1	1.00	24.00	6,351.00		152,424			152,424
000	MESNZ7006	AA	PRINCIPAL EXECUTIVE/MANAGER D	1	1.00	24.00	7,343.00		176,232			176,232
000	MMN X0872	AA	OPERATIONS & POLICY ANALYST 3	1	1.00	24.00	6,663.00		159,912			159,912
000	MMS X1219	AA	SUPERVISING ACCOUNTANT	1	1.00	24.00	5,231.00		125,544			125,544
000	MMS X1322	AA	HUMAN RESOURCE ANALYST 3	1	1.00	24.00	5,764.00		138,336			138,336
000	MMS X7004	AA	PRINCIPAL EXECUTIVE/MANAGER C	1	1.00	24.00	4,742.00		113,808			113,808
000	MMS X7006	AA	PRINCIPAL EXECUTIVE/MANAGER D	1	1.00	24.00	6,998.00		167,952			167,952
000	MNNNZ7518	AA	SUPERVISING PHYSICIAN	1	1.00	24.00	15,214.00		365,136			365,136
000	OA C0104	AA	OFFICE SPECIALIST 2	9	8.79	210.90	2,901.44		612,656			612,656
000	OA C0107	AA	ADMINISTRATIVE SPECIALIST 1	6	6.00	144.00	3,251.16		468,168			468,168
000	OA C0108	AA	ADMINISTRATIVE SPECIALIST 2	1	1.00	24.00	3,974.00		95,376			95,376
000	OA C0211	AA	ACCOUNTING TECHNICIAN 2	2	2.00	48.00	3,121.50		149,832			149,832
000	OA C0871	AA	OPERATIONS & POLICY ANALYST 2	1	1.00	24.00	4,569.00		109,656			109,656
000	OA C1483	IA	INFO SYSTEMS SPECIALIST 3	1	1.00	24.00	3,639.00		87,336			87,336
000	OA C1485	IA	INFO SYSTEMS SPECIALIST 5	1	1.00	24.00	5,805.00		139,320			139,320
000	OA C1487	IA	INFO SYSTEMS SPECIALIST 7	1	1.00	24.00	6,272.00		150,528			150,528
000	OA C5233	AA	INVESTIGATOR 3	6	6.00	144.00	5,034.00		724,896			724,896
000				38	37.79	906.90	3,021.16		4,381,302			4,381,302

12/29/14 REPORT NO.: PPDPLBUDCL
REPORT: SUMMARY LIST BY PKG BY SUMMARY XREF
AGENCY:84700 OREGON MEDICAL BOARD
SUMMARY XREF:015-00-00 103 Operations

DEPT. OF ADMIN. SVCS. -- PPDB PICS SYSTEM

PAGE 2
2015-17
PROD FILE
PICS SYSTEM: BUDGET PREPARATION

PKG	CLASS	COMP	DESCRIPTION	POS CNT	FTE	MOS	AVERAGE RATE	GF SAL	OF SAL	FF SAL	LF SAL	AF SAL
103	MENNZ0873	AA	OPERATIONS & POLICY ANALYST 4	1	1.00	24.00	5,764.00		138,336			138,336
103				1	1.00	24.00	5,764.00		138,336			138,336

12/29/14 REPORT NO.: PPDPLBUDCL
REPORT: SUMMARY LIST BY PKG BY SUMMARY XREF
AGENCY:84700 OREGON MEDICAL BOARD
SUMMARY XREF:015-00-00 104 Operations

DEPT. OF ADMIN. SVCS. -- PPDB PICS SYSTEM

2015-17
PICS SYSTEM: BUDGET PREPARATION
PAGE 3
PROD FILE

PKG	CLASS	COMP	DESCRIPTION	POS CNT	FTE	MOS	AVERAGE RATE	GF SAL	OF SAL	FF SAL	LF SAL	AF SAL
104	OA	C0118 AA	EXECUTIVE SUPPORT SPECIALIST 1	1	1.00	24.00	2,636.00		63,264			63,264
104				1	1.00	24.00	2,636.00		63,264			63,264

12/29/14 REPORT NO.: PPDPLBUDCL
 REPORT: SUMMARY LIST BY PKG BY SUMMARY XREF
 AGENCY:84700 OREGON MEDICAL BOARD
 SUMMARY XREF:015-00-00 105 Operations

DEPT. OF ADMIN. SVCS. -- PPDB PICS SYSTEM

PAGE 4
 2015-17
 PROD FILE
 PICS SYSTEM: BUDGET PREPARATION

PKG	CLASS	COMP	DESCRIPTION	POS CNT	FTE	MOS	AVERAGE RATE	GF SAL	OF SAL	FF SAL	LF SAL	AF SAL
105	OA	C0104	AA OFFICE SPECIALIST 2	6-	5.79-	138.90-	2,938.66		409,112-			409,112-
105	OA	C0107	AA ADMINISTRATIVE SPECIALIST 1	6	5.79	138.90	2,972.16		413,936			413,936
105					.00	.00	2,955.41		4,824			4,824
				40	39.79	954.90	3,042.65		4,587,726			4,587,726
				40	39.79	954.90	3,042.65		4,587,726			4,587,726

12/29/14 REPORT NO.: PPDPLBUDCL
REPORT: SUMMARY LIST BY PKG BY SUMMARY XREF
AGENCY:84700 OREGON MEDICAL BOARD
SUMMARY XREF:015-00-00 105 Operations

DEPT. OF ADMIN. SVCS. -- PPDB PICS SYSTEM

2015-17
PICS SYSTEM: BUDGET PREPARATION
PAGE 5
PROD FILE

PKG	CLASS	COMP	DESCRIPTION	POS CNT	FTE	MOS	AVERAGE RATE	GF SAL	OF SAL	FF SAL	LF SAL	AF SAL
				40	39.79	954.90	3,042.65		4,587,726			4,587,726

PKG	CLASS	COMP	DESCRIPTION	POS CNT	FTE	MOS	AVERAGE RATE	GF SAL	OF SAL	FF SAL	LF SAL	AF SAL
000	B	Y7500	AE BOARD AND COMMISSION MEMBER		.00	.00	0.00		117,382			117,382
000	MEAHZ	7010	HA PRINCIPAL EXECUTIVE/MANAGER F	1	1.00	24.00	9,506.00		228,144			228,144
000	MENNZ	0830	AA EXECUTIVE ASSISTANT	1	1.00	24.00	4,111.00		98,664			98,664
103	MENNZ	0873	AA OPERATIONS & POLICY ANALYST 4	2	2.00	48.00	6,057.50		290,760			290,760
000	MESNZ	7006	AA PRINCIPAL EXECUTIVE/MANAGER D	1	1.00	24.00	7,343.00		176,232			176,232
000	MMN	X0872	AA OPERATIONS & POLICY ANALYST 3	1	1.00	24.00	6,663.00		159,912			159,912
000	MMS	X1219	AA SUPERVISING ACCOUNTANT	1	1.00	24.00	5,231.00		125,544			125,544
000	MMS	X1322	AA HUMAN RESOURCE ANALYST 3	1	1.00	24.00	5,764.00		138,336			138,336
000	MMS	X7004	AA PRINCIPAL EXECUTIVE/MANAGER C	1	1.00	24.00	4,742.00		113,808			113,808
000	MMS	X7006	AA PRINCIPAL EXECUTIVE/MANAGER D	1	1.00	24.00	6,998.00		167,952			167,952
000	MNNNZ	7518	AA SUPERVISING PHYSICIAN	1	1.00	24.00	15,214.00		365,136			365,136
105	OA	C0104	AA OFFICE SPECIALIST 2	3	3.00	72.00	2,916.33		203,544			203,544
105	OA	C0107	AA ADMINISTRATIVE SPECIALIST 1	12	11.79	282.90	3,111.66		882,104			882,104
000	OA	C0108	AA ADMINISTRATIVE SPECIALIST 2	1	1.00	24.00	3,974.00		95,376			95,376
104	OA	C0118	AA EXECUTIVE SUPPORT SPECIALIST 1	1	1.00	24.00	2,636.00		63,264			63,264
000	OA	C0211	AA ACCOUNTING TECHNICIAN 2	2	2.00	48.00	3,121.50		149,832			149,832
000	OA	C0871	AA OPERATIONS & POLICY ANALYST 2	1	1.00	24.00	4,569.00		109,656			109,656
000	OA	C1483	IA INFO SYSTEMS SPECIALIST 3	1	1.00	24.00	3,639.00		87,336			87,336
000	OA	C1485	IA INFO SYSTEMS SPECIALIST 5	1	1.00	24.00	5,805.00		139,320			139,320
000	OA	C1487	IA INFO SYSTEMS SPECIALIST 7	1	1.00	24.00	6,272.00		150,528			150,528
000	OA	C5233	AA INVESTIGATOR 3	6	6.00	144.00	5,034.00		724,896			724,896
				40	39.79	954.90	3,042.65		4,587,726			4,587,726

12/29/14 REPORT NO.: PPDPLAGYCL
REPORT: SUMMARY LIST BY PKG BY AGENCY
AGENCY:84700 OREGON MEDICAL BOARD

DEPT. OF ADMIN. SVCS. -- PPDB PICS SYSTEM

PAGE 2
2015-17
PROD FILE
PICS SYSTEM: BUDGET PREPARATION

PKG	CLASS	COMP	DESCRIPTION	POS CNT	FTE	MOS	AVERAGE RATE	GF SAL	OF SAL	FF SAL	LF SAL	AF SAL
				40	39.79	954.90	3,042.65		4,587,726			4,587,726

12/29/14 REPORT NO.: PPDPLWSBUD
 REPORT: DETAIL LISTING BY SUMMARY XREF AGENCY
 AGENCY: 84700 OREGON MEDICAL BOARD
 SUMMARY XREF: 015-00-00 103 Operations

DEPT. OF ADMIN. SVCS. -- PPDB PICS SYSTEM

PAGE 1
 2015-17
 PROD FILE
 PICS SYSTEM: BUDGET PREPARATION

POSITION NUMBER	AUTH NO	ORG STRUC	F POS PKG Y TYP	CLASS COMP	S T RNG P	POS CNT	FTE	BUDGET RATE	MOS	GF SAL	OF SAL	FF SAL	LF SAL	T R K
0000875	001232680	015-01-00-00000	103 0 PF	MENNZ0873 AA	32 02	1	1.00	5,764.00	24.00		138,336			
EST DATE: 2015/07/01			EXP DATE: 9999/01/01											
			103			1	1.00		24.00		138,336			

12/29/14 REPORT NO.: PPDPLWSBUD
 REPORT: DETAIL LISTING BY SUMMARY XREF AGENCY
 AGENCY: 84700 OREGON MEDICAL BOARD
 SUMMARY XREF: 015-00-00 104 Operations

DEPT. OF ADMIN. SVCS. -- PPDB PICS SYSTEM

2015-17
 PICS SYSTEM: BUDGET PREPARATION
 PAGE 2
 PROD FILE

POSITION NUMBER	AUTH NO	ORG STRUC	PKG Y	F POS TYP	CLASS	COMP	RNG P	S T POS CNT	FTE	BUDGET RATE	MOS	GF SAL	OF SAL	FF SAL	LF SAL	T R K	
0000876	001232820	015-01-00-00000	104	0	PF	OA	C0118 AA	17 02	1	1.00	2,636.00	24.00		63,264			
EST DATE: 2015/07/01			EXP DATE: 9999/01/01														
			104						1	1.00		24.00		63,264			

12/29/14 REPORT NO.: PPDPLWSBUD
 REPORT: DETAIL LISTING BY SUMMARY XREF AGENCY
 AGENCY: 84700 OREGON MEDICAL BOARD
 SUMMARY XREF: 015-00-00 105 Operations

DEPT. OF ADMIN. SVCS. -- PPDB PICS SYSTEM

PAGE 3
 2015-17
 PROD FILE
 PICS SYSTEM: BUDGET PREPARATION

POSITION NUMBER	AUTH NO	ORG STRUC	F POS PKG Y TYP	CLASS COMP	S T POS RNG P	CNT	FTE	BUDGET RATE	MOS	GF SAL	OF SAL	FF SAL	LF SAL	T R K
0000533	000500630	015-01-00-00000	105 0 PF	OA C0104 AA	15 02	1-	1.00-	2,435.00	24.00-		58,440-			
EST DATE: 2015/07/01 EXP DATE: 9999/01/01														
0000533	000500630	015-01-00-00000	105 0 PF	OA C0107 AA	17 02	1	1.00	2,636.00	24.00		63,264			
EST DATE: 2015/07/01 EXP DATE: 9999/01/01														
0000534	000500640	015-01-00-00000	105 0 PF	OA C0104 AA	15 08	1-	1.00-	3,139.00	24.00-		75,336-			
EST DATE: 2015/07/01 EXP DATE: 9999/01/01														
0000534	000500640	015-01-00-00000	105 0 PF	OA C0107 AA	17 06	1	1.00	3,139.00	24.00		75,336			
EST DATE: 2015/07/01 EXP DATE: 9999/01/01														
0000653	001117310	015-01-00-00000	105 0 PP	OA C0104 AA	15 05	1-	.79-	2,756.00	18.90-		52,088-			
EST DATE: 2015/07/01 EXP DATE: 9999/01/01														
0000653	001117310	015-01-00-00000	105 0 PP	OA C0107 AA	17 03	1	.79	2,756.00	18.90		52,088			
EST DATE: 2015/07/01 EXP DATE: 9999/01/01														
0000657	000500770	015-01-00-00000	105 0 PF	OA C0104 AA	15 09	1-	1.00-	3,290.00	24.00-		78,960-			
EST DATE: 2015/07/01 EXP DATE: 9999/01/01														
0000657	000500770	015-01-00-00000	105 0 PF	OA C0107 AA	17 07	1	1.00	3,290.00	24.00		78,960			
EST DATE: 2015/07/01 EXP DATE: 9999/01/01														
0000690	000983530	015-01-00-00000	105 0 PF	OA C0104 AA	15 08	1-	1.00-	3,139.00	24.00-		75,336-			
EST DATE: 2015/07/01 EXP DATE: 9999/01/01														
0000690	000983530	015-01-00-00000	105 0 PF	OA C0107 AA	17 06	1	1.00	3,139.00	24.00		75,336			
EST DATE: 2015/07/01 EXP DATE: 9999/01/01														
0000691	000983560	015-01-00-00000	105 0 PF	OA C0104 AA	15 06	1-	1.00-	2,873.00	24.00-		68,952-			
EST DATE: 2015/07/01 EXP DATE: 9999/01/01														
0000691	000983560	015-01-00-00000	105 0 PF	OA C0107 AA	17 04	1	1.00	2,873.00	24.00		68,952			
EST DATE: 2015/07/01 EXP DATE: 9999/01/01														
			105				.00		.00		4,824			
						2	2.00		48.00		206,424			
						2	2.00		48.00		206,424			

12/29/14 REPORT NO.: PFDPLWSBUD
 REPORT: DETAIL LISTING BY SUMMARY XREF AGENCY
 AGENCY: 84700 OREGON MEDICAL BOARD
 SUMMARY XREF: 015-00-00 105 Operations

DEPT. OF ADMIN. SVCS. -- PPDB PICS SYSTEM

PAGE 4
 2015-17
 PROD FILE
 PICS SYSTEM: BUDGET PREPARATION

POSITION NUMBER	AUTH NO	ORG STRUC	F POS PKG Y TYP	CLASS COMP	S T RNG P	POS CNT	FTE	BUDGET RATE	MOS	GF SAL	OF SAL	FF SAL	LF SAL	T R K
						2	2.00		48.00		206,424			