Ways and Means Written Reference Materials

Oregon Medical Board, Agency 847

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Agency mission, goals, and historical context

The Oregon Medical Board ("Board" or "OMB") is an entirely other-funded agency established in 1889 to ensure that only qualified and competent individuals are licensed to practice medicine in Oregon. The Board is responsible for licensure and regulation of the professions of medical doctor (MD), doctor of osteopathic medicine (DO), doctor of podiatric medicine (DPM), physician assistant (PA), and licensed acupuncturist (LAc).

The 14 members of the Board (seven medical doctors, two doctors of osteopathic medicine, one podiatric physician, one physician assistant, and three public members) are appointed by the Governor and confirmed by the Senate. Board members have ultimate responsibility for the activities of the agency and the decisions concerning licensure, discipline, and regulations through administrative rules on numerous medical and ethical issues. Board members also appoint and review the work of the Executive Director; review the findings and recommendations of the Acupuncture and Emergency Medical Services Advisory Committees; guide agency initiatives and communications through the Legislative and Editorial Committees; and monitor and inform the agency on developing trends and issues in medical practice.

Current board membership and committee assignments are available on the Board's website at https://www.oregon.gov/omb/board/Pages/default.aspx.

The Board's purpose is public safety. Public protection is achieved through prevention, remediation, discipline, and ensuring members of the public are informed about their medical providers and Board processes. The Board operates in an atmosphere of constant change due to ongoing developments in the medical profession. In responding to these changes, the Board is guided by its values of integrity, accountability, excellence, customer service, and equity.

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 OMB is also focused on fostering licensee wellness and ensuring equitable health care is available to all Oregonians.

The Board is governed by Oregon Revised Statute (ORS) Chapter 677, known as the Medical Practice Act, and Oregon Administrative Rules (OAR) Chapter 847. In recognizing that the practice of medicine is a privilege, not a right, the Legislature established the Board in 1889, tasking it with the responsibility to protect the public from unauthorized or unqualified persons

and from unprofessional conduct by licensed persons. The Board has proudly protected the people of Oregon for more than 130 years.

The 2023-25 Governor's budget is \$18,223,626. This funding will provide the resources needed to achieve the goal of ensuring public safety through prevention and remediation. It will also allow the Board to continue to meet performance measures efficiently.

Summary of programs

The Board's purpose is public safety, which is achieved through prevention, remediation, and ensuring all members of the public have needed information about their medical providers and can equally access Board services.

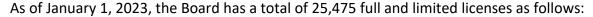
The Board is responsible for licensing, regulating, and disciplining the professions of medical doctor (MD), doctor of osteopathic medicine (DO), doctor of podiatric medicine (DPM), physician assistant (PA), and acupuncturist (LAc) to ensure that only qualified and competent individuals are licensed to practice. The Board has only one program consisting of 42 FTE in several functional areas or sections.

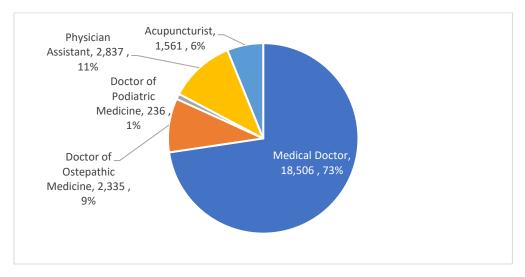
The Board grants licenses only after careful review of an applicant's education, training, employment history, and criminal background to ensure that the applicant is qualified and competent to practice medicine safely in Oregon. Licensing requirements are consistent with the rigorous standards or "best practices" recommended by the Federation of State Medical Boards and aimed at ensuring all Oregonians have access to medical providers who meet statewide standards for licensure. Patients, health systems, and insurers rely on the Board's careful and thorough evaluation of each applicant. New licenses are issued daily and renewed biennially.

The OMB's Investigations and Compliance Section responds to complaints from the community alleging that licensees may have violated 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. The OMB utilizes Oregon's Health Professionals' Services Program (HPSP) to rehabilitate licensees with substance use disorders, mental health disorders, or who are dually diagnosed. Investigative and disciplinary procedures are consistent and adhere to state law to ensure equitable treatment of each complaint and that licensees receive expected due process. Disciplinary orders are issued monthly after each full Board conference call.

Customers and partner organizations include the public, applicants and licensees, other state and national boards and agencies, professional organizations, health care systems and hospitals, medical schools, physician assistant programs, acupuncture schools, and health

insurance systems. The Board strives to be transparent and to provide customers with the ability to access to its services. The Board informs interested parties about Board processes and actions through interactions with agency staff, the agency website, the quarterly newsletter, community presentations, and multiple other channels of communication. The Board also partners with professional associations and others to achieve common goals.





Agency organizational information

The Board is 100% other funded; it receives no General Fund dollars. The Board's revenue comes primarily from licensee fees, which are held in trust for the purpose of supporting the Board's programs and serving our licensees and the public.

The agency is divided into four service areas-licensing, investigations and compliance, administrative and business services, and administration and communications.

These services support the agency's focus on protecting the public and promoting equitable access to quality health care.

With 42 FTE, the OMB is a relatively small agency. Board staff work together to continuously improve processes and provide services in the most effective and efficient way possible. Our staff also work as a team in support of various statewide charitable fundraising activities.



Licensing

The Licensing Section is responsible for both the initial licensure and license renewal of all health care 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 are granted the privilege to practice medicine in Oregon.

This team is responsible for issuing over 3,300 licenses annually and renewing over 20,000 licenses every two years.

Services are primarily provided through our online services website, allowing individuals to apply for, renew, or reactivate their licenses, check the status of their applications, print their certificates of registration, and more. In addition, our call center staff provide services by phone and email.

Investigations and Compliance

While decisions regarding disciplinary matters are made by the 14-member Board, this section is responsible for triaging incoming complaints, acting as the neutral fact-gatherer, and supplying complete information to the Board so that Board members may make decisions based on the available evidence.

This section receives 700-800 written complaints annually against licensees and applicants and conducts investigations as required by statute. This section assists the public and licensees in filing complaints and understanding the investigative process. For licensees who are subject to Board discipline, this section monitors compliance with their Board orders and Agreements.

Services are primarily provided through phone, email, and written communications with consumers and licensees, review of records received, and through consultation with medical experts.

Administrative and Business Services

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

This section of the agency performs all accounting, procurement, and contracting functions, coordinates facilities and equipment, and administers all information systems for the agency.

Administration and Communications

The Administration and Communications Section 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 and consistent with the agency's values.

This team develops agency communications, including our quarterly newsletter and other published and online materials and works with partners and impacted parties on policy initiatives such as licensee sexual misconduct, disparities in health outcomes, opioid education, and licensee wellness. The members of this team manage the agency's administrative rules; respond to public records requests; develop, draft, monitor, and help to implement legislative concepts; provide educational outreach to licensees; and provide the human resource management for the agency.

Agency performance goals

The Oregon Medical Board's long- and short-range planning is directed by its mission and enacted through the OMB Strategic Plan. The Strategic Plan was initially 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 2023-25 budget and ensure the Board is focused on meeting its key performance measures (KPMs). The OMB's high-level goals, as identified within the Strategic Plan, are shaped by the agency mission and incorporate the agency's values of:

- Integrity a commitment to acting honestly, ethically, and fairly
- Accountability a willingness to accept responsibility for actions in a transparent manner
- Excellence an expectation of the highest quality work and innovation
- Customer Service a dedication to provide equitable, caring service to all Oregonians with professionalism and respect
- Equity a devotion to creating and fostering an environment where everyone has access and opportunity to thrive

The complete Strategic Plan is available on the agency website at https://www.oregon.gov/omb/board/about/Documents/Strategic%20Plan.pdf.

The Board prioritizes equity, diversity and inclusion. The agency's Affirmative Action Plan is available online at https://www.oregon.gov/omb/board/about/Documents/2021-2023%20AA%20Plan%203.17.21%20Final.pdf.

The Board's comprehensive set of Key Performance Measures (KPMs) help assess and manage our performance. Performance measure results are reviewed regularly to quickly identify and respond to variances. The Board expects to continue to meet or exceed its KPMs in 2023-25 and beyond through streamlining and process improvement.

Key Performance Measure	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
License Appropriately	\checkmark	\checkmark	\checkmark	\checkmark	✓
Discipline Appropriately	✓		✓	✓	✓
Monitor Licensees who are Disciplined	✓	✓	✓	✓	✓
License Efficiently	✓	✓	✓	✓	✓
Renew Licenses Efficiently	✓	✓	✓	✓	✓
Customer Satisfaction	✓	✓	✓	✓	✓
Board Best Practices	✓	✓	✓	✓	✓

[✓] Target met or exceeded

The Oregon Medical Board has determined that several of our KPMs do not adequately capture the agency's targets or results. See <u>Requested Changes to KPM's</u> below.

Unresolved 2021-2023 Issues

With the 2021-23 agency budget, the Legislature approved a policy package to replace the Board's core business suite software, and we are well underway with the project.

The project was initially estimated to complete by the end of June. However, due to procurement delays some of the previously approved funding will be shifted from the 2021-23 biennium into 2023-25. See additional information within 101 Core Business Suite Software Replacement Project below.

Major agency changes, budget drivers, risks, and information technology projects

No major agency changes are anticipated in 2023-25.

The agency's major budget drivers are:

- Increasing numbers of licensees increase overall agency workload.
- Increasing numbers of complaints against licensees increase Investigations staff and Board member workload.
- Increasing personal services expenses and inflation drive the Board's expenses and fees necessary to pay for agency services.

The agency's most significant budget risks are:

- **Keeping licensing fees low.** The need to maintain reasonable licensing fees while retaining adequate ending balance to provide agency services. As an Other-Funded agency, we must carefully monitor revenue, expenditures, and fee changes to ensure the agency is appropriately funded.
- An aging core business suite software system. This system performs nearly all agency business functions and is approaching its end of life. The agency is currently designing and configuring a replacement system, see information in policy package 101, below.
- Pending lawsuits. The Board is a regulatory agency, and disciplined licensees or others may not agree with our actions. This does not mean those actions are improper. The Board affords extensive due process to all applicants and licensees to ensure appropriate outcomes. Licensees are entitled to a contested case hearing and may appeal Board decisions within the courts. These proceedings can be costly. The Board strives to retain appropriate funding limitation to be sure we have the financial resources to act in the best interests of public safety. The Board has also been named as a party in other lawsuits that do not directly involve the agency but rather the records in the agency's custody.
- Number of licensees. As an entirely Other Funded, fee-based agency, changes in the
 number of applicants and licenses impact the funds available to pay agency expenses.
 The agency carefully monitors the numbers of licensees to project future cashflow and
 anticipate the need to increase fees. Failing to increase fees at the appropriate time
 could mean the agency is unable to pay its expenses.
- **Legislative mandates.** New legislation must be implemented within the timelines of the legislation, often with existing staff resources while continuing to deliver the agency's programs without interruption or delay.

Environmental factors impact the agency's budget and ability to achieve our mission and strategic goals. The most significant environmental factors impacting the agency are:

- **COVID-19.** Since 2020, the pandemic has stretched and strained government agencies and the OMB in new ways. The Board has partnered with other state agencies and the medical community in response to the pandemic.
- **Advances in medicine.** The evolution of the medical profession requires that the agency continue to partner with other agencies, both in-state and nationally, to

- establish best practices and seek solutions to public health issues, increasing reliance on telemedicine, disparities in health care, physician wellness, and the opioid epidemic.
- Licensee expectations. Board staff monitors national and international trends in order to anticipate the needs and expectations of applicants and licensees in how we deliver services.
- **Cybersecurity.** The ever-growing threats to the security of the confidential information we collect.

The agency anticipates only one major information technology project in 2023-25. The project was approved during the 2021-23 biennium and is currently underway. The project will replace the current technology system that performs nearly all of the Board's core business functions, including licensing and case management. The project is anticipated to complete in June 2024. This is a significant project for agency staff and customers that is being carefully managed. The project meets the thresholds for Enterprise project prioritization and stage gate oversight. DAS Enterprise Information Services has approved the project for stage gates 1 through 3; stage gate 4 is in progress. See additional information within 101 Core Business Suite Software Replacement Project below.

Major changes to the agency budget or operations in the past 6 years Not applicable.

Budget issues related to COVID-19, natural disasters, or emerging issues None.

Legislation necessary to implement the Governor's budget None.

With every legislative session there are numerous proposals that impact the agency. During 2020 and 2021, the agency tracked over 200 bills with potential impacts. For 2023, there are bills that could impact the agency in large and small ways. OMB staff will continue to monitor these bills and provide fiscal impact statements timely.

Reductions included in the Governor's budget

The Governor's Budget for 2023-25 reduces the OMB budget by \$83,030 for reductions in anticipated expenses for services provided by other state agencies.

Long-term vacancies

The OMB has five positions that were vacant for 12 months or more as of December 31, 2022. The OMB has experienced difficulty in hiring several positions due to market constraints, particularly in the information technology team. All vacant positions are either filled as a limited duration position or were in recruitment as of December 31st.

Position Title	Other Funds Budget	Vacant Date	Reason For Vacancy and Current Status
Administrative Specialist 1	\$ 145,000	12/31/2021	Hiring difficulties. Recruitment is in progress.
Operations & Policy Analyst 3	\$ 249,212	7/12/2021	Reclass in progress. Position has been filled at a different classification pending the reclassification.
Payroll Analyst	\$ 165,317	11/5/2021	Reclass in progress. Position has been filled at a different classification pending the reclassification.
Administrative Specialist 1	\$ 145,000	9/3/2021	Hiring difficulties. Recruitment is in progress.
Information Systems Specialist 3	\$ 185,240	4/19/2019	Hiring difficulties. Position has been filled as limited duration at a different classification while long-term needs are evaluated.

Cost containment

Cost drivers, budget risks, and the operating environment, discussed above, have driven agency efforts to contain costs and improve services, eliminate redundant and unnecessary processes, and increase automation for our customers and staff.

The agency principally uses technology to modernize activities, utilize paperless processes, and increase efficiency. We maintain an online services website, allowing individuals to apply for, renew, or reactivate their license, check the status of their application, print their license certificate, and more at any time.

The OMB also uses technology to serve consumers and licensing credentialers. We maintain an up to date website and effective, modern licensee lookup with robust search features. The strategic and forward-thinking use of technology allowed the agency to readily transition most agency functions into telework in response to the COVID-19 pandemic.

We've improved services to our customers by creating an internal communications team, which has helped us to improve the quality and quantity of communications with customers through our quarterly newsletter and focus on keeping our website current and relevant. We've improved mechanisms for generating email recipient lists from our licensing database and replaced our email list service software, allowing for more timely notifications about current events, including public health issues such as COVID-19.

The following are just a few examples of cost-saving changes made since the last fee increase.

- Transitioned to paperless processes, including the creation of a secure online portal allowing licensees to provide documents electronically, reducing document handling time and printing costs.
- Integrated consultant access to medical records with existing applicant and licensee
 online portal to streamline the process and reduce staff handling time. Ongoing
 improvements to the online portal reduce the need for applicants and licensees to call
 the agency for assistance.
- Developed mechanism to allow licensees to print their own license certificate, eliminating printing and mailing expense.
- Implemented electronic, automated processes for internal management of draft Orders, streamlining the process and reducing errors.
- During the COVID-19 pandemic, transitioned meetings from in-person to video conference, reducing travel and other meeting expenses. Streamlining meeting processes has reduced the hours necessary to complete agency business, further reducing meeting expenses, including staff overtime.

The agency has a long practice of partnering in-state, nationally, and internationally to establish best practices and seek solutions to public health issues, including equity, physician wellness and the opioid epidemic. Recently, our Executive Director was selected as the North America representative for the International Association of Medical Regulatory Authorities. These partnerships allow the agency to contribute to and utilize the work of our partners, creating efficiencies and consistency for all.

Shared programs and dependencies

The Oregon Medical Board, the Oregon State Board of Nursing, the Board of Dentistry, and the Oregon Board of Pharmacy have partnered to contract for the Health Professional's Services Program (HPSP). This program provides confidential monitoring for health care professionals with a substance abuse or mental health diagnosis. The program is focused on ensuring the continued safe practice of enrolled health care professionals. Licensees enter into the program either through Board referral or self-enrollment. Licensees who self-enroll remain anonymous as long as they fully comply with the program. Careful long-term monitoring, combined with referral to treatment programs where indicated can allow disciplined licensees to be successfully remediated and eventually restored to full practice. As the largest of the participating Boards, the Oregon Medical Board and Oregon State Board of Nursing together pay 84% of the Health Professionals' Services Program costs. The Oregon State Board of Nursing has announced their intent to withdraw from this partnership in 2025, and the remaining boards are working together to ensure the ongoing sustainability of the program.

As an agency, we share our expertise with other health boards when they need additional support. For example, the OMB also provides fiscal and human resources services to the Board of Dentistry.

The Board also collaborates with the Oregon Health Authority on the Prescription Drug Monitoring Program (PDMP), a tool to help health care providers manage their patient's prescriptions. The program was started to support the appropriate use of prescription drugs. The information is intended to help patients and health care providers work together to determine what medications are best for them.

Finally, the Board collects data prescribed by the Health Care Workforce Committee. The data collected helps state and federal programs identify health care shortages to ensure Oregon citizens have access to the health care services they need.

Summary of the Governor's Budget

The Board is 100% other funded; it receives no General Fund dollars. The Board's revenues and expenditures are paid by and dedicated to those who are served; 97% of agency revenue comes from the licensing and renewal activities of the agency. The other 3% of revenue is generated by civil penalties and various fees for services the agency provides.

	Other Funds
2023-25 Current Service Level	\$ 17,906,656
Policy Package 101- Core Business Suite Software Replacement	400,000
Policy Package 102 – Registration Fees	Revenue only
Governor's reductions	< 83,030 >
2023-25 Governor's Budget	\$ 18,223,626

With the 2023-25 budget, the Governor has approved two policy option packages proposed by the OMB. The Governor's budget reduces the agency budget by approximately \$83,000 for reductions in anticipated expenses for services provided by other state agencies.

101 Core Business Suite Software Replacement

In conducting Oregon Medical Board programs, agency staff use a single system that performs nearly all the Board's core business functions, including licensing and investigative case management. With the 2021-23 agency budget, the Legislature approved a policy package to replace the system, and we are well underway with the project. This project meets the thresholds for Enterprise project prioritization and Stage Gate oversight. We've been working closely with the Enterprise Information Services division and have their support for this project. We have completed Stage Gates 1, 2, and 3 and are working on implementation activities and Stage Gate 4 endorsement.

The project was initially estimated to complete by the end of June. However, due to procurement delays some of the previously approved funding will be shifted from the 21-23 biennium into 23-25. The Governor's budget recommends limitation of \$400,000 to complete this project. The agency has requested this package be revised to \$600,000 based on further shifts of when the funding will be required. There is no increase in overall requested project budget.

When the project is complete, the agency will have a single, easily configurable system that will provide all existing essential functions and allow the agency to add other needed functionality and services for operating efficiencies and in service of our licensees and the public.

102 Registration Fees

The second of our policy packages is intended to provide the funding necessary for the agency to meet the agency's increasing expenses.

The Board scrutinizes expenditures carefully, seeking every opportunity to use efficiencies to save money and avoid fee increases. Fees are kept low to help encourage providers to come to Oregon and stay in Oregon to practice, improving access to healthcare by encouraging a large pool of medical providers. The Board has not increased license registration fees since 2013.

The Board has made every effort to avoid a fee increase for as long as possible. Where feasible, the Board has simplified, automated, or eliminated tasks and business activities to streamline activities and reduce expenses.

In spite of the agency efforts to keep expenses down, expenses have continued to rise due to increasing personal services costs, general inflation, and increased state government service charges, which are the fees the agency pays to other state agencies.

Since the last fee increase, the number of licensees served by the agency has increased by 30%, necessitating the addition of two positions, a 9.5% increase, to handle the increasing workload as well as increased service expectations from licensees, the medical community, and the public.

As an entirely Other Funded agency, the Board carefully monitors its cash flow, ensuring that it has funds for anticipated costs and a reserve to cover unanticipated costs. Unanticipated costs are typically those associated with disciplinary activities. These expenses are unpredictable and can vary widely from case to case based on the complexity of the case, the contracted professional expertise required, the legal expenses, and the costs for Administrative Law Judge services. A single case can cost tens of thousands of dollars. The Board needs to have funds in reserve to pay these expenses.

Most Medical Board licenses are renewed at the end of the second quarter of each biennium. This renewal cycle dictates that fees must be adjusted at the beginning of the biennium to receive additional funding **within** that biennium. If we run short of funds after the biennial renewal cycle, we don't have a means to generate additional revenue until the next renewal cycle, in the next biennium.

This renewal cycle also means the Board must carry a minimum of 6 months ending balance at the end of each biennium to meet monthly cash flow needs through the next renewal cycle.

With our Requested Budget and the Governor's subsequent recommendation, we had anticipated that the fee increase would be implemented in July of this year. As always, we've been monitoring our revenues and expenditures closely to ensure we will have adequate funding but are not raising fees unnecessarily. With the most recent revenue and expenditure information, we will have a slightly greater ending balance for 21-23 than previously expected. To soften the fee increase for our customers, we request the implementation date be shifted to July 1, 2024.

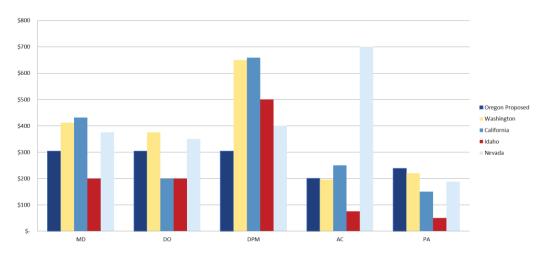
By shifting the date and with our renewal cycles, most licensees will not pay increased fees until the final quarter of calendar year 2025. Shifting the implementation date is a good approach given our current funding position. Our customers will appreciate having longer to plan and budget for the increase.

The Board aims to keep registration fees reasonable to help attract new providers into Oregon to bolster our health care workforce. The current and proposed annual registration fees are as:

	Current	Proposed	Change
Physician and Podiatric Physician	\$243	\$304	\$61
Physician Assistant	\$191	\$239	\$48
Acupuncturist	\$161	\$201	\$40

As an other-funded agency, we must carefully monitor revenue, expenditures, and fee changes to ensure the agency is appropriately funded while keeping our fees affordable.

This chart shows how our proposed fees compare to those of our neighboring states. Our proposed registration fees – shown in blue on the far left of each data cluster – remain generally consistent with those of our neighboring states.



Requested changes to KPMs

The Oregon Medical Board has determined that several of our Key Performance Measures (KPMs) do not adequately capture the agency's targets or results. Through a series of thoughtful meetings among subject matter expert managers and staff and with approval by the Board, revisions to the KPMs are proposed as solutions to this issue. Legislatively Adopted changes to these KPMs would be effective for the fiscal year that begins July 1, 2023.

Key Performance Measure #1

Current Measure:

LICENSE APPROPRIATELY - Percentage of Board-Issued license denials that were upheld upon appeal.

Target = 100%

<u>Problem</u>

During most fiscal years, there are few, if any, appeals and resulting outcomes of those appeals. This has frequently resulted in a calculated result of zero because there is no data for that year. This result may make it appear we missed the target. The state's KPM reporting system does not allow entry of "not applicable" or other means of reporting there was no data. In these instances, the agency has elected to report actual results of 100%, which is an imperfect solution when there is simply no data to report.

Proposed Replacement Measure

LICENSE APPROPRIATELY – Percentage Number of Board-Issued license denials upheld overturned on appeal.

Target = 100% Zero

<u>Discussion</u>

The revision would change the measure to report license denials overturned rather than those not overturned. Results and targets would change from percentages to numbers. Thus, a report for a year with zero appeals of licensure or zero denials overturned would meet the target. This change will provide a clearer portrayal of the outcome and underlying data.

Key Performance Measure #2

Current Measure:

DISCIPLINE APPROPRIATELY - Percentage of disciplinary actions not overturned on appeal

Target = 100%

Problem

As with KPM #1, during most fiscal years there are few, if any, appeals and resulting appellate decisions. The difficulties in reporting and agency approach to resolving the concern is the same as for KPM #1.

Proposed Replacement Measure

DISCIPLINE APPROPRIATELY – Percentage Number of disciplinary actions not overturned on appeal.

Target = 100% Zero

Discussion

The revision would change the measure to report disciplinary actions overturned rather than those not overturned. Results and targets would change from percentages to numbers. Thus, a report for a year with zero appeals of disciplinary actions or zero disciplinary actions overturned would meet the target. This change will provide a clearer portrayal of the outcome and underlying data.

Key Performance Measure #4

Current Measure:

MONITOR LICENSEES WITH BOARD ORDERS AND CORRECTIVE ACTION AGREEMENTS - Percentage of licensees with Board Orders or Corrective Action Agreements who have a new complaint within 3 years.

Target = 3%

Problem

When established, this KPM was intended to measure licensee recidivism rates. As currently calculated, this KPM does not accurately measure recidivism as the mere existence of a new complaint within three years does not in itself indicate that the licensee has again violated the Medical Practice Act (ORS 677). In addition, reviewing complaints received within a period following a licensee's Order or Agreement is a manual process. This introduces human error and represents significant staff time to provide the data.

<u>Proposed Replacement Measure</u>

MONITOR LICENSEES WITH BOARD ORDERS AND CORRECTIVE ACTION AGREEMENTS - Percentage of licensees with Board Orders or Corrective Action Agreements who have a new complaint Notice of Proposed Disciplinary Action within 3 5 years.

Target = 3%

Discussion

Based on a review of past disciplinary outcomes, the agency requests changing the measurement period from three years to five years and changing the indicator from a mere complaint to a Notice of Proposed Disciplinary Action to better measure recidivism. A Notice is a legal document issued by the Board after a complaint has been investigated when the Board believes that a violation of the Medical Practice Act has occurred. The need for this subsequent disciplinary action, even if unrelated to the prior disciplinary action, would be considered recidivism, and the human element (and potential error) of gathering the data will be eliminated.

Governor's Budget Document

https://www.oregon.gov/omb/board/about/Documents/84700%20Oregon%20Medical%20Board%202023-25%20Governors%20Budget.pdf

Results of Secretary of State audits

Not applicable.

Recent changes to budget and/or management flexibility impact on agency operations

Not applicable.

Supervisory Span of Control Report

Not applicable.

Proposed technology projects

See policy package 101 Core Business Suite Software Replacement, above.

Proposed capital construction projects Not applicable.

Program Prioritization for 2023-25

Program Prioritization for 2023-25																						
Agency Name: Oregon Medical Board																						
2023-25 Blennium Agency Number: 84700												84700										
Agency-Wide Program/Division Priorities for 2023-25 Biennium																						
1		2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
(ra	ınke	rity d with priority t)	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 CSI included in Agency Reques
Ago	cy	Prgm/ Div																				
1		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			3,103,394				\$ 3,103,394		11.00	N	Y	S	ORS 677		
2		1	OMB	Compliance	i) 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			8,983,485				\$ 8,983,485	16	16.00	N	Y	S	ORS 677		
		1	OMB	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 mewsletter on regulatory and disciplinary issues 7) Provide public information including: written verifications of licensure and telephoned inquiries 8) Provide Human Resources 9) Includes per diems for 14 Board Members and 10 Committee members, totaling \$468,600	7,8	4			2,868,886				\$ 2,868,886	7	7.00	N	Y	s	ORS 677		

	Program Prioritization for 2023-25																				
Age	Agency Name: Oregon Medical Board																				
	2023-25 Biennium Agency Number: 84700																				
Ager	Agency-Wide																				
					Program/Di	vision Pri			2023-25 Bien	nium											
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
(ra:	Priority (ranked with highest priority first) Program or Activity Description Program or Activity Ocde Program (V/N) Program or Activity Ocde Program (V/N) Primary Program (C, D, Option (V/N) Activity Code Program (V/N) Primary Program (V/N) Program or Activity Ocde Program (V/N) Program or Activity Ocde Program (V/N) Primary Program									Req. Code (C, D, FM, FO,	Legal Citation	Explain What is Mandatory (for C, FM, and FO Only)	Comments on Proposed Changes to CSL included in Agency Request								
Age	y Prgm/ Div																				
	1	OMB	Business Services	1) Provide public information through electronic data requests 2) Agency network, database, and web site development and maintenance 3) Budgeting, cash receipts, and disbursement 4) Payroll 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			2,950,892				\$ 2,950,892	8	8.00	N	¥	s	ORS 677		

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

Within each Program/Division area, prioritize each Budget Program Unit (Activities) by detail budget level in ORBITS

Document criteria used to prioritize activities:

Activities were prioritized based on the following criteria:

Does the activity fulfill a statutory mandate?
 Does the activity support the mission of the Oregon Medical Board?
 Does the activity support the Governor's priorities?
 What activities will serve the most Oregonians?

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

Other Funds Ending Balance Form

UPDATED OTHER FUNDS ENDING BALANCES FOR THE 2021-23 & 2023-25 BIENNIA

Agency: Oregon Medical Board
Contact Person (Name & Phone #): Carol Brandt, (503) 939-5151

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	<u>(i)</u>
Other Fund				Constitutional and/or	2021-23 Endi	ing Balance	2023-25 Endi	ing Balance	
Type	Program Area (SCR)	Treasury Fund #/Name	Category/Description	Statutory reference	In LAB	Revised	In CSL	Revised	Comments
Limited	84700-000-00-00-	8470000401 Oregon Medical Board	Operations	ORS 677.290	5,336,673	8,473,551	3,032,617		Current projections of 2021-23 ending balance is higher than LAB primarily due to lower than anticipated spending for the previous and current biennia. The agency has seen savings in operational, travel and meeting expenses due to COVID-19 restrictions. The agency's Core Business Suite replacement project encountered procurement delays, shifting substantial project expenses from the 2021-23 biennium to the 2023-25 biennium. The 2021-23 Revised Ending Balance represents a reserve of approximately 11 months operating expenses for 2023-25. Based on renewal cycles, the agency requires a minimum of six months ending balance. The 2023-25 Revised Ending Balance includes the agency requested fee increase and provides a reserve of approximately 9 months operating expenses to begin 2025-27.
Limited	84700-000-00-00- 00000	8470000401 Oregon Medical Board	Operations	ORS 677.290	5,336,673	8,473,551	3,032,617		2023-25 Revised Ending Balance with the agency requested fee increase but modified to be implemented July 1, 2024 instead of July 1, 2023. Provides a reserve of approximately 5.6 months operating expenses to begin 2025-27.

ARPA Ending Balance Form

Not applicable.