



Arizona Medical Board

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Patricia E. McSorley

August 4, 2017

Debbie Davenport, Auditor General
State of Arizona, Office of the Auditor General
2910 N. 44th Street, Suite 410
Phoenix, AZ 85018

RE: Response to Preliminary Report

Dear Ms. Davenport,

Thank you for the opportunity to respond to the revised draft preliminary performance audit and sunset review report for the Arizona Medical Board ("Board") dated July 11, 2017. The Board is in agreement with the findings and recommendations from the Auditor General, and each will be discussed below as requested.

LICENSING, PERMITTING, AND REGISTRATION

Recommendation 1.1: The Board should continue using its newly implemented secondary review procedure for trainees to ensure that renewal applicants meet all requirements in statute and rule, including ensuring that all applicants who are chosen for Continuing Medical Education ("CME") audits are audited, and if audited, ensuring that the applicants submit proof of meeting CME requirements.

The finding of the Auditor General is agreed to and the audit recommendation will be implemented.

As noted by the audit, the Board has implemented a secondary review procedure that ensures that new employees can properly evaluate and determine compliance with renewal requirements, including the CME audit process. This procedure will continue to be used in order to ensure that all renewal applications meet the requirements for statute and rule, and those applications needing a CME audit are properly processed by Board staff.

COMPLAINT RESOLUTION

Recommendation 2.1: The Board should continue to implement the measures it adopted to address delays in its complaint resolution process. The Board should also assess the impact of these measures on complaint resolution timeliness and take additional actions, as needed, should resolvable delays persist.

The finding of the Auditor General is agreed to and the audit recommendation will be implemented.

As noted by the audit, the Board has implemented a number of measures to address delays in the complaint resolution process, including steps taken to minimize delays in obtaining records for investigations, continuing efforts to increase the pool of Outside Medical Consultants ("OMCs") available for reviewing medical records and increased Board meeting

frequency when required. The Board continues to hold telephonic Board meetings in months where no regular Board meeting is scheduled. Additionally, efforts to minimize wait time for completed cases to be reviewed by the Staff Investigation Review Committee (“SIRC”) have been successful. Since January, 2017 completed cases are scheduled for the next available SIRC meeting, with meetings occurring at least once weekly, and multiple internal medical consultants continue to be utilized when necessary to avoid additional delays.

The Board notes that no recommendations were made with regard to the Auditor’s review of the Board’s public information policies and procedures, but the Board is committed to continuing to provide accurate and statutorily appropriate public information in a timely manner. Additionally, as identified by the report, the Board continues to find ways to improve its PHP program to better assist impaired physicians while protecting the public.

The Board would like to thank the Auditor General’s consideration during this process, and the professionalism of the staff involved. The Board looks forward to continuing to implement these procedures as it continues to act in accordance with its stated mission and statutory directives.

Sincerely,

Patricia E. McSorley
Executive Director