

Medical Advisory Board

Minutes

April 6, 2018 12:00 – 3:00 PM

- I. Call to Order: MAB Chair, John Taylor
 - A. Present: John Taylor, Sourbha Dani, Robert Dreher, Eileen Fingerman, Frederick Goggans, Gene Giunti, Patrick Keane, Robert Lodato, Janis Petzel, Larry Boivin, Thea Fickett, Linda Grant
 - B. Attended by Phone: None
 - C. Absent: Thomas Morrione
- II. Introductions and other housekeeping: Linda Grant
- III. Approval of Minutes: John Taylor
 - A. October 20, 2017 meeting minutes accepted as written
- IV. Review of Cases: Thea Fickett
 - A. Case 1 (MA) – 80 y/o female with dementia
 - B. Case 2 (MC) – 24 y/o female with possible seizure or alteration/loss of consciousness
- V. Old business:
 - A. Functional Ability Profiles
 - i. Regulatory agenda, schedule, & process for rulemaking Linda Grant
 - 1. Put FAP revisions on 2019 regulatory calendar for changes in 2020, allowing time to identify priorities and select participants
 - 2. Consider whether to propose rulemaking on FAP sections individually or to submit entire booklet at one time
 - a. If sections are proposed individually they need to stand on their own since entire booklet will not be reprinted
 - 3. Determine method of distribution for notifications and rules; online, electronic distribution, U.S. Postal Service, other
 - 4. If the rules are not printed and mailed out with each change, clinicians will have difficulty knowing whether or not they have the most up to date version of rules
 - 5. Minimize different versions floating around, particularly if it is not printed with a visible difference (i.e. - green cover)
 - ii. FAP discussion Thea Fickett
 - 1. Dementia
 - 2. Seizures
 - 3. Hypoglycemia
 - 4. Peripheral Vision
 - 5. Narcolepsy
 - 6. Obstructive Sleep Apnea
 - 7. Items for future discussion will be placed on FAP parking lot

8. Justification for suspension should be required, especially when doing a hand serve
 1. Encourage staff to request rationale from clinician
 2. If immediate suspension requested, may suspend and follow-up to get supporting documentation if unable to obtain prior
 - iii. Frank Breznyak, NP approved to sign narcolepsy Driver Medical Evaluations
 - iv. Evaluate options for training clinicians to assist them in using Functional Ability Profile rules and completing forms (CR-24 & MVE-103)
 - v. Can BMV identify specific FAP's that create questions or confusion for clinicians
 - vi. Can BMV identify specific clinicians associated with incomplete or incorrectly completed forms
- B. October 20, 2017 case update – 45 y/o male with history of multiple crashes and concerned citizen reports; no new information received and driver still suspended.
- VI. New business:
- A. Statistical Reports Thea Fickett
 - i. Medical Review Statistics Report (2017)
 - ii. Vision Statistics (2017)
 1. Best Eye Report
 2. Multiple Eye Defects Report
 3. Multiple Eye Defects & Dementia Report
 4. Vision Detail Summary Report
 - B. Meeting quorum requirements Jay Taylor
 - i. None required by Statute
 - ii. Informal group consensus
 1. Policy issues should have 50% quorum
 2. Case related issues may be approved by available MAB members with related clinical expertise
 3. Other issues, chair may recommend whether quorum is needed or not
 - C. Open Discussion Thea Fickett
 - i. Driver Orientation Screen for Cognitive Impairment" (DOSCI)
 1. Keep this on the radar for further information and discussion
 - ii. Increase online accessibility of FAP, forms and resources for clinicians and drivers
 1. Look for ways to make the rules more searchable and accessible
 2. Rules and forms are currently posted on BMV Medical requirements web page
 3. Forms are fillable on-line, but cannot be submitted electronically
 4. All members would like to see the forms be fillable, able to be submitted electronically, become more interactive, i.e. provide

feedback when there is missing information and provide a means for BMV to capture data electronically, etc.

5. Members agreed that developing algorithms for some of the FAP's and forms might be helpful to clinicians, starting with an algorithm for seizures vs unknown AOC/LOC vs Cardiac Syncope vs PNES. Start with form fillable & electronic submission
 6. Members would like to know what other states do electronically with their rules and forms
- iii. Steps for processing "Medical-Adverse Driving" reports reviewed

VII. Actions Needed:

- A. Research stats on "hand serve" notices of suspension
- B. Train medical section staff to obtain documentation of rational for suspension before taking action whenever possible
- C. FAP Changes
 - i. Put rulemaking on Regulatory calendar for 2019 and tentatively submit 2020
 - ii. E-mail list of top 3 priorities to MAB
 - iii. Determine when to start working on FAP's
 - iv. Identify names of specialists to work on disease specific FAP's
 1. Select conditions(s) to be revised
 2. Invite specialists pertinent to topics to participate in sub-committees
 - v. Draft questions/concerns for committee review and discussion, by topic
- D. FAP Distribution
 - i. Brainstorm options for disseminating notification of rule changes for future distribution of rule changes
 1. We are committed once we enter regulatory process
 - ii. Determine whether to revise entire document or only portions of the document at one time?
 1. How can we prevent different versions from floating around?
 - iii. Need "Disclaimer" on rules – refer to website for most current version
- E. Can we quantify which clinicians and FAP's are problematic?
- F. Develop & enhance electronic format of FAP and forms
 - i. Do other states have electronic fillable with option to submit electronically or using an interactive process?
- G. Develop training for clinicians on how to use FAP and complete CR-24 & MVE-103
 - i. Look into developing training for clinicians, to assist them in using Functional Ability Profile rules and how to complete CR-24 and MVE-103.
 - ii. Create free webinar on FAP and make it available on-line
 - iii. Put together a module on how to complete CR-24
 - iv. Promote education of clinicians through presentations to large organizations, by offering web based tutorials, webinars, conferences, etc.

v. Check with Maine Medical Association about continuing education credits

H. Statistical analysis needed

VIII. Meeting Schedule:

A. Next Meeting Date: Friday, November 2, 2018

B. From: 12:00 – 3:00 PM

C. Location: Executive Conference Room

D. 2019 meeting dates: April 5 and November 1

IX. Adjournment: 2:30 PM

Meeting Handouts:

1. Agenda
2. Minutes: April 6, 2018
3. Case reviews (2)
4. Medical Review Statistics
5. Vision Statistics (4)
5. Mileage reimbursement forms