

Minutes of the Meeting of the
NYS Medicine Board
March 7, 2025
1411 Broadway NY, NY

Board Members Present: Dr. Roosevelt Boursiquot, public member Dr. Alice Fornari EdD, Dr. Martha Grayson, Dr. Elisabeth Guthrie, John Hallowell PA, Dr. Gregory Harvey, Dr. Krishan Kumar, Brenton LaRicca PA-D, Dr. Louis Papa, Dr. Maria Plummer, Dr. James Romanelli, Dr. Ramanathan Raju, Dr. Nancy Sapio, Dr. Neeta Shah, Dr. Amit Shelat, Dr. Steven Sherman, Dr. Robert Walther, and Dr. David Wlody.

Board Members Absent: Dr. Roseanne Berger (Observed Remotely), Dr. Sumathi Kasinathan (Observed Remotely), Dr. Najeeb Rehman, Dr. Sumir Sahgal, Dr. Arash Salemi, and Dr. Rahul Sharma.

Guests Present: Gretta Gross, DO, Executive Vice President for Assessment at NBOME, Doug Murray, General Counsel at NBOME, Marc M. Triola, MD, Professor of Medicine, Associate Dean for Educational Informatics, Director, Institute for Innovations in Medical Education, NYU Langone Health, NYU Grossman School of Medicine, Cassandra Pineda, Assistant Vice President, Graduate Medical Education and Health Workforce at GNYHA, Edward Mathes, PA-C, DFAAPA Former President of NYSSPA, and Al Wattermaker.

Staff Members Present: Stephen Boese, Executive Secretary to the Board; Michelle Pawlowski, Education Credential Specialist 2; Carla Gibbons, Education Program Assistant 2; and Lee Fitzgerald, Education Program Assistant 2.

Meeting is called to order by Dr. Shelat at 9:30 am.

Welcome/Introductions:

We have a new Physician Assistant member at the Medicine Board, Mr. John Hallowell, PA-C. He was previously the Director of Advanced Practice Professionals at Good Samaritan Hospital Medical Center, West Islip, N.Y. with Administrative responsibility for 130 PA and NPs. He also served as Director of Physician Assistant Services for two hospitals under Northwell Health. He has a career as a PA in NYS going back to the mid-80s. Mr. Hallowell brings considerable hands-on experience in direct practice, management and academics.

Motion to Accept Minutes:

Motion was made, seconded, and passed to accept the minutes from the December 2024 meeting.

Chair's Report: Dr. Shelat

Dr. Shelat shares with the Board that former board chair, Dr. Lawrence Epstein has been awarded with The FSMB Distinguished Service Award. This award is presented to individuals who have demonstrated the "highest level of service" in the medical profession. Dr. Papa will accept the award in-person on Dr. Epstein's behalf at the FSMB annual meeting this April.

Report from the Advisory Committee on Clinical Clerkships:

University of Queensland has been re-approved until March 2032. Ben Gurion was granted a 1-year extension on their current approval.

International Medical Graduate Workgroup Report:

The Medicine Board's IMG Workgroup evaluates the postgraduate training and applications for licensure by Endorsement for International Medical Graduates. Roughly 3-4 of these applications are reviewed by the workgroup each week. The FSMB and ACGME are looking at "alternative licensing models" for IMGs. New York's unique IMG review method has gained national attention in this sense. Other state licensing boards are considering limited license models for these physicians with unique credentials.

Executive Secretary's Report:

Update from the Office of the Professions:

o New Physician Assistant Law - attachment

Mr. Boese provided clarification on the new PA law, in answer to questions we have received regarding prescriptive authority. This legislation has raised the number of PAs that can be supervised by a licensed physician to 6 in a private practice setting, and 8 in a correctional facility. It also enables PAs to order certain specified non-patient-specific regimens to nurses, and to order durable medical equipment. We do not see any new law or regulation regarding prescriptive authority for PAs. Prescriptive authority for PAs prescribing medications is authorized in Public Health Law and DOH regulations.

o Labeling of mifepristone, misoprostol (Chapter 7, 2025) - attachment

To address safety and security concerns of prescribers, a new law now allows mifepristone to be labeled with the practice name instead of the name of the individual prescriber.

o Current Proposals from the Governor's proposed state budget:

- Transfers oversight and licensing of physicians, physician assistants and specialist assistants to DOH – Similar proposals have been made in the past for all healthcare professions, but this proposal is specific to the 3 professions under the umbrella of the Medicine Board. NYSED commissioner Betty Rosa made a presentation to the legislature in opposition of this proposed law. Medicine has been licensed by NYSED for 134 years.
- Authorizes medical assistants to administer immunizations – this proposal would allow MAs to administer immunizations in an outpatient setting with appropriate training and supervision.
- Allows certain PAs to practice without supervision
- Nurse Licensure Compact – A Physician licensing compact has not been added to the budget this year, but a Nursing compact has.

Update – Use of Energy Devices Including Lasers as the Practice of Medicine (Formerly – Use of lasers for aesthetic purposes):

The Medicine Board is currently addressing the question of who can use lasers for certain dermatologic procedures. A workgroup on the issue has been led by Dr. Romanelli and Dr. Walther. The Office of Professional Discipline queried the Board on practices using these devices: mainly lasers, radiofrequency, CoolSculpting and shockwave therapy. The workgroup has created an updated proposal—the term “use of lasers” has been changed to “use of energy devices including lasers” to better describe the types of instruments being used. This practice guidance is coming from the perspective of public protection.

Generally speaking, the practice of medicine is considered to be “anything that modifies below the basement membrane of the skin”. However, an exception exists in caselaw for laser hair removal, which impacts below the membrane, but is not classified as medicine.

The workgroup recommends editing the current document purpose from “This document clarifies which energy treatments and lasers...” to “This document clarifies a set of treatments...” to broaden the application. This would be an editorial change to the document, which has already been approved by NYSED counsel.

The Medicine Board members approved this document.

Presentation – Update from the NBOME:

Dr. Greta Gross, DO, Executive Vice President for Assessment and Doug Murray, General Counsel of the NBOME give a presentation on recent changes to the COMLEX examination. The COMLEX consists of three levels and is the accepted medical licensure examination for doctors of osteopathy in the entire United States.

The NBOME decreased the maximum attempt limit of any level from 6 attempts to 4 attempts in 2022. Applicants who wish to sit for any additional attempts beyond 4 would need a letter of consent from a State medical licensing Board.

The NBOME re-introduced a demonstration program for clinical assessment after a pause during the COVID-19 pandemic, called the Core Competency Capstone for DOs (C3DO Project). The goal is to create a standardized assessment to include an in-person, hands-on evaluation of fundamental osteopathic clinical skills including interpersonal and communications skills and OMT. More information on the initiative can be found at <https://www.nbome.org/c3do/>

The International Association of Medical Regulatory Authorities (IAMRA) recently supported a resolution that DOs should be treated as physicians in all member countries. COMLEX is now recognized in Canada, Australia, Africa and India.

Dr. Shelat and Dr. Raju are members of the NBOME National Faculty. These volunteers help to create examinations and assessments for DOs, and are always looking to recruit new members.

Presentation – Artificial Intelligence (AI) in Medicine and Medical Training:

Dr. Marc M. Triola, MD, Professor of Medicine, Associate Dean for Educational Informatics, Director, Institute for Innovations in Medical Education, NYU Langone Health, NYU Grossman School of Medicine gives a presentation on the potential use of AI in medicine and medical training.

Generative AI in medicine is not an entirely new concept—automated ECG reports have been used for the last 30-40 years, for example. The vast majority of AI use has been in radiology. AI has the ability to learn patterns and also predict and replicate patterns. These systems have improved quickly and dramatically, and it is likely to improve enough for safe use in the next 18-24 months.

Dr. Triola uses the example of self-driving cars to convey the potential benefits in medicine. A recent Tesla study demonstrated that collectively, Tesla cars utilizing self-driving technology drove an average of ~7 million miles before an accident occurred, while human drivers in the U.S. collectively drove roughly half a million miles before an accident occurred. It has been observed in medicine that AI is generally more accurate than humans at diagnosis and differential. Patients who were surveyed also preferred the “bedside manner” of AI chatbots versus communications with human doctors.

Similar to how a human would “take the wheel” of a self-driving car, the goal for medicine in AI is to have humans in the driver’s seat to intervene as necessary. It would be seen as a tool that can help with care gaps and improve workforce issues.

A proposed federal bill H.R. 238 – Healthy Technology Act of 2025 would enable AI to be licensed as healthcare provider with prescriptive authority under the FDA.

More information on the use of AI in healthcare from NYU Langone Health can be found at <https://ai.iime.cloud/>

Discussion – Review of Policy. Substantial Equivalence for ABMS and AOA certification boards:

It is the current policy of the NY Medicine Board to require that a physician seeking to name their practice with a name implying expertise in a medical specialty must have either an ABMS or AOA board certification in that specialty. Physicians are also only allowed to list ABMS or AOA board certifications on the New York State Physician Profile website. Hospitals have used other certifying boards besides the ABMS and AOA to give privileges to their providers.

It is agreed that applications from physicians for use of a specialty title without an acceptably accredited certification board would be considered on a case-by-case basis, and would be looking at the individual and their credentials.

Professional Committee Reports:

- Athletic Training – Mr. Boese

The proposed draft regulations for the new AT licensure bill were presented for public comment. The majority of the feedback received was not relevant to what the Committee can respond to.

No other committee meetings were held since the last Medicine Board Meeting.

Next Meeting Dates:

The next meetings are set for 6/6/25, 9/5/25, 12/5/25, 3/6/26 at 9:30 am.

Meeting adjourned at 12:30 pm.

Draft respectfully submitted,

Lee Fitzgerald
Education Program Assistant 2