

Minutes of the Meeting of the  
NYS Medicine Board  
March 6, 2026  
1411 Broadway NY, NY

Board Members Present: Dr. Amit Shelat, Dr. Louis Papa, Dr. Roosevelt Boursiquot, Dr. Amit Garg, Dr. Martha Grayson, Dr. Elisabeth Guthrie, Dr. Gregory Harvey, John Hallowell, PA-C; Dr. Sumathi Kasinathan, Dr. Krishan Kumar, Brenton LaRiccica PA-C, Dr. Audrey Murray, Dr. Maria Plummer, Dr. Ramanathan Raju, Dr. Najeeb Rehman, Dr. James Romanelli, Dr. Ira Salom, Dr. Nancy Sapio, Dr. Neeta Shah, Dr. Rahul Sharma, Dr. Steven Sherman, and public members Dr. Alice Fornari EdD, Dr. David Wlody,

Board Members Absent: Mohammad-Zuber Nakadar, MBBS.

Extended Board members: Dr. Dawn Morton-Rias(remote), Dr. Lynn Mark, Dr. Roseanne Berger, Dr. Monica Dweck (remote)

Guests Present: Sarah Benson (remote); Cassandra Pineda, GNYHA; Dr. Kristen Walker (remote); Al Watermaker

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

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

Welcome and Introductions-Dr. Shelat

Introduction of New Members. Audrey Murray, MD, Amit Garg, MD, Ira Salom, MD.

Motion to Accept Minutes:

Motion was made, seconded, and passed to accept the minutes from December 5, 2025, meeting.

Chair's Report-Dr. Shelat: IMS meets next month and will be reporting to group in June. Dr. Shelat, Stephen, and Lee will attend FSMB meeting next month. Dr. Raju will also attend as FSMB Board member.

International Medical Graduate Workgroup Report:

The workgroup has reviewed 46 IMG applicants, 8 of which were endorsement reviews; 36 were unaccredited postgraduate training reviews.

Executive Secretary's Report- Stephen Boese:

Update from the Office of Professions

- Medical Physics Liaison is still needed - contact Stephen.
- A Physician Member has been nominated for the Athletic Training Board. We are still looking for a public member for this Board.

- There is a lot of interest from other states and organizations in what we do in terms of International Medical Graduates applicants. Legislative committees in other states are looking to New York as they are considering new strategies for recruiting international medical graduates.
- The Board elected Dr. Raju as FSMB liaison in December. We have learned that he can no longer serve as our FSMB delegate because he has been elected to the FSMB Board. A new liaison is needed from the Medicine Board. We will discuss and seek to elect a new liaison at the June meeting. Dr. Shelat will serve as our delegate at the upcoming FSMB annual meeting. Stephen was invited by FSMB to serve on the Reference Committee at the annual meeting.

#### Legislative Updates

- A136/S138 Medical Aid in Dying is approved and now a law. The Board discussed the provisions as an informational item but made note that this was not legislation supported or opposed by the Board or NYSED. Concerns were discussed about this new law: how often will this be used, who will hand out medications, can pharmacies take medication back, how will they dispose of medication and how safely these medications will be used? The cost of the medication was discussed and whether insurance will pay for it.

Highlights to the changes that have been made to the law were discussed.

- There is now a five-day waiting period when a prescription is written and when it is filled.
- An oral request by the patient for medical aid in dying must be recorded by video or audio.
- Anyone who may benefit financially from the death of the patient will not be eligible to serve as a witness to the recording.
- There is now mandatory mental health evaluation of the patient seeking medical aid.
- Patients must be New York residents to request medical aid in dying.
- Allows religious home Hospice providers to opt out of the legislation.
- A violation of the law is defined as professional misconduct under the education law.
- Extends the effective date of the bill to six months after signing.

Dr. Shelat reviewed other states that have a similar law and presented findings on how they are handling medical aid in dying.

- A4613-B/S6693-B, podiatry scope of practice (Approved) The Board briefly reiterated its concerns regarding the legislation but note that it has been enacted into law.
- A6063/S4423 Grieving Families Act has been vetoed; there was no discussion.

## Membership attrition

Dr. Shelat and Dr. Papa's terms will end this Fall, and they will unfortunately need to be cycled off of the Board. In September we will be seeking to elect a new chair and vice chair of the Board. We will have a call for nominations at our next meeting in June and vote in September.

This is Dr. Kasinathan's last meeting (term ends May 16), as she is unfortunately cycling off the Board. The Board thanks Dr. Kasinathan for her years of service and contributions to the board.

FYI – After President Trump issued an executed order highly critical of LCME and other accreditors because of DEI policies, LCME Has issued a statement indicating that they will end considering diversity initiatives as part of their accreditation process. Stephen emphasized that the Board of Regents and the Department remain committed to diversity, equity and inclusion initiatives.

## State Budget Update

Stephen Boese updated Medicine Board members on certain budget items affecting medicine.

- Medical Assistants would be permitted to administer immunizations. This would be the responsibility of the physician to assure that person is qualified. Commissioner Rosa articulated the Department's support at a legislative budget hearing.
- Certified Medication Aides would be authorized in nursing homes to administer medications. Registered Nurses would be authorized to supervise.
- There is a proposal to substitute "physician" with "qualified health care provider acting within their scope of practice" in school health and vehicle and traffic laws.
- The Governor proposes moving Article 131-A (Definitions of Professional Misconduct Applicable to Physicians, Physician's Assistants and Specialist's Assistants) to public health law.
- Move section 6527, "Special Provisions" to public health law and DOH administration. This includes provisions certain insurers to employ physicians, physician waiver of responsibility for certain emergency actions, service on UR, incident, quality assurance and other review boards, the prescription of non-patient specific orders, and other such issues related to physician licensure.
- Move physician assistant and specialist assistant practice acts to PHL/DOH
- Move approval of physician PCs and PLLCs to DOH

Language in the budget allows PAs to serve as school medical directors.

### Current Legislation Update:

S8656-A /A10083, provides that mifepristone or misoprostol may be dispensed without the name and address of the prescriber and patient included on the prescription label. A coding system may be used for tracking.

PA Bill A7988/S7981-allows a PA to practice without direct supervision if they have 6000 hours of practice or work in a hospital facility. This contrasts with the Governor's budget proposal which requires 8000 hours of practice AND work in a hospital facility in order for PAs to practice without physician supervision. Notably, the Governor's proposal would also require 8000 hours in a specialty area and require an additional 8000 hours if the PA should change the specialty of their practice. It was noted that the Governor's bill seems to address a prior concern of the med board regarding future PAs practicing without supervision who may change the specialty area of their practice.

### Energy Producing Device guidance update:

The Board considered a request from the Department of State for information concerning Electronic Muscle Stimulators. The board consensus is that the use of "muscle stimulators" depends on the portrayal and marketing of the service. If it is portrayed as diagnosing, treating, operating, or prescribing for any human disease, pain, injury, deformity, or physical condition, then it would be the practice of medicine. If it is portrayed as being used for some other purpose, then it would not be the practice of medicine.

In addition, Dr. Garg, noted that he does not believe that EMS devices modulate 'fat' or adipose tissue in any way. Any potential improvement in appearance is via an improvement in muscle tone, not through a modulation of fat. The OGS mentioned consideration of the Splendor X machine. Splendor X appears to be a light energy device with the main case use of hair removal. Dr. Garg does not believe it has any ability or evidence to support its use for muscle stimulation and/or fat modulation. Stephen further stated that as we know, due to longstanding decisions, laser hair removal is not considered to be the practice of medicine.

### Professional Committee Reports:

#### Athletic Training-

- Implementation of the new Athletic Training practice act was discussed at the most recent AT Committee meeting.
- Athletic Trainers cannot dispense over the counter medications. Staff is researching the legal rationale for this policy.
- In schools, return to play after concussion must be provided by a physician. It is unclear how this impacts an athletic trainer and their supervising physician when this clearance comes from an outside doctor. We are continuing to research this issue.

There were no recent meetings for the other three committees.

Next Meeting Dates:

The next meetings are set for 6/5/26, 9/11/26, 12/4/26 at 9:30 am. Proposed and approved March 5, 2027 @ 9:30 am.

Public Meeting adjourned at 11:20 am

Executive Session called to order at 11:45 am

DRAFT