

2017 - 2019 ARIZONA MASTER LIST OF STATE GOVERNMENT PROGRAMS

OSA 0.0 Agency Summary  
 BOARD OF OSTEOPATHIC EXAMINERS  
 Jenna Jones, Executive Director  
 Board of Osteopathic Examiners (602) 771-2522  
 ARS 32-1800 et seq

Objective: 1 FY2017: To maintain administrative efficiency and customer satisfaction.  
 FY2018: To maintain or improve administrative efficiency and customer satisfaction.  
 FY2019: To maintain or improve administrative efficiency and customer satisfaction.

Performance Measures	FY 2017 Actual	FY 2018 Estimate	FY 2019 Estimate
Administration as percent of total cost	7	8	7
Customer satisfaction rating (1-8)	5	7	7

Explanation: changing above from 1-5. For FY18, revising to 1-8 system.

**Mission:**

To protect the public health and safety of people in the State of Arizona through the regulation of physicians licensed to practice osteopathic medicine and surgery in the State. The Board protects the public by setting educational and training standards for licensure, and by reviewing complaints made against osteopathic physicians, interns and residents to ensure that their conduct meets the standards of the profession, as defined in law (A.R.S. §32-1854).

**Description:**

The Board of Osteopathic Examiners regulates osteopathic physicians in the State of Arizona. The Board is responsible for the licensure of osteopathic physicians and residents, the enforcement of standards of practice, and the review and adjudication of complaints.

◆ **Goal 1** To issue and renew licenses promptly and in an effective manner

Objective: 1 FY2017: Maintain high customer service levels.  
 FY2018: Maintain high service levels; encourage use of online vs paper renewals. Attempt to determine and evaluate if moving to an online application process is feasible and cost effective.  
 FY2019: Maintain high service levels; encourage use of online renewals vs paper forms. If it is determined that online application process is feasible and cost effective move to implementation online system.

Performance Measures	FY 2017 Actual	FY 2018 Estimate	FY 2019 Estimate
Number of new and existing licenses	3204	3275	3375
Number of applications for new license received (does not include Post Graduate permits or dispensing registrations)	326	350	375
Number of new license applications issued	289	300	325
Average days to issue new license	24	22	20
Explanation: Timeframe to process applications			
Percentage of renewals done online vs. paper/manually	93	94	94

◆ **Goal 2** To investigate and resolve complaints in a timely manner

Objective: 1 FY2017: Maintain or reduce average number of days to investigate and resolve complaints.  
 FY2018: Maintain or reduce the average number of days to investigate and resolve complaints.  
 FY2019: Maintain or reduce the average number of days to investigate and resolve complaints.

Performance Measures	FY 2017 Actual	FY 2018 Estimate	FY 2019 Estimate
Complaints received	274	310	320
Complaints investigated	269	300	300
Licensees who had disciplinary action taken	20	20	20
Average calendar days to resolve a complaint	217	225	220
Average calendar days to investigate a complaint	107	105	105
Number of complaints closed/resolved	297	315	325

◆ **Goal 3** To administer the agency efficiently and provide customer service to the public

**AGENCY SUMMARY**

**Program:** OSA 0 . 0 BOARD OF OSTEOPATHIC EXAMINERS  
**Director:** Jenna Jones, Executive Director  
**Phone:** Board of Osteopathic Examiners (602) 771-2522  
**Statute:** ARS 32-1800 et seq

**Mission:**

*To protect the public health and safety of people in the State of Arizona through the regulation of physicians licensed to practice osteopathic medicine and surgery in the State. The Board protects the public by setting educational and training standards for licensure, and by reviewing complaints made against osteopathic physicians, interns and residents to ensure that their conduct meets the standards of the profession, as defined in law (A.R.S. §32-1854).*

**Description:**

The Board of Osteopathic Examiners regulates osteopathic physicians in the State of Arizona. The Board is responsible for the licensure of osteopathic physicians and residents, the enforcement of standards of practice, and the review and adjudication of complaints.

◆ **Goal:** 1 To issue and renew licenses promptly and in an effective manner

- Objectives:** 1 2017 Obj: Maintain high customer service levels.  
 2018 Obj: Maintain high service levels; encourage use of online vs paper renewals. Attempt to determine and evaluate if moving to an online application process is feasible and cost effective.  
 2019 Obj: Maintain high service levels; encourage use of online renewals vs paper forms. If it is determined that online application process is feasible and cost effective move to implementation online system.

**Performance Measures:**

ML	Budget	Type		FY 2016 Actual	FY 2017 Estimate	FY 2017 Actual	FY 2018 Estimate	FY 2019 Estimate	
1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	OP	Number of new and existing licenses	3,017	3,150	3204	3275	3375
				This figure is the total number of licensees on June 30, the last day of the fiscal year.					
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	IP	Number of applications for new license received (does not include Post Graduate permits or dispensing registrations)	255	275	326	350	375
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	OP	Number of new license applications issued	248	250	289	300	325
4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	EF	Average days to issue new license	22	20	24	22	20
				This item previously measured the average days to issue (the days between the Board's approval of the application, and the applicant paying to have the license issued). By rule (AAC R4-22-104), the applicant has 6 months in which to request issuance after approval. This did not appear to be an appropriate measurement. Licenses are now issued within one or two days of the date payment is made. As of FY13, we are now measuring the over all timeframe for processing an applicaton by our office.					
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	EF	Percentage of renewals done online vs. paper/manually	93	93	93	94	94

◆ **Goal:** 2 To investigate and resolve complaints in a timely manner

- Objectives:** 1 2017 Obj: Maintain or reduce average number of days to investigate and resolve complaints.  
 2018 Obj: Maintain or reduce the average number of days to investigate and resolve complaints.  
 2019 Obj: Maintain or reduce the average number of days to investigate and resolve complaints.

**Performance Measures:**

ML	Budget	Type		FY 2016 Actual	FY 2017 Estimate	FY 2017 Actual	FY 2018 Estimate	FY 2019 Estimate	
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	IP	Complaints received	292	310	274	310	320
2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	OP	Complaints investigated	297	300	269	300	300
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	OP	Licenses who had disciplinary action taken Includes denials of license application	14	14	20	20	20
4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	EF	Average calendar days to resolve a complaint	263	250	217	225	220
				From Date Opened to Date Resolved- ( this includes compliance times for licensee to meet terms of probation or CME, etc.) FY15 with removal of 10 long term compliance = 264 days. In FY16, removing 7 longterm compliance/consent agreements=234 days. In FY17, overall average was 243. There were 7 files with long term probation or SRAs. If these are not included the avg number is 217.					
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	EF	Average calendar days to investigate a complaint From Date Opened to Date [Investigative report] Completed	108	110	107	105	105
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	OP	Number of complaints closed/resolved	348	350	297	315	325

◆ Goal: 3 To administer the agency efficiently and provide customer service to the public

Objectives: 1 2017 Obj: To maintain administrative efficiency and customer satisfaction.

2018 Obj: To maintain or improve administrative efficiency and customer satisfaction.

2019 Obj: To maintain or improve administrative efficiency and customer satisfaction.

Performance Measures:

ML	Budget	Type		FY 2016 Actual	FY 2017 Estimate	FY 2017 Actual	FY 2018 Estimate	FY 2019 Estimate	
1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	EF	Administration as percent of total cost	7	7	7	8	7
					The preparation for the pending move to 1740 Adams is requiring attendance at a number of meetings and additional work.				
2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	QL	Customer satisfaction rating (1-8)	5	5	5	7	7
					The form we currently use only has 5 fields for options of response. This will be modified to 8.				
					In FY 17, a customer service survey to our website via survey monkey.				

## Budget Related Performance Measures

### Arizona Board of Osteopathic Examiners

Agency:	0.0	BOARD OF OSTEOPATHIC EXAMINERS
Contact:	Jenna Jones, Executive Director (602) 771-2522	
2nd Contact:	Jenna Jones, Executive Director (602) 771-2522	
Statute:	ARS 32-1800 et seq	

ML	Budget	Type	Performance Measure	FY 2016 Actual	FY 2017 Estimate	FY 2017 Actual	FY 2018 Estimate	FY 2019 Estimate
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	EF	Administration as percent of total cost	7	7	7	8	7
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	OP	Number of new and existing licenses	3,017	3,150	3204	3275	3375
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	QL	Customer satisfaction rating (1-8) changing above from 1-5. For FY18, revising to 1-8 system.	5	5	5	7	7
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	OP	Complaints investigated	297	300	269	300	300
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	EF	Average calendar days to resolve a complaint	263	250	217	225	220
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	EF	Average days to issue new license Timeframe to process applications	22	20	24	22	20

# Agency 5-Year Plan

**Issue 1** Identifying and resolving pending complaints on a more timely basis. Complete the investigation so they can be resolved more timely by the Board.

**Description:** This is a critical issue to our Board and to a number of parties (stakeholders) that we are current with our complaint caseload.

We have spent the past 60 months working diligently to address a backlog of old cases all while trying to keep up with an increasing number of newly reported complaints. In FY16, we received 291 complaints, investigated 297 and resolved 348 cases. During FY15, we received 299 complaints, a significant increase over the previous year. As a comparison, in FY12, we received 176 new complaints and 217 in FY13, 262 in FY14. The incoming number of complaints remained stable between FY15 and FY16. As of August 2017, we are up 20% this calendar year over last year in the number of complaints received.

During FY15, we resolved 336 cases compared to 234 In FY14. In FY13, we were successful in resolving 233 complaints, in comparison to 146 in FY12. During FY16 we resolved 348 cases. In FY17, we resolved 297.

We anticipate the increase in complaints to continue into the future as is evidenced by our 20 % increase this calendar year. The public is more aware of regulatory boards and appears to be turning to us more often for assistance, which includes filing complaints. IN FY18, we are projecting the newly reported complaints to approach the 350 mark, or a 20% increase over the previous year.

## **Solutions:**

To overcome a backlog of complaints, the Board has utilized several methods to reduce the backlog. We will continue to pursue other options to assist us. With the increase in newly reported complaints, we will need to continue to identify methods to stay current with the complaint caseload to reach the state's goal of completing investigations or resolving complaints within 180 days.

We have also increased the number of cases that are being referred for outside medical review. We are seeking methods to identify these more quickly and receive our reports on a more timely basis, within 30 days. As more and more doctors are becoming board certified, it is necessary to utilize the appropriate peers to review the cases. The increase in case referrals for outside medical review has worked well and we will continue utilizing this option. Many of the outside consultants are requiring high fees for their services. This is understandable and should be expected to continue or increase in the future. To receive accurate medical opinions, cases involving a high degree of specialty medicine must be sent to outside reviewers for review. As such, more cases will be referred to our investigator for review and investigation completion.

It is more cost efficient to utilize outside medical consultants versus hiring more staff.

We have streamlined a number of our internal processes to create more efficiency and timeliness in the complaint process. In addition, the Board has agreed to add extra meetings to keep on top of the case load.

By reducing the time to investigate and resolve complaints it will allow our agency to be more efficient and gain greater support from the public and the licensees. A timely system allows the Board to identify emerging trends, problems or issues on a more timely basis so we can provide more timely feedback or education on a proactive basis to the licensees and stakeholders. The average number of days to complete an investigation and resolve cases in FY15 was 143.5 and 264. In FY16, we investigated in an average of 107.65 days and resolved in 234 days. Both numbers are a significant improvement over the previous years. In FY17, our investigation timeframe was 107 days and the days to complete was at 217 (this number includes compliance timeframes for probation and CME). Through ongoing assessment, we continue to improve our timeframes for addressing complaints.

**Issue 2** Complaints are taking more than 180 days to resolve and the Auditor General has set a guideline of 180 days or less to resolve complaints. We need to complete our complaint process within 180 days.

**Description:** Our goal is to reduce the average number of days to investigate and resolve a complaint to an average of 180 days or less. Our FY16 and FY17 numbers reflect that our investigations are completed well within the timeframe at 107.6 days. We recognize that some complaints, due to the difficulty of the case, require further investigation, evaluation or chart review after the Board reviews the matter initially. We are trying to identify these cases before they go to the Board in anticipation of their request. Other factors such as continuances at the request of the licensee can also extend the timeframes for resolving these cases. With the consolidation of many medical offices, plans and hospitals, we are finding it is more difficult to get timely responses to requests for records and subpoenas. This outside delay is affecting our internal process and slowing down our resolution timeframes.

On average, we should meet the timeframes. Cases that go for an Investigative Hearing or that are sent to the Office of Administrative Hearings can take a longer period of time to resolve as these cases may result in a revocation or a suspension of greater than 12 months of a license. However, we will continue to strive to timely resolve such cases as quickly as possible. We are offering more Consent Agreements for surrender versus taking the matters to hearing.

Again, this is a critical item to our Board as it affects the public and our licensees. When we identify a serious case involving possible immediate danger to the public, the Board addresses these matters on an immediate basis and with possible summary suspensions.

**Solutions:**

This issue is tied with our first strategic issue. We continue to reduce the outstanding number of complaints and we are receiving a large number of new complaints. As the Board works through resolving all of the outstanding complaints, we are able to more timely address the newer complaints and we believe this has been the case, considering our reductions in timeframes to investigate and resolve complaints.

We continue to reduce our number of days to complete an investigation from 194 days in FY14, to 143 days in FY15, and to 107.6 in FY16. In FY17 we remained at 107 days. Although we were able to see a 50% reduction in the time to investigate complaints over a three year period FY14-FY16, we anticipate minimal improvements in time as we approach 100 days.

The Board has increased their number of meetings to allow an opportunity to hold more Investigative Hearings. We anticipate 7-8 meetings in FY18. More meetings allow the Board to conduct more Investigative Hearings and increase the outcome of resolving more cases. Sometimes, the Board will initially review a case but then return it for more investigation, a chart review or possibly an evaluation of the licensee. In order to address these situations, staff is trying to be more proactive by anticipating such requests and addressing or requesting the additional information prior to the Board's initial review.

We have undertaken a number of methods to increase our output of completed investigations and our Board has been very supportive of increasing their workload (ie: board meetings) to respond to and address the backlog. By holding the extra meetings it has enabled us to resolve more complaints. In addition, we have revised our reviewer process to allow for a more timely initial review of the cases.

We continue to evaluate our processes to determine if there are methods or processes available to us to increase our complaint resolution rate. We may seek to offer more Consent Agreements to the licensees rather than going thru the entire hearing process.

We believe that to continue the reduction in timeframes we must also take into account the number of pending complaints. As we review and revise our processes, we have been able to stay on top of the increasing complaint numbers while clearing out the backlog.

**Issue 3** Our agency efficiently processes applications while continuing to meet with statute, rule and timeframe requirements. We will evaluate and determine if online applications would be effective and cost efficient for our agency in response to a customer service driven model.

**Description:** There are pressures on the national level to reduce the licensing timeframes to issue new licenses. We continue to identify methods to streamline the processing time while continuing to provide a quality driven product or evaluation to protect the public. We are always looking for ways to improve our processes. Our average time to approve a license is 24 days.

Currently, the medical profession is encountering pressures from outside groups to pursue national licensure using as an example, the doctor who wants to provide telehealth must be licensed in the state that he provides care. The argument is that it takes too long for many of the jurisdictions to process the applications and that every state has different requirements. The response has been to consider a state licensing compact for physicians. Arizona passed legislation in 2016 to become part of the Interstate Medical Licensure Compact.

Many agencies are utilizing more online processes in response to demands from the public and applicants. We must continually evaluate what forms we provide on the internet and what information is provided on our website. We strive to be proactive in this area and we are open to customer suggestions or requests. Currently, applicants for licensure and dispensing registrations must send the forms into our office. We will explore moving to an online application submission while still assuring compliance with the statutes and rules. However, to date, the expense to move to such a system is significant in terms of actual cost and staff time. We are working with our software vendor to assess the online application but we are likely another year out (FY19) before we are ready to move forward. With the upcoming move to a new building downtown, we will look at an online application after the move is complete which moves the project into FY2019.

We, as well as other medical boards, are striving to find ways to process applications and issue licenses as expediently as possible. We are continuing to pursue the most efficient license process possible while continuing our mission to protect the public. Our current average application processing time is twenty-four days. Cases where a license application raises issues or questions will take longer because the matter would go before the Board.

We recently revised our statutes and rules but we will continue to look at revising our statutes and rules to assist with making our application process more streamlined, efficient and understandable. The rules process requires funding and considerable time by the staff as well as the Board. The vast majority of the extra expense is due to the need of the expertise from a rules writer to assist us with the process.

It is critical that we provide the most efficient model possible. Those applicants that are qualified to be licensed should move through the process as quickly as possible and the public demands licensed professionals to provide medical care on a timely basis. With the approaching shortage of doctors we do not want to be viewed as a barrier to entry into the practice for those qualified applicants who wish to practice in Arizona.

**Solutions:**

Our plan includes reviewing and updating the statutes and rules regarding licensing requirements and pursuing updates or revisions for changes, if necessary. This is a long, difficult process that assures all provisions are covered and the process is in compliance with the statutes and rules. Rules changes require the assistance of a rules writer and therefore additional expense. Staff time devoted to these changes is significant. Our number of license applications continues to increase, in FY17 we experienced a 16% increase in applications over FY16. Our staff size remains the same and has been successful in managing the increasing workload. With a small staff, this is sometimes extremely difficult.

We have made significant reductions in the days it takes to process an application and we will continue to evaluate our processes to make sure we are utilizing the most efficient model possible. We are currently at an average of 24 days, we hope to reduce this figure by 5% over the next two years. Thus far, in the past three years we have taken an average of over 60 days and reduced it to 24.

We will be looking at online application processing; however, much of the verification process will still require and compose much of the time required to process applications. There are external factors which are beyond our control. We are working to identify these and establish methods to improve the response time for receiving these materials.

We continue to evaluate other board's processing procedures to see where or how we may enhance our current policies and procedures. We will also continue to benchmark and gain input and feedback from other licensing organizations to determine what they have done to improve their processes.

The Interstate Compact is operating and licenses through the compact are issued in less than ten days.

### Resource Assumptions

	FY2020 Estimate	FY2021 Estimate	FY2022 Estimate
<b>Full-Time Equivalent Positions</b>	7.2	8.2	8.2
<b>General Fund</b>	0.0	0.0	0.0
<b>Other Appropriated Funds</b>	925.0	960.0	960.0
<b>Non-Appropriated Funds</b>	0.0	0.0	0.0
<b>Federal Funds</b>	0.0	0.0	0.0