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mn.gov/boards/podiatric-medicine/

AT A GLANCE

FY19

Credentialing Services

- 574 Licensees 267 Doctors of Podiatric Medicine (DPM), 88 Orthotists, 28 Prosthetists, 87 Prosthetist Orthotists, 49 Pedorthists, 28 Fitters, 14 Assistants
- 101 DPM License Renewals/72 % completed online
- 13 Temporary Permits
- 51 New Applicants/69% completed online
 - 19 DPM Applications, 4 Orthotists, 1 Prosthetist, 13 Prosthetist Orthotist
 - 3 Pedorthists, 8 Fitters, 3 Assistants,
- 1,092 License Verifications/98% completed online
- Professional Development/Continuing Education
 - 4,040 Continuing Medical Education (CME) hours reviewed
 - Approved 6 CME Sponsorships
 - Conducted 13 DPM Interviews
 - Administered 13 Jurisprudence Exams

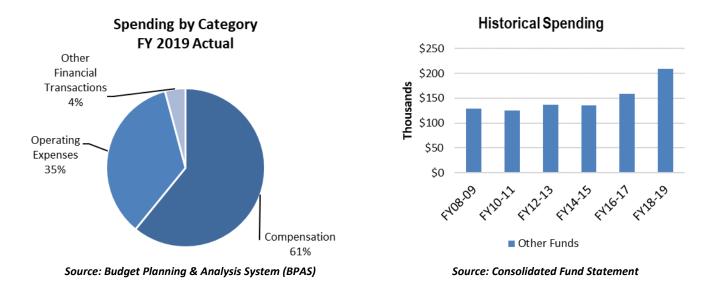
PURPOSE

The Minnesota Board of Podiatric Medicine was established in 1916. The Board mission is to protect the public by extending the privilege to practice to qualified doctors of podiatric medicine (DPM), orthotists, prosthetists, prosthetist orthotists, pedorthists, fitters and assistance and investigating complaints relating to their competency or behavior.

The Board accomplishes its mission by:

- Responding to public and agency inquiries, complaints and reports regarding licensure and conduct of applicants, permit holders, licensees and unlicensed practitioners;
- Reviewing allegations of statute and rule violations, holding disciplinary conferences with licensees, and taking formal action to suspend or revoke the licenses of DPM who fail to meet standards;
- Setting and administering educational requirements and examination standards for licensure; and providing information and education about licensure requirements and standards of practice to the public and other interested audiences.

BUDGET



The Board is funded by licensure fees and receives no general fund dollars. Minnesota Statutes section 214.06, subdivision 1(a) compels the Board to collect fees in the amount enough to cover direct and indirect expenditures. Funds are deposited as non-dedicated revenue into the state government special revenue fund. From this fund, the Board receives a direct appropriation to pay for agency expenses such as salaries, rent, costs associated with disciplinary/contested cases and operating expenditures. It also pays statewide indirect costs through an open appropriation.

In addition to Board operations, licensure fees fund activities that support multiple boards and/or other agencies. Some of these are: the Administrative Services Unit (interboard), Health Professionals Services Program (interboard), Prescription Monitoring Program (Pharmacy Board), Office of the Attorney General for legal services, and the Criminal Background Check Program (interboard).

STRATEGIES

The Board of Podiatric Medicine is guided by these principles:

- Responsibility for public protection will be fulfilled with respect for due process and adherence to laws and rules;
- Customer services will be delivered in a respectful, responsive, timely, communicative, and nondiscriminatory manner;
- Government services will be accessible, purposeful, responsible, and secure; and
- Business functions will be delivered with efficiency, accountability, and a willingness to collaborate.

The Board's licensure strategies are accomplished through licensure of applicants who meet set standards of education, examination, supervised practice, continuing education, and ethical practice. The number of licensed DPMs in Minnesota has increased 8% over the past two years. This reflects the growing need for their services and the demand is expected to continue with an aging population.

The Board's Complaint Resolution Committee (CRC) is authorized by Minnesota Statutes, Chapter 214 to receive, investigate and resolve complaints regarding conduct or standard of care.

The Board's administrative strategies are advanced through responsive, efficient, and cost-effective services that include a commitment to technology upgrades, helping to achieve this goal. The Automated Licensing

Information Management System (ALIMS) offers online applications, renewals and verifications and receives them in real time, creating significant efficiencies.

The Board is comprised of seven volunteer members appointed by the Governor - five DPM and two public members who receive a per diem and mileage reimbursement for meetings. The full Board meets quarterly and the Complaint Review Committee (CRC) more frequently.

Type of Measure	Name of Measure	Previous	Current	Dates
Quality	Number of DPM licensees	247	267	2017 2019
Quality	Number of new license applications	15	51	2017 2019
Quantity/Quality	Percent and number of license verifications made online	957/97%	1092/98%	2017 2019
Quantity	Number of complaints received/investigated	11	11	2017 2019
Quality	Licenses granted within 2 days upon receipt of all documentation	100%	100%	2017 2019

RESULTS

The statutory authority for the Minnesota Board of Podiatric Medicine is located in Chapter 153.01 – 153.26, 1538 https://www.revisor.mn.gov/statutes/?id=153.01.

The rules are located in MN Rules Chapter 6900. <u>https://www.revisor.mn.gov/rules/?id=6900</u>.

Additional statutes pertaining to all health licensing boards are found in Chapters 13, 16, and 214.

Podiatric Medicine, Board of

Agency Expenditure Overview

(Dollars in Thousands)

	Actual	Actual	Actual	Estimate	Forecast Ba	ase	Governor's Recommendat	
	FY18	FY19	FY20	FY21	FY22	FY23	FY22	FY23
Expenditures by Fund								
1201 - Health Related Boards	103	95	106	292	199	199	214	214
2000 - Restrict Misc Special Revenue	9	2	1	2	2	2	2	2
Total	113	97	107	294	201	201	216	216
Biennial Change				192		1		3:
Biennial % Change				92		0		8
Governor's Change from Base								30
Governor's % Change from Base								
Expenditures by Program								
Podiatry Board	113	97	107	294	201	201	216	21
Total	113	97	107	294	201	201	216	216
Expenditures by Category								
Compensation	62	59	67	109	110	112	110	11
Operating Expenses	50	34	41	185	91	89	106	104
Other Financial Transaction		4						
Total	113	97	107	294	201	201	216	21

Podiatric Medicine, Board of

Agency Financing by Fund

(Dollars in Thousands)

	Actual	Actual	Actual	Estimate	Forecast Base		Governor's Recommendation	
	FY18	FY19	FY20	FY21	FY22	FY23	FY22	FY23
1201 - Health Related Boards								
Balance Forward In		96		93				
Direct Appropriation	199	199	204	199	199	199	214	214
Cancellations		200	5					
Balance Forward Out	96		93					
Expenditures	103	95	106	292	199	199	214	214
Biennial Change in Expenditures				200		0		30
Biennial % Change in Expenditures				101		(0)		8
Governor's Change from Base								30
Governor's % Change from Base								8
Full-Time Equivalents	0.52	0.52	0.66	1.00	1.00	1.00	1.00	1.00

2000 - Restrict Misc Special Revenue

Balance Forward In		0	0	1	1	1	1	1
Receipts	10	1	1	2	2	2	2	2
Balance Forward Out	0	0	1	1	1	1	1	1
Expenditures	9	2	1	2	2	2	2	2
Biennial Change in Expenditures				(8)		1		1
Biennial % Change in Expenditures				(71)		29		29
Governor's Change from Base								0
Governor's % Change from Base								0

Podiatric Medicine, Board of

Agency Change Summary

(Dollars in Thousands)

	FY21	FY22	FY23	Biennium 2022-23
Direct				
Fund: 1201 - Health Related Boards				
FY2021 Appropriations	199	199	199	398
Forecast Base	199	199	199	398
Change Items				
MN.IT Cost Reduction and Appropriation Transfer		15	15	30
Total Governor's Recommendations	199	214	214	428
Dedicated				
Fund: 2000 - Restrict Misc Special Revenue				
Planned Spending	2	2	2	4
Forecast Base	2	2	2	4
Total Governor's Recommendations	2	2	2	4
Revenue Change Summary				
Dedicated				
Fund: 2000 - Restrict Misc Special Revenue				
Forecast Revenues	2	2	2	4
Total Governor's Recommendations	2	2	2	4
Non-Dedicated				
Fund: 1201 - Health Related Boards				
Forecast Revenues	139	290	139	429
Total Governor's Recommendations	139	290	139	429

FY 2022-23 Biennial Budget Change Item

Fiscal Impact (\$000s)	FY 2022	FY 2023	FY 2024	FY 2025
ASU (Transfer from BELTSS to Dentistry)				
General Fund*				
Expenditures	0	0	0	0
Revenues	0	0	0	0
State Government Special Revenue				
Expenditures	(647)	(647)	(647)	(647)
Revenues	0	0	0	0
Pharmacy, Board of				
State Government Special Revenue				
Expenditures	65	65	65	65
Revenues	0	0	0	0
Dentistry, Board of				
State Government Special Revenue				
Expenditures	40	40	40	40
Revenues	0	0	0	0
Chiropractic Examiners, Board of				
State Government Special Revenue				
Expenditures	25	25	25	25
Revenues	0	0	0	0
Optometry, Board of				
State Government Special Revenue				
Expenditures	15	15	15	15
Revenues	0	0	0	0
BELTSS				
State Government Special Revenue				
Expenditures	15	15	15	15
Revenues	0	0	0	0
Social Work, Board of				
State Government Special Revenue				
Expenditures	50	50	50	50
Revenues	0	0	0	0
Marriage and Family Therapy, Board of				
State Government Special Revenue				
Expenditures	22	22	22	22
Revenues	0	0	0	0
Podiatric Medicine, Board of				
State Government Special Revenue				
Expenditures	15	15	15	15
Revenues	0	0	0	0
Veterinary Medicine, Board of				
State Government Special Revenue				
Expenditures	10	10	10	10
Revenues	0	0	0	0

Change Item Title: MN.IT Cost Reduction and Appropriation Transfer

Fiscal Impact (\$000s)	FY 2022	FY 2023	FY 2024	FY 2025
Dietetics and Nutrition Practice, Board of				
State Government Special Revenue				
Expenditures	15	15	15	15
Revenues	0	0	0	0
Physical Therapy, Board of				
State Government Special Revenue				
Expenditures	15	15	15	15
Revenues	0	0	0	0
Behavioral Health and Therapy, Board of				
State Government Special Revenue				
Expenditures	35	35	35	35
Revenues	0	0	0	0
Net Fiscal Impact =	(325)	(325)	(325)	(325)
(Expenditures – Revenues)				
FTEs	0	0	0	0

*There is no General Fund impact to the health licensing boards listed in Fiscal Impact chart.

Recommendation:

The Governor recommends the Health-Related Licensing Boards' IT expense reorganization and reduction. The Administrative Services Unit (ASU) is authorized by Minn. Stat. 214.107 and serves as an agent to the Health-Related Licensing Boards. ASU is seeking a \$647,000 reduction in its FY 2022 and FY 2023 appropriation and a corresponding \$322,000 increase in appropriation for twelve (12) Health-Related Licensing Boards (Table 1) for a net reduction of \$325,000. This appropriation decrease is the result of the Health-Related Licensing Boards' restructuring and reduction of IT-related costs. The appropriation increases for the twelve (12) Health-Related Licensing Boards will fund IT expenses previously paid by ASU.

Rationale/Background:

Since the creation of MN.IT Services in 2012, funds to pay all technology-related costs of the Health-Related Licensing Boards have been appropriated to ASU as the boards' agent. MN.IT staff were assigned to the boards and costs consolidated and paid by ASU. As part of its IT restructuring efforts, the Health-Related Licensing Boards worked with MN.IT to reduce the number of MN.IT staff directly assigned to the boards and move to direct-billing. This requires a transfer of the appropriation for IT-related costs from ASU to certain boards.

The Health-Related Licensing Boards are fee-supported agencies. The Boards are required by Minnesota Statutes to collect enough revenue to cover all direct-appropriated and indirect costs. The Health-Related Licensing Boards' collected fee revenues are deposited into the State Government Special Revenue fund to cover the boards' IT-related costs. This reduction does not impact the State's General Fund.

Proposal:

The Health-Related Licensing Boards' IT reorganization includes reduction of FTEs including software developer position and IT manager position. Database support and project management services will now be paid as needed by contract instead of by assigned FTE. These staffing changes result in a \$325,000 annual reduction in ASU's appropriation. The remaining IT-related costs have been itemized and allocated to the boards and related programs for payment as direct expenditures beginning in FY 2022. The itemization and allocation results in a \$647,000 reduction in the ASU appropriation and an appropriation increase for twelve (12) boards to cover IT-related costs which will now be direct-billed.

This proposal is impacted by the transfer of the ASU appropriation from the Board of Executives for Long Term Services and Supports (BELTSS) to the Board of Dentistry beginning in FY 2022, which was submitted as a separate change item. The ASU appropriation for MN.IT will be reduced by \$647,000 (from \$1,214,000 to \$567,000) when it transfers from BELTSS to Dentistry.

Impact on Children and Families:

The Health-Related Licensing Boards work to promote public protection, including the protection of the children and families of the State of Minnesota. This change will not impact the boards' ability to continue to protect the people of Minnesota.

Equity and Inclusion:

The Health-Related Licensing Boards do not discriminate on the basis of race, ethnicity, gender, sexual orientation, or disability. This change will not impact the boards' ability to provide services for all people of the State of Minnesota, without discrimination.