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Board of Medical Practice

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<https://mn.gov/boards/medical-practice/>

AT A GLANCE

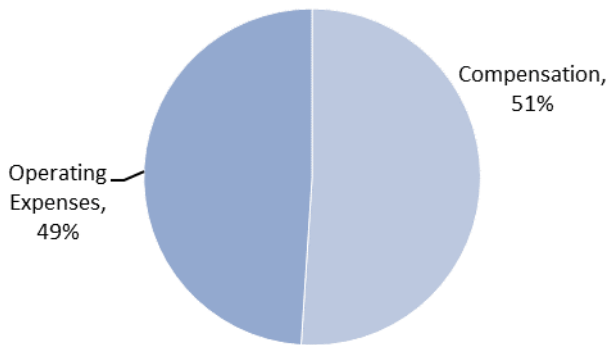
- 16-member Board comprised of 11 physicians and 5 public members appointed by the Governor
- 23 full-time equivalent staff
- 36,862 active credentials
- 3,426 new credentials issued
- 916 new complaints received
- 773 complaints resolved
- 81 disciplinary and corrective actions against credentialed professionals
- 164 credentialed professionals monitored under disciplinary or corrective actions

PURPOSE

The Board of Medical Practice (Board), established on July 1, 1887, is mandated by M.S. 214 & M.S. 147.01 to protect the public from the improper and unlawful practice of medicine. The Board carries out its mission by granting qualified applicants the privilege to practice in Minnesota and by investigating complaints relating to the competency or behavior of credentialed individuals.

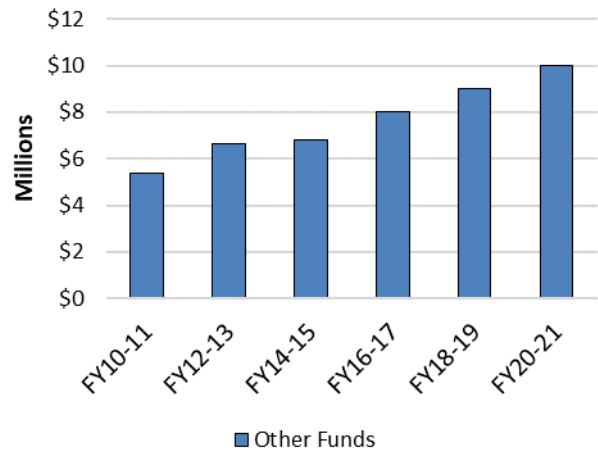
BUDGET

**Spending by Category
FY 2021 Actual**



Source: Budget Planning & Analysis System (BPAS)

Historical Spending



Source: Consolidated Fund Statement

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 sufficient 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 (inter-board), Health Professionals Services Program (inter-

board), Prescription Monitoring Program (Pharmacy Board), Office of the Attorney General for legal services, Criminal Background Check Program (inter-board), and the Voluntary Healthcare Provider Program (inter-board).

STRATEGIES

- The Board regulates professional practice and enforces applicable laws and rules by issuing credentials, monitoring continuing professional education requirements, engaging in quality review, and investigating complaints.
- The Board ensures minimum standards of care through education and corrective or disciplinary actions against impaired or incompetent practitioners.
- The Board provides information and education about licensing and registration requirements, as well as professional profile and enforcement actions to the public, the professionals, and other interested audiences.
- The Board provides administrative management of the Health Professionals Services Program, ensures that the program is operating in accordance with its statutory authority, sets the budget for the program, enters into contracts on behalf of the program, and provides guidance on general operations of the program.

RESULTS

<i>Type of Measure</i>	<i>Name of Measure</i>	<i>Previous</i>	<i>Current</i>	<i>Dates</i>
Quantity	Active credentials New credentials issued	34,976 3,382	36,862 3,426	FY20 & FY21
Quantity	Complaints received	857	916	FY21 & FY22
Quality	Complaints resolved Number of complaints resolved (<180 days)	862 209	773 256	FY21 & FY22
Results	Disciplinary actions Corrective actions	67 4	73 8	FY21 & FY22

Minnesota Statutes chapters 147 (<https://www.revisor.mn.gov/statutes/?id=147>), 147A – F (<https://www.revisor.mn.gov/statutes/cite/147a>, <https://www.revisor.mn.gov/statutes/cite/147b>, <https://www.revisor.mn.gov/statutes/cite/147C>, <https://www.revisor.mn.gov/statutes/cite/147D>, <https://www.revisor.mn.gov/statutes/cite/147e>, <https://www.revisor.mn.gov/statutes/cite/147f>) and 148.7801 – 148.7815 (<https://www.revisor.mn.gov/statutes/cite/148.7801>) provide the Board of Medical Practice with legal authority to regulate medical practice and allied health professions for the purpose of public protection.

Minnesota Statutes chapter 214.32, Subd. 1(a) and (b) (<https://www.revisor.mn.gov/statutes/cite/214.32>) provides the Board of Medical Practice with the designated legal authority to provide administrative management of the Health Professionals Services Program for the purpose of public protection. The Health Professionals Services Program is legally authorized under Minnesota Statutes chapter 214.31 (<https://www.revisor.mn.gov/statutes/cite/214.31>)

(Dollars in Thousands)

	Actual FY20	Actual FY21	Actual FY22	Estimate FY23	Forecast Base FY24 FY25		Governor's Recommendation FY24 FY25	
<u>Expenditures by Fund</u>								
1201 - Health Related Boards	4,464	5,197	5,550	6,230	5,868	5,868	5,779	5,971
2000 - Restrict Misc Special Revenue	68	79	100	97	68	68	68	68
Total	4,532	5,276	5,650	6,327	5,936	5,936	5,847	6,039
Biennial Change				2,168		(105)		(91)
Biennial % Change				22		(1)		(1)
Governor's Change from Base								14
Governor's % Change from Base								0

Expenditures by Program

Board of Medical Practice	4,532	5,276	5,650	6,327	5,936	5,936	5,847	6,039
Total	4,532	5,276	5,650	6,327	5,936	5,936	5,847	6,039

Expenditures by Category

Compensation	2,586	2,693	2,760	2,955	2,935	3,018	2,464	2,618
Operating Expenses	1,938	2,583	2,868	3,363	2,992	2,909	3,375	3,413
Other Financial Transaction	8	1	22	9	9	9	8	8
Total	4,532	5,276	5,650	6,327	5,936	5,936	5,847	6,039

Full-Time Equivalents

	29.09	29.79	30.50	31.00	30.00	30.00	25.00	25.00
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(Dollars in Thousands)

	Actual FY20	Actual FY21	Actual FY22	Estimate FY23	Forecast Base FY24 FY25		Governor's Recommendation FY24 FY25	
1201 - Health Related Boards								
Balance Forward In		1,804		362				
Direct Appropriation	6,030	5,996	5,912	5,868	5,868	5,868	5,779	5,971
Transfers In	23							
Transfers Out		593						
Cancellations	15	2,009						
Balance Forward Out	1,573		362					
Expenditures	4,464	5,197	5,550	6,230	5,868	5,868	5,779	5,971
Biennial Change in Expenditures				2,118		(44)		(30)
Biennial % Change in Expenditures				22		(0)		(0)
Governor's Change from Base								14
Governor's % Change from Base								0
Full-Time Equivalents	29.09	29.79	30.50	31.00	30.00	30.00	25.00	25.00

2000 - Restrict Misc Special Revenue

Balance Forward In	18	33	39	29				
Receipts	82	85	90	68	68	68	68	68
Balance Forward Out	33	39	29					
Expenditures	68	79	100	97	68	68	68	68
Biennial Change in Expenditures				50		(61)		(61)
Biennial % Change in Expenditures				34		(31)		(31)
Governor's Change from Base								0
Governor's % Change from Base								0

(Dollars in Thousands)

	FY23	FY24	FY25	Biennium 2024-25
Direct				
Fund: 1201 - Health Related Boards				
FY2023 Appropriations	5,868	5,868	5,868	11,736
Forecast Base	5,868	5,868	5,868	11,736
Change Items				
Maintain Current Service Levels		798	1,068	1,866
Increase Appropriation to Add Two FTEs		234	242	476
Health Professionals Services Program (HPSP) Additional Staff		113	117	230
The Health Professionals Services Program Transfer to Minnesota Board of Psychology		(1,234)	(1,324)	(2,558)
Total Governor's Recommendations	5,868	5,779	5,971	11,750
Dedicated				
Fund: 2000 - Restrict Misc Special Revenue				
Planned Spending	97	68	68	136
Forecast Base	97	68	68	136
Total Governor's Recommendations	97	68	68	136
Revenue Change Summary				
Dedicated				
Fund: 2000 - Restrict Misc Special Revenue				
Forecast Revenues	68	68	68	136
Total Governor's Recommendations	68	68	68	136
Non-Dedicated				
Fund: 1201 - Health Related Boards				
Forecast Revenues	7,679	8,016	8,372	16,388
Change Items				
The Health Professionals Services Program Transfer to Minnesota Board of Psychology		(20)	(20)	(40)
Total Governor's Recommendations	7,679	7,996	8,352	16,348

Board of Medical Practice

FY 2024-25 Biennial Budget Change Item

Change Item Title: Maintain Current Service Levels

Fiscal Impact (\$000s)	FY 2024	FY 2025	FY 2026	FY 2027
General Fund				
Expenditures	0	0	0	0
Revenues	0	0	0	0
Other Funds				
Expenditures (BMP)	679	863	863	863
Expenditures (HPSP)	119	205	205	205
Revenues				
Net Fiscal Impact = (Expenditures – Revenues)	798	1,068	1,068	1,068
FTEs	0	0	0	0

Recommendation:

The Governor recommends additional funding of \$798,000 in FY 2024 and \$1,068,000 in each subsequent year from the state government special revenue fund to maintain the current level of service delivery for the Board of Medical Practice (BMP) and the Health Professionals Services Program (HPSP).

Rationale/Background:

Each year, the cost of doing business rises—employer-paid health care contributions, FICA and Medicare, along with other salary and compensation-related costs increase. Other operating costs, like rent and lease, fuel and utilities, and IT and legal services also grow. This cost growth puts pressure on agency operating budgets that remain flat from year to year.

Agencies face challenging decisions to manage these costs within existing budgets, while maintaining the services Minnesotans expect. From year to year, agencies find ways to become more efficient with existing resources. However, cost growth typically outstrips efficiencies, and without additional resources added to agency budgets, service delivery erodes.

For the Board, operating cost pressures exist in multiple categories—increases in compensation and insurance costs at the agency, increasing costs to maintain our current staff complement in a challenging labor market, and increasing IT costs. If an operational increase is not provided, the Board will be hampered in its ability to protect the public, which includes provision of a properly credentialed health care workforce that is fit and competent to serve Minnesota patients.

Proposal:

The Governor recommends increasing agency operating budgets to support maintaining the delivery of current services. For the Board, this funding will support expected and anticipated employee compensation growth and known cost increases in lease rates, legal services, other operating, and IT services.

Results:

This proposal is intended to allow the Board of Medical Practice to continue to provide current levels of service and information to the public.

Board of Medical Practice

FY 2024-25 Biennial Budget Change Item

Change Item Title: Increase Appropriation to Add Two FTEs

Fiscal Impact (\$000s)	FY 2024	FY 2025	FY 2026	FY 2027
General Fund				
Expenditures	0	0	0	0
Revenues	0	0	0	0
Other Funds				
Expenditures	234	242	242	242
Revenues	0	0	0	0
Net Fiscal Impact = (Expenditures – Revenues)	234	242	242	242
FTEs	2	2	2	2

Recommendation:

The Governor recommends an increase to the agency’s base budget of \$234,000 in FY2024 and \$242,000 in FY2025 to continue the agency’s licensing and complaint investigations in accordance with statutory and procedural timelines. Revenues collected by the agency are sufficient to fund this request in its entirety without increasing fees.

Rationale/Background:

Board Mission and Funding: The mission of the Board of Medical Practice is to protect the public’s health and safety by assuring that the people who practice medicine or as an allied health professional are competent, ethical practitioners with the necessary knowledge and skills appropriate to their title and role. The agency, comprised of 16 members, including 11 physicians and 5 public members appointed by the Governor, regulates more than 36,000 health care professionals in eight professions. The agency is currently supported by a full-time staff of 23.

The agency is entirely fee supported and receives no General Fund dollars to support its services. Fees must be collected to cover all direct and shared operational costs and are deposited as non-dedicated revenue into the State Government Special Revenue Fund. The Minnesota Legislature makes a biennial appropriation from this fund to cover all expenses incurred by the agency.

Proposal:

The Board of Medical Practice is requesting an increased budget appropriation to adequately staff the agency and maintain agency operations necessary to protect the public. Public protection includes provision of a properly credentialed health care workforce that is fit and competent to serve Minnesota patients. The agency regulates an increasing number of healthcare professionals in each of the eight (8) professions under its jurisdiction.

Although the agency has managed to absorb costs during the FY22-FY23 biennium, it can no longer absorb the increasingly complex and voluminous work across all regulated professions. Current revenues fully support the addition of these two necessary positions. Details of the two positions follow:

- Investigator – Licensure Unit: The Licensure Unit requires additional professional level support to assist with the analysis, preparation, and presentation of complex initial license/registration applications and applications for renewal. With overall increases in applications, expanded license portability through the Interstate Medical Licensure Compact and implementation of temporary permits, additional professional support is necessary to assure timely application processing. In addition, the agency anticipates continuing education mandates that require a significant amount of professional and technical support.

The implementation of criminal background checks for initial licensure and participation in a multistate compact requires a heightened level of analysis of criminal conduct.

- Investigator – Complaint Review Unit: The Complaint Review Unit requires additional professional level support to conduct comprehensive investigations and oversee the coordination and processing of complaint files. Performance of complex case analysis, preparation and presentation of investigative findings involving misconduct by regulated health care providers, and resolution of complaint investigations within statutorily established timelines are essential to ensure public protection.

Impact on Children and Families:

Access to qualified health care professionals is essential to children and families. This change item will ensure the agency’s ability to continue to provide essential services to protect the public.

Equity and Inclusion:

The agency’s mission to protect the public is all-inclusive.

Tribal Consultation:

Does this proposal have a substantial direct effect on one or more of the Minnesota Tribal governments?

Yes

No

IT Costs:

Not Applicable.

Results:

An increased appropriation will enable the agency to protect the public by complying with statutory and procedural requirements and timelines.

Statutory Change(s):

There are no statutory changes.

Board of Medical Practice

FY 2024-25 Biennial Budget Change Item

Change Item Title: Health Professionals Services Program (HPSP) Additional Staff

Fiscal Impact (\$000s)	FY 2024	FY 2025	FY 2026	FY 2027
General Fund				
Expenditures	0	0	0	0
Revenues	0	0	0	0
Other Funds				
Expenditures	113	117	117	117
Revenues	0	0	0	0
Net Fiscal Impact = (Expenditures – Revenues)	113	117	117	117
FTEs	1	1	1	1

Recommendation:

The Governor recommends an increase to the base budget appropriation for the Health Professionals Services Program (HPSP) of \$113,000 in FY2024 and \$117,000 in FY2025 in order to continue the agency’s ability to protect the public by monitoring impaired health care professionals. Board of Medical Practice is currently the administering Board for HPSP.

Rationale/Background:

Board Mission and Funding:

The HPSP is a shared program of the Minnesota Health Related Licensing Boards and the Minnesota Department of Health with a statutory obligation to protect the public from persons regulated by the participating agencies who are unable to practice with reasonable skill and safety by reason of illness, use of alcohol, drugs, chemicals, or any other materials, or as a result of any mental, physical, or psychological condition. The HPSP is funded by the participating state agencies with less than 2% of General Fund dollars.

Proposal:

The BMP is requesting an increased budget appropriation for the HPSP to adequately staff the program and maintain program operations necessary to protect the public. Health professionals are presenting to the HPSP in greater numbers and with increasingly complex conditions, requiring greater case manager involvement. Public protection includes provision of a properly credentialed health care workforce that is fit and competent to serve Minnesota patients.

Details of the additional FTE follow:

- **Case Manager (CM):** The HPSP CM acts as a resource for health professionals, licensing agencies, health care employers, and stakeholders in the health care community. The CM evaluates symptoms and treatment needs, obtains diagnostic information and medical records, creates and implements participation agreements and monitors the continuing care and compliance of health care professionals. In addition, the CM engages with treatment providers, supervisors and other collaborative parties. The CM also analyses records and reports, coordinates toxicology screening processes, and intervenes as necessary to address non-compliance or symptom exacerbation. CMs file reports as needed with regulatory agencies.

Impact on Children and Families:

Access to qualified health care professionals is essential to children and families. This change item will ensure the agency’s ability to continue to provide essential services to protect the public.

Equity and Inclusion:

The agency’s mission to the protect the public is all-inclusive.

Tribal Consultation:

Does this proposal have a substantial direct effect on one or more of the Minnesota Tribal governments?

Yes

No

IT Costs:

Not Applicable.

Results:

An increased appropriation to add a case manager will enable the agency to continue to ensure public protection through its monitoring services.

Statutory Change(s):

There are no statutory changes.

Board of Medical Practice

FY 2024-25 Biennial Budget Change Item

Change Item Title: The Health Professionals Services Program Transfer to Minnesota Board of Psychology

Fiscal Impact (\$000s)	FY 2024	FY 2025	FY 2026	FY 2027
Board of Medical Practice (HPSP)				
General Fund				
Expenditures	0	0	0	0
Revenues	0	0	0	0
State Government Special Revenue				
Expenditures	(1,234)	(1,324)	(1,324)	(1,324)
Revenues	(20)	(20)	(20)	(20)
Psychology (HPSP)				
General Fund				
Expenditures	0	0	0	0
Revenues	0	0	0	0
State Government Special Revenue				
Expenditures	1,234	1,324	1,324	1,324
Revenues	20	20	20	20
Net Fiscal Impact = (Expenditures – Revenues)	0	0	0	0
FTEs	(8)	(8)	(8)	(8)

Recommendation:

The Governor recommends moving the Health Professionals Services Program’s (HPSP) budget from the Board of Medical Practice to the Board of Psychology, the newly appointed Administering Board for the HPSP. This proposal transfers the appropriated base budget. Additional HPSP change items for FY24-25, if approved, will also transfer to the Board of Psychology.

Rationale/Background:

The mission of the HPSP is to protect the public by providing monitoring services to regulated health professionals whose illnesses may impair their ability to practice safely.

The HPSP is a shared program of the Minnesota Health Related Licensing Boards and the Minnesota Department of Health. Minn. Stat. 214.32(a) states: “...If the participating boards change which board is designated to provide administrative management of the program, any appropriation remaining for the program shall transfer to the newly designated board on the effective date of the change. The participating boards must inform the appropriate legislative committees and the commissioner of management and budget of any change in the administrative management of the program, and the amount of any appropriation transferred under this provision.”

Proposal:

This proposal will move the HPSP budget to the newly designated Administering Board, the Board of Psychology. This is an administrative change and will have no impact on program services.

Impact on Children and Families:

Access to qualified health care professionals is essential to children and families. This change item will ensure the agency’s ability to continue to provide essential services to protect the public.

Equity and Inclusion:

The agency’s mission to the protect the public is all-inclusive.

Tribal Consultation:

Does this proposal have a substantial direct effect on one or more of the Minnesota Tribal governments?

Yes

No

IT Costs:

Not applicable.

Results:

The program will be able to continue its operations to protect the public.

Statutory Change(s):

There are no statutory changes.

Program: Board of Medical Practice

Activity: Medical Practice Operations

<https://mn.gov/boards/medical-practice/>

AT A GLANCE

BOARD OF MEDICAL PRACTICE

- Issue new credentials
- Renew credentials
- Take action against regulated professionals

PURPOSE AND CONTEXT

The Board of Medical Practice (Board) established on July 1, 1887, is mandated by M.S. 214 & M.S. 147.01 to protect the public from the improper and unlawful practice of medicine. Laws and regulations provide authority to grant and govern the subsequent use of credentials to practice medicine and seven allied health professions: Physicians, Acupuncturists, Athletic Trainers, Genetic Counselors, Naturopathic Doctors, Physician Assistants, Respiratory Therapists, and Traditional Midwives.

The Board also serves as the designated administering board for the Health Professionals Services Program (HPSP), a confidential monitoring program that serves the health-related licensing boards pursuant to M.S. 214.31.

The Board carries out its mission of public protection by granting qualified applicants the privilege to practice in Minnesota and by investigating complaints relating to the competency or behavior of credentialed individuals.

SERVICES PROVIDED

The 16-member Board is supported by a full-time staff of 23. The Board relies the licensure and registration fees of the professions it regulates to fund the operations and services provided by the Board. The Board also manages HPSP's funds for the operations and services provided under the program's authority. Primary services for the Board include:

1. **Licensure and registration:** The Board ensures that applicants have met minimum licensure and registration standards established by the Board. These standards include registering enrollees in accredited training programs; conducting primary source verification that an applicant has successfully completed accredited education and training and has successfully passed a qualifying national examination. The Board also establishes that an applicant is competent to practice in the credentialed profession by reviewing the applicant's background and fitness to practice. As of January 1, 2018, all applicants for initial licensure and licensees applying for participation in an interstate licensure compact are required to complete a fingerprint based criminal background check, providing additional information for the Board to consider when making licensure decisions.
2. **Continued Competence:** The Board requires continuing education for all credentialed professionals under its regulatory authority. The Board conducts continuing education audits to ensure compliance with educational requirements.
3. **Complaint Investigation and Resolution:** The Board investigates and resolves all jurisdictional complaints against health care professionals under its regulatory authority and against individuals engaged in unlicensed practice. Deviations from minimum practice standards are identified and conduct that places patients at risk is addressed through appropriate disciplinary, corrective and educational remedies.

RESULTS

<i>Type of Measure</i>	<i>Name of Measure</i>	<i>Previous</i>	<i>Current</i>	<i>Dates</i>
Quantity	Active credentials	34,976	36,862	FY20 &
	New credentials	3,382	3,426	FY22
Quantity	Complaints received	857	916	FY21 & FY22
Quality	Complaints resolved	862	773	FY21 &
	Complaints resolved within 180 days	209	256	FY22
	Percent of online renewals	99.01	99.01	
Results	Disciplinary actions	67	73	FY21 &
	Corrective actions	4	8	FY22

Minnesota Statutes chapters 147 (<https://www.revisor.mn.gov/statutes/?id=147>), 147A – F (<https://www.revisor.mn.gov/statutes/cite/147a>, <https://www.revisor.mn.gov/statutes/cite/147b>, <https://www.revisor.mn.gov/statutes/cite/147c>, <https://www.revisor.mn.gov/statutes/cite/147d>, <https://www.revisor.mn.gov/statutes/cite/147e>, <https://www.revisor.mn.gov/statutes/cite/147f>) and 148.7801 – 148.7815 (<https://www.revisor.mn.gov/statutes/cite/148.7801>) provide the Board of Medical Practice with legal authority to regulate medical practice and allied health professions for the purpose of public protection.

Minnesota Statutes chapter 214.32, Subd. 1(a) and (b) (<https://www.revisor.mn.gov/statutes/cite/214.32>) provides the Board of Medical Practice with the designated legal authority to provide administrative management of the Health Professionals Services Program for the purpose of public protection.

Medical Practice Operations

Activity Expenditure Overview

(Dollars in Thousands)

	Actual FY20	Actual FY21	Actual FY22	Estimate FY23	Forecast Base FY24 FY25		Governor's Recommendation FY24 FY25	
<u>Expenditures by Fund</u>								
1201 - Health Related Boards	3,610	4,259	4,577	5,199	4,866	4,866	5,779	5,971
2000 - Restrict Misc Special Revenue	68	79	100	97	68	68	68	68
Total	3,678	4,338	4,677	5,296	4,934	4,934	5,847	6,039
Biennial Change				1,956		(105)		1,913
Biennial % Change				24		(1)		19
Governor's Change from Base								2,018
Governor's % Change from Base								20
<u>Expenditures by Category</u>								
Compensation	1,840	1,903	1,948	2,125	2,150	2,213	2,464	2,618
Operating Expenses	1,830	2,435	2,707	3,163	2,776	2,713	3,375	3,413
Other Financial Transaction	8		22	8	8	8	8	8
Total	3,678	4,338	4,677	5,296	4,934	4,934	5,847	6,039
<u>Full-Time Equivalent</u>								
	21.53	21.77	22.39	23.00	23.00	23.00	25.00	25.00

Medical Practice Operations

Activity Financing by Fund

(Dollars in Thousands)

	Actual FY20	Actual FY21	Actual FY22	Estimate FY23	Forecast Base		Governor's Recommendation	
					FY24	FY25	FY24	FY25
1201 - Health Related Boards								
Balance Forward In		1,606		333				
Direct Appropriation	5,007	4,994	4,910	4,866	4,866	4,866	5,779	5,971
Transfers Out		493						
Cancellations	15	1,848						
Balance Forward Out	1,382		333					
Expenditures	3,610	4,259	4,577	5,199	4,866	4,866	5,779	5,971
Biennial Change in Expenditures				1,907		(44)		1,974
Biennial % Change in Expenditures				24		(0)		20
Governor's Change from Base								2,018
Governor's % Change from Base								21
Full-Time Equivalents	21.53	21.77	22.39	23.00	23.00	23.00	25.00	25.00

2000 - Restrict Misc Special Revenue

Balance Forward In	18	33	39	29				
Receipts	82	85	90	68	68	68	68	68
Balance Forward Out	33	39	29					
Expenditures	68	79	100	97	68	68	68	68
Biennial Change in Expenditures				50		(61)		(61)
Biennial % Change in Expenditures				34		(31)		(31)
Governor's Change from Base								0
Governor's % Change from Base								0

Program: Board of Medical Practice

Activity: Health Professionals Services Program

<https://mn.gov/boards/hpsp/>

AT A GLANCE

- Serves the 16 health regulatory boards, the Emergency Services Regulatory Board, the Department of Health, and the practitioners they regulate
- Over 350 health practitioners referred annually
- Over 350 health practitioners discharged annually
- Over 600 health practitioners are actively enrolled in Health Professionals Services Program (HPSP)

NOTE: HPSP is a program providing services on behalf of the State agencies that regulate healthcare professionals. HPSP's structure requires that its budget and oversight be assigned to one of the participating Boards. The Board of Medical Practice is designated as the administering board and fiscal agent for HPSP.

PURPOSE AND CONTEXT

The Health Professionals Services Program's (HPSP) mission is to protect the public by monitoring regulated health professionals whose illnesses may impair their ability to practice safely. HPSP achieves its mission by promoting early intervention, diagnosis, and treatment as an alternative to board discipline. Early intervention improves the chances for successful treatment before clinical skills are compromised and patients may be harmed.

HPSP provides services to all of the health licensing boards in Minnesota. This enables all boards to access the same service while eliminating the need for duplicative services. It also enables health practitioners, their employers, and treatment providers easy access to program services and expertise.

SERVICES PROVIDED

Health practitioners self-refer or are referred to HPSP for the monitoring of their substance, psychiatric, and/or other medical disorders which may impair their ability to practice safely. HPSP protects the public by immediately intervening with health practitioners who are unsafe to practice, which directly contributes to the statewide outcome that people in Minnesota are safe. Additionally, HPSP's enabling legislation allows some practitioners to report to HPSP without board involvement, allowing them to benefit from HPSP monitoring outside of board disciplinary processes.

To accomplish its mission, HPSP provides the following services to regulated health practitioners in Minnesota:

- Determine whether health practitioners have potentially impairing illnesses that warrant monitoring and implement immediate practice restrictions if appropriate (HPSP interventions start even before monitoring contracts are signed).
- Create and implement monitoring contracts for health practitioners with potentially impairing illnesses.
- Monitor health practitioners' professional practice, continuing care, and compliance with monitoring contracts.
- Report practitioners who are unsafe to practice or who violate the conditions of their monitoring contracts to their regulatory board.
- Provide outreach and education to professional schools, health care employers, treatment programs, and other stakeholders about HPSP services.

RESULTS

HPSP protects the public by implementing monitoring contracts that require accountability and provide structure for practitioners to manage their illnesses, while also monitoring their work performance. HPSP protects the public by identifying and addressing non-compliance with treatment and monitoring or performance issues. This includes reporting or discharging practitioners to their regulatory boards where they may face disciplinary action. The measurements below do not show factors that contribute to practitioner non-compliance with monitoring (i.e., financial resources, insurance, stable support system).

<i>Type of Measure</i>	<i>Name of Measure</i>	<i>Previous</i>	<i>Current</i>	<i>Dates</i>
Quantity	Number of practitioners referred	416	382	FY21 & FY22
Quantity	Number of practitioners discharged	463	404	FY21 & FY22
Quantity	Number of practitioners who successfully completed the terms of monitoring.	178	168	FY21 & FY22
Quantity	Number of practitioners discharged to their board due to non-compliance with monitoring*	68	41	FY21 & FY22
Quality	Percent of practitioners who successfully met the terms of monitoring*	60%	68%	FY21 & FY22
Quality	Percent of practitioners reported to their board for not completing monitoring*	34%	32%	FY21 & FY22
Quality	Percent of monitoring contracts signed within 60 days	85%	80%	FY21 & FY22

* Represents practitioners who engaged in monitoring.

M.S. 214.31 to M.S. 214.37 (<https://www.revisor.mn.gov/statutes/?id=214.31>) provides the legal authority for HPSP.

Health Professionals Services Program

Activity Expenditure Overview

(Dollars in Thousands)

	Actual FY20	Actual FY21	Actual FY22	Estimate FY23	Forecast Base		Governor's Recommendation	
					FY24	FY25	FY24	FY25
<u>Expenditures by Fund</u>								
1201 - Health Related Boards	854	938	973	1,031	1,002	1,002	0	0
Total	854	938	973	1,031	1,002	1,002	0	0
Biennial Change				212		0		(2,004)
Biennial % Change				12		(0)		(100)
Governor's Change from Base								(2,004)
Governor's % Change from Base								(100)
<u>Expenditures by Category</u>								
Compensation	746	790	812	830	785	805	0	0
Operating Expenses	108	147	161	200	216	196	0	0
Other Financial Transaction		1	0	1	1	1	0	0
Total	854	938	973	1,031	1,002	1,002	0	0
<u>Full-Time Equivalents</u>	7.56	8.02	8.11	8.00	7.00	7.00	0.00	0.00

Health Professionals Services Program

Activity Financing by Fund

(Dollars in Thousands)

	Actual FY20	Actual FY21	Actual FY22	Estimate FY23	Forecast Base		Governor's Recommendation	
					FY24	FY25	FY24	FY25
1201 - Health Related Boards								
Balance Forward In		198		29				
Direct Appropriation	1,023	1,002	1,002	1,002	1,002	1,002	0	0
Transfers In	23							
Transfers Out		100						
Cancellations		162						
Balance Forward Out	191		29					
Expenditures	854	938	973	1,031	1,002	1,002	0	0
Biennial Change in Expenditures				212		0		(2,004)
Biennial % Change in Expenditures				12		(0)		(100)
Governor's Change from Base								(2,004)
Governor's % Change from Base								(100)
Full-Time Equivalents	7.56	8.02	8.11	8.00	7.00	7.00	0.00	0.00