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COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE
BUREAU OF PROFESSIONAL AND OCCUPATIONAL AFFAIRS

F I N A L M I N U T E S

MEETING OF:

STATE BOARD OF PODIATRY

TIME: 10:33 A.M.

Held at

PENNSYLVANIA DEPARTMENT OF STATE

2525 North 7th Street

CoPA HUB, Eaton Conference Room

Harrisburg, Pennsylvania 17110

as well as

VIA MICROSOFT TEAMS

Wednesday, February 28, 2024

State Board of Podiatry
February 28, 2024

BOARD MEMBERS:

Arion R. Claggett, Acting Commissioner, Bureau of Professional and Occupational Affairs
Eric B. Greenberg, D.P.M., J.D., Chairman
Dia D. McCaughan, D.P.M.
Christopher A. Seda, D.P.M., Vice Chairman
William D. Fetchik, D.O., Secretary

BUREAU PERSONNEL:

Dean F. Picarella, Esquire, Board Counsel
Thomas M. Davis, Esquire, Regulatory Counsel
Paul J. Jarabeck, Esquire, Senior Board Prosecutor
Timothy J. Henderson, Esquire, Board Prosecution Liaison
Priscilla Turek, Board Administrator
Andrew LaFratte, MPA, Deputy Policy Director, Department of State
Carlton Smith, Deputy Chief Counsel, Prosecution Division
Nichole Wray, Division Chief of the State Boards of Medicine, Osteopathic Medicine, and Podiatry
Deena Parmelee, Legal Office Administrator 1, Department of State
Brian, Extern, Department of State
Benjamin McFadden, Extern, Department of State

ALSO PRESENT:

Mike Barth, Executive Director, Pennsylvania Podiatric Medical Association
Adam Jarabeck
Derek Richmond

1 ***

2 State Board of Podiatry

3 February 28, 2024

4 ***

5 [Pursuant to Section 708(a)(5) of the Sunshine Act,
6 at 10:00 a.m. the Board entered into Executive
7 Session with Dean F. Picarella, Esquire, Senior Board
8 Counsel, for the purpose of conducting quasi-judicial
9 deliberations on a number of matters that are
10 currently pending before the Board and to receive the
11 advice of counsel. The Board returned to open
12 session at 10:30 a.m.]

13 ***

14 The regularly scheduled meeting of the State
15 Board of Podiatry was held on Wednesday, February 28,
16 2024. Eric B. Greenberg, D.P.M., J.D., Chairman,
17 called the meeting to order at 10:33 a.m.

18 ***

19 [Dean F. Picarella, Esquire, Board Counsel, noted the
20 meeting was being recorded and voluntary
21 participation constituted consent to be recorded.

22 Mr. Picarella also noted the Board entered into
23 Executive Session for the purpose of conducting
24 quasi-judicial deliberations on a number of matters
25 that are currently pending before the Board and to

1 receive the advice of counsel.]

2 ***

3 Introduction of Board Members/Attendees

4 [Priscilla Turek, Board Administrator, provided an
5 introduction of the Board members, staff, and
6 audience in attendance.]

7 ***

8 Approval of minutes of the December 20, 2023 meeting

9 CHAIRMAN GREENBERG:

10 Next on the agenda is the approval of
11 minutes from the previous meeting in
12 December. Has everybody reviewed those
13 minutes?

14 Can I get a motion to approve the
15 minutes as recorded?

16 ACTING COMMISSIONER CLAGGETT:

17 So moved.

18 CHAIRMAN GREENBERG:

19 Second?

20 DR. FETCHIK:

21 Second.

22 CHAIRMAN GREENBERG:

23 May I have a roll call vote on that?

24

25 Mr. Claggett, aye; Dr. Greenberg, aye;

1 Dr. McCaughan, aye; Dr. Seda, aye; Dr.
2 Fetchik, aye.

3 [The motion carried unanimously.]

4 ***

5 Appointment - Annual Prosecution Division
6 Presentation

7 [Carlton Smith, Esquire, Deputy Chief Counsel,
8 Prosecution Division, informed Board members that he
9 assumed his role in March 2023 when Carolyn
10 DeLaurentis was promoted to the Executive Deputy
11 Chief Counsel position and provided a brief summary
12 of his professional background.

13 Mr. Smith reported a decrease in the number of
14 Bureau of Professional and Occupational Affairs
15 (BPOA) complaints across all boards and commissions
16 from around 22,000 in 2022 to roughly 19,000 in 2023.

17 Mr. Smith presented the Prosecution Division's
18 Annual Report for the State Board of Podiatry. He
19 reported almost 1,500 licensees in 2023. He noted 73
20 cases were opened in 2023. He also noted 87 current
21 open cases and 65 closed cases. He informed Board
22 members that prosecution's standard is to be able to
23 dispose of a case within a year across all boards.

24 Mr. Smith addressed closed discipline cases in
25 2023, noting 4 suspensions, 3 voluntary surrenders,

1 and some fines.

2 Mr. Smith addressed prosecution not warranted and
3 warning letters. He reported 6 warning letters and
4 explained that warning letters are issued after
5 prosecution considered the seriousness of the
6 allegations, licensee disciplinary history, and
7 strength of the evidence.

8 Mr. Smith discussed prosecution not warranted,
9 noting prosecution again considers the seriousness of
10 the allegations and disciplinary history but also
11 considers any type of expert opinion in terms of
12 evaluating whether to forward with the case and
13 assessing any possible violation.

14 Mr. Smith also reported the Board had one case
15 dismissed in 2023.]

16 ***

17 Report of Prosecutors

18 [Timothy J. Henderson, Esquire, Board Prosecution
19 Liaison, presented the Consent Agreement for Case No.
20 21-44-017790. He referred to Section 16(a)(3) of the
21 Podiatry Practice Act and addressed the recommended
22 discipline, including undergoing a PROBE Ethics &
23 Boundaries Program.

24 Acting Commissioner Claggett asked Mr. Henderson
25 to provide an overview of the PROBE Ethics &

1 Boundaries Program.

2 Mr. Henderson explained that the course is
3 basically for professionals who breach boundaries
4 with patients. He noted that the ethics course is a
5 live three-day course of continuing education, where
6 individuals are educated on boundaries in the
7 workplace as well as other relevant instruction of
8 how to present themselves in the workplace.

9 Mr. Henderson mentioned that the case is not
10 common in the podiatry world, so there was not a lot
11 of precedent set by the Board on this particular
12 issue. He noted the civil penalty was addressed to
13 provide justice for this matter and to correspond to
14 similar acts that may have been committed by
15 podiatrists.

16 Mr. Henderson noted that prior to November 2022
17 that the Commonwealth did present this case, and
18 everything else is the same except for the addition
19 of the 12 months of probation, which would likely be
20 reported to the National Practitioner Data Bank.

21 Chairman Greenberg asked whether the 25 hours of
22 education is also done for similar actions or
23 violations within the medical and doctor of
24 osteopathic medicine (D.O.) boards.

25 Mr. Henderson noted the education would be done

1 for similar actions or violations within the medical
2 and podiatric boards, and it is interactive and
3 instructional as well.]

4 ***
5 [Pursuant to Section 708(a)(5) of the Sunshine Act,
6 at 10:50 a.m. the Board entered into Executive
7 Session with Dean F. Picarella, Esquire, Board
8 Counsel, for the purpose of conducting quasi-judicial
9 deliberations on a number of matters that are
10 currently pending before the Board and to receive the
11 advice of counsel. The Board returned to open
12 session at 10:55 a.m.]

13 ***
14 MR. PICARELLA:
15 Based upon discussions in Executive
16 Session, I believe the Board Chair would
17 entertain a motion to approve the Consent
18 Agreement at Case No. 21-44-017790.

19 CHAIRMAN GREENBERG:
20 Would somebody make the motion?

21 ACTING COMMISSIONER CLAGGETT:

22 So moved.

23 CHAIRMAN GREENBERG:
24 Second to the motion?

25 DR. FETCHIK:

1 Second.

2 CHAIRMAN GREENBERG:

3 May I have a roll call vote?

4

5 Mr. Claggett, aye; Dr. Greenberg, aye;
6 Dr. McCaughan, aye; Dr. Seda, recuse; Dr.
7 Fetchik, aye.

8 [The motion carried. Christopher Seda recused
9 himself from deliberations and voting on the motion.
10 The Respondent's name is Youssef M. Kabbani, D.P.M.]

11 ***

12 Report of Prosecutors - (cont.)

13 [Paul J. Jarabeck, Esquire, Senior Board Prosecutor,
14 informed Board members that the Pennsylvania
15 Department of Health will be publishing a Health
16 Alert Network Advisory detailing infection prevention
17 and control practice expectations in podiatric care.

18 Mr. Jarabeck noted that the draft will be
19 released jointly by the Philadelphia Department of
20 Public Health and the Pennsylvania Department of
21 Health. He stated the Pennsylvania Department of
22 Health has received input from regulatory partners
23 for long-term care facilities and from the
24 Pennsylvania Podiatric Medical Association (PPMA),
25 noting PPMA has agreed to distribute the Health Alert

1 Network Advisory by email to their members once it is
2 published.

3 Mr. Jarabeck thanked Acting Commissioner Claggett
4 and Board Counsel for their assent to being able to
5 send an email blast to all Podiatry Board licensees
6 of the Health Alert Network Advisory. He mentioned
7 that the Department of State website will include a
8 link but not till there is a publication blackout
9 that has ended somewhere around March 25.

10 Mr. Jarabeck is hoping the advisory will be
11 published by the end of this week or beginning of
12 next week. He emphasized there is a strong
13 partnership between their office and the Department
14 of Health to work together on infection control
15 investigations and to bring information to the
16 public.

17 Dr. Fetchik requested information regarding what
18 infections or diseases podiatrists would be required
19 to report to agencies.

20 Mr. Jarabeck explained the need to be careful
21 about delving into the area of the Department of
22 Health, being an advisory entity that is working to
23 stop a violation versus what they do in terms of
24 investigating and potentially putting discipline
25 forth.

1 Mr. Jarabeck explained that it is really the
2 standard of process of sterilizing and disinfecting
3 instruments and the facility itself versus any type
4 of reporting of disease, which goes back to following
5 the standard of care and infection control in
6 treatment settings. He mentioned that their emphasis
7 has been on the issue of long-term care facilities.

8 Acting Commissioner Claggett thanked Mr. Jarabeck
9 for bringing it to the Board's attention.]

10

11 Report of Board Counsel - Final Adjudication and
12 Order for Approval

13 MR. PICARELLA:

14 I have one item in my report. It's the
15 Final Adjudication and Order drafted
16 pursuant to the Board's direction at the
17 last meeting. It's on Timothy Abbott,
18 Case No. 22-44-013588.

19 Based upon discussions in Executive
20 Session, I believe the Board Chair would
21 entertain a motion to adopt the
22 Adjudication and Order in this matter and
23 direct Board Counsel to issue it as the
24 Final Order of the Board.

25 CHAIRMAN GREENBERG:

1 May I have a motion for that?

2 ACTING COMMISSIONER CLAGGETT:

3 So moved.

4 CHAIRMAN GREENBERG:

5 Second?

6 DR. FETCHIK:

7 Second.

8 CHAIRMAN GREENBERG:

9 Roll call vote?

10

11 Mr. Claggett, aye; Dr. Greenberg, aye;

12 Dr. McCaughan, aye; Dr. Seda, aye; Dr.

13 Fetchik, aye.

14 [The motion carried unanimously.]

15

16 Report of Board Counsel - Regulatory Status Report

17 [Thomas M. Davis, Esquire, Regulatory Counsel,

18 provided a Status of Regulations Report for the

19 Board's review. He informed Board members of the

20 active regulations and provided an update on three

21 regulations that were moving forward. He mentioned

22 that two of the regulations were drafted by Deputy

23 Chief Counsel Montgomery, who probably presented

24 before the Board several times regarding the Act 53

25 and child abuse regulations.

1 Mr. Davis stated the Board received a letter from
2 the Independent Regulatory Review Commission on
3 February 1, which read, the Independent Regulatory
4 Review Commission has reviewed your proposed
5 regulation. We have no objections, comments, or
6 recommendations to offer on this regulation. If you
7 deliver the final-form regulation without revisions
8 and the committees do not take any action, it will be
9 deemed approved.

10 Mr. Davis noted it is practically the same
11 regulation bureau-wide and is available on IRRC's
12 website under 16A-4412.

13 Mr. Davis addressed 16A-66, noting it is a bureau
14 or commissioner's regulation regarding Act 53 and
15 criminal offenses related directly to the practice of
16 this profession. He reported it to be a
17 consolidation of all the board lists, and it is also
18 available on IRRC's website.

19 Mr. Davis referred to bullet points provided by
20 Deputy Chief Counsel Montgomery, where the final-form
21 rulemaking was delivered to IRRC and the standing
22 committees of the House and Senate on February 14,
23 2024. He noted everyone who commented was notified
24 of the delivery and the availability of the final-
25 form rulemaking. He informed Board member that it is

1 posted on IRRC's website and is expected to be on
2 IRRC's agenda for its public meeting on March 21,
3 2024. He noted there will be a public meeting before
4 the Independent Regulatory Review Commission, and
5 anybody can attend.

6 Mr. Davis also provided an update on the
7 radiologic procedures regulation, noting it is
8 extremely close to completion. He mentioned the
9 Board already voted to approve the annex and the
10 preamble, and he is working on the regulatory
11 package. He discussed the Regulatory Analysis Form
12 (RAF) and a question about what the Board wanted to
13 do in comparison to the 13 other states in the
14 Northeast quadrant.]

15 ***

16 [Andrew LaFratte, MPA, Deputy Policy Director,
17 Department of State, addressed the Board's prior
18 request, noting two letters of support he received
19 from Chairman Greenberg were very helpful in
20 understanding the challenges.

21 Mr. LaFratte also mentioned receiving a letter
22 from Dr. Pontious, where one of the main pain points
23 was the inability of a podiatrist to directly order
24 home health care, including wound care, after
25 performing foot and ankle surgery. He noted Dr.

1 Pontious suggested that the Certified Registered
2 Nurse Practitioner (CRNP) statute Title 41, § 21.27(a)
3 limits a CRNP to "collaborate only with physicians
4 who practice in this Commonwealth."

5 Mr. LaFratte explained that the request from Dr.
6 Pontious and Chairman Greensberg was to modify the
7 regulation to then read, "collaborate only with
8 physicians and podiatrists in this Commonwealth,"
9 and collaboration would be limited to the present
10 scope of podiatric medicine.

11 Mr. LaFratte mentioned receiving a second letter
12 from Dr. Paris with the main pain point being that
13 the lack of recognition for podiatrists as physicians
14 has resulted in allied health professionals refusing
15 to accept a podiatrist's orders and then directing
16 that to recommendations from the PA Chapter of the
17 American Physical Therapy Association as a rationale.

18 Mr. LaFratte informed Board members that their
19 office has been in communication with the Department
20 of Human Services regarding Medicaid requirements for
21 podiatry services and provided a brief summary of the
22 findings. He stated the Centers for Medicare and
23 Medicaid Services (CMS), which exercises federal
24 oversight authority for the Medicaid program, name
25 the services that state Medicaid programs are

1 required to provide under Chapter 42 of the Code of
2 Federal Regulations.

3 Mr. LaFratte referred to § 440, where podiatry is
4 an optional service that Pennsylvania has elected to
5 provide and the Medical Assistance Program in some
6 instances. He noted payment conditions for podiatric
7 services in the Medical assistance Program are found
8 in Title 55 of the PA Code in § 1143, which pertains
9 to podiatry services.

10 Mr. LaFratte stated the regulation details
11 podiatry services and has a list of non-compensable
12 services and items under § 1143.58 specifically
13 stating that payment is not made to a podiatrist for
14 these items and then lists 13 different items. He
15 noted item 11 on the list is physical therapy and may
16 be why the PA Chapter of the Physical Therapy
17 Association recommends that physical therapists not
18 accept orders from podiatrists when it comes to
19 Medicaid, which was highlighted in the letter from
20 Dr. Paris.

21 Mr. LaFratte stated the Medical Assistance
22 Program Outpatient Fee Schedule can be searched to
23 determine if a specific procedural code is covered in
24 the fee for service delivery system. He noted that
25 podiatrists are labeled as provider type 14 with

1 specialty 140 and can bill for those services. He
2 mentioned that exactly 4,376 entries are open to
3 podiatrists when looking at the Medical Assistance
4 Fee Schedule.

5 Chairman Greenberg expressed concern with the
6 word optional being used compared to the other
7 medical professions or the allopathic and osteopathic
8 providers and asked why podiatry is not included as a
9 mandatory service.

10 Mr. LaFratte mentioned having conversations with
11 The Department of Human Services (DHS). He noted it
12 is a federal issue and is an elected service, where
13 Pennsylvania has elected to cover that. He explained
14 that a covered service is defined in the MA Program
15 and pertains to a benefit to which an MA beneficiary
16 is entitled under the program of the Commonwealth.

17 Mr. LaFratte stated DHS was asked what a
18 podiatrist or a practitioner can do if a service is
19 not covered and were told that in the fee for service
20 delivery system, if an MA provider believes that an
21 item or service not listed on the program fee
22 schedule is medically necessary for the MA
23 beneficiary, the provider may submit a request for
24 coverage of that item or service through DHS's
25 Administrative Waiver Program. He mentioned that

1 there is an exception process, and the procedure is
2 described in the Medical Assistance program provider
3 handbook.

4 Mr. LaFratte explained that DHS reviews the
5 administrative waivers and then make a medical
6 necessity determination based on the submitted
7 documentation and will notify the prescriber or
8 provider and the beneficiary of that decision.

9 Mr. LaFratte informed Board members that the
10 Department of State (DOS) policy is available to
11 facilitate the conversation with the State Board of
12 Nursing if the Board expresses interest in pursuing
13 the regulatory change concerning the CRNP statute.

14 Mr. LaFratte also stated DOS policy is continuing
15 this conversation with the Department of Human
16 Services regarding the non-compensable list that has
17 physical therapy on there for podiatry services. He
18 noted waiting for answers on what, if any, mechanisms
19 exist for making alterations to the contents of that
20 list.

21 Mr. LaFratte also mentioned looking into the
22 Department of Human Services Code for Pennsylvania at
23 Title 55 of that Human Services Code under § 5230.3,
24 where there is a possibility of including podiatrists
25 in the definition of a licensed practitioner of the

1 healing arts. He noted the definition of a licensed
2 practitioner of the healing arts under the Human
3 Services Code reads that it is an individual licensed
4 by the Commonwealth to practice the healing arts, and
5 term is limited to a physician, physician assistant,
6 a certified registered nurse practitioner, and
7 psychologist.

8 Mr. LaFratte referred to the federal regulations
9 under Home Health Services at § 440.70 for the federal
10 Medicaid Program, where it states that home health
11 services means the services of the section that are
12 provided to a beneficiary on his or her physician's
13 orders or orders written by a licensed practitioner
14 of the healing arts acting within their scope of
15 practice authorized under state law and as part of a
16 written plan of care that the ordering practitioner
17 reviews every 60 days for services.

18 Mr. LaFratte informed Board members that he is
19 still talking with DHS to see whether podiatry could
20 be added to the definition of a licensed practitioner
21 of the healing arts, which could alleviate some of
22 the concerns brought by the Board.

23 Chairman Greenberg encouraged Mr. LaFratte to
24 pursue that and commented that the CRNP and the human
25 service avenues seem to be a path to clear up the

1 Board's concerns.

2 Dr. McCaughan asked what kind of time frame a
3 podiatrist would be looking at when applying for the
4 waiver through DHS because patient care may be
5 affected due to delays, along with putting additional
6 administrative burdens on private practices.

7 Chairman Greenberg commented that the Board would
8 prefer podiatrists not have to go through that avenue
9 and delay when treating a patient and is asking for
10 the same authority as other healthcare practitioners
11 who do not have to make their patients wait.

12 Mr. LaFratte offered to ask DHS and forward their
13 response to Board Counsel.

14 Chairman Greenberg stated the Board agreed with
15 the CRNP and the Human Services options.

16 Mr. LaFratte will follow up with Board Counsel
17 and Board administrator and go that route with the
18 State Board of Nursing and continue to do their part
19 speaking with the PA Department of Health and federal
20 human services to investigate possibilities on a
21 state level.

22 Chairman Greenberg thanked Mr. LaFratte for the
23 quick response and follow up regarding the proposals.

24 Mr. LaFratte mentioned the Board Counsel had
25 suggested the Board consider amending their own

1 Podiatry Practice Act in the past to define the term
2 of a podiatric physician and asked whether that is
3 also something the Board would like to do.

4 Chairman Greenberg stated the Board would like
5 the profession of podiatry to be recognized as a
6 physician practicing within their scope of practice
7 as laid out per the statute. He noted their entire
8 impetus was trying to go through it that way but that
9 it seemed to meet lot of hurdles. He reported on
10 never receiving a response from other stakeholders to
11 let the Board know of objections that could be
12 remedied.

13 Mr. LaFratte suggested the Board put a proposal
14 together defining podiatric physician within their
15 own Podiatry Practice Act.

16 Mr. Davis informed Board members that it may not
17 be something the Board can do if it was already
18 looked into in the past.

19 Chairman Greenberg explained that the Board never
20 received a reason as to why it was not accepted in
21 the past, and the Board is currently asking for the
22 courtesy of a response as to why it is being
23 rejected, so the Board can then give a response. He
24 stated the Board would like to know who objected to
25 it and their reason as to why it was not accepted.

1 Chairman Greenberg emphasized that the word
2 physician means physician within the scope of
3 practice that has been on the books for many decades
4 now, and there is no intention to expand their scope
5 of practice by including the word physician as part
6 of their definition.

7 Mr. Picarella stated there would need to be
8 changes to the Practice Act that would go through the
9 legislature, not to their regulations.

10 Chairman Greenberg commented that Mr. LaFratte is
11 working on certain statutes for the CRNPs and human
12 services, and the Board could have another prong
13 through the legislature. He again mentioned the
14 importance of receiving a response and an answer as
15 to what is stalling it or to any objections being
16 made.

17 Mr. Davis offered to work with Mr. Picarella and
18 Mr. LaFratte to get the Board some kind of a
19 response.]

20 ***
21 Report of Board Chair - No Report

22 ***
23 Report of Acting Commissioner - No Report

24 ***
25 Report of Board Administrator - No Report

1 [Priscilla Turek, Board Administrator, thanked Dr.
2 McCaughan for her service to the State Board of
3 Podiatry.]

4 ***
5 Continuing Education Program Approval

6 CHAIRMAN GREENBERG:

7 Continuing Education Program Approval for
8 Jefferson Northeast Health Podiatry Grand
9 Rounds for April 18.

10 Do I have a motion to ratify the
11 position of the Continuing Education
12 Committee?

13 ACTING COMMISSIONER CLAGGETT:

14 So moved.

15 CHAIRMAN GREENBERG:

16 Second?

17 DR. FETCHIK:

18 Second.

19 CHAIRMAN GREENBERG:

20 Roll call vote.

21

22 Mr. Claggett, aye; Dr. Greenberg, aye;
23 Dr. McCaughan, aye; Dr. Seda, aye; Dr.
24 Fetchik, aye.

25 [The motion carried unanimously.]

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For the Board's Information/Discussion - Board Meeting Dates

[Eric B. Greenberg, D.P.M., J.D., Chairman, noted the 2024 Board meeting dates are April 17, June 20, August 21, October 15, and December 16. He also noted 2025 meeting dates for the Board's review.]

Adjournment

CHAIRMAN GREENBERG:

Motion to adjourn.

ACTING COMMISSIONER CLAGGETT:

So moved.

[There being no further business, the State Board of Podiatry Meeting adjourned at 11:28 a.m.]

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CERTIFICATE

I hereby certify that the foregoing summary minutes of the State Board of Podiatry meeting, was reduced to writing by me or under my supervision, and that the minutes accurately summarize the substance of the State Board of Podiatry meeting.



Derek Richmond,

Minute Clerk

Sargent's Court Reporting
Service, Inc.

STATE BOARD OF PODIATRY
REFERENCE INDEX

February 28, 2024

	TIME	AGENDA
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9	10:00	Executive Session
10	10:30	Return to Open Session
11		
12	10:33	Official Call to Order
13		
14	10:33	Introduction of Board Members/Attendees
15		
16	10:35	Approval of Minutes
17		
18	10:35	Appointment - Carlton Smith, Deputy
19		Chief Counsel, Annual Prosecution
20		Division Report
21		
22	10:45	Report of Prosecutors
23		
24	10:50	Executive Session
25	10:55	Return to Open Session
26		
27	10:55	Report of Prosecutors (cont.)
28		
29	11:01	Report of Board Counsel
30		
31	11:26	Continuing Education Program Approval
32		
33	11:27	For the Board's Information/Discussion
34		
35	11:28	Adjournment
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