

**MINUTES**  
**MASSACHUSETTS BOARD OF REGISTRATION IN MEDICINE**  
**MEDICAL SPA TASK FORCE**

**January 16, 2008**

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**PRESENT**

**Task Force Members**

*Boards:*

Gino Chisari, RN, Board of Registration in Nursing  
Barbara Kellman, JD, Board of Registration in Nursing  
Kathe Mullally, JD, Board of Cosmetology

*Legislature:*

Senator Joan Menard  
Representative Peter Koutoujian

*Appointees:*

Stephanie Cogliano, RE  
Dianne Quibell, MD  
Winifred Nee Tobin, Consumer  
Jeffrey Dover, MD  
Jagruti Patel, MD  
Faye Marie Jenkins, RN  
Karen Bonney, Board of Cosmetology  
An Hinds, Board of Cosmetology

*Absent:*

Catherine Hinds, Board of Cosmetology  
Karen McKoy, MD

**Board Staff**

Nancy Achin Audesse, Board of Registration in Medicine  
Russ Aims, Board of Registration in Medicine  
Brenda Beaton, Esq., Board of Registration in Medicine  
Kathleen DiTonno, Board of Registration in Medicine

## **1. Welcome, Goals for Today's Discussion**

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Nancy Achin Audesse, Executive Director of the Board of Registration in Medicine called to order the meeting of the Medical Spa Task Force. The goal of this meeting is to discuss the legislative outline for medical spa regulations including looking at the final document to move forward, focusing on the protection of public safety.

## **2. Approval of July 18<sup>th</sup>, August 29<sup>th</sup>, September 26<sup>th</sup>, October 24<sup>th</sup> and November 28<sup>th</sup> Minutes**

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Ms. Achin Audesse brought forth a motion to approve the meeting minutes of July 18, 2007, August 29<sup>th</sup>, September 26<sup>th</sup>, October 24<sup>th</sup> and November 28<sup>th</sup> Medical Spa Task Force Meetings. Mr. Aims states that the November minutes need minor grammatical changes, which will be made. All minutes were approved by the task force with no further discussion.

## **3. Discussion Topic: Legislative Outline of Medical Spa Regulation**

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Ms. Achin Audesse welcomed the newest member to the Medical Spa Task Force, Karen Bonney from the Board of Cosmetology. Ms. Achin Audesse stated that it is important that there are many representatives from all of the regulatory boards in order to ensure that there is equal opportunity for input. Mr. Aims stated that he will not be a voting representative for the Board in an effort to prevent the Board of Registration in Medicine from having additional pull in the proposed regulations. Ms. Achin Audesse and An Hinds are the official votes from the Board as the task force moves forward to ensure that it is not only physicians voting in this matter. Ms. Achin Audesse reiterated that there may continue to be some disagreements as the regulatory document is finalized, in which case, votes will be taken by members of the task force.

Ms. Bonney informed the task force that the Board of Cosmetology (BORC) is considering creating a license for an advanced aesthetician, but this framework for this process has not yet begun. Ms. Bonney stated that she will bring this discussion before the BORC with an update for the task force at the next meeting. In discussing the current proposed regulations of task force, Ms. Bonney stated that the aesthetician would work in a separate, designated space under physician supervision within the private office exemption. The reason being that under BORIN regulations, an aesthetician's practice facility is licensed, inspected and regulated by BORC. Both BORIN and BORIM stated that while private offices are exempt from licensure, the individual practice within an office as well as the environmental safety is part of their licensure. The task force went into discussion about the difficulty and exclusivity of having aestheticians being permitted to work only in a specific location of a private physician's office. The task force came to agreement that it would not be an issue for physicians to getting a facility license when an aesthetician is practicing in the office. This would help to protect both the patients as well as the practitioners by raising the standard for office space. This

would allow BORO to continue to regulate licensees' practice area, regardless of location. A condition of licensure by BORO will require a licensee to notify BORO of job location to ensure that BORO is able to inspect a licensee's location.

#### Discussion: Parameters of Private Office Exemption

Ms. Achin Audesse led the discussion regarding the private office exemption. The task force discussed the need to restrict private office practice so that a loophole is not created for physicians to run multiple locations with minimum supervision. Dr. Patel stated that maintaining one facility only is reasonable for appropriate oversight. If a physician wanted to have more than one facility he/she would need to apply for medical spa licensure, for which one would need a full time medical director, who does not have to be a physician. This refers to a Level 2 medical spa, as a Level 3 medical spa is deemed the practice of medicine, and must have a physician present at all times. Regardless of the number of facilities a physician owns, it would be required for each one to employ a full time medical director, who must be local. A Medical director would be required at a Level 3 Medical Spa and a site director would be required at a Level 2 Medical Spa. A medical director is not needed at Level 2 Medical Spa; the site director may be a nurse or physician. There also must be a back-up director so that there is always a director on site. The medical director may be a nurse or physician. The physician would be required to be on-site at each of his/her facilities 10% of the time, based on hours that the facility is open and must be immediately available by electronic means. Based on national standards, the physician must be a maximum of four hours away from the facility at any given time. This would allow the owning physician to review the prescriptive practice at each location as well as help to maintain the safety environment of the facility itself. There would be written protocols for emergency situations. Because the medical director would have clinical training, the supervising physician's immediate physical presence would not alter the outcome of an emergency situation. The medical director would be able to stabilize the patient and contact 911 to have patient transported for emergency care as medical spas would not be equipped to handle medical emergencies. The physical site standards would be under the jurisdiction of DPH, though each regulatory Board would maintain the authority to inspect its own licensee and work space. Ms. Achin Audesse stated that each Board may wish to write advisory practice guidelines for its licensees in this matter. Such detail as stated above should not be written in at a statutory level, but certainly each Board can benefit from the guidelines.

#### Discussion: Educational and Supervisory Proposal

Ms. Achin Audesse expressed that each Board should look at credential requirements of their licensees as well as any possible barriers for certification requirements.

Mr. Chisari reviewed the corrections as made to the supervision and training requirements. A detailed chart has been attached with highlighted revisions. Note that the term advanced aesthetician is used as a 'placeholder' for future regulations, as the license type of advanced aesthetician does not exist at this time. The task force stated that for the time being, the word advanced will be removed. The task force discussed the need for a

physician or nurse to carry an additional license from BORG if he/she wanted to provide Level 1 procedures. BORIM and BORIN agree that proof of appropriate training and credentials should be required, but not an additional license as this will cause confusion over which Board has jurisdiction of the licensee. Each Board would be best suited to determine the level of credential for its licensee to perform additional services as some of the Level 1 services may fall within the practice of nursing. If a nurse or physician wished to perform only Level 1 procedures, then a separate license would be required.

Within the category of Level 2 procedures, the word surgical will be removed, as anything surgical is a Level 3 procedure. Level 2 credential requirements were chosen based on national standards, some of which exists, some of which is forthcoming in the near future. The task force has named some of the standards as a placeholder.

The task force also discussed the role of a nurse as a supervisor to an aesthetician. Nurses do not supervise other licensed individuals because they are held to their own boards. However, a nurse may be a supervisor in an administrative role, not clinical. Referral for a client from a nurse would not be supervision and would be clinically appropriate.

#### **4. Goals for Next Meeting- Scheduling**

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The next meeting of the Medical Spa Task Force is tentatively set for February 27, 2008, 8:00 AM- 11:00 AM.

BORG will provide a memorandum to the Task Force regarding the possibility of an advanced aesthetician licensee, as the Task Force is unable to proceed without it. Attorney Beaton will draft legislation from BORIM regarding the separation of licensure of site versus individual practitioners. Each regulatory Board should also provide opinions in the issue. Dr. Dover will provide to Mr. Aims documentation surrounding the issues of purchase of equipment and secondary markets. Mr. Aims stated that the subcommittee on sale of goods is still working and will bring its recommendations to the next Task Force meeting.