



Oregon

Tina Kotek, Governor

Oregon Board of Medical Imaging

800 NE Oregon Street, Suite 1160A

Portland, OR 97232-2162

OBMI.info@OBMI.oregon.gov

www.oregon.gov/obmi

Phone: 971-673-0215

Fax: 971-673-0218

OREGON BOARD OF MEDICAL IMAGING (OBMI)

Stacy Katler, DVM, Executive Director (971-673-0216; cell-971-990-6514)

AGENCY MISSION

Created by the Legislature in 1977 (SB 679), the Board of Medical Imaging's mission is to protect the public health, safety and welfare of Oregonians undergoing medical imaging studies performed by agency licensees for the purpose of medical diagnosis and therapy.

OBMI has the responsibility, through licensure and enforcement, to ensure patient safety, licensee skill and ethics because patients themselves are not able to choose their provider for Medical Imaging procedures; this makes OBMI crucial in the continuance of protecting public health and safety.

ORGANIZATIONAL STRUCTURE

- 12-Member Board: Each Member, appointed by the Governor and confirmed by the Senate, serves two 3-year terms. Culturally and geographically diverse including 4 Physicians, 1 technologist from each of the 5 Imaging Modalities, 3 public members and as an advisory, non-voting member, the Section Manager from RPS (Radiation Protection Services).
- Staff: Staff is a diverse group with specialized knowledge of Medical Imaging with a history of experience and long-time employment with the Board including three Full-Time staff and one 0.75 FTE Investigator for a total of 3.75 FTE.

PROGRAM SUMMARY

- Licensure: Total of 8600 active licensees including: radiologic technologists; sonographers; nuclear medicine technologists; MRI technologists; radiation therapists; and limited x-ray machine operators (LXMO).
- Initial Education for Limited X-Ray: Inspect, approve, and oversee educational institutions that offer initial programs for limited x-ray permits. Coordinate national licensure examinations for limited x-ray machine operators (LXMO).
- Continuing Education: Review and approve continuing education course offerings including Cultural Competence. All licensees must maintain competency either by maintaining national registry credentialing or completing Board approved CE coursework.
- Enforcement: The OBMI investigates violations of licensure statutes and rules and resolves infractions through negotiated agreements nearly 100% percent of the time.
- Continuous renewals: OBMI sets license and permits to renew on the birth month of the applicant.
- License/permit fee: \$216 for a *two-year* license or permit.

PERFORMANCE AND OUTCOME MEASURES

- Timely licensure: All complete license applications and renewals are processed within 2 working days.
- Automation: 100% of ALL applications (renewals, new applications and all LXMO) are completed using online database
- Customer Service: 93% Excellent Service
 - Initial response to telephone inquiries within one business day.

To promote, preserve and protect the public health, safety and welfare of Oregonians who are undergoing medical imaging studies performed by agency license and permit holders for the purpose of medical diagnosis and therapy.



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- Informative e-newsletter to keep licensees informed regarding Board news and actions.
- Continuous review and update of website to simplify and provide user-friendly information.
- Discipline resolution: 99% of the 121 Disciplinary cases 23-25 Biennium so far resolved with Negotiated Settlements. 99% of 189 resolved with Negotiated Settlements for the Previous Biennium.
- Best practices: The Board annually reviews and adheres to specific performance measures (as directed by the Joint Legislative Audit Committee in 2006) regarding governance practices. 100%

PROGRAM OBJECTIVES

The Board Issues Licenses and Permits to technologists who operate medical imaging equipment. Technologists are trained to capture an image, using the least amount of radiation possible. These are the images that will enable a physician to make an accurate diagnosis and to create a treatment plan.

- Through licensure, ensure that persons who practice medical imaging on humans are educationally prepared and clinically competent.
- Increase awareness of Medical Imaging laws and practices among the public and medical provider community.
- Investigate and resolve complaints regarding medical imaging in a fair and timely manner.
- Determine that limited x-ray machine operator (LXMO) schools are operated in a manner to ensure that LXMOs are properly trained to perform within the scope of practice.
- Key Partners include Imaging Schools, National Credentialing Organizations and Registries, and local chapters of National medical imaging organizations.

MAJOR POLICY CHANGES

- Increasing numbers of licensees – from 4,200 in 2009 to 8,600 in 2024.
- Average Licensure increase of approximately 7% per biennium with a complex licensure process that involves 9 license types with over 37 subspecialties.
- With New Director (2019), enforce rules that hold facilities and licensees accountable for practicing without a valid license, contributing to a substantial increase in the number of disciplinary cases. (2020)
- Increases in complexity and number of disciplinary cases involving unprofessional conduct, negligence, and patient safety issues. (2020)
- Improved computer tracking and efficiency concerning Disciplinary Cases resulting in advanced Probation monitoring, simplified civil penalty payments accounting and better case load tracking. (2020)
- Completely Paperless business processes. Eliminated need for temporary data entry personnel. (2021)
- Created a Continuing Education Advisory Committee comprised of stakeholders and interested parties that makes recommendations to the Board concerning CE and other educational issues. (2020)
- New Database that allows for ALL license and permits to be completed online and user-friendly access 24/7 (2021)
- Complete rule and policy revisions. (2020)
- Increased Transparency: Posting Board Action on website. (2021)
- Established distance learning for LXMO schools which increases rural access to education programs. (2020)

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- Established a separate permit for Advanced Practice Registered Nurses (APRN) to Supervise fluoroscopy (2019).
- Starting Rule Advisory Committee for Complete Rule and Statute Revisions (2023)
- Complete rule revision (2024)

MAJOR BUDGET DRIVERS

- Increasing numbers and categories of licensed technologists and limited permits increase the workload for staff regarding licensing, compliance, and enforcement. Licensure is inherently complex due to the specialties and sub-specialties in the Medical Imaging Field.
- Increasing number of out-of-state license applicants – 18% increase in out-of-state licensees in past three years and consistently during the COVID-19 pandemic. This appears to be a growing trend of health facilities hiring licensed technologists who work for temporary/traveling agencies to fill staffing gaps.
- Increasing Legal Services costs related to disciplinary and compliance issues:
 - The average number of disciplinary cases has more than doubled over the past ten years. The Board has reviewed over a 16% increase so far this Biennium as compared to last Biennium.
 - Committee comprised of 4-6 Board Members that review all disciplinary cases prior to Quarterly Board meetings. This process provides for increased efficiency and detailed review of all cases, it doubles the number of meetings that our AAG needs to attend.

COVID-19 RESPONSE

- Ready and efficient Agency response to COVID-19 Pandemic.
- User-friendly website with up-to-date COVID-19 information and links.
- Agency Prepared to work remotely with IT hardware and software in place prior to pandemic need.
- Offices situated to allow for the three full-time employees to work safely during Pandemic, Investigator typically works remotely.
- Proactively filed Emergency Rules to Expedite licensure for technologists that were needed especially in remote communities.
- Existing Rules provide a process for Radiography School Graduates to practice on a Temporary License and enter the workforce. This was critical to provide staff during the initial stages of the pandemic with many chest radiographs needed.
- DAS Approved a Licensure Fee Increase for a July 1, 2020, effective date, Board postponed to January 1, 2021, to help alleviate added stress on licensees during the beginning of the pandemic.

SPECIFIC ACTIONS TO CONTAIN COSTS

- Avoid the need for staffing increase by focusing efforts on key performance measures of timely licensure and customer service. User friendly Website with easy-to-follow instructions and links for licensure, Q & A format information, dedicated staff with focus on service, licensing, and compliance.
- Efficiency in office practices decreases costs enabling staff to focus on service, licensure, and compliance. Streamlining office procedures, thoughtful work assignments that minimize duplicity.
- IT Improvements enhance the availability of information to prospective applicants, speed up licensure process and free up staff to cover increased workload. New Database is showing significant and favorable licensure efficiencies for staff and licensees.



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GOVERNOR'S RECOMMENDED BUDGET

- Expenditure limitation of \$1,806,246– comprised of all Other Funds
- 4 positions (4.0) FTE
- Limitation reductions (10%) will likely result in:
 - Reduced support services including computer support, legal services, office supplies.
Reduced response time and efficiency to respond to licensees. Delay in issuing licenses and responding to inquiries; delay in responding to inquiries from licensees; general reduction in customer service; reduced ability to investigate health care complaints; Reduced ability to continue current level of disciplinary regulation.
 - reduced ability to process continuing education requests; possible occasional office closure.