

DMV MEDICAL ADVISORY BOARD MEETING

WEDNESDAY FEBRUARY 8, 2023 4:00PM

MICROSOFT TEAMS MEETING

MAB MEMBERS IN ATTENDANCE: Chairman and seven members. Specialties represented: Internal medicine/Geriatrics, Internal medicine/Endocrinology, Neurology, Orthopedics, Occupational Medicine/Certified Medical Examiner, Cariology, and Psychiatry.

DMV EMPLOYEES IN ATTENDANCE: Motor Vehicle Division Chief Debra Notarino, Motor Vehicle Division Manager Susan Archambault, Motor Vehicle Program Coordinators Gayla Daigle, Lynell Little and Matthew Mangiafico, and Motor Vehicle Analysts Joseph Crowley, Roxanne Dean, Melissa Jones, Catherine Lam, Tanisha Markland, Edith Merrill, Victoria Platt and Patrice White

1. MEETING CALLED TO ORDER

Dr. ██████ called the meeting to order at 4:06pm.

2. WELCOME

Dr. ██████ asked if any new members were in attendance. Susan Archambault mentioned there are new members specializing in low vision standards, but they were added to the Board when this meeting was being organized and were not invited.

3. DIVISION UPDATE

Susan introduced the new Division Chief of Driver Regulation, Debra Notarino. Debra thanked everyone for joining the meeting and shared that there is a new legislative mandate the team has been working on.

4. DISCUSSION ON LEGISLATIVE CHANGE AND CORRESPONDING DMV FORMS

Matthew Mangiafico explained that new legislation allows drivers to submit a medical form that would be supplied to the Medical Advisory Board (MAB) to determine whether a person is safe to drive with a licensed driving instructor to practice for a road skills test while their license is medically withdrawn. Drs. ██████ and ██████ asked if this meant drivers must drive with a licensed driving instructor as opposed to a family member or DMV employee. Matthew affirmed this. The new DMV forms related to this change were displayed. Dr. ██████ asked for a hypothetical case as to what would happen before and after the law change. Matthew explained that prior to the law change, to practice on the road, the customer would have had to have a hearing officer authorize this. Now the customer's forms would be sent to MAB for review by an appointed medical professional. Catherine Lam added that previously with the hearing process, the hearing officer took up to 90 days to make a decision on whether the customer could practice on the road, and because of this time length, the customer may simply opt for testing without practicing and this puts the DMV road test agent and the general public at risk. Dr. ██████ commented on how there are not many people that request to practice before a road

test. Catherine responded that most customers don't want to wait to get back on the road so don't request a hearing to be able to practice driving. Dr. [REDACTED] suggested perhaps DMV should obligate customers to go to a certified driving school of DMV's choosing. Matthew replied that the DMV Legal Department did not want to restrict customers' choice in driving schools. Dr. [REDACTED] asked what the recourse is for the customer if they fail a road test. Matthew answered that customers have the option to request another re-exam and are given first availability, but there is still a wait time. If they have failed a second re-exam, Matthew stated that the customer must wait one year before requesting a third re-exam or request a hearing to have this requirement waived. Susan said the customer may seek to have a MAB review to be allowed to practice driving while waiting for a hearing date to determine if a third re-exam is allowable. Dr. [REDACTED] asked if this request was voluntary. Matthew and Susan confirmed so. Susan confirmed with Matthew and Catherine that hearing officers do not require customers to practice before granting a third re-exam. Dr. [REDACTED] stated that this is a reasonable process and experiences with how this process is working can be shared after a year or so when more numbers are available.

#### 5. OPEN DISCUSSION

Dr. [REDACTED] opened the meeting for other issues to be discussed. Dr. [REDACTED] wanted to know why, when a customer renews their operator's license, they are not subjected to an eye exam. Dr. [REDACTED] stated that this issue has been examined in the past but never implemented. Roxanne Dean and Debra Notarino commented that at one time a machine was set up to test eyes and the requirement never went into effect. Susan Archambault asked if there is a medical form that customers can bring to Branches instead of having an eye exam. Lynell Little replied that the form is still being reviewed by the DMV Legal Department. Roxanne asked how some drivers can have poor vision in one eye and 20/20 vision in the other with a final vision of 20/20. Dr. [REDACTED] answered that the better eye compensates for the worse. Dr. [REDACTED] asked about the necessity of the customer's signature on the medical form and some ambiguity in the condition-specific sections of the medical form regarding whether a customer can drive. Dr. [REDACTED] stated that Commercial License holders must pass a vision test with either eye passing the minimum standard. If this isn't the case, the driver would need a monocular vision waiver. Roxanne asked about non-CDL. Dr. [REDACTED] answered that vision standards are up to the licensing state. Susan directed the conversation back to Dr. [REDACTED] question. Dr. [REDACTED] suggested the medical form be updated to include a place for the doctor to say if a customer could drive conditionally based on their health. Dr. [REDACTED] suggested information from a specialist would be helpful for MAB members to provide a response. Catherine responded that the new form has a question about whether the customer should be referred to a specialist. If that area is marked, DMV can inquire and submit the specialist's report to MAB. Dr. [REDACTED] reiterates the need for a place on the form for the completing medical professional to state that they are not sure if the person is capable of driving. Roxanne stated that if one specialist claims the customer is not safe to drive, the rest of the form should not be considered. Susan and Matthew stated that the medical form could be reviewed. Roxanne asked MAB members if there are any pet peeves about what is sent to them from DMV. Dr. [REDACTED] said he would like to know if a patient has type one diabetes on insulin or type two diabetes because currently the form does not give the medications and it's very important from a hypoglycemic risk standpoint to know if they're on insulin or not. Roxanne asked Dr. [REDACTED] if lab numbers matter when making a recommendation. Dr. [REDACTED] replied that they don't matter, but it's important to know when the patient's last altered mental status was. Dr. [REDACTED] mentioned that he is using state statutes to assist Hartford Healthcare in determining if a patient is safe to drive. In

the next six to twelve months, Hartford Healthcare will have a document to present to MAB to make sure their guidelines mesh with state statutes. Dr. [REDACTED] mentions that driving a personal vehicle and driving a commercial vehicle are very different and that the current DMV medical form fails to capture that difference. Dr. [REDACTED] suggests the form be changed to differentiate between driving a commercial vehicle or a personal vehicle. Dr. [REDACTED] discusses the need for more information regarding orthopedics on the P-142M form. Dr. [REDACTED] remarks that the new MAB referral form has a place for the MAB doctor to state they require more information to decide on a customer's ability to drive. He says this is helpful. Dr. [REDACTED] mentions that some CDL drivers should never have been certified to begin with and he sees a lot of those cases referred to him.

6. NEXT MEETING

Dr. [REDACTED] indicates the date and time of the next meeting is to be determined.

7. ADJOURNMENT

Dr. [REDACTED] adjourns the meeting and thanks everyone for attending.