

[Contact Us](#) | [Sitemap](#)Search Licensure in Medic [Home](#)[About Us](#)[Licensure](#)[Complaint & Investigation](#)[Laws & Rule Updates](#)[Resources](#)

Summer 2023 Newsletter

[Downloadable PDF Version](#)

In this issue:

[FROM THE CHAIR](#)

- [Duty to Report](#)

[WHAT EVERYONE SHOULD KNOW](#)

- [Buying Prescription Medications Online](#)
- [MMA Center for Quality Improvement CME](#)

[ADVERSE ACTIONS](#)

- [Adverse Actions](#)

[LICENSING ISSUES](#)

- [Physician Assistants with Less than 4,000 Clinical Hours](#)

[BOARD NEWS](#)

- [New Medical Director - Paul N. Smith M.D.](#)

[BOARD OPPORTUNITIES](#)

- [An Opportunity to Join the Board](#)

FROM THE CHAIR

Mandated Reporting to the Board: A Legal and Ethical Obligation

Maroulla S. Gleaton, M.D., Chair

The daily lives of physicians and physician assistants involve countless interactions with people – be they professional colleagues, staff, or patients and their family members. Many of these interactions are brief, some are on the fly, and most are forgotten. Some, of course, are funny, and some are poignant - especially in the exchanges among clinicians and patients.

Unfortunately, there are occasions when a clinician may experience an interaction with a physician or physician assistant that falls well outside the norm of civil or professional discourse. In addition, clinicians may observe an interaction between a physician or physician assistant with another person – a colleague, staff, patient, or patient family member – that falls well outside the appropriate norm. What does a clinician do after experiencing or observing this type of behavior?

Maine law requires licensed physicians and physician assistants to report to the Board certain conduct they experience or observe:

...[A]ny physician or physician assistant licensed to practice or otherwise lawfully practicing within this State shall... report the relevant facts to the appropriate board relating to the acts of any physician or physician assistant in this State if, in the opinion of the... physician [or] physician assistant... has reasonable knowledge of acts of the physician or physician assistant amounting to **gross or repeated medical malpractice, misuse of alcohol, drugs or other substances** that may result in the physician's or the physician assistant's performing services in a manner that endangers the health or safety of patients, **professional incompetence, unprofessional conduct or sexual misconduct** identified by board rule. <https://legislature.maine.gov/statutes/24/title24sec2505-1.html>

Under certain limited circumstances, reporting, physicians or physician assistants directly to the Medical Professionals Health Program regarding substance misuse or health-related impaired practice satisfies this mandated reporting requirement.

Reporting a colleague with whom one works side-by-side on a daily basis may be difficult, but it is required by law. Maine law protects those who make mandated reports by providing civil immunity for making the report or providing other information to the Board.

It is not always comfortable to make these reports, but it is reasonable and necessary to ultimately protect patients - who are vulnerable and to whom we as health care professionals are obligated to care for and protect. Both physicians and physician assistants are also bound by their respective ethical guidelines to report when experiencing or observing inappropriate, unprofessional, or unethical behavior:

AMA Code of Conduct Principle 9.4.3: "...physicians should report colleagues whose behavior is incompetent or unethical..."

AAPA Guidelines for Ethical Conduct of the PA Profession: "Illegal and Unethical Conduct - PAs should not participate in or conceal any activity that will bring discredit or dishonor to the PA profession. They should report illegal or unethical conduct by health care professionals to the appropriate authorities."

WHAT EVERYONE SHOULD KNOW

The NABP: A Resource for Prescribers Regarding Internet Pharmacies

Protecting public health is a priority we share. For this reason, the National Association of Boards of Pharmacy® (NABP®) is reaching out to colleagues in the TriRegulator Collaborative to help disseminate important information about buying medication safely. While patients may think buying prescription medicine online is always safe, it is important that they – and their health care providers – know the risks.

NABP has been verifying legitimate internet pharmacies and cataloging illegal online drug sellers for decades. In 2014, NABP became the .pharmacy registry operator. Only two types of entities are permitted to register a .pharmacy domain name: (1) health care merchants that have earned NABP's Health Care Merchant Accreditation; and (2) government entities that regulate the practice of a health care profession. In conjunction with its role as registry operator, NABP established the .Pharmacy Executive Board, which serves this program in an advisory capacity. In a recent meeting, the Board discussed the importance of educating health care professionals and patients on how to mitigate the dangers associated with purchasing prescription drugs, including controlled substances, online.

NABP has identified more than 40,000 websites that fail to comply with NABP patient safety and pharmacy practice standards, or applicable laws. Nearly 95 percent of websites offering prescription-only drugs online operate illegally. These websites commonly facilitate: (1) the sale of prescription-only medicine without requiring a valid prescription; (2) the sale of medicine that has not been approved or authorized for sale in the patient's jurisdiction; and/or (3) the practice of pharmacy without required licensure in all relevant jurisdictions. So-called Canadian pharmacies shipping to patients in the US do so without the proper licenses. They often sell medications that are approved by neither US Food and Drug Administration nor Health Canada. Many of these drugs have been found to be substandard or falsified.

To help patients protect themselves when ordering medications online, NABP provides a Safe Site Search Tool, with which they can check whether a website is verified by NABP or not recommended. They can also look for .pharmacy at the end of the domain name for assurance that the website has been verified by NABP.

NABP encourages licensees to help educate patients about buying medication safely. Please view and download the educational resources including flyers, artwork, social media posts, and newsletter articles found at <https://safe.pharmacy/resources/> and use them as you deem appropriate. In addition, you can access a related on-demand webinar, "Illegal Online Pharmacies' Impact on Legitimate Health Care Businesses."

If you have any questions about this information, feel free to contact NABP Digital Health Regulatory Expert Niamh Lewis at nlewis@nabp.pharmacy.

New CME Certificate Process Within the MMA-CQI Learning Lab

The Maine Medical Association, Center for Quality Improvement (MMA-CQI) offers free online learning courses for category 1 AMA CME through the Learning Lab. There are various courses covering several topics, including opioid-related courses to meet the current state requirement for 3 hours of opioid-related CME every two years as well as topics recommended by the DEA and SAMHSA to satisfy 2023 MATE Act requirements.

In 2023, MMA-CQI changed its process for issuing CME certificates to conform to the American Medical Association (AMA) requirements. The AMA regulations state that CME may only be awarded to M.D.s and D.O.s and all other learners should receive a certificate of participation. However, other learners can still use the hours from the courses for their recertification purposes. The certificate of participation will contain the accreditation statement and the number of credits designated for the course.

In the past, all learners were able to download a CME certificate after completing the evaluation for the course in Survey Monkey. The learner would complete the CME certificate and keep it for their records. In the new process, the course evaluation is still completed in Survey Monkey, but MMA-CQI is mailing completed CME certificates to M.D.s and D.O.s and certificates of participation to all other learners within 10 business days of completing the course evaluation in Survey Monkey.

This has been a big change in how CME certificates are issued, and MMA-CQI is very appreciative of the assistance they have received from the Maine Medical Education Trust and the Maine Board of Licensure in Medicine. And they are especially appreciative of the patience of the many learners who use the Learning Lab and are adjusting to this change, too.

If you have any questions or would like more information, please email learninglab@mainemed.com.

ADVERSE ACTIONS

Adverse Actions

In 2022 the Board reviewed approximately 300 complaints and investigative reports – an average of 25 per meeting. While the number of complaints received by the Board remains consistently large, the number of complaints that result in adverse action is quite small. In most cases, the conduct resulting in adverse action is egregious or repeated or both.

The Board's complaint process is relatively straight-forward. FAQs about the complaint process are available on the Board's website: <https://www.maine.gov/md/complaint/discipline-faq>. Brochures regarding the complaint process are also available on the Board's website: <https://www.maine.gov/md/resources/forms>.

Upon receipt of a complaint, it is forwarded to the licensee for a written response and a copy of the medical records. In general, the licensee's response is shared with the complainant, who may submit a reply. The Board reviews the complaint file once completed, and may take any of the following actions:

- Dismiss
- Dismiss and issue a letter of guidance
- Further investigate
- Invite the licensee to an informal conference
- Schedule an adjudicatory hearing

The following adverse actions are being reported for the purpose of educating licensees regarding ethical and/or legal issues that can lead to discipline, and to inform licensees of any limitations or restrictions imposed upon scope of practice.

Mark P. Cartier, M.D. License MDE13318 (Date of Action 06/12/2023) On March 14, 2023, the Board approved Dr. Cartier's request to permanently convert his medical license to an Emeritus License while under investigation for unprofessional conduct effective June 12, 2023.

Thomas Marks, M.D. License MD24965 (Date of Action May 11, 2023) On May 11, 2023, the Board of Licensure in Medicine and Dr. Marks entered into a Consent Agreement for Permanent Surrender of his Maine medical license for incompetence, unprofessional conduct, violation of Board rules, and disciplinary action taken in other states arising out of or as a result of his arrest for felony criminal charges in New Hampshire.

Keri McFarlane Bentley, M.D. License MD23766 (Date of Action 04/28/2023) On April 28, 2023, the Maine Board of Licensure in Medicine automatically suspended Dr. Bentley's license pursuant to 32 M.R.S. 18511 following receipt of the Tennessee April 16,

2023, Order of Immediate Suspension constituting disciplinary action taken by Dr. Bentley's state of principal license through the Interstate Medical Licensure Compact.

John P. Griffin, M.D. License MD18265 (Date of Action April 12, 2023) On April 12, 2023, Dr. Griffin entered into a Consent Agreement for Licensure with the Board agreeing to limit his surgical practice to the following bedside procedures: wound debridement; wound revision; incision and drainage of abscess; drainage of hematoma; wound tissue culture sampling; punch biopsy under local anesthesia; incisional biopsy under local anesthesia; excisional biopsy under local anesthesia; repair/revision of acute laceration under local anesthesia; ankle/brachial indices; elastic compression therapy; rigid compression therapy; and negative pressure wound therapy. Dr. Griffin has no limitations on his clinical practice beyond the limitations identified.

La Tania M. Akers-White, M.D. License MD23333 (Date of Action 04/12/2023) Effective April 12, 2023, Dr. Akers-White and the Board entered into a Consent Agreement for misrepresentation in obtaining a license, unprofessional conduct, violation of Board rules, and disciplinary action taken by other states. The Board imposed a reprimand, a prescribing restriction that Dr. Akers-White shall not prescribe any controlled substances to Maine patients, and payment of a civil penalty in the amount of One Thousand Dollars (\$1,000).

Kathleen Marion-Helen Dosiek, PA License PA2008 (Date of Action 04/12/2023) Effective April 12, 2023, Ms. Dosiek and the Board entered into a Consent Agreement for Conversion of License converting her inactive license to an active status license and requiring Ms. Dosiek comply with all terms of the reentry to practice plan including completion of period of direct supervision of at least six (6) months and 240 hours of direct patient care.

Mark W. Fourre, M.D. License MD12773 (Date of Action 03/16/2023) On March 16, 2023, Mark W. Fourre, M.D. and the Board entered into a Consent Agreement for Conversion to Active Status requiring that Dr. Fourre comply with all terms of the reentry to practice plan.

LICENSING ISSUES

Physician Assistants with Less than 4,000 Clinical Hours

It has now been two years since the enactment and implementation of the physician assistant law made by LD1660. Unfortunately, the Board continues to see instances of noncompliance with the physician assistant law and rule. Most noncompliance is not purposeful, but rather a failure to follow through by submitting required forms.

Physician assistants with less than 4,000 clinical hours must have either an **approved uniform notice of employment** or an **approved collaborative agreement** in order to provide medical services. Both forms can be found on the Board's website at <https://www.maine.gov/md/licensure/pa-license>. On initial and renewal applications many physician assistants with less than 4,000 clinical hours indicate they will be submitting one of the required forms but fail to do so.

Physician assistants with less than 4,000 clinical hours *need two separate items to render medical services, an active license and the aforementioned notice or agreement*. Board staff does not delay issuing a license until receipt of the form – which expedites licensure. However, the license itself does not allow you to practice. Therefore, when you submit an application for licensure or re-licensure and indicate that a form will be forthcoming, you must ensure to do so. Unfortunately, the receipt of a license appears to lead some physician assistants to believe they don't need to submit the additional form – which is not correct and violates the Board's physician assistant law and rule.

How can you tell if you have an approved registered relationship?

First, search for yourself on the Board's website <http://www.pfr.maine.gov/ALMSOnline/ALMSQuery/SearchIndividual.aspx?Board=376>.

Second, at the top of the result page, there will be an item under **Notices** that states, "At the time of issuance the physician assistant has less than 4,000 hours of clinical practice documented." If this language is missing/does not appear, you have previously provided verification of your 4,000 clinical hours and do not need to provide the Board with the uniform notice or collaborative agreement. However, if this language does appear at the top, check for an entry under **Employer**. If there is one or more employer listed, those are the sites where you are approved to provide medical services. **If there is nothing listed under Employer, or the heading does**

not appear at all, there is no approved site because you have not submitted the required notice or collaborative agreement – and are unable to practice.

All physician assistants are urged to proactively check their status on the Board's website and correct any issues that may exist.

If you have questions or concerns please reach out to the Board's licensing staff for help.

BOARD NEWS

BOLIM's New Medical Director



Paul N. Smith, MD joined the Board Staff in June 2023 as Medical Director. He earned his BS degree from West Point and his MD degree from the University of Southern California. He practiced clinical OB/GYN for 45 years – first as an Army physician, then in Tacoma, WA, and the last 19 years at Bangor OB/GYN. He brings extensive clinical and administrative experience to the Board Staff.

Dr Smith resides in Dedham with his wife. They have three grown children. He enjoys hiking, aviation, and telling dad jokes.

BOARD OPPORTUNITIES

An Opportunity to Join the Board

Take advantage of this opportunity to gain a broad and deeply informed perspective on the spectrum of medical practice in Maine while performing an essential public service in overseeing public safety.

The Maine Board of Licensure in Medicine ("Board") has been licensing and regulating allopathic physicians in Maine since 1895. Today, it consists of 11 members – 6 actively practicing physicians, 2 actively practicing physician assistants, and 3 public members. **The Board is seeking one physician member** who meets the following statutory qualifications:

[Be a] graduate of a legally chartered medical college or university having authority to confer degrees in medicine and must have been actively engaged in the practice . . . in this State for a continuous period of 5 years preceding . . . appointment to the Board.

The Board has a current special interest in seating a psychiatrist.

The Board is also seeking one physician assistant member who meets the flowing statutory qualifications:

[Must be a physician assistant] licensed under this chapter who [has] been actively engaged in the practice of the profession of physician assistant in this State for a continuous period of 5 years preceding appointment to the Board.

The Board meets once a month at its offices in Augusta, Maine. The members of the Board are provided with materials for an upcoming meeting 1-2 weeks in advance. A typical Board meeting commences at 8:00 am and lasts until 4:00-5:00 pm. During a meeting, the Board conducts reviews of applications for licensure, complaints and investigations, and rulemaking. In addition, the Board occasionally holds informal conferences and adjudicatory hearings to resolve complaints and investigations.

The Board is composed of motivated, hard-working individuals committed to ensuring the protection of the public. The Board is supported by a dedicated staff of professionals. Anyone who may be interested in this challenging and rewarding opportunity should contact Dennis E. Smith, Esq., Executive Director at: (207) 287-3605 or by email at dennis.smith@maine.gov; or Tim Terranova, Assistant Executive Director at (207) 287-6930 or e-mail at tim.e.terranova@maine.gov

Editor-in-Chief David Nyberg, Ph.D. Graphic Design Ann Casady

Credit

Information

[Maine.gov](#)

[Site Policies](#)

[Accessibility](#)

[Comments/Questions](#)

[Board Home](#)

Contact

Maine Board of Licensure in Medicine
137 State House Station
161 Capitol Street
Augusta, Maine 04333-0143

Telephone: (207) 287-3601

Fax: (207) 287-6590