State of Maine

Board of Licensure in Medicine

137 SHS, 161 Capitol Street

Augusta, Maine 04333-0137

February 8, 2022

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State of Maine Board of Licensure in Medicine 137 SHS, 161 Capitol Street Augusta, Maine 04333-0137 Minutes of February 8, 2022

Board Members Present: Maroulla S. Gleaton, M.D., Chair; Christopher R. Ross, P.A., Secretary; Susan Dench, Public Member (computer issues – joined the meeting at 8:21 a.m.); Holly Fanjoy, M.D.; Renee Fay-Leblanc, M.D.; Noel Genova, P.A.; Frederick Goggans, M.D.; Gregory Jamison, RPh, Public Member; Noah Nesin, M.D.; Brad E. Waddell, M.D.; and Lynne M. Weinstein, Public Member.

Board Members Absent: None

Board Staff Present: Dennis E. Smith, Executive Director; Timothy E. Terranova, Assistant Executive Director; Kenji Saito, M.D., Medical Director; Julie Best, Complaint Coordinator; Savannah Okoronkwo, Consumer Assistance Specialist; Maureen S. Lathrop, Administrative Assistant; and Tracy Morrison, Licensing Specialist

Attorney General's Office Staff Present: Michael Miller, Assistant Attorney General

In accordance with the "Board Member Remote Participation Policy" adopted by the Board on August 10, 2021, the Board Chair directed that the February 8, 2022 meeting of the Board be conducted through remote participation of all Board members pursuant to Section 2(A) of that policy. The Board posted notices of this virtual meeting on its website and on the Legislative calendar. In addition, the Board posted a copy of the agenda for the meeting on its website.

Votes were conducted by roll call with members voting "for" "against" or "abstain."

EXECUT	IVE	SESSIONS	
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PURPOSE

None

RECESSES

9:30 a.m. – 9:40 a.m. Recess

10:48 a.m. – 11:01 a.m. Recess

I. Call to Order

Dr. Gleaton called the meeting to order at 8:00 a.m.

A. Amendments to Agenda (none)

B. Scheduled Agenda Items

1. 1:00 p.m. Continuation of Adjudicatory Hearing (CR21-191; CR21-210; CR22-4) — Continuance Granted

II. Licensing

A. Applications for Individual Consideration

1. Initial Applications

a. David T. Beihl, M.D.

Dr. Nesin moved to approve Dr. Beihl's license application. Mr. Ross seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For

Ms. Dench: Not present

Dr. Fanjoy: For
Dr. Fay-Leblanc: For
Ms. Genova: For
Dr. Goggans: For
Mr. Jamison: For
Dr. Nesin: For
Dr. Waddell: For
Ms. Weinstein: For

b. Van W. Adamson, M.D.

Dr. Nesin moved to table the application and request that Dr. Adamson provide additional information. Mr. Ross seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For

Ms. Dench: Not present

Dr. Fanjoy: For

Dr. Fay-Leblanc: For

Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For

Dr. Waddell: For Ms. Weinstein: For

2. Reinstatement Applications (none)

3. Renewal Applications

a. Rodrigo C. Roxas, M.D.

Dr. Nesin moved to approve Dr. Roxas' renewal application. Ms. Genova seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For

Ms. Dench: Not present

Dr. Fanjoy: For
Dr. Fay-Leblanc: For
Ms. Genova: For
Dr. Goggans: For
Mr. Jamison: For
Dr. Nesin: For
Dr. Waddell: For

Ms. Weinstein: For

b. Gretchen F. Paranya, M.D.

Mr. Ross moved to approve Dr. Paranya's renewal application. Ms. Weinstein seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For

Ms. Dench: Not present

Dr. Fanjoy: For
Dr. Fay-Leblanc: For
Ms. Genova: For
Dr. Goggans: For
Mr. Jamison: For
Dr. Nesin: For
Dr. Waddell: For
Ms. Weinstein: For

4. Requests to Convert to Active Status (none)

5. Requests to Withdraw License/License Application

a. Maureen E. Verbil, P.A.

Ms. Genova moved to approve Ms. Verbil's request to withdraw her license application. Mr. Ross seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For Ms. Weinstein: For

6. Requests for Collaborative/Practice Agreements (none)

B. Other Items for Discussion (none)

C. Citations and Administrative Fines (none)

III. Board Orders/Consent Agreements/Resolution Documents for Review (none)

IV. Complaints

1. CR19-208 Beth Shortridge, M.D.

Dr. Gleaton moved to dismiss the complaint with a letter of guidance. Ms. Weinstein seconded the motion.

A roll call vote was taken, and the motion passed 10 in favor, 1 abstained.

Dr. Gleaton: For Mr. Ross: Abstained Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For Ms. Weinstein: For

MOTION: The Board initiated the complaint following receipt and review of Maine patient medical records. Review of the patient medical records raised concerns that the physician was not meeting standards of care when providing services to patients via telemedicine by conducting inadequate physical examinations, including through an untrained proxy or the patient, and/or by providing medical services through audio-only telephone in violation of Board Rules, Chapter 6 Telemedicine Standards of Practice, §§ 2(9), 3(3), 3(6)(B)(2), 3(7), 3(8), 3(19), and 3(20).

The guidance is as follows: As a physician you are responsible for the documentation of telehealth encounters which should demonstrate compliance with applicable standards of care including standards associated with: (1) obtaining a patient medical history, including history of present illness, review of systems, chief complaint, medications, prior surgeries and pertinent social history; (2) conducting a physical examination, when necessary to diagnose the condition to be treated; (3) making an appropriate medical diagnosis, including the medical decision making and basis for the diagnosis; and (4) providing a treatment plan, including treatment recommendations and prescriptions. When available, you are also responsible for coordination of care and/or providing the telehealth documentation to the local clinician identified by the patient. When necessary, you are also responsible for referring the patient for in-person care, conveying your medical documentation to the clinician providing in-person care, and documenting the referral in the telehealth medical record.

2. CR21-42 Clifford M. Singer, M.D.

Dr. Fay-Leblanc moved to dismiss the complaint with a letter of guidance. Ms. Genova seconded the motion.

A roll call vote was taken, and the motion passed 10 in favor, 1 abstained.

Dr. Gleaton: For Mr. Ross: Abstained Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For

Dr. Nesin: For Dr. Waddell: For Ms. Weinstein: For

MOTION: The complaint was filed by a patient who expressed concerns about the physician's treatment and his failure to record medication dosage changes in the patient's medical record. The physician responded to the complaint and explained his care and treatment and provided a copy of the patient's medical record.

The guidance is as follows: Medication reconciliation is a component of safe patient care. It is important to ensure that you update patient medication lists in the patient medical record on or near the time and date (whether during a phone call or visit) of any change to prescribed medications, including but not limited to changes in dosages, frequency and whenever adding or discontinuing medications.

3. CR21-81

Dr. Nesin moved to investigate further and request that the physician respond to questions from the Board. Dr. Fay-Leblanc seconded the motion.

A roll call vote was taken, and the motion passed 10 in favor, 1 recused.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: Recused Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For Ms. Weinstein: For

4. CR21-201

Dr. Gleaton moved to dismiss the complaint. Dr. Nesin seconded the motion.

A roll call vote was taken, and the motion passed 10 in favor, 1 abstained.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For

Dr. Goggans: Abstained

Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For

Ms. Weinstein: For

MOTION: A patient, who saw a plastic surgeon once for surgical intervention for cosmetic breast and abdominal surgery, complained about cancellation of the surgery and concern about refund payment. Review of the records reveals appropriate evaluation and attempt to fulfill the patient's desire for plastic surgery. There were several messages between the office staff of the physician and family members; however, the surgery was canceled due to extended medical leave by the physician. There is clear documentation of refund.

5. CR21-211

Dr. Gleaton moved to investigate further and request that the physician respond to questions from the Board. Dr. Waddell seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For Ms. Weinstein: For

6. CR21-156

Dr. Waddell moved to investigate further, request additional records, and obtain an independent medical review. Dr. Fanjoy seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For Ms. Weinstein: For

7. CR21-112

Ms. Genova moved to dismiss the complaint. Dr. Nesin seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For Ms. Weinstein: For

MOTION: The licensee cared for the complainant as an in-patient when he was recovering from surgery in the hospital. She and the patient did not agree on a post-op plan for pain control. Since the provider/patient relationship was not therapeutic, the licensee's decision regarding outpatient care was appropriate and the patient was offered timely care from another provider in the office.

It appears from the record that the licensee delivered good care to this patient. Appropriately, she followed the patient's palliative care physician's plan for post-op pain control.

8. CR21-179 Hanna Campbell, P.A.

Ms. Genova moved to dismiss the complaint with a letter of guidance. Mr. Ross seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For

Ms. Weinstein: For

MOTION: The complaint was filed by a patient regarding the physician assistant's coding of the care and treatment she received during a visit and the physician assistant's failure to communicate with her about it despite her efforts to contact the physician assistant. The physician assistant responded to the complaint and indicated that there had been a misunderstanding between her and the patient regarding the focus of the appointment, that changes in documentation and coding could have been made, that she should have engaged in a conversation with the patient and maintained an open line of communication, and she apologized.

The guidance is as follows: Understanding the focus of a patient's visit is important to establishing an effective clinician-patient relationship. In addition, paying close attention to medical record documentation and coding is important, regardless of whether it is prepared by you or a medical scribe. Finally, taking the time to communicate directly with an upset patient conveys empathy and contributes to developing and maintaining an effective clinician relationship, which in turn can enhance care and treatment.

9. CR21-204

Dr. Nesin moved to table the matter. Ms. Genova seconded motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For Ms. Weinstein: For

10. CR21-214

Ms. Dench moved to table the matter. Dr. Nesin seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For Ms. Weinstein: For

11. CR21-92

Mr. Ross moved to dismiss the complaint. Ms. Weinstein seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For Ms. Weinstein: For

MOTION: A patient complains that the physician took away his medications and did not provide timely referrals. The patient had many nights that he could not sleep and could not work because he did not have appropriate treatment. The physician responded that she saw him as a new patient with long standing history of back pain that had not changed. Review of the records revealed that the patient received reasonable care.

12. CR21-106

Ms. Dench moved to table the matter. Ms. Genova seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For Ms. Weinstein: For

13. CR21-175

Ms. Weinstein moved to investigate further: 1) request that the physician surrender his license while under investigation; 2) if no response wait to see if he applies to renew his license in April; and 3) if he allows his license to expire close the complaint with no further action and report the expiration of his license while under investigation. Dr. Fay-Leblanc seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For Ms. Weinstein: For

14. CR21-182

Ms. Dench moved to dismiss the complaint. Ms. Weinstein seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For

Dr. Waddell: Not present

Ms. Weinstein: For

MOTION: A patient complains the physician in a residency program misdiagnosed him and falsified his medical records. The physician named in the complaint

precepted by an attending physician, conducted a 90-minute comprehensive intake evaluation. The patient did not disagree with the diagnosis at the time. Review of the records reveal appropriate diagnosis and care provided.

15. CR21-183

Ms. Dench moved to dismiss the complaint. Ms. Weinstein seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For Ms. Weinstein: For

MOTION: A patient complains the physician who he had begun seeing as a minor to control symptoms and to provide medication management failed to diagnose him correctly and hid his true diagnosis. The physician saw this patient over the course of many years. Review of the records reveal appropriate care.

16. CR21-184

Ms. Dench moved to dismiss the complaint. Ms. Weinstein seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For

Ms. Weinstein: For

MOTION: A patient admitted to a state facility complains the physician provided him with inappropriate care and treatment. He also alleges he was misdiagnosed, over prescribed medication and was discriminated against by this physician. Review of the records reveal appropriate care was provided.

17. CR21-212

Dr. Fay-Leblanc moved to dismiss the complaint. Ms. Weinstein seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For Ms. Weinstein: For

MOTION: A patient questioned the documentation of the presence of a preceptor physician during a medical encounter with a resident physician. Review of the records reveals appropriate documentation and the complainant was satisfied. The medical practice has laudably continued to offer care to this patient despite some difficult communication interactions with the patient.

18. CR21-213

Ms. Genova moved to dismiss the complaint. Ms. Dench seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For

Dr. Waddell: For

Ms. Weinstein: For

MOTION: The complainant is the mother of a 3-month-old who was seen by the licensee for complaints of vomiting and diarrhea. The complaint is not about the care given per se, but about the licensee's questioning of the parent about her COVID-19 vaccination status. Discussion of COVID-19 vaccination status is a delicate issue. However, the records reflect good care, delivered to the community standard.

19. CR21-114

Mr. Ross moved to investigate further and request that the physician respond to questions from the Board. Ms. Genova seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For Ms. Weinstein: For

20. Intentionally left blank

V. Assessment and Direction

21. AD22-25

Dr. Fay-Leblanc moved to close the matter with no further action and approve renewal of the physician's license. Mr. Ross seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For Ms. Weinstein: For

22. Intentionally left blank

23. Pending Adjudicatory Hearings and Informal Conferences Report

This material was presented for informational purposes. No Board action was required.

24. Consumer Assistance Specialist Feedback (none)

VI. Informal Conference (none)

VII. Minutes for Approval

Mr. Jamison moved to approve the minutes of the January 11, 2022 meeting. Dr. Goggans seconded the motion.

A roll call vote was taken, and the motion passed 10 in favor, and 1 abstained.

Dr. Gleaton: For Mr. Ross: Abstained Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For Ms. Weinstein: For

VIII. Consent Agreement Monitoring

A. Monitoring Reports

1. Richard Evan Caesar, M.D.

This material was presented for informational purposes. No Board action was required. Dr. Waddell was recused.

2. Donald B. Shea, M.D.

Dr. Gleaton moved to deny Dr. Shea's proposed changes to his pain protocol and request additional information. Dr. Fay-Leblanc seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For Ms. Weinstein: For

3. Bruce G. Manley, P.A.

This material was presented for informational purposes. No Board action was required.

4. Kevin M. Kendall, M.D.

This material was presented for informational purposes. No Board action was required.

IX. Adjudicatory Hearing 1:00 p.m.

A. Continuation of Adjudicatory Hearing (CR21-191; CR21-210; CR22-4) — Continuance Granted

X. Remarks of Chair (none)

XI. Remarks of Executive Director

Mr. Smith told the Board to anticipate an adjudicatory hearing in March and an informal conference in April. He also advised that staff is preparing the Chapter 11 and Chapter 12 rules for re-proposal.

A. FSMB Draft Appropriate Use of Telemedicine Technologies in the Practice of Medicine for Comment

The Board provided comments for Mr. Smith to submit to the Federation of State Medical Boards regarding the Draft Appropriate Use of Telemedicine Technologies in the Practice of Medicine Policy.

B. FSMB Draft Reports for Comment

This material was presented for informational purposes. No Board action was required.

XII. Assistant Executive Director's Report

Mr. Terranova reported that Elena Crowley, Licensing Specialist, left her position with the Board effective February 4th.

A. MMA CQI Report

This material was presented for informational purposes. No Board action was required.

B. Annual Licensing Report

This material was presented for informational purposes. No Board action was required.

C. Complaint Status Report

As of February 1, 2022, there are one hundred fourteen complaints outstanding. Nineteen complaints were opened during the month of January and twelve were closed.

D. Licensing Feedback (none)

- XIII. Medical Director's Report (none)
- XIV. Remarks of Assistant Attorney General (none)
- XV. Rulemaking (none)
- XVI. Policy Review (none)
- XVII. Requests for Guidance (none)

XVIII. Standing Committee Reports

A. Licensure and CME Committee

1. Licensing Status Report [Appendix A]

This material was presented for informational purposes. No Board action was required.

- XIX. Board Correspondence (none)
- XX. FSMB Material (none)

XXI. FYI

This material was presented for informational purposes. No Board action was required.

XXII. Other Business (none)

XXIII. Adjournment 12:05 p.m.

At 12:05 p.m. Ms. Genova moved to adjourn the meeting. Mr. Ross seconded the motion.

A roll call vote was taken, and the motion passed unanimously.

Dr. Gleaton: For Mr. Ross: For Ms. Dench: For Dr. Fanjoy: For Dr. Fay-Leblanc: For Ms. Genova: For Dr. Goggans: For

Mr. Jamison: For Dr. Nesin: For Dr. Waddell: For Ms. Weinstein: For

Respectfully submitted,

Maureen S Lathrop

Maureen S. Lathrop Administrative Assistant

Dear Mr. Smith,

In accordance with the "Board Member Remote Participation Policy" adopted by the Board on August 10, 2021, I am directing that the February 7, 2022 and February 8, 2022 meetings of the Board be conducted virtually through exclusively remote participation pursuant to Section 2(A) of that policy. In support of this directive, I have determined that, based on the following circumstances, there exists an emergency or urgent issue which, pursuant to the policy, requires the Board to meet by entirely remote methods on February 7, 2022 and February 8, 2022:

- The Secretary of the U.S. Department of Health and Human Services first proclaimed on January 31, 2020, and most recently renewed on July 20, 2021, the nationwide public health emergency (PHE) due to the continued consequences of the Coronavirus Disease 2019 (COVID-19) pandemic. (https://www.phe.gov/emergency/news/healthactions/phe/Pages/COVID-19July2021.aspx)
- 2. The Commissioner of the Maine Department of Health and Human Services declared on July 1, 2021 a health emergency due to the continued consequences of the COVID-19 pandemic, which shall remain in effect through the duration of the PHE declared by the Secretary of the U.S. Department of Health and Human Services.

 (https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/Public%20Health%20Emergency%20Declaration%206-30-21.pdf)
- 3. The acting Secretary of the U.S. Department of Health and Human Services wrote a letter to all Governors on January 22, 2021 stating, "To assure you of our commitment to the ongoing response, we have determined that the PHE will likely remain in place for the entirety of 2021, and when a decision is made to terminate the declaration or let it expire, HHS will provide states with 60 days' notice prior to its termination." (https://ccf.georgetown.edu/wp-content/uploads/2021/01/Public-Health-Emergency-Message-to-Governors.pdf)
- 4. Efforts to combat the pandemic continue in Maine where, as of January 24, 2022, 168,474 residents have been infected (123,626 confirmed and 44,848 probable), 3,816 residents have been hospitalized with the virus, and 1,714 people have died from the virus since January 2020. (https://www.maine.gov/dhhs/mecdc/infectious-disease/epi/airborne/coronavirus/data.shtml)
- 5. As of January 24, 2022, the number of new COVID-19 infections in the State of Maine as confirmed by testing brings the seven-day average of new cases in the State to 1031.4; the number of new cases (confirmed and probable) statewide is 1,581; the number of current hospitalizations is 427 (with 100 in critical care); the number of validated vaccine breakthrough cases is 33,261; the total number of deaths is 1,714. (https://www.maine.gov/dhhs/mecdc/infectious-disease/epi/airborne/coronavirus/data.shtml)

- 6. The new infections in the United States and the State of Maine involve the Delta variant, a highly contagious SARS-CoV-2 virus strain, which was first identified in India in December 2020. The Delta variant has increased transmission, increased risk of hospitalization and fatality, decreased susceptibility to therapeutic agents, and has evaded natural or vaccine-induced immunity. The Omicron variant is a variant of SARS-CoV-2, the virus that causes COVID-19. It was first reported to the WHO from South Africa on November 24, 2021. On November 26, 2021, the WHO designated it as a variant of concern and named it Omicron. As of January 24, 2022, the Delta variant represents 12.6 percent, and the Omicron variant represents 87.4 percent of all sequenced samples collected in Maine.
- 7. Also, as a result of the Delta variant and the increase in COVID-19 infections, the United States Centers for Disease Control and Prevention announced on July 28, 2021 that even fully vaccinated individuals should wear masks in indoor public settings in parts of the country that are experiencing a substantial or high transmission of COVID-19. The Maine Center for Disease Control and Prevention has also announced a similar policy. (https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated-guidance.html) (<a href="https://www.maine.gov/governor/mills/news/state-maine-follows-updated-us-cdc-recommendations-face-coverings-indoor-public-settings-2021)
- 8. As of January 24, 2022, 16 of Maine's counties are now in the "substantial" or "high" transmission categories as defined by the U.S. Centers for Disease Control and Prevention. The U.S. C.D.C. recommends that people in 16 Maine counties with "substantial" or "high" transmission wear face coverings in public indoor settings. (https://covid.cdc.gov/covid-data-tracker/#county-view)
- 9. An in-person meeting of the Board is foreseeably likely to result in individuals who may reside in counties with "substantial" or "high" transmission, or otherwise be at higher risk of exposure to the COVID-19 virus, including members of the Board, its staff, licensees, and members of the public, gathering indoors.
- 10. Conducting an in-person Board meeting on February 7, 2022 and February 8, 2022 is not practicable due to the widespread rise in COVID-19 infections and the potential exposure to the COVID-19 virus to Board members and to members of the public. Therefore, I have determined that there is an emergency such that the February 7, 2022 and February 8, 2022 Board meetings shall be held entirely remotely as the best way to protect the safety and wellbeing of the members of the Board, its staff, licensees, and members of the public.

There will be no physical location where members of the public may attend this meeting. The Board will continue to provide members of the public a meaningful opportunity to attend the meeting remotely via Zoom as it has successfully done since April of 2020. Please post this determination to the Board website and update the agenda to include the Zoom information as soon as possible.

APPENDIX A

BOARD OF LICENSURE IN MEDICINE

DATE: FEBRUARY 1, 2022

TO: BOARD MEMBERS

CC:

FROM: TIMOTHY TERRANOVA

RE: LICENSING STATUS REPORT AND LISTS

The following information is included:

A summary of all new licenses granted in January 2022 by license type (82);

A list of all individuals granted a new license in January 2022;

A summary of all pending applications by license type (332);

A list of online vs. paper renewals in January 2022 by license type (95.11%);

The number of licenses expired January 31, 2022 (56);

The number of licenses lapsed for date October 31, 2021 (55); and

The list of licenses withdrawn in January 2022 (7).

In addition, the overall licensing statistics include:

The number of active MD licenses (not including EC) on February 1, 2022 (7,086);

The number of active MD licenses with a Maine address (not including EC) on February 1, 2022 (3,682);

The number of active PA licenses on February 1, 2022 (1,068);

The number of active PA licenses with a Maine address on February 1, 2022 (962); and

The number of licenses pending renewal on February 1, 2022 (54).

We look forward to your feedback.

SELECTION FILE SUMMARY

STATE OF MAINE - DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION BOARD OF LICENSURE IN MEDICINE

Selection File Name: MONTHLY-ISSUED

SUMMARY BY LICENSE PREFIX

CP - YOUTH CAMP LICENSE						
A - Active	1					
SUBTOTAL:	1					
EC - TEMPORARY EDUCATIONAL CERTIFICATE A - Active	3					
SUBTOTAL:	3					
EL - EMERGENCY 100-DAY LICENSE						
A - Active	2					
SUBTOTAL:	2					
MD - MEDICAL DOCTOR						
A - Active	74					
SUBTOTAL:	74					
PA - PHYSICIAN ASSISTANT						
A - Active	2					
SUBTOTAL:	2					
SUMMARY BY LICENSE STATUS						
A - Active	82					

TOTAL ALL LICENSES:

82

Selection File: MONTHLY-ISSUED

MD25575 - YEWANDE OLASENI ADESHINA, MD

MD25625 - ADEKEMI OLUSEYI AKINSANYA, MD

MD25580 - BORIS AVEZBAKIYEV, MD

MD25417 - HISHAM SALAH BASSIOUNY, MD

MD25517 - KINLEY DANAE BECK, MD

MD25194 - NANCY BERLINER, MD

MD25319 - SAMEER KAPI BERRY, MD

MD25619 - SUSAN K. BORERI, MD

MD25617 - CARLO GENNARO BROGNA, MD

MD25540 - CRAIG ALAN BUNNELL, MD

MD25532 - JEFFREY LINCOLN CHRISTIE, MD

MD25290 - THOMAS E. CLANCY, MD

MD25367 - JEAN MARIE CONNORS, MD

MD25372 - ANTONIO COPPOLINO III, MD

MD25508 - CARLETON EDUARDO CORRALES, MD

MD25599 - ROBERT G. DARLING, MD

MD25251 - CHRISTOPHER ROBERT DENNIS, MD

MD25663 - SARAH ANN EBERT, MD

MD25712 - DAVID RICHARD EHRENBERGER, MD

CP211049 - ANDREW H. EICHENFIELD, MD

MD25551 - SUSAN MARIA ELRICH, MD

MD25512 - MARK FAIRWEATHER, MD

PA2253 - SANDY J. FALCON, PA

MD25381 - COLLEEN MARIE FELTMATE, MD

MD25248 - RYAN THOMAS FITT, MD

MD25382 - ANTONIO ROSARIO GARGIULO, MD

MD25521 - SAMUEL ZACHARY GOLDHABER, MD

MD24855 - NANCY M. GRACIN, MD

MD25728 - IRENE GRAZIANI, MD

PA2304 - JOSHUA JAMES GRZYB, PA

MD25592 - PAMELA MARIE GUERRIERE-KOVACH, MD

MD25439 - IBRAHIM JAMIL HADDAD, MD

MD25678 - MICHAEL JOHN HAFRAN, MD

MD25387 - OLE-PETTER RIKSFJORD HAMNVIK, MD

EC221001 - MOHAMMAD TAMER HANAFY, MD

EC211105 - JEREMY ALBERT JOSEPH HREHA, MD

MD25718 - PATRICK THOMAS HURLEY, MD

EC211109 - JESSIE WHITNEY HYDE, MD

MD25481 - HASSAN A. KHALIL, MD

MD25477 - TAHSIN ZAMAN KHUNDKAR, MD

MD25437 - MARTIN KING, MD

MD25677 - MARC GERHARD KOENIG SR, MD

MD24298 - MARLYN ALEECE LAKE, MD

MD25163 - ALYSSA ANN LEBEL, MD

MD25525 - BRYAN C. LEWIS, MD

MD25667 - AALAP MANOJ MAJMUDAR, MD

MD24764 - HARVEY MAMON, MD

MD24392 - MARGARET BLAIR MARSHALL, MD

MD25695 - ALEXANDER MICHAEL MASON, MD

MD25757 - ERIN ROSE MEDINA, MD

MD25579 - ELTON REX NAIDOO, MD

MD25300 - KHAI THANH NGUYEN, MD

MD25541 - AJSA ANA SOFIJA NIKOLIC, MD

MD25758 - IFEOMA LAURA OKAFOR, MD

MD25660 - LAUREN HEATHER O'MALLEY, MD

MD25673 - JENNA S. PTASCHINSKI, MD

MD25552 - SYED MOHAMMED QUADRI, MD

MD25455 - TALAT HAYAT RAJA, MD

MD25227 - LILLIANA MARIA RAMIREZ GARCIA, MD

MD20616 - TAD TIMOTHY MATTHEW RENVYLE, MD

MD25749 - NAOMI ELIZABETH ROSS, MD

MD25725 - JONATHAN STEWART ROUWHORST, MD

MD25462 - WILLIAM HENRY SAUER, MD

MD25463 - BENJAMIN MORGAN SCIRICA, MD

MD25642 - MUHAMMAD WASEEM SHAHID, MD

MD25615 - NADIA SHAUKAT, MD

MD25526 - LORAN SOLIMAN, MD

MD25343 - MICHELLE CONNOLLY SPECHT, MD

EL221001 - KENNETH BOYD STRUMPF, MD

MD24914 - MIHO JEAN TANAKA, MD

MD25727 - JAMES ROBERT ULAGER, MD

MD25326 - SUMAN VADDI, MD

MD25547 - CLINTON S. WEISS, M.D.

MD25590 - LOUIS ALPHONSUS WESLEY, MD

MD25724 - LYNN MARIE WESTPHAL, MD

MD25729 - MARK LEON WILLENBRING, MD

MD25696 - GREGORY VERNON WILLIAMS, MD

MD25494 - RACHEL WEINSTEIN WINTER, MD

EL211145 - WAYNE WONG, MD

MD25593 - WAYNE WONG, MD

MD25495 - SIGAL YAWETZ, MD

MD25723 - LYDIA J. ZHANG, MD

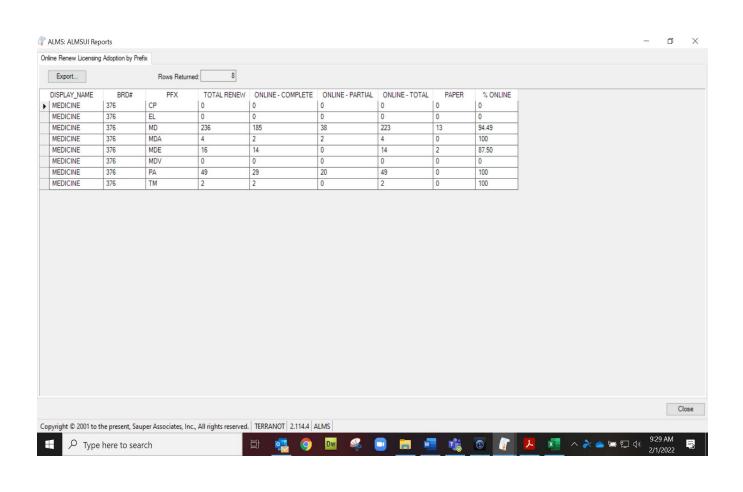
SELECTION FILE SUMMARY

STATE OF MAINE - DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION BOARD OF LICENSURE IN MEDICINE

Selection File Name: MONTHLY-PENDING

SUMMARY BY LICENSE PREFIX

CP - YOUTH CAMP LICENSE	
P - Pending	3
SUBTOTAL:	3
EC - TEMPORARY EDUCATIONAL CERTIFICATE	
P - Pending	4
SUBTOTAL:	4
EL - EMERGENCY 100-DAY LICENSE	
P - Pending	5
SUBTOTAL:	5
MD - MEDICAL DOCTOR	
A - Active	4
P - Pending	281
SUBTOTAL:	285
PA - PHYSICIAN ASSISTANT	
P - Pending	34
SUBTOTAL:	34
TM - TELEMEDICINE	
P - Pending	1
SUBTOTAL:	1
SUMMARY BY LICENSE STATUS	
A - Active	4
P - Pending	328
TOTAL ALL LICENSES:	332



Selection File: WITHDRAWALS

MD19833 - DONNA LYNN BURKETT, MD

MD7927 - RAYMOND A. CASTRO, MD

MD23175 - VADIM LEYENSON, MD

MD22922 - PAUL FREEMAN NIELSON, MD

PA1976 - MICHAEL PHILLIPS, PA

PA1766 - ELENI M. SALLINGER, PA

MD24910 - KATHRYN MARY VARGO, MD