

**Maine Board of Licensure in Medicine
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October 14, 2025**

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**Maine Board of Licensure in Medicine
Minutes of October 14, 2025
8:02 a.m. – 3:34 p.m.**

Board Members Present: Chair Renée M. Fay-LeBlanc; Secretary Christopher R. Ross, PA; Holly W. Fanjoy, MD; David H. Flaherty, PA; Public Member Gregory Jamison, RPh; Noah Nesin, MD; Anthony T. Ng, MD; Brad Waddell, MD; and Public Member Lynne M. Weinstein

Board Members Present Remotely: Maroulla S. Gleaton, MD (8:04 a.m. – 8:18 a.m.)

Board Members Absent: Public Member Jonathan T. Sahrbeck

Board Staff Present: Executive Director Timothy E. Terranova; Assistant Executive Director Valerie Hunt; Medical Director Paul N. Smith, MD; Complaint Coordinator Kelly McLaughlin; Consumer Assistance Specialist Faith McLaughlin; Investigative Secretary Danielle Magioncalda; Administrative Assistant Maureen S. Lathrop; Licensing Supervisor Tracy Morrison; and Licensing Specialist Savannah Okoronkwo

Attorney General's Office Staff Present: Assistant Attorney General Jennifer Willis

The meeting was held at the Board's Offices in Augusta, Maine with Board members participating in person, individual Board members participated remotely. The Board met in public session except during the times listed below which were held in executive session. Executive sessions are held to consider matters which, under statute, are confidential (*e.g.*, 1 M.R.S. § 405; 10 M.R.S. § 8003-B; 22 M.R.S. § 1711-C; 24 M.R.S. § 2510; 32 M.R.S. § 3282-A). During the public session of the meeting, actions were taken on all matters discussed during executive session. In addition, the meeting was made virtually available to the public not attending the meeting in person using the platform Zoom. A link for the public to access the Board meeting virtually was included on the Board's agenda and posted on its website.

EXECUTIVE SESSIONS

PURPOSE

1:10 p.m. – 1:58 p.m.

Pursuant to 1 M.R.S. § 405(6)(F) and 32 M.R.S. § 3282-A to conduct an informal conference

2:19 p.m. – 2:23 p.m.

Pursuant to 1 M.R.S. § 405(6)(E) to consult with legal counsel

RECESSES

9:58 a.m. – 10:09 a.m.

Recess

11:58 a.m. – 12:31 p.m.

Lunch

1:10 p.m. – 1:16 p.m.

Recess

2:10 p.m. – 2:16 p.m.

Recess

I. Call to Order

Dr. Fay-LeBlanc called the meeting to order at 8:02 a.m.

A. Amendments to Agenda

Mr. Ross moved to amend a consent agreement in the matter of CR23-126 onto the agenda for review. Dr. Fanjoy seconded the motion, which passed unanimously.

B. Scheduled Agenda Items

1. 8:10 a.m. FSMB Board of Directors Report – Dr. Gleaton
2. 1:00 p.m. Informal Conference (CR23-164)

II. Licensing

A. Applications for Individual Consideration

1. Initial Applications

a. Chetan Raj Nanjundaiah, MD

Dr. Fanjoy moved to grant the license. Mr. Ross seconded the motion, which passed 8-0-0-1. Dr. Nesin was recused from the matter and left the room.

b. Derek Kurt Urban, MD

Dr. Waddell moved to grant the license. Mr. Flaherty seconded the motion, which passed unanimously.

c. Donald Angle, MD

Dr. Fanjoy moved that Dr. Angle does not meet qualifications for licensure. Dr. Waddell seconded the motion, which passed unanimously.

2. Reinstatement Applications (none)

3. Renewal Applications

a. Steven S. Winn, MD

Dr. Waddell moved to grant renewal of Dr. Winn's active license upon receipt of his written attestation that, once employed, he will provide the Board with a copy of his Focused Professional Practice Evaluation ("FPPE") and/or a copy of the plan for his Ongoing Professional Practice Evaluation ("OPPE") as established with his new employer. Dr. Fanjoy seconded the motion, which passed unanimously.

b. Christine E. Emigh, MD

Dr. Ng moved to grant the renewal upon receipt of Dr. Emigh's written attestation that she will report every step and the final decision regarding the MaineCare Services investigation to the Board. Dr. Fanjoy seconded the motion, which passed unanimously.

4. Requests to Convert to Active Status (none)

5. Requests to Withdraw License/License Application (none)

6. Requests for Collaborative/Practice Agreements (none)

B. Other Items for Discussion

1. Chioma Ibeneme, MD Sponsorship Request

Dr. Fanjoy moved to sponsor Dr. Ibeneme for one additional attempt at USMLE Step 3. Dr. Ng seconded the motion, which passed unanimously.

C. Citations and Administrative Fines (none)

D. Licensing Status Report

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

E. Licensing Feedback

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

F. Complaint Status Report

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

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

A. CR23-126 Ramon E. Cheleuitte, MD – First Amendment to Consent Agreement

Ms. Weinstein moved to ratify the first amendment to consent agreement with correction of a typographical error. Mr. Ross seconded the motion, which passed 8-0-0-1. Dr. Nesin was recused from the matter and left the room.

IV. Complaints

1. CR25-147

Dr. Nesin moved to dismiss the complaint. Dr. Fanjoy seconded the motion, which passed 8-0-0-1. Dr. Ng was recused from the matter and left the room.

MOTION: The complainant is a physician whose attorney arranged for the licensee to perform an evaluation of the complainant as part of an effort to address a dispute with the Board of Licensure in Medicine. The complainant was not satisfied with the outcome of that evaluation or the cost of it and makes a number of allegations about the licensee that are unfounded. The licensee has provided a full response with appropriate supporting documentation.

2. CR24-205

Dr. Waddell moved to investigate further and issue a letter of guidance. Dr. Ng seconded the motion, which passed unanimously.

3. CR25-22

Dr. Waddell moved to investigate further and issue a letter of guidance. Dr. Fanjoy seconded the motion, which passed unanimously.

4. CR24-259

Dr. Fay-LeBlanc moved to request that the physician complete a medical record documentation course, review four papers specified by the Board and report to the Board what he learned and how he might approach the case differently. Ms. Weinstein seconded the motion, which passed unanimously.

Following further discussion, Dr. Fay-LeBlanc moved to issue a citation. Mr. Ross seconded the motion, which passed unanimously.

5. CR25-15

Mr. Ross moved to issue a citation and investigate further and issue a letter of guidance. Dr. Nesin seconded the motion, which passed unanimously.

6. CR24-243 Saad Saleem Farooqi, MD

Ms. Weinstein moved to dismiss the complaint with a letter of guidance. Mr. Ross seconded the motion, which passed unanimously.

MOTION: The Board-issued complaint arose from the physician's failure to complete the Maine Jurisprudence Examination, following the issuance of an expedited IMLC license to practice medicine in Maine. All initial applicants to practice medicine are required to pass this examination to hold a license. Board staff notified the physician multiple times of this requirement without any response from him. In response to the formal complaint issued by the Board in October 2024, the physician ultimately completed the required examination in November 2024. On February 12, 2025, the physician was notified by email that the Board had issued a \$200 citation for his failure to timely take the jurisprudence examination. When he failed to respond to multiple communications, and failed to timely pay that citation, the Board voted to offer him a consent agreement imposing discipline for his unprofessional conduct and violations of Board rules. On June 24, 2025, he requested reconsideration of the Board's disciplinary action, apologized for his failure to timely complete requirements and respond to correspondence, explained that he had

experienced significant personal circumstances during the relevant period, and indicated that he would pay the citation. The Board ultimately received a check from the physician in the amount of \$200 postmarked August 25, 2025.

The guidance is as follows: All physician licensees of the Maine Board of Licensure in Medicine must take the Maine Jurisprudence Examination at initial application and periodically thereafter. In addition, even remotely located and practicing physicians who receive a Maine license to practice medicine via the Interstate Medical License Compact (“IMLC”), must comply with all Maine licensing requirements as stated in the Board laws and rules.

Failure to comply with any Maine law or rule potentially subjects a licensee to Board discipline. Remote licensees through the IMLC are advised to take great care to learn and comply with the laws of distant states in which they have sought and obtained an expedited IMLC license, in order to avoid potential disciplinary action and loss of their ability to renew their IMLC license. In addition, all remote-state licensees are advised to periodically check the Board’s website and their emails from the Board to keep up to date on changes to Board laws and rules, including the possible rule change that will require all Maine licensees to *personally complete all parts of their license applications*. Those licensees using third-party renewal services or delegating to corporate staff the completion of the medical license applications should pay particular attention to upcoming changes to Board Rule Chapter 1 that are currently in the rulemaking process, to avoid potential disciplinary action in the future.

While it is entirely the responsibility of each licensee to know and comply with Board laws and rules related to specific license they hold, Board staff makes every effort to timely and clearly communicate obligations to licensees and help them comply with the Board’s laws and rules. Licensees who ignore those communications from staff or the Board risk disciplinary action for violating the Board’s law or rule that were the subject of the correspondence, as well as for failing to behave professionally related to their licensure obligations, particularly where the failure to respond occurs over a protracted period with no effort to respond and involves additional violations of a licensee’s obligations under the Board’s laws or rules.

7. CR25-27 Peter K. Edison, MD

Dr. Nesin moved to dismiss the complaint with a letter of guidance. Dr. Fanjoy seconded the motion, which passed unanimously.

MOTION: The patient complaint arose from a procedure the physician performed in his office. The physician did not use local anesthetic when he made a 2-cm incision in a 6-cm cyst on the patient’s back and then applied packing. The physician responded with a description of the medical decision making and the care provided. There is no documentation of any discussion with the patient of the options for performing the procedure with or without anesthesia. There is also no documentation of the patient’s informed consent to the procedure being performed without anesthesia. The patient reported that they were not informed that no anesthesia would be used and had expected it to be used. The patient also reported that the procedure was particularly painful.

The guidance is as follows: In a circumstance in which a patient might reasonably expect anesthetic, but you intend not to use any, it is especially important to educate the patient about their options and document that discussion, and, where appropriate, engage in shared decision

making with the patient. It is also important to obtain and document written informed consent for any invasive medical procedure, beyond a general consent to treat.

8. CR25-37 Michael J. Festino, MD

Dr. Fay-LeBlanc moved to dismiss the complaint with a letter of guidance as amended. Mr. Ross seconded the motion, which passed unanimously.

MOTION: In this case, the patients' complaint arose from the physician's decision to discharge them from his practice, and the patients' perception that the reason was not communicated to them. In addition, the patients were both discharged together, as a couple, when the conflict was only with one of the patients. In his response, the physician provided his rationale for the simultaneous dismissal of both patients.

The guidance is as follows: It is important for patients to have clear expectations and understand what circumstances might trigger a physician to sever the physician-patient relationship and dismiss a patient from their practice. This is particularly true when a physician employs a policy of discharging both members of a couple simultaneously if there is reason to discharge one of them. The Board recommends that you develop a clearly articulated written policy for patient discharge which outlines your philosophy, practices, and potential reasons for discharge to ensure all patients are adequately informed in advance.

9. CR25-46

Ms. Weinstein moved to investigate further and issue a letter of guidance. Mr. Jamison seconded the motion, which passed unanimously.

10. CR25-60 Eric D. Holmes, PA

Mr. Jamison moved to dismiss the complaint with a letter of guidance. Ms. Weinstein seconded the motion, which passed unanimously.

MOTION: The Board-issued complaint arose from the physician associates instruction to a subordinate clinician in his organization to continue to render medical services as scheduled, despite that clinician having been expressly advised by Board staff to cease practicing due to that clinician's failure to comply with Board laws and rules and failure to sufficiently demonstrate their qualifications to render medical services or comply with Board laws and rules. In his response the physician associate acknowledged the inappropriate nature of his actions and described the lessons he has learned from the underlying events and this complaint. The physician associate further identified the steps he has taken to educate himself, including working with a professional mentor, and to better understand and implement professionalism in his workplace and his professional obligations.

The guidance is as follows: While all licensees of the Board bear individual responsibility for their own compliance with Board laws and rules, it is important for those in supervisory or other positions of power not to undermine another licensee's compliance with Board laws or rules, particularly when non-compliance is accompanied by instruction to cease rendering medical

services. The Board notes that, in response to this complaint, you have taken commendable accountability and steps to improve your professionalism.

11. CR25-102 Timothy T. Goltz, MD

Dr. Nesin moved to dismiss the complaint with a letter of guidance. Mr. Flaherty seconded the motion, which passed unanimously.

MOTION: The patient complained that his examination was painful, the physician was unresponsive to his expressions of discomfort, attempted to intimidate him, and "...kicked [the patient] out of [your] office so to speak." The physician responded and presented his perception of the encounter, which included his recollection that he perceived the patient as threatening and that he told the patient he would not be intimidated into mis-documenting his findings regarding his disability evaluation.

The guidance is as follows: It is important for clinicians to maintain an empathetic and supportive demeanor during patient encounters, even in circumstances when a patient's experience of an exam is dramatically inconsistent with usual or expected responses.

12. CR25-112

Dr. Fanjoy moved to investigate further and 1) request that the physician respond to questions from the Board; 2) obtain an outside expert review of the care provided by the emergency medicine physician; 3) issue a complaint against the radiologist involved in the care and obtain an outside expert review; 4) issue complaints against the two consulting surgeons and obtain an outside expert review; and 5) refer information to the Board of Nursing regarding a nurse practitioner involved in the care. Mr. Flaherty seconded the motion, which passed unanimously.

13. CR25-116

Dr. Waddell moved to investigate further and request that the physician respond to questions from the Board. Mr. Ross seconded the motion, which passed unanimously.

14. CR25-123

Mr. Flaherty moved to investigate further and request that the physician complete a medical record documentation course, review the Board's telehealth rules and report to the Board what she learned. Mr. Ross seconded the motion, which passed unanimously.

15. CR25-128

Dr. Waddell moved to investigate further and obtain an outside expert review. Dr. Fanjoy seconded the motion, which passed unanimously.

16. CR25-129

Mr. Ross moved to dismiss the complaint. Dr. Nesin seconded the motion, which passed 8-0-0-1. Dr. Waddell was recused from the matter and left the room.

MOTION: A patient complains that the physician sent him to a neurosurgeon which was not needed and delayed the appropriate care. The patient also complains that the staff derailed an already planned path to treat his pain by sending him to the neurosurgeon. Because of these delays he had to cancel a planned trip, and he lost thousands of dollars. The physician responded that he was upset and surprised about how the patient felt that his treatment went. The physician states that he doesn't recall the details but certainly would have had his staff work to accommodate the patient's schedule and that it was appropriate to have him cleared by neurosurgery prior to doing the ablation. Review of the records revealed that the patient received reasonable care.

17. CR25-134

Dr. Nesin moved to dismiss the complaint. Dr. Ng seconded the motion, which passed unanimously.

MOTION: The complainant applied for long term disability and has a number of complaints about the licensee, who reviewed the application for the insurance company but is not a provider for the patient. The complainant asserts that the licensee contacted various of the complainant's medical providers, conveyed false, incomplete and inaccurate information, failed to review all of the complainant's medical records, requested that providers make "medical changes". The complainant provides a detailed description of their recent medical care.

The licensee responds with a description of their role in reviewing claims for the insurance company, provides details of their assessment of this particular claim and their communications with two of the complainant's providers and provides supporting documentation.

The complainant provides a rebuttal and asserts that the licensee was contacting one of the complainant's providers "...to persuade them to change information in my medical files." There is no supporting documentation for this assertion.

18. CR25-150

Dr. Fanjoy moved to dismiss the complaint. Dr. Ng seconded the motion, which passed unanimously.

MOTION: The complainant is a patient who alleges that the licensee was dismissive and rude when the patient was being seen for an eye exam. He alleges that there was a violation of HIPAA and also believes that he was made to wait longer as punishment for being difficult. He alleges he was treated inappropriately and complains about multiple issues with his visit including unnecessary eye drops, testing, and feeling pressured to consent to a future procedure.

The licensee provides an appropriate response indicating the need for repeated eye drops for his exam and the indications for his tests. The licensee denies that he would ever make a patient wait purposefully nor would he ever coerce a patient into having a procedure.

The medical records support appropriate care and treatment.

19. CR25-160

Mr. Ross moved to investigate further and issue a letter of guidance. Dr. Waddell seconded the motion, which passed unanimously.

20. CR25-165

Dr. Nesin moved to investigate further and refer the matter to the medical board where the patient resides, request ten telehealth charts for patients in Maine and obtain an outside expert review. Dr. Ng seconded the motion, which passed unanimously.

21. CR25-173

Dr. Fanjoy moved to dismiss the complaint and refer information to the Board of Osteopathic Licensure. Mr. Flaherty seconded the motion, which passed unanimously.

MOTION: The complainant is the mother of a two-month-old child who was seen in an emergency department for a bump on his head. The licensee is a pediatrician who did not see the patient. The mother alleges that the licensee failed to follow up with the child because he was not an established patient of the practice. The mother reports poor communication regarding the results of an outpatient study that was ordered by the emergency department. She also alleges that the licensee was inappropriate in examining the child previously in the hospital when he was born. The licensee responds that he was appropriate in his care and communication. The licensee requested that the mother make an appointment so he could appropriately examine the child. He indicates that the outpatient study ordered by the emergency department was concerning for a hematoma which would require a mandated report to DHHS. The medical records support that there was appropriate and professional communication between the licensee, his staff, and the complainant.

22. CR25-178

Mr. Jamison moved to dismiss the complaint. Dr. Waddell seconded the motion, which passed unanimously.

MOTION: A patient complained about a delay in the filling of three prescription requests. After the patient was apprised of some potential reasons for the delay and the timeline of the requests from the pharmacy to the licensee's office the patient chose to withdraw the complaint.

23. Intentionally left blank

24. Intentionally left blank

V. Assessment and Direction

25. AD24-267

Dr. Fanjoy moved to issue a complaint (**CR25-232**). Ms. Weinstein seconded the motion, which passed unanimously.

26. AD25-132

Dr. Waddell moved to issue a citation, offer the physician leave to withdraw his license while not under investigation, and issue a complaint if he chooses not to withdraw his license. Mr. Flaherty seconded the motion, which passed unanimously.

27. AD25-139

Dr. Nesin moved to request that the physician voluntarily change his license status to inactive pending resolution of the matter, issue a complaint (**CR25-233**) and direct that the physician have a § 3286 evaluation. Dr. Fanjoy seconded the motion, which passed unanimously.

28. AD25-143

Dr. Nesin moved to issue a citation and close the matter with no further action upon receipt of payment. Dr. Fanjoy seconded the motion, which passed unanimously.

29. AD25-145

Dr. Fanjoy moved to close the matter with no further action. Mr. Ross seconded the motion, which passed unanimously.

30. AD25-151

Dr. Nesin moved to issue a complaint (**CR25-231**), obtain an outside expert review, and remind the physician that he cannot currently practice in Maine. Mr. Flaherty seconded the motion, which passed unanimously.

31. AD25-158

Dr. Nesin moved to issue a citation and table the matter pending the outcome of an action in Mississippi. Dr. Waddell seconded the motion, which passed unanimously.

32. AD25-172

Dr. Nesin moved to issue a citation and close the matter with no further action upon receipt of payment. Mr. Flaherty seconded the motion, which passed unanimously.

33. AD25-181

Dr. Fanjoy moved to issue a complaint (**CR25-234**), obtain records and obtain an outside expert review. Ms. Weinstein seconded the motion, which passed 8-0-0-1. Dr. Waddell was recused from the matter and left the room.

34. AD25-190

Dr. Waddell moved to offer the physician leave to withdraw his license while not under investigation and issue a complaint if he chooses not to withdraw his license. Dr. Fanjoy seconded the motion, which passed unanimously.

35. AD25-196

Dr. Ng moved to issue a complaint (**CR25-235**) and direct the physician assistant to have a § 3286 substance misuse evaluation. Dr. Nesin seconded the motion, which passed unanimously.

36. AD25-198

Dr. Fanjoy moved to close the matter with no further action. Ms. Weinstein seconded the motion, which passed unanimously.

37. AD25-199

Dr. Fanjoy moved to issue a complaint (**CR25-236**) and obtain an outside expert review. Ms. Weinstein seconded the motion, which passed unanimously.

38. AD25-223

Dr. Nesin moved to issue a complaint (**CR25-237**) and direct that the physician assistant have a § 3286 substance misuse evaluation. Mr. Flaherty seconded the motion, which passed unanimously.

39. Intentionally left blank

40. Intentionally left blank

41. Pending Adjudicatory Hearings and Informal Conferences report

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

42. Consumer Assistance Specialist Feedback

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

VI. Informal Conference

A. CR23-164

At 1:10 p.m. Mr. Flaherty moved to enter executive session pursuant to 1 M.R.S. § 405(6)(F) and 32 M.R.S. § 3282-A to conduct an informal conference. Mr. Ross seconded the motion, which passed unanimously.

At 1:58 p.m. Dr. Waddell moved to come out of executive session. Dr. Ng seconded the motion, which passed unanimously.

Dr. Waddell moved to investigate further and issue a letter of guidance. Dr. Ng seconded the motion, which passed unanimously.

VII. Minutes for Approval

A. July 8, 2025

Ms. Weinstein moved to approve the minutes of the July 8th meeting. Dr. Fanjoy seconded the motion, which passed unanimously.

B. September 8, 2025

Dr. Ng moved to approve the minutes of the September 8th meeting. Ms. Weinstein seconded the motion, which passed 7-0-2-0 with Mr. Ross and Dr. Fanjoy abstaining.

C. September 9, 2025

Dr. Nesin moved to approve the minutes of the September 9th meeting. Ms. Weinstein seconded the motion, which passed 8-0-1-0 with Dr. Fanjoy abstaining.

VIII. Consent Agreement Monitoring

A. Monitoring Reports

1. Dashiell Jordan, MD

Dr. Fanjoy moved to offer Dr. Jordan the standard CSS consent agreement amendment and practice restriction. Mr. Jamison seconded the motion, which passed 8-0-0-1. Dr. Nesin was recused from the matter and left the room.

2. Cameron R. Bonney, MD

The Board reviewed the monitoring report. No action was taken.

3. Kathleen Dosiek, PA

The Board reviewed the monitoring report. No action was taken.

4. Liam Funte, MD

The Board reviewed the monitoring report. No action was taken.

5. Jesus Gandarillas, PA

The Board reviewed the monitoring report. No action was taken.

6. Clifford R. Peck, MD

The Board reviewed the monitoring report. No action was taken.

7. Farhaad R. Riyaz, MD

The Board reviewed the monitoring report and directed staff to remind Dr. Riyaz that it is his responsibility to be proactive with reports without prompting from staff.

8. Ian G. Reight, MD

Dr. Nesin moved to clarify that the requirement for one year of mentorship begins when Dr. Reight gains new employment. Dr. Waddell seconded the motion, which passed 8-0-0-1. Mr. Ross was recused from the matter and left the room.

9. Intentionally left blank

IX. Adjudicatory Hearing (none)

X. Remarks of Chair

A. BOLIM-BOL Workgroup Meeting

The Board reviewed meeting notes from the last workgroup meeting.

B. Draft Statute Review

The Board reviewed a side-by-side comparison of current statute and the draft statute. Information will be provided to the workgroup at its meeting later this month.

C. CLEAR Annual Educational Conference

Ms. Weinstein gave a report on her recent attendance at the FARB and CLEAR conferences.

XI. Executive Director's Monthly Report

Mr. Terranova reported that the Board of Osteopathic Licensure approved the draft Joint Rule Regarding Standards of Practice for Intravenous (IV) Therapy Businesses, Medical Spas and Medical Aesthetic Businesses.

A. IAMRA Report

The Board reviewed Mr. Terranova's written report.

B. Wellbeing First Champion

The Board of Licensure in Medicine has been recognized as a 2025 Wellbeing First Champion by the Dr. Lorna Breen Heroes Foundation.

C. Board Voices on AI

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

D. FOAA Training

During the past legislative session, a bill was passed mandating Freedom of Access Act (FOAA) training for all current board members. Future board members will need to complete the training within 120 days of their appointment. Mr. Terranova requested that after completion of training, Board members complete the form certifying their completion of training and email a copy to him and Ms. Lathrop to be maintained in the Board's records.

E. LD1583 Home Health and Hospice Update

Mr. Terranova gave the Board an update on the status of the legislation.

F. LD1803 Stakeholder Group Update

Dr. Gleaton and Mr. Terranova gave the Board an update on the recent Stakeholder Group meeting.

G. LD2828 Physician Associate Proposed Legislation

A list of proposed bill titles for the 2nd session of the 132nd Legislature was released on October 3rd. Review of the list revealed LD2828. Staff reached out to the Maine Academy of Physician Associates (MEAPA) to request further information. The copy of the draft bill provided would remove the practice agreement requirement for physician associates with more than 4,000 clinical hours who is the principal clinical provider in a practice that does not include a physician partner.

H. Edward David, MD Obituary

Mr. Terranova noted the recent passing of Edward David, MD, JD. Dr. David was a Board member for twenty years and served as Board Chair for most of his tenure.

XII. Assistant Executive Director's Monthly Report

Ms. Hunt welcomed Danielle Magioncalda, Investigative Secretary, back to the office following her leave.

Ms. Hunt recognized Savannah Okoronkwo for completion of the Administrators in Medicine Certified Medical Board Licensing Specialist training and certification as a CMBLS.

Ms. Hunt reported that interviews are scheduled for the open Licensing Specialist position.

XIII. Medical Director's Report (none)

XIV. Remarks of Assistant Attorney General

AAG Willis updated the Board on the status of pending litigation.

XV. Rulemaking

A. Chapter 1 Rule Regarding Physicians

Dr. Nesin moved to adopt the Basis Statement and Response to Comments and the amended Chapter 1 Rule Regarding Physicians. Dr. Fanjoy seconded the motion, which passed unanimously.

XVI. Policy Review (none)

XVII. FSMB Material (none)

XVIII. FYI

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

XIX. Other Business 8:10 a.m.


A. FSMB Board of Directors Report

Dr. Gleaton gave a brief overview of matters discussed at a recent meeting including efforts to support the mission of the Boards, workforce concerns, and effects of federal government reorganization and funding.

XX. Adjournment 3:34 p.m.

At 3:34 p.m. Mr. Ross moved to adjourn the meeting. Dr. Waddell seconded the motion, which passed unanimously.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Maureen S. Lathrop', written in a cursive style.

Maureen S. Lathrop
Administrative Assistant