# Rhode Island Board of Medical Licensure and Discipline 2022 Annual Report

**JANUARY 2023** 





#### Introduction

Although the aggressive public health deployment of vaccines and development of effective treatments has restored some "normalcy" to everyday life, the pandemic continues to define many aspects of Rhode Island healthcare. As Rhode Island approaches 3 years of the pandemic, we see significant changes in healthcare staffing and delivery modalities, particularly the more widespread use and acceptance of telemedicine. The Board of Medical Licensure and Discipline continues to navigate its mission to protect the public and ensure high professional standards in a rapidly changing medical field.

Upon the expiration of emergency regulations allowing for remote meetings under the Rhode Island Open Meetings Act the BMLD returned to in person meetings. As in 2021 the BMLD fulfilled its duty -- no meetings were cancelled in 2022.

Administrative staffing continues to be an issue for the Board as continued erosion of funding has challenged extant staff with increased workload and diminishing resources. This challenge increased exponentially with the departure of Dr. James McDonald, the long-standing Chief Administrative Officer of the BMLD.

The mission of the Board of Medical Licensure and Discipline (BMLD) is to protect the public through enforcement of standards for medical licensure and ongoing clinical competence. The BMLD has six members who represent the public, and seven members who are physicians. BMLD members receive no compensation of any type for their hundreds of hours of service annually.

BMLD Members 2022						
James McDonald, MD, MPH	Interim Director, Rhode Island Department of Health, Chair					
Jennifer Barry, Esq.	Public member, plaintiff attorney					
Sajeev Handa, MD	Vice Chair, Physician (Allopathic)					
Alexios Carayannopoulos, DO	Physician (Osteopathic)					
Sandra Coletta	Public member					
Crista Durand	Public member, hospital administrator					
Catherine DeGood, DO	Physician (Osteopathic)					
Sabina Holland, MD	Physician (Allopathic)					
Emily Green PhD	Public member					
Leonard Green	Public member					
David Kroessler, MD	Physician (Allopathic)					
James Monti, MD	Physician (Allopathic, full-time faculty)					
Vacant	Public member					

The BMLD meets the second Wednesday of each month at the Rhode Island Department of Health (RIDOH) in Providence, Room 401, and the open session of each meeting begins at 8:15 a.m. Any member of the public can attend the open session.

The BMLD is staffed by RIDOH employees who divide their time to effectively ensure the BMLD has the resources it needs to function at the highest level. The BMLD has gained outside legal counsel in 2022 due to the staffing shortage.

BMLD Staff					
VACANT	Chief Administrative Officer				
Raymond Marcaccio, Esq.	Legal Counsel				
Jessica DeSanto	Board Manager				
Steven Sullivan	Board Investigator				
Tara Charland	Licensing Officer				
VACANT	Administrative Support				

A statutory committee was convened in August 2022 to find a new Chief Administrative Officer; BMLD members Leonard Green and David Kroessler, MD, have devoted significant time and energy in the recruitment effort. The Board also extends its gratitude to Shannon Sullivan who served as a licensing aide this year, and to Sajeev Handa, MD and Jennifer Barry, Esq., who have reviewed every physician license application in the absence of the CAO, a tremendous commitment of time and energy.

Finally, the Board expresses great thanks and admiration to Dr. James McDonald for his leadership, guidance and innovation, and wishes him great success in his new position with the New York State Department of Health.

## Licensing

Licensing of physicians, by examination or by endorsement, represents one of the essential functions of the BMLD. Ensuring that physicians who are allowed to practice medicine in Rhode Island are competent, ethical, and professional is critical to the licensing process. It is notable that the last two years, more physician licenses were issued than in any prior year of the Boards 127-year history. This remains an increase of licenses from 2020, reflecting the increased workload of the part-time licensing aide. The state now has 6,221 fully licensed physicians. Much of this increase is attributable to the increase in telemedicine as more physicians have obtained a license in Rhode Island yet are located in a different state due to the pandemic.

Physician Licensing									
	2015	2016	2017	2018	2019	2020	2021	2022	
Physician licenses issued	377	478	430	476	474	565	867	848	
Physician license applications withdrawn	0	3	3	5	1	1	0	1	
Physician license applications denied	0	0	0	0	0	0	0	0	
Average number of days to receive physician license	29.5	25	31	25	26	28	28	41	
Percentage of licenses approved in less than three days after receipt of final documents	95	99	97	93	99	100	96	98	
Emergency Licenses issued (no fee)						797	0	0	

Physician Licenses, By Type									
	As of 12/31/15	As of 12/31/16	As of 12/31/17	As of 12/31/18	As of 12/31/19	As of 12/31/20	As of 12/31/21	As of 12/31/22	
Allopathic physicians	4,836	4,616	5,024	4,710	5,149	4,946	5,778	5,701	
Osteopathic physicians	335	316	365	340	418	437	511	520	
Temporary Post Graduate license <sup>4</sup>	N/A	N/A	N/A	16	13	13	15	8	
Academic faculty, limited license <sup>3</sup>	4	4	4	3	3	2	1	0	
Volunteer license <sup>2</sup>	2	15	15	16	17	14	14	15	
Total Physicians with a Full License	5,177	4,951	5,408	5,085	5,598	5,386	6,289	6,221	
Physicians (MD and DO) with a Controlled Substance Registration	4,303	3,324	4,238	3,934	4,242	3,982	4,410	4,193	
Limited license (Training) <sup>1</sup>	781	808	843	829	881	888	900	920	
Emergency Licenses						829	0	0	

<sup>&</sup>lt;sup>1</sup> Limited License: a physician, in accordance with regulation 1.3.4; in an approved accredited graduate medical education program 216-RICR-40-05-1 <a href="http://sos.ri.gov/documents/archives/regdocs/released/pdf/DOH/8700.pdf">http://sos.ri.gov/documents/archives/regdocs/released/pdf/DOH/8700.pdf</a>

<sup>&</sup>lt;sup>2</sup> Volunteer License: a physician, in accordance with regulation 1.4.5; retired; receives no financial compensation; practices at a 501(c)(3) and has proof of malpractice coverage 216-RICR-40-05-1 <a href="http://sos.ri.gov/documents/archives/regdocs/released/pdf/DOH/8700.pdf">http://sos.ri.gov/documents/archives/regdocs/released/pdf/DOH/8700.pdf</a>

<sup>&</sup>lt;sup>3</sup> Academic Faculty License: a physician, in accordance with regulation 1.4.6; physician of noteworthy and recognized professional attainment who is clearly an outstanding physician and who has been offered a full-time academic appointment by the dean of an accredited medical school in Rhode Island. 216-RICR-40-05-1 <a href="http://sos.ri.gov/documents/archives/regdocs/released/pdf/DOH/8700.pdf">http://sos.ri.gov/documents/archives/regdocs/released/pdf/DOH/8700.pdf</a>

<sup>&</sup>lt;sup>4</sup> Temporary Post Graduate License: a physician, in accordance with regulation 1.4.4; new in 2018. 216-RICR-40-05-1 http://sos.ri.gov/documents/archives/regdocs/released/pdf/DOH/8700.pdf

#### **Just Culture**

The Board continues its framework of Just Culture originally adopted in September of 2019 embracing the RIDOH values of equity and justice.

## Rules and Regulations for Licensure and Discipline of Physicians

In 2022, rules and regulations for physicians <a href="https://rules.sos.ri.gov/regulations/part/216-40-05-1">https://rules.sos.ri.gov/regulations/part/216-40-05-1</a> were revised and promulgated on April 24, 2022.

### **Continuing Medical Education (CME) Activities**

CME that are required for the renewal cycle, 2022-2024 in addition to the other CME requirements as written in the updated Physician Regulations.

#### **CMEs on Public Health Topics**

At least 4 hours of continuing medical education shall be earned on topics of current concern as determined by the director of the Rhode Island Department of Health. Current topics include: Cultural Awareness, Risk Management, and Antimicrobial Stewardship.

## **Complaints and Disciplinary Actions**

An essential role of the BMLD is to investigate and adjudicate complaints. Complaints come from a variety of sources, including patients, patient advocates, notices of litigation, licensed facilities, pharmacists, physicians, and other healthcare professionals. Each complaint is reviewed prior to being opened for complete investigation. The complaint process for physicians is detailed in a flow chart at http://health.ri.gov/complaints/physician/.

Summary of Annual Complaint Activity									
	2015	2016	2017	2018	2019	2020	2021	2022	
Complaints received	422	514	320	597	544	704	585	450	
Complaints opened for investigation	200	168	122	256	243	163	169	136	
Complaints adjudicated by full Board	211	200	137	169	171	157	125	114	
Suspensions	1	0	3	7	5	0	5	1	
Voluntary agreements not to practice medicine/surrender of license	4	7	1	3	4	7	6	1	
License reinstatements/ activations with disciplinary actions	7	4	3	1	3	2	1	1	
Reprimands and related sanctions	20	18	19	27	24	29	16	6	
Revocations	0	1	0	0	0	0	0	0	
Public adverse actions	32	30	26	38	36	38	28	9	

An illustration of the types of public disciplinary actions for 2022 are illustrated in the chart low:



In 2022, the issue most frequently cited in physician disciplinary actions was failing to meet the minimum standard of care. Rhode Island Department of Health staff attrition, including attorneys, administrators, and subject matter experts, resulted in more pending disciplinary actions to be resolved in the coming year.

#### **Publications**

There were ten publications in peer-reviewed journals that were authored by BMLD staff and were relevant to the Board in 2022.

- Barre, L, MD, MPH, Phengsavatdy A, B.S., MPH, Goulet, M., McDonald, JV., M.D., M.P.H, Review of Malpractice Settlements and Awards from 2008–2018 in Rhode Island, Rhode Island Medical Journal, 2022 August 1 Vol 105, Number 6. Pages 52-56.
- 2. Nitenson, A., Hallowell, B, McDonald, M. "Trends and Risk Factors for Overlapping Stimulant and Opioid Prescriptions-Rhode Island, April 1, 2016–March 31, 2020." *Rhode Island Medical Journal* 105.3 (2022): 42-45.
- 3. Zang, X., Bessey, S. E., Krieger, M. S., Hallowell, B. D., Koziol, J. A., Nolen, S., ... & Marshall, B. D. (2022). Comparing Projected Fatal Overdose Outcomes and Costs of Strategies to Expand Community-Based Distribution of Naloxone in Rhode Island. *JAMA network open*, *5*(11), e2241174-e2241174.
- 4. Hallowell, B. D., Chambers, L. C., Samuels, E. A., Bratberg, J., McDonald, J., Nitenson, A., Onyejekwe, C., & Beaudoin, F. L. (2022). Sociodemographic and prescribing characteristics that impact long-term retention in buprenorphine treatment for opioid use disorder among a statewide population. *Drug and Alcohol Dependence*, 109680.
- Siegert, T. F., Chambers, L. C., Weidele, H., Scagos, R., McDonald, J., Onyejekwe, C., & Hallowell, B. D. (2022). Controlled Substance Prescription History among Individuals Who Died of an Accidental Opioid-Involved Drug Overdose in Rhode Island. Substance Use & Misuse, 1-4.
- 6. Wunsch, C., Wightman, R., Pratty, C., Jacka, B., Hallowell, B. D., Clark, S., ... & Samuels, E. A. (2022). Thirty-day Treatment Continuation After Audio-only Buprenorphine Telehealth Initiation. *Journal of Addiction Medicine*, 10-1097.
- 7. Beaudoin, F. L., Jacka, B. P., Li, Y., Samuels, E. A., Hallowell, B. D., Peachey, A. M., ... & Marshall, B. D. (2022). Effect of a Peer-Led Behavioral Intervention for Emergency Department Patients at High Risk of Fatal Opioid Overdose: A Randomized Clinical Trial. *JAMA Network Open*, *5*(8), e2225582-e2225582.
- 8. Hallowell, B. D., Chambers, L. C., Barre, L., Diao, N., Onyejekwe, C., Banks, A., ... & McDonald, J. (2022). Association between initial opioid prescription diagnosis type and subsequent chronic prescription opioid use in Rhode Island: a population-based cohort study. *BMJ open*, *12*(1), e050540.
- 9. Borrelli, E. P., Bratberg, J., Hallowell, B. D., Greaney, M. L., & Kogut, S. J. (2022). Application of a diazepam milligram equivalency algorithm to assess benzodiazepine dose intensity in Rhode Island in 2018. *Journal of Managed Care & Specialty Pharmacy*, 28(1), 58-68.
- Marshall, B. D., Alexander-Scott, N., Yedinak, J. L., Hallowell, B. D., Goedel, W. C., Allen, B., ... & Cerdá, M. (2022). Preventing overdose using information and data from the environment (PROVIDENT): Protocol for a randomised, population-based, community intervention trial. *Addiction*. 117(4):1152-1162.

#### Revenue

Revenue generated from licensing and registration fees is sent to the General Treasurer of the State of Rhode Island General, and BMLD operations are funded by RIDOH. License fees account for the vast majority of revenue for the State as reflected in the table below. Physician licenses are renewed by June 30, of even years; therefore, revenue varies significantly between renewal cycles. Revenue is also generated by fees paid to renew Controlled Substance Registrations (CSR). There is a fee for verification of a Rhode Island physician license which is administered via veridoc.org, which sends real-time license verification to state medical boards as requested. RIDOH offers primary source verification at no charge, at <a href="http://209.222.157.144/RIDOH">http://209.222.157.144/RIDOH</a> Verification/Search.aspx?facility=N&SubmitComplaint=Y.

The BMLD was authorized to issue fines for disciplinary actions in 2022. The BMLD does also have the authority to issue administrative fees which reflect the actual costs associated with investigating a complaint.

Annual Revenue from Physician-Related Fees									
	2015	2016	2017	2018	2019	2020	2021	2022	
License Fees (MD/DO) <sup>1</sup>	\$542,209	\$5,417,610	\$581,935	\$ 5,566,053	\$1,016,333	\$5,913,411	\$1,294,945	\$6,800,035	
CSR Fees <sup>2</sup>	\$70,600	\$796,550	\$77,770	\$790,400	\$76,000	\$803,630	\$84,000	\$84,440.00	
License Verification Fees <sup>3</sup>	\$108,849	\$146,155	\$146,800	\$165,515	\$179,450	\$155,880	\$116,300	\$5,900	
Administrative Fees from Disciplinary Actions <sup>4</sup>	\$33,829	\$17,900	\$23,055	\$37,938	\$29,744	\$75,636.54	\$35,293	\$16,095.00	
Limited License Application Fees <sup>5</sup>	\$59,405	\$59,115	\$58,275	\$57,275	\$61,420	\$60,850	\$59,605	\$62,400	
Limited License CSR Fees <sup>6</sup>	\$80,100	\$83,100	\$84,700	\$86,100	\$89,300	\$92,300	\$31,400	\$95,300	
Physician Hospital Beds Licensing Fees <sup>7</sup>	\$180,800	\$136,840	\$197,860	\$186,662	\$150,856	\$191,949	\$147,695	\$180,504	
Total Annual Fees	\$1,075,792	\$6,657,270	\$1,170,395	\$6,889,943	\$1,603,103	\$7,293,657	\$1,501,493	\$7,244,674	

<sup>\*</sup>provisional

<sup>&</sup>lt;sup>1</sup> Source: L2K – Revenue Reports – Physicians – Allopathic Physician [MD], Osteopathic Physician [DO].

<sup>&</sup>lt;sup>2</sup> Source: L2K – Revenue Reports – Physicians – CSR Allopathic Physician [MD], CSR Osteopathic Physician [DO].

<sup>&</sup>lt;sup>3</sup> Source: RIFANS – Account Numbers 10.075.2201958.01.422000.00000 (2015-2016);

<sup>10.075.2136993.01.422000.00000 (2016-2020).</sup> 

<sup>&</sup>lt;sup>4</sup> Source: BMLD Program Records.

<sup>&</sup>lt;sup>5</sup> Source: L2K – Revenue Reports – Physicians – Academic Faculty [Limited], Limited Physician, Medical Officer [Limited] (2015-2016 only), Intern [Limited] (2015 only), Fellow [Limited] (2016 only), Limited Physician-Alternate Jurisdiction (2017 only), Temp Post Grad Allopathic Physician (2019-2020).

<sup>&</sup>lt;sup>6</sup> Source: L2K – Revenue Reports – Physicians – CSR-Limited Physician, CSR-Academic Faculty [Limited], CSR Limited Physician-AJ (2017 only), CSRX-Temp Post Grad Allopathic Physician (2018-2020), CSRX-Temp Post Grad Osteopathic Physician (2018-2020).

<sup>&</sup>lt;sup>7</sup> Source: L2K – Revenue Reports – Physicians – Physician Hospital Beds.

## Conclusion

The BMLD was established in 1986, and 2022 reflects the close of its 36<sup>th</sup> year of protecting the public and ensuring the highest standards of the medical profession. The BMLD is composed of highly respected and committed volunteers who give of themselves and their time to carry out its mission. The BMLD is vigilant and consistent in its mission to protect the public and does so in the spirit of equity and justice for all.