



**Tennessee Board of Medical Examiners  
Regular Board Meeting**

**Tuesday, November 3, 2020  
Wednesday, November 4, 2020**

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**MINUTES**

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The regular board meeting of the Tennessee Board of Medical Examiners was called to order at 8:30 a.m. in the Iris Room, Ground Floor, Metro Center Complex, 665 Mainstream Drive, Nashville, Tennessee 37243 by Dr. W. Reeves Johnson, Board President.

Board members present:       W. Reeves Johnson, MD, President  
  Melanie Blake, MD, Vice President  
  Neal Beckford, MD  
  Robert Ellis, Consumer Member  
  Phyllis Miller, MD  
  Deborah Christiansen, MD  
  Stephen D. Loyd, MD  
  Julianne Cole, Consumer Member  
  Jennifer Claxton, Consumer Member  
  Randall Pearson, MD  
  John Hale, MD

Board member(s) absent:       Samantha McLerran, MD

Staff present:                     Francine Baca-Chavez, JD, Office of General Counsel  
  Rene Saunders, MD, Medical Consultant, BME  
  Angela Lawrence, BME Executive Director  
  Stacy Tarr, Administrative Director  
  Candyce Wilson, Administrative Director

Ms. Lawrence made opening remarks to the Board and provided an overview of the requirements for a special meeting by teleconference. All requirements were satisfied. The electronic meeting was scheduled for the purpose of considering time sensitive matters considering the covid-19 pandemic. Dr. Neal Beckford motioned for approval to conduct the meeting electronically for this purpose and Mr. Robert Ellis seconded the motion. A roll call vote was taken, and it passed. By roll call confirmation all members present confirmed they received all meeting materials prior to this meeting. The teleconference was then turned over to the President of the Board, Dr. W. Reeves Johnson.

Dr. Johnson called the meeting to order. A roll call was conducted, and a quorum of the Board was established with the following members present: Dr. W. Reeves Johnson, Dr. Melanie Blake, Dr. Stephen Loyd, Dr. Neal Beckford, Mr. Robert Ellis, Dr. Deborah Christiansen, Ms. Julianne Cole, Ms. Jennifer Claxton, Dr. Phyllis Miller and Dr. John Hale.

## **I. CONSIDERATION OF APPLICATIONS**

### **Medical Doctor Applicant Interview(s):**

**Paula Dozzi, MD** – appeared before the Board via WebEx without legal representation. Dr. Dozzi is a Canadian Medical School graduate who completed the LMCC licensing examination but has not completed 4 years of RCPSC accredited postgraduate training (2 years only) and has no US ACGME postgraduate training. References include TCA 63-6-207 and Rule 0880-02-.08. She is currently ABMS Board Certified and meeting MOC. Two years of Canadian family medicine residency training, which is the standard length. Accepted Canadian license on a reciprocal basis in order to qualify for ABMS Board Certification.

*Dr. Randall Pearson joined the meeting.*

Review of the Boards rule and the Boards previous actions on applicants with similar situations. Ms. Francine Baca-Chavez encouraged the Board to remain consistent in their interpretation of their rules for all applicants. Historically, the Board has required such an applicant to go through the Declaratory Order process. The Board has requested to revise the rule that applies for Canadian applicants, but those rules will not be finalized for a while and the Board is encouraged to utilize their current rules and remain consistent. The applicant expressed she would be interested in seeking licensure through the Declaratory Order process. Mr. Ellis motioned to table application up to six (6) months to allow the applicant to apply for a Declaratory Order. Dr. Beckford seconded the motion and it passed by roll call vote.

**Paschal Ike, MD** - appeared before the Board via WebEx without legal representation. Dr. Ike is an International Medical School graduate who has completed 3 years of US Residency training but failed 1 step of the USMLE more than 3 times (Rule 0880-02-.08(2)(C)). He is not currently ABMS Board Certified. He is a candidate for a Georgia Medical license and if it is issued, he could potentially qualify for reciprocity by Rule 0880-02-.05(8)(c)(5). Additionally, the Board has considered and approved for rulemaking to amend the Rule that allows for 6 attempts at any step of the USMLE. Those rules are in internal review. He reports he has successfully completed his residency training. The applicant would qualify for a temporary license based off the date of receipt of the application, despite him having already completed his training. Dr. Beckford motioned to grant an unrestricted license contingent on him obtaining an unrestricted license in GA; however, if that does not occur then he be granted a non-renewable temporary license, subject to all rules, for no longer than (2) years for the purpose of him obtaining ABMS Board Certification. Dr. Miller seconded the motion. The motion passed by roll call vote with Dr. Loyd abstained and Dr. Pearson opposed.

**Kaycee Burcham, MDST** – appeared before the Board via WebEx without legal representation. Dr. Burcham is participating in a Residency rotation in Tennessee in conjunction with her Residency program at the University of Mississippi (Magnolia Regional Medical Center). She has applied for the Special Training license but does not qualify for Special Training license by virtue of being eligible for a full medical license (TCA 63-6-207). Ms. Baca-Chavez stated the applicant could qualify for a license exemption. The Board recommended that the applicant seek a license exemption. Dr. Christiansen motioned to recommend withdrawal of the special training application by the applicant, and to transfer the collected fees to a license exemption request should one be submitted to the Board's office. Dr. Pearson seconded the motion and it passed by roll call vote.

## **AFFILIATED MONITORS PRESENTATION by Ms. Denise Moran and Mr. Vincent DiCianni**

Ms. Moran and Mr. DiCianni provided the Board with an overview of the services provided by Affiliated Monitors.

- The program started in 2004
- When the program started there was no remedial option.
- The program offers independent monitoring of a practitioner that the Board believes can be remediated
- The monitoring includes chart reviews, billing record reviews, policies and procedures at the place of practice, staff meetings and trainings in place and supervision of mid-levels taking place.
- Local practitioners are used as monitors, they are trained on how to be a monitor, with no conflict to the licensee they would monitor.
- This service is at no cost to the Board. The one being monitored pays the cost.

### **Petition for Declaratory Order**

**Paula Dozzi, MD** – appeared before the Board via WebEx. Dr. Dozzi has provided the petition for declaratory order to the Board for consideration. The Board reviewed the petition. Dr. Christiansen motioned to accept the petition for Declaratory Order. Dr. Hale seconded the motion and it passed by roll call vote. Dr. Loyd was not present to vote.

### **Disciplinary Order(s) – Order(s) of Compliance**

**Frederick Stevens, MD** – appeared before the Board via WebEx without legal representation. Ms. Francine Baca-Chavez represented the State. The State agrees he is compliant with the terms of his original 2017 consent order. The Board was presented with an order of compliance. Dr. Christiansen motioned to accept the order of compliance. Mr. Ellis seconded the motion and it passed by roll call vote. Dr. Loyd abstained.

## **II. Discussion on Supervising Overprescribing Midlevel’s with Mr. David Silvus**

Mr. Silvus provided the Board with an overview of the process followed by the Bureau of Investigations. When the consultant is reviewing a complaint, if there is no supervision concern then the supervision matter is not discussed further. If the consultant believes there to be a problem with supervision, then a formal complaint is filed. When a physician has been found to not be in compliance with the requirement to review 10% of his/her mid-level’s charts, it is commonly stated that the mid-level didn’t provide him/her with the charts to review but everything he/she was given had been reviewed. The supervision rules fall under BME and there is no rule under the Nursing Board to require the nurse to give 10% of his/her charts to their collaborating physician. Dr. Blake spoke regarding the Advanced Practice Professionals Taskforce working towards revising the BME rules and the goal to have some equal responsibility in those charts getting to the physician.

## **III. Updates from Taskforces & Committees**

- a. **Development Committee (Dr. Blake, Dr. Johnson, Dr. Beckford, Mr. Ellis and Dr. Christiansen) –**
  - i. The Committee met yesterday, November 2, 2020.
  - ii. Five-hour CME grace period – The Board audits 5% of renewal applicants each month. Typically, about 5% of that group is deficient in their CMEs. If someone was deficient in only 5 hours, then they are given 30 days to make it up. If it is

more than 5 hours or less, then the Boards CME policy is applied for their deficiency on CME. The DVC brought a revised policy before the Board with a motion to consider. It was requested to amend the policy by using the word “deficient” throughout the whole policy rather than change the word to “lacking”. It was also suggested to amend the policy by adding a statement that the Agreed Citation is not reported to the NPDB. Dr. Johnson motioned to approve the amendment to the policy and Mr. Ellis seconded the motion. It passed by roll call vote. Mr. Ellis motioned to approve the revised policy. Dr Johnson seconded the motion and it passed by roll call vote with Dr. Christiansen opposed.

- iii. **CME FAQs** – The Committee discussed the desire to phase out using Maintenance of Certification (hereinafter “MOC”) and remove it to qualify for CME. Removing this option will require a notification to the licensees and clear communication of the change, possibly through an e-mail blast. Dr. Blake reports the FAQs will be revised to remove MOC. Dr. Johnson reports not all certifying Boards have the same requirements. For instance, Board of Neurosurgery gives them 10 years to complete CMEs so you could essentially not do CMEs for 9 years and complete all CMEs in one year. At the next meeting this will be removed from the FAQs and presented to the Board for approval.
- iv. **Re-entry Policy:** The Committee cannot make a strong argument between 2 to 5 years out of practice. Two years is probably the safest pathway. The Board would like to ask the Commissioner, Dr. Piercy, to appear before the Board or Development Committee meeting. The Reentry Taskforce will join the Development Committee meeting to revamp the policy.
- v. **Residency and Fellowship Training Clarification** – Many residencies are only two years in length simply because the program is three years long but includes one year you must have already completed in order to qualify to enter the residency program. International Medical Graduates (hereinafter “IMG”) are required to have successfully completed a 3-year ACGME residency program. The ACGME allows the program director to give a one year credit to an IMG who has completed one year of training that was not ACGME accredited, so they enter at PGY2 and at the end of training is credited to have completed a 3-year residency training. Dr. Saunders suggested the Boards Postgraduate Training Verification form be revised because most program directors are not wanting to attest that the physician completed a 3-year residency in the program because they wont want to attest to the year that the physician was not in their program. The Board decided to table this discussion.
- vi. **DVC Membership** – the Board reviewed a draft policy addressing the composition and purpose of the Development Committee. The final policy will come before the Board at the next meeting. The Committee will have temporary additional members added based on topic discussions.
- vii. **Public Comment by Mr. Yarnell Beatty with the Tennessee Medical Association** – Due to Dr. Mitchell Mutter retiring from the State the prescribing CME course he offers will come to an end. TMA has offered to assist in filling this gap. There was also further discussion about a periodic report being presented to the Board by TMA.

IV. **Presentation by Dr. Michael Baron, TMF Medical Director and Ms. Nancy Oglesby, Justice 3D**

**Dr. Michael Baron** – Dr. Baron presented study results based on implicit bias, which governs the feelings and attitudes that we hold of others based predominantly on personal characteristics such as one’s race, ethnicity, age and appearance. These attitudes and stereotypes can manifest in the justice system, workplace, school setting and in the healthcare system. Implicit bias at the unconscious level – it is out of your control until you’re made aware of it; it is hard to be impartial if you are not aware of your unbiases. Self-awareness of implicit bias and knowing how to manage it will have a huge impact when we stand as judge and jury in contested cases and while interviewing applications. Justice 3D will provide training for neurobiology of trauma and trauma-informed interviewing, empathy-based integration, and implicit bias.

**Ms. Nancy Oglesby** – Justice 3D focuses on trauma informed interviewing. The cost of training is based on the number of hours taken, from 1 to 3 hours, and not based on the number of participants. It is offered on weekends and at night. The 3-hour instruction would include the investigator information. The training can be offered in-person or virtually. Several other State Medical Boards have received this training already. Dr. Johnson suggested several other Boards, the Office of General Counsel and Bureau of Investigations would benefit from this training.

The Board expressed an interest in receiving this training. Ms. Angela Lawrence will communicate with the finance team on this matter. A justification memo will need to be drawn up for approval since it is just a onetime training. Tentative dates and cost of training will be needed for the approval to go through.

#### **Agreed Order(s)**

**Lisa Gressel, PA** – did not appear before the Board nor did a legal representative appear on her behalf. Ms. Lara Gill represented the State. This order has been ratified by the Committee of Physician Assistants. Respondent was licensed on June 25, 1999 and the license expired on April 30, 2021. Respondent was employed by the Center for Advanced Medicine (“CAM”), in Manchester, Tennessee, between the years of approximately 2014-2018 as a physician’s assistant. For that time, the Respondent’s collaborating/supervising physician was David Florence, DO. While working at CAM, the Respondent provided direct patient care that included prescribing controlled substances. Pursuant to a complaint, the State conducted an investigation that included the review of patient records prepared and kept by Respondent. The review of those records showed that between approximately 2014 and 2018 while employed at CAM, Respondent’s documentation fell below the standard of care with regard to her documentation of the information necessary to show the amounts and/or durations of controlled substances prescribed to some patients were medically necessary. Respondents documents fell below the standard of care as Respondent failed to properly document actions she took in response to inconsistencies and red flags which arose through Respondents monitoring of her patients, including inconsistent drug screens in some of the patient charts reviewed. Some of the patient charts reviewed showed that Respondent’s documentation fell below the standard of care in that some patient charts lacked the appropriate history and physical, diagnosis based on examinations and diagnostic test, and a therapeutic plan including discussion of risks and benefits of various treatment options. The facts stipulated are grounds for discipline. This order shall place Respondent’s medical license on probation. The order outlines several other requirements of the Respondent. Respondent shall pay four (4) Type A civil penalties for a total of four thousand dollars (\$4,000.00). Respondent shall pay actual and reasonable costs of this case not to exceed five thousand dollars (\$5,000.00). Mr. Ellis motioned for approval. Dr. Hale seconded the motion and it passed by roll call vote.

#### **Consent Order(s)**

**Janet McNeil, MD** – did not appear before the Board nor did a legal representative appear on her behalf. Ms. Tracy Alcock represented the State. Respondent was licensed on March 22, 1985 and the license expires on March 31, 2022. The Top 50 prescriber list is a list of the 50 Tennessee practitioners who prescribed the highest number of morphine equivalents for a given time period. Respondent was among the top fifty prescribers in Tennessee for the 2012, 2013, 2014 and 2015 calendar years. The Department reviewed twenty-nine (29) patient records of the Respondents. The order further outlines findings from the investigation. The facts stipulated are grounds for discipline. The order shall permanently voluntarily surrender Respondents license, which is the same as permanently revoked, effective Wednesday, November 11, 2020. Respondent agrees that she will not see any patients after the close of business on Tuesday, November 3, 2020. Respondent shall pay actual and reasonable costs of the case not to exceed three thousand dollars (\$3,000.00). Dr. Beckford motioned for approval. Dr. Loyd seconded the motion and it passed by roll call vote.

### **Final Order(s)**

**Casey Messer, PA** – did not appear before the Board nor did a legal representative appear on his behalf. Ms. Tracy Alcock represented the State. Respondent was licensed on July 30, 2013 and the license expires on June 30, 2022. This order has been ratified by the Committee of Physician Assistants. In or around April 2014, the Kentucky Board of Medical Licensure (hereinafter “Kentucky Board”) entered an Emergency Order of Suspension of Respondent’s P.A. license due to probable cause that he had engaged in unprofessional behavior and sexual misconduct while working as a P.A. in Kentucky. Subsequently, in or around July 2014, pursuant to an Agreed Order, the Kentucky Board disciplined Respondents license. In the Kentucky Order, the facts stipulated, but are not limited to the following. Respondent engaged in unprofessional behavior and sexual misconduct with two patients while working as a P.A. Respondent exceeded his P.A. scope of practice when Respondent engaged in certain behavior without the presence of a supervising physician. The Kentucky Order restricted and limited the Respondent’s license, specifying Respondent could not perform any act which would constitute the practice of a P.A., until approved by the panel. Respondent is to complete certain courses outlined in the Order. In or around December 2014, pursuant to an Amended Agreed Order, the Kentucky Board found that Respondent had completed the required coursework and amended the discipline of Respondents license to an indefinite restricted status subject to certain requirements. This order shall place Respondents license on probation for six (6) months. The order outlines requirements of the Respondent prior to Respondent’s license being taken off probation and the restrictions/limitations while on probation. Dr. Christiansen motioned for approval. Dr. Hale seconded the motion and it passed by roll call vote.

### **Consent Order(s)**

**Whitney Ross, PA** – did not appear before the Board nor did her legal representative appear on her behalf. Ms. Tracy Alcock represented the State. Respondent was licensed on February 14, 2013 and the license expires November 30, 2021. From at least 2018 to December 2019, Respondent owned and treated patients as a P.A. at Sale Creek Primary Care. The Department’s investigation included a review of the CSMD and one patient medical record. In 2019, Respondent, who was dealing with significant stressors in her personal life at the time, began abusing controlled substances and other drugs available to her as part of her practice. While working at Sale Creek, Respondent treated her coworker as a patient. At times, the patient shared, and Respondent consumed some of the controlled substances Respondent prescribed for the patient. Respondent realized she needed help, and at the end of November 2019/beginning of December 2019, Respondent closed her practice and referred her patients to other providers. Respondent met with representatives of TMF and ultimately signed a five-year monitoring agreement with TMF. The order outlines conditions within that monitoring agreement. Respondent has not practiced since December 1, 2019. The facts stipulated are grounds for discipline. This order shall reprimand the Respondents license. Respondent must maintain 100% compliance with the terms of her TMF contract and is required

to have quarterly reports submitted to verify compliance. Respondent must pay two Type “C” Civil Penalties for a total of one hundred dollars (\$100.00). Respondent must pay actual and reasonable costs of the case not to exceed three thousand five hundred dollars (\$3,500.00). Dr. Christiansen motioned for approval. Mr. Ellis seconded the motion and it passed by roll call vote.

### **Service Reward Presentation**

Dr. Lisa Piercey, Commissioner of Health, presented Dr. Mitchell Mutter with a service reward for his time served with the Tennessee Department of health and his many contributions to the State of Tennessee.

Ms. Valerie Nagoshiner, Chief of Staff, read letters by Dr. John Drehyzner and Dr. David Raegan, written with recognition to the many contributions of Dr. Mitchell Mutter to the State of Tennessee.

Ms. Angela M. Lawrence, Executive Director, presented Dr. Mutter with an engraved plaque on behalf of the members of the Board of Medical Examiners in recognition of his service to the State of Tennessee.

### **Presentation from Dr. Mitchell Mutter, TDOH Special Projects Director**

- Dr. Mutter presented an update on the Morphine equivalents per capita through the State
- Reports show a decline by 50% but TN still ranks in the top 5 of highest Morphine equivalents in the country
- As of October 2020, there are 118 active pain management clinics in TN

### **Consider and Approve Consent Agenda**

Dr. Christiansen motioned to accept the consent agenda. Mr. Ellis seconded the motion and it passed by roll call vote with Dr. Miller and Dr. Pearson was not present to vote. The Consent Agenda contained the following:

1. Approval of September 29-30, 2020 Board meeting minutes
2. Approval of September 28, 2020 Development Committee meeting minutes
3. Ratification of new licenses, reinstatement and renewals of Medical Doctors, MD X-Ray Operators, Genetic Counselors, Acupuncture and Polysomnography
4. Review of Office of Investigations Statistical Complaint Report and Currently Monitored Practitioners Report
5. Review of Administrative Office Statistical Licensing Report
6. Review of the Office of General Counsel Report
7. Review and approve continuing medical education Agreed Citations – Leigh Valentine, AMDX, Wendy Simms, AMDX, Kayla Sexton, AMDX, Wayne Ladner, PA, Richard Swift, PA, Megan Huddleston, PA and Edward Friedman, PA.

### **Disciplinary Order(s) – Order(s) of Compliance**

**Nirav Patel, MD** – appeared before the Board via WebEx with legal representation from Mr. William Wooten. Ms. Francine Baca-Chavez represented the State. The State agrees he is compliant with the terms of his original consent order. The Board was presented with an order of compliance to lift the conditions on his license. Dr. Blake motioned for approval. Dr. Hale seconded the motion and it passed by roll call vote.

### **Request for Order Modification**

**Rosaire M. Dubrule, MD** – was not present during the meeting. Ms Francine Baca-Chavez informed the Board that the Board entertains these requests when the licensee can prove meeting one or more of the terms of their Order, is impossible. In his request, Dr. Dubrule expresses his inability to comply is due to a financial burden. His inability to comply is a monetary issue which is not something permitted by rule. The Board spoke in favor of supporting the original order and requirements he should meet. Dr. Blake motioned to reject the request for order modification. Dr. Beckford seconded the motion. Dr. Loyd recused and it passed by roll call vote.

### **Disciplinary Order(s) Consent Order(s)**

**Chennakesava Kummathi, MD** – did not appear before the Board nor did a legal representative appear on her behalf. Ms. Paetria Morgan represented the State. Respondent was licensed on February 17, 2016 and that license currently expires August 31, 2021. On February 13, 2020, Respondent prescribed twenty (20) alprazolam pills to a physician colleague without establishing a physician-patient relationship. On February 13, 2020, Respondent also prescribed twenty (20) oxycodone pills to the same physician colleague without establishing a physician-patient relationship. Respondent failed to create a medical record for the alprazolam and oxycodone prescriptions. The facts stipulated are grounds for discipline. This order shall reprimand Respondents license. Respondent must complete specific coursework. Respondent is restricted from prescribing opioids for six (6) months and until successful completion of the required continuing education course stated in the order. Respondent is restricted from collaborating with any advanced practice registered nurses or physician assistants for prescribing opioids during the six (6) months stated. Further coursework listed in the order shall be completed within one (1) year. Respondent must submit proof to the Board that he has notified anyone whom he collaborates with of this Consent Order. Respondent must pay one (1) Type A civil penalty for a total of one thousand dollars (\$1,000.00). Respondent shall pay all actual and reasonable costs of the case not to exceed five thousand dollars (\$5,000.00). Mr. Ellis motioned to approve the order. Dr. Christiansen motioned to approve the order. Mr. Ellis seconded the motion and it passed by roll call vote.

**Thomas Sturdavant, MD** – did not appear before the Board nor did a legal representative appear on his behalf. Ms. Paetria Morgan represented the State. Respondent was licensed on October 27, 2017 and that license currently expires April 30, 2021. On or about November 8, 2019, before the United States District Court for the Southern District of Mississippi, Respondent pled guilty to a Conspiracy to Commit Healthcare Fraud. The aforementioned guilty plea constituted a “conviction of a felony involving moral turpitude and unprofessional conduct, including any dishonorable or unethical conduct likely to deceive, defraud, or harm the public”. To resolve the Mississippi disciplinary matter, Respondent voluntarily surrendered his Mississippi medical license on or about July 6, 2020. The facts stipulated are grounds for discipline. This order shall voluntarily surrender Respondent’s license. Respondent shall pay all actual and reasonable costs of the case not to exceed two thousand dollars (\$2,000.00). Dr. Christiansen motioned to approve the order. Dr. Hale seconded the motion and it passed by roll call vote.

**Kaycee Burcham, MD** (continued from Applicant Interviews) – this applicant appeared before the Board earlier today and more information has been obtained. The applicant does not meet the qualifications of the statute for an exemption nor a special training license. Dr. Burcham can only obtain a full license. The Board’s motion from earlier still stands.

**Residency Discussion from DVC** (continued from DVC update) – Dr. Saunders presented an example of a previous postgraduate training verification form received where she was able to approve the license after gathering the information necessary to attest that the appropriate number of residency training years was successfully completed. At this point, Dr. Saunders will continue to review applicants and utilize the policy as it applies until if/when the Board decides to revise the policy.



**Development Committee Agenda items for the January 2021 Meeting**

- Discussion on if one-year US training program means “residency”
- DVC Composition/function
- CME FAQs
- Discussion on more information with the applicant interview materials presentation

**Public Comment** – None.

**Board Elections** –

**President:** Dr. Beckford motioned to nominate Dr. Blake as President of the Board. Ms. Claxton seconded the motion and it passed by roll call vote.

**Vice President:** Mr. Ellis motioned to nominate Dr. Loyd as Vice President of the Board. Ms. Claxton seconded the motion it passed by roll call vote.

**Secretary:** Dr. Loyd motioned to nominate Mr. Ellis as Secretary of the Board. Dr. Hale seconded the motion it passed by roll call vote with Mr. Ellis recused.

**DVC Composition** – Dr. Johnson stated at this time the Committee will be comprised of the following members: Dr. Blake, Dr. Johnson, Mr. Ellis, Dr. Loyd, Dr. Beckford, Dr. Christiansen.

**Board Member Training** - Discussion on the Board watching ALJ Stovall’s educational video at the first of the year for newer members of the Board and as a refresher for the other members of the Board. Dr. Blake encouraged other members to participate in Case Review.

The Board concluded all regular Board business and recessed at 5:24pm CT.

**Tennessee Board of Medical Examiners  
Wednesday, November 4, 2020**

**Contested Case**

**Joseph Hensley, MD v. State of Tennessee Board of Medical Examiners**

**Iris Room via WebEx**

**Administrative Law Judge: Phillip R. Hilliard**

**Panelists: Neal Beckford, MD, Deborah Christiansen, MD; Stephen Loyd, MD**

**Counsel for State: Francine Baca-Chavez, Deputy General Counsel**

**Counsel for Respondent: David L. Steed, Esq.**

Respondent has been granted license number 15978 by the Board on December 11, 1984. Respondent’s license currently has an expiration date of July 31, 2021. Between approximately December 2014 and March 2015, Respondent treated a patient, including through prescription of controlled substances, who was an employee and with whom he was having a personal relationship. Respondent also treated several immediate family members as patients, including through prescription of controlled substances.

The panel of the Board determines the following shall be included in the final order. The order shall place Respondent’s license on probation for a period of three (3) years. Respondent shall successfully complete the medical course entitled “Medical, Ethics, Boundaries and Professionalism” and the course entitled “Prescribing Controlled Drugs: Critical Issues and Common Pitfalls”. Respondent shall pay two (2) Type

A civil penalties for a total of two thousand dollars (\$2,000.00). Respondent shall pay actual and reasonable costs of the case not to exceed twenty-five thousand dollars (\$25,000.00). While Respondent's license is on probation, the Respondent shall not serve as a supervising physician or substitute supervising physician. At the expiration of the probationary period, Respondent becomes eligible to petition the Board for an Order of Compliance to lift the restrictions imposed by this Order. Respondent shall appear before the Board when requesting to lift the probation unless waived by the Board's medical consultant. This is formal disciplinary action and will be reported to the National Practitioner Data Bank. There was a motion to approve the discussed and reviewed order. There was a second to the motion and it passed.