



Commonwealth of Massachusetts Board of Registration in Medicine



2022 Annual Report

Executive Summary

The Massachusetts Board of Registration in Medicine licenses more than 40,000 physicians, osteopaths and acupuncturists. The Board was created in 1894 to protect the public health and safety by setting standards for the practice of medicine and ensuring that doctors who practice in the Commonwealth are appropriately qualified and competent.

The Board's work in 2022 continued to reflect the mission "to ensure that only qualified physicians are licensed to practice in the Commonwealth, to ensure that those physicians and health care institutions in which they practice provide to their patients a high standard of care, and to support an environment that maximizes the high quality of health care in Massachusetts."

The Board met twenty-two times in 2022. By the end of 2022, Massachusetts had a total of 40,274 fully licensed physicians, 5,644 trainees with limited licenses, and 1,165 acupuncturists licensed to provide care to Massachusetts residents and patients who come to Massachusetts from around the world seeking quality care.

In furtherance of the Board's mission, the Board accomplished the following: the Quality and Patient Safety Division created and distributed three *First Do No Harm* newsletters sharing the practices and experiences of the healthcare clinicians and facilities reporting to the Board which included topics on maternal and pediatric health, experience during COVID-19 pandemic, and achieving system-level performance improvements; the Board amended *Policy on Telemedicine* (Policy 2020-01) for the purpose of clarifying the practice of medicine by physicians via telemedicine; the Board removed the interim language and adopted *Policy on Provisionally Issued Limited Licenses for Qualified Applicants* (Policy 2021-03) which ensures qualifying limited licensees begin their program start dates on time and legally authorizes the licensee to participate in the postgraduate training program while the Board completes the administrative review of the application; the Board's commitment to patient safety and physician wellness was illustrated in offering safe haven non-reporting for physicians who are receiving appropriate treatment for mental health or substance use disorder; and the Board maintained and updated a dedicated landing page on its website with resources for combatting the harmful effects of implicit bias on health care outcomes.

The Board also implemented a series of initiatives to improve its efficiency and service to physicians, while strengthening the Board's focus on patient safety. These initiatives included launching a new online licensing platform for application submittal and internal review and approval, and modifying the application process to require primary-source verification by the Federated Credential Verification Service (FCVS). The net result was a reduction in time to licensure, increase in licensing volume over prior years, and a substantially improved application experience for physicians.

In continuing its efforts to meet the increased demand for physician services in Massachusetts, the Board extended the expiration date of emergency temporary licenses for both out of state physicians (Policy 2020-05) and Full license applicants (Policy 2020-09). Also, the Board adopted *Interim Policy on Post-Graduate Training Requirement for International Medical Graduates* (Policy 2022-05) allowing graduates of International Medical Schools who have satisfactorily completed at least two years of postgraduate medical training to be eligible for licensure.

The Complete Annual Report includes a statistical tabulation of the Board's work during 2022. Behind these numbers is the real work of the dedicated staff and Board Members committed to patient safety, transparency, fairness, outreach to consumers, and the continuous improvement of the health care system in the Commonwealth.

The Board

The Board of Registration in Medicine consists of seven members who are appointed by the Governor to three-year terms. There are two public members and five physician members. A member may serve only two full consecutive terms. Members sometimes serve beyond the end of their terms before a replacement is appointed. Members may serve on one or more of the Board's committees.

Members of the Board 2022

As of 12/15/22

Julian Robinson, M.D., Chair, Physician Member
Holly Oh, M.D., Secretary, Physician Member
Nawal Nour, M.D., M.P.H., Physician Member
Booker T. Bush, M.D., Physician Member
Frank O'Donnell, JD, MPA, Public Member
John McGahan, CAS, LADC, Public Member

The Board of Registration in Medicine also has jurisdiction over the licensure and discipline of acupuncturists through its Committee on Acupuncture. The members of the Committee include four licensed acupuncturists, one public member, one physician member actively involved with acupuncture and one physician member of the Board designated by the Chair of the Board. The Board appoints the Committee members to terms of three years.

Weidong Lu, M.B., M.P.H, Ph.D., Lic. Ac., Chairman
Nancy E. Lipman, Lic. Ac., M. Ac., Vice Chair
Wei Zhang, Lic. Ac., Secretary
Joseph Audette, M.D., Physician Member
Linda Robinson-Hidas, Lic. Ac.
Nawal Nour, M.D., M.P.H., Physician Member and
Member of the Board

Members of the Committee on Acupuncture 2022

As of 12/8/22

**Board
Leadership
2022**

As of 12/15/22

George Zachos, J.D., Executive Director
Vita P. Berg, J.D., General Counsel
Susan Carson, Director of Operations
Michael Sinacola, Director of Licensing
Lisa Fuccione, J.D., Director of Enforcement
Daniela Brown, R.N., Director of Quality and Patient Safety
Steven Hoffmann, J.D., Division of Law and Policy Manager

Mission Statement

The Board of Registration in Medicine's mission is to ensure that only qualified and competent physicians of good moral character are licensed to practice in the Commonwealth of Massachusetts and that those physicians and health care institutions in which they practice provide to their patients a high standard of care, and support an environment that maximizes the high quality of health care in Massachusetts.

Committees of the Board

Complaint Committee

The Complaint Committee is comprised of two Board members who meet twice a month to review the evidence gathered by the Enforcement Division in all investigations. If the Complaint Committee determines disciplinary action is appropriate, it makes recommendations to the full Board regarding the type of sanction that could be imposed. When the evidence is insufficient to support disciplinary action, the Complaint Committee has the authority to close the investigation.

Licensing Committee

The Licensing Committee is comprised of two Board members who meet twice a month. The primary role of the Licensing Committee is to ensure that every physician applying for licensure in the Commonwealth is qualified by education and training and is in compliance with the Board's licensing regulations. As a committee of the Board, the Licensing Committee is responsible for reviewing license applications with legal issues, competency issues, malpractice or medical issues, waiver requests and other issues requiring Board approval. The recommendations of the Licensing Committee are then forwarded to the full Board for its review. The Board in its discretion may accept, reject, or amend any Licensing Committee recommendation.

Quality and Patient Safety Committee

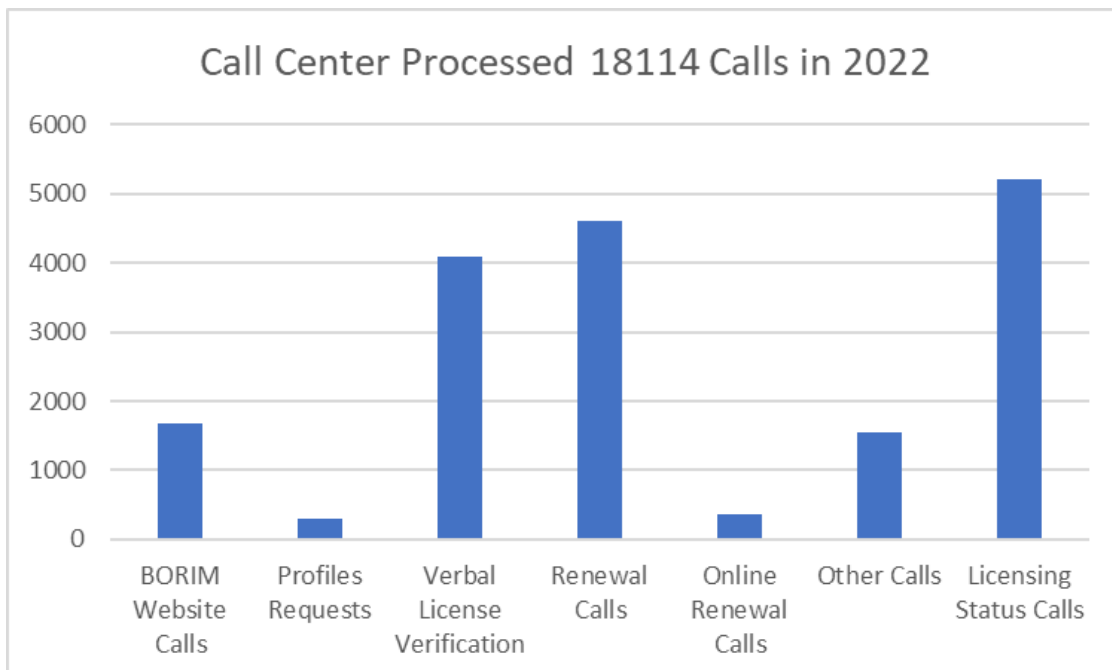
The Quality and Patient Safety (QPS) Committee membership is comprised of one Board member and a multidisciplinary group of providers. It includes members from the Boards of Nursing and Pharmacy, as well as a patient representative. Members of the QPS Committee work with hospitals and other health care facilities to improve quality and patient safety processes and ensure that physicians who practice within a facility are active participants in these programs. The Committee is committed to preventing patient harm through the strengthening of medical quality assurance programs in all institutions. The members provide the expertise that allows responsive feedback and thorough consideration of the issues brought before the QPS Committee.

Executive Division

The Executive Director of the agency reports to the Board and, under their direction, is responsible for the administration of the Agency and oversight of staff including management, personnel, regulatory and organizational functions. The Executive Director supervises the senior leadership team who, in turn, manage the various divisions of the Agency. A primary responsibility of the Executive Director is to support and assist the Board in all matters pertaining to its mission.

Operations Division

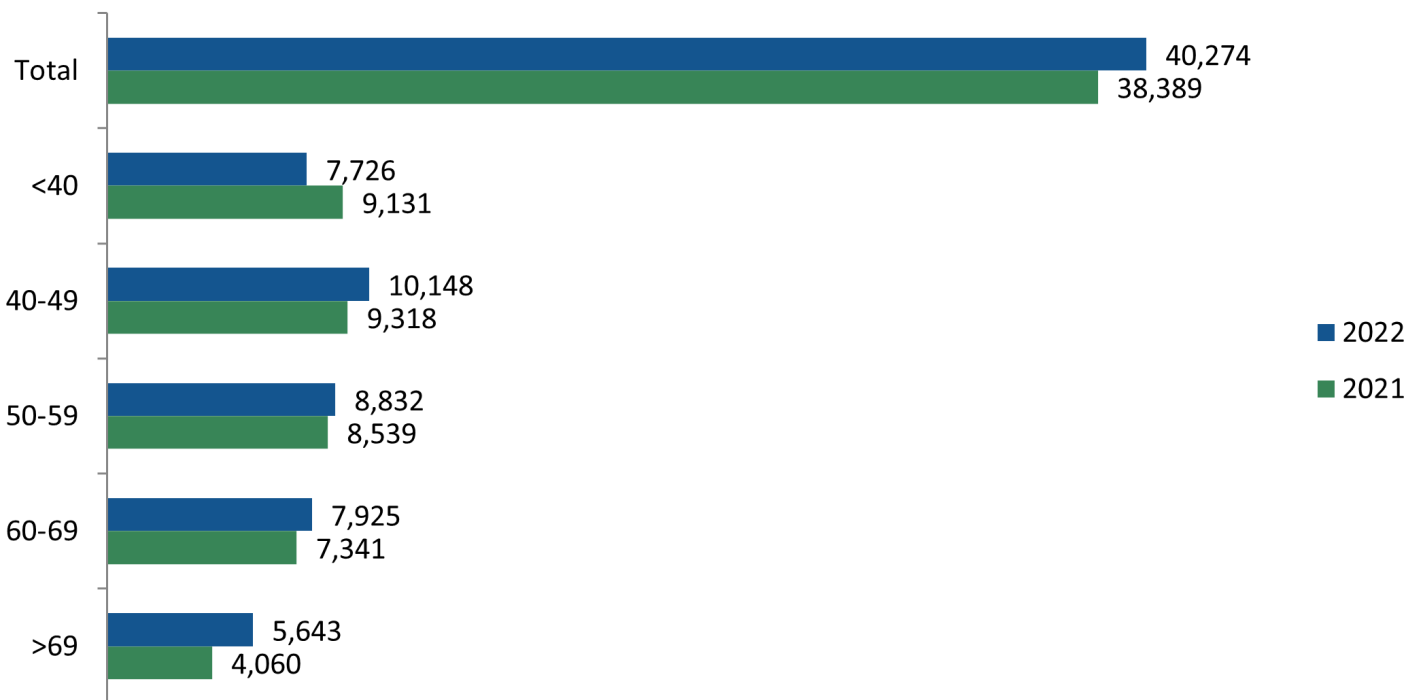
The Operations Division is supervised by the Director of Operations, who is responsible for budget, human resources, procurement, expenditure tracking and facilities. The Director also manages the Call Center, Document Imaging Unit, Mailroom, and Reception. Staff in the Call Center provides physicians with substantive responses on receipt of the call, decreasing the number of calls that go to voicemail, assisting callers with obtaining forms or other documents, provides copies of requested Profiles documents, and handles all licensing status calls. The Document Imaging Unit scans agency documents into an electronic database, which has allowed staff to access the agency's documents from their desktops.



Licensing Division

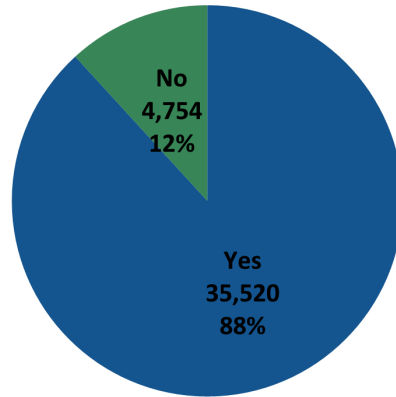
The Licensing Division is the point of entry for physicians applying for a license to practice medicine in the Commonwealth and has an important role in protecting the public. The Division conducts an in-depth review of a physician's credentials to validate the applicant's education, training, experience, and competency.

2021-2022 Full License Physician Demographics

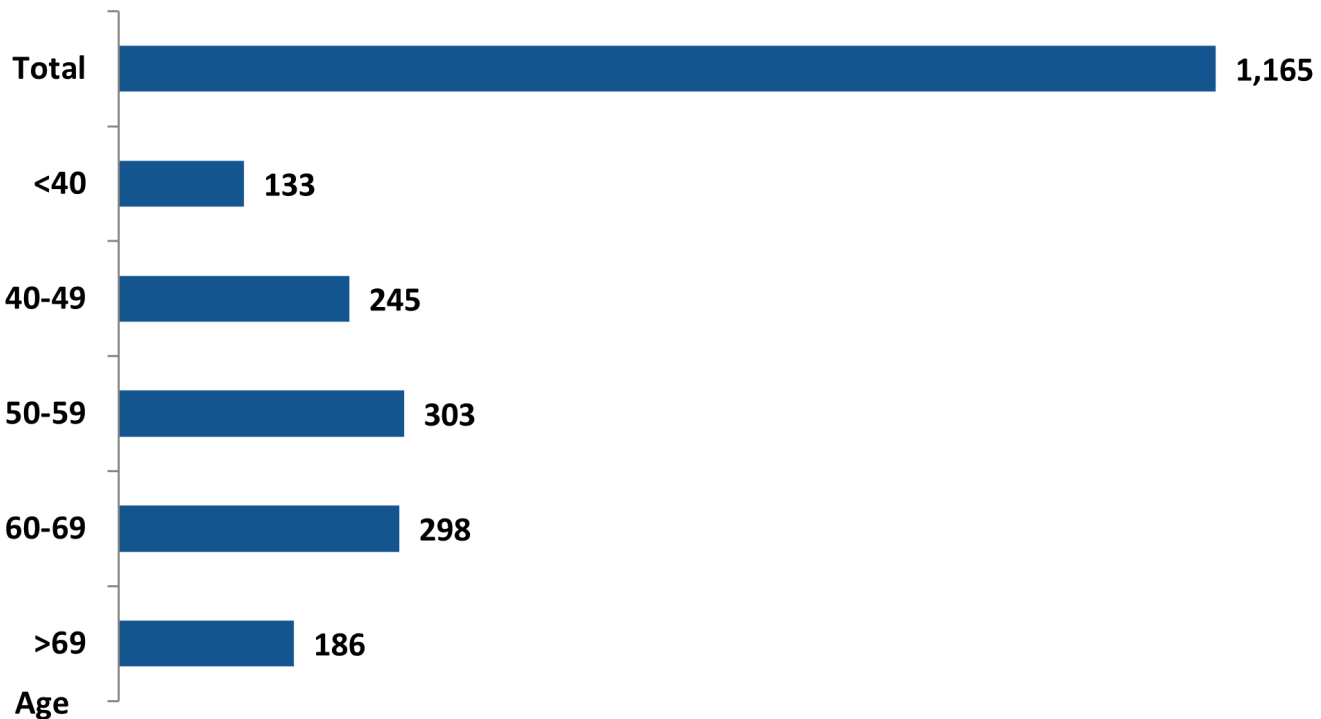


Medical Licenses					
	2022	2021	2020	2019	2018
Initial Full Licenses	2,915	2,467	1,616	2,123	2,129
Full Renewals	16,253	21,406	18,696	20,373	14,703
Lapsed Licenses Revived	216	177	173	184	198
Initial Limited Licenses	1,892	1,878	1,800	1,899	1,803
Limited Renewals	3,752	3,613	5,231	3,528	3,447
Temporary (Initial) Licenses	22	12	8	9	8

2022 Board Certified Licensed Physicians



2021 Licensed Acupuncturist Demographics



Acupuncture Licenses					
	2022	2021	2020	2019	2018
Active Acupuncturists	1,165	1,122	1,099	1,138	1,117
Initial Licenses Issued	48	48	32	43	40
Renewals	530	534	536	501	568
Temporary (initial) Licenses	0	0	0	0	0

Enforcement Division

The Enforcement Division is mandated by statute to investigate complaints involving physicians and acupuncturists, and to litigate adjudicatory matters. Complaints come from various sources (e.g. consumers of healthcare and their advocates; law enforcement agencies; health care facilities; health care professionals). Complaints are investigated by teams comprised of a complaint counsel, an investigator and/or a nurse investigator.

Investigations					
	2022	2021	2020	2019	2018
Physicians					
New complaint investigations opened during the year	615	627	955	553	479
<i>Source of Complaints:</i>					
Patients	376	354	581	298	229
Relatives of patients	122	120	180	76	106
Statutory report	90	128	176	160	129
Other	27	25	18	17	15
No. of physicians who agreed not to practice medicine during investigation	13	5	18	11	4
Investigations closed during the year	778	594	347	364	394
Pending investigations as of 12/31	1216	1316	1282	673	555
Acupuncturists					
New complaint investigations opened during the year	4	3	3	2	2
Investigations closed during the year	6	1	1	1	0

Other sources include physicians who self-report; law enforcement; attorneys representing patients.

Disciplinary Actions					
	2022	2021	2020	2019	2018
Number of medical licenses disciplined	43	60	50	57	50
Resignation	16	14	22	18	12
Revocation	1	6	11	11	7
Summary Suspension	2	1	7	6	4
Indefinite Suspension and Probation	5	9	7	12	13
Practice Restrictions	3	1	0	2	1
Reprimand	15	24	5	5	11
Admonishment	5	6	0	4	3
Fine	2	1	1	2	3
<i>Total amount (\$) imposed per year</i>	\$7,500	\$5,000	\$2,500	\$12,500	\$15,000
Continuing Professional Development	2	4	2	3	0

The total number of disciplinary actions taken by the Board may exceed the total number of licenses disciplined because multiple actions can be taken against a single license.

Summary Suspensions are interim actions taken on an emergent basis when there is evidence that the physician is an immediate threat, or may pose a serious threat, to the public's health, safety, and welfare.

Disciplinary Hearings					
	2022	2021	2020	2019	2018
Statements of Allegations (SOA's) referred to the Division of Administrative Law Appeals (DALA) for a hearing	22	14	29	30	29
SOA's at DALA awaiting a hearing, as of 12/31	37	45	56	52	46
Recommended Decisions issued by DALA	21	20	23	23	17

An SOA is an Order for a physician to Show Cause why his or her license should not be disciplined. An SOA may encompass more than one complaint against the physician.

The Division of Administrative Law Appeals (DALA) is an independent agency within the Executive Office of Administration and Finance, which was established by the legislature to provide a neutral forum for holding adjudicatory hearings in any case in which a party has a right to such a hearing before an administrative agency may make a final decision or take a final action." See [The Executive Office for Administration and Finance 2013-2015 Strategic Plan](#), p. 15. DALA is responsible for issuing findings of facts and conclusions of law; the Board is responsible for determining and imposing the sanction.

Quality and Patient Safety Division

The Quality and Patient Safety Division (QPSD) of the Massachusetts Board of Registration in Medicine oversees institutional systems of quality assurance, risk management, peer review, and credentialing. This comprises the Patient Care Assessment (PCA) Program which is a requirement under regulation 243 CMR 3.08. QPSD seeks to be collaborative and educational in working with healthcare facilities (HCF) to ensure the existence of a program of robust peer review and quality assurance.

REGULATORY REPORTING

Annual Reports (AR) and Semi-Annual Reports (SAR)

Health Care Facilities submit an Annual Report and a Semi-Annual Report to the Quality and Patient Safety Division within the Board of Registration in Medicine. These reports support the quality initiatives that are ongoing within the facility in addition to the required elements stated in the statute.

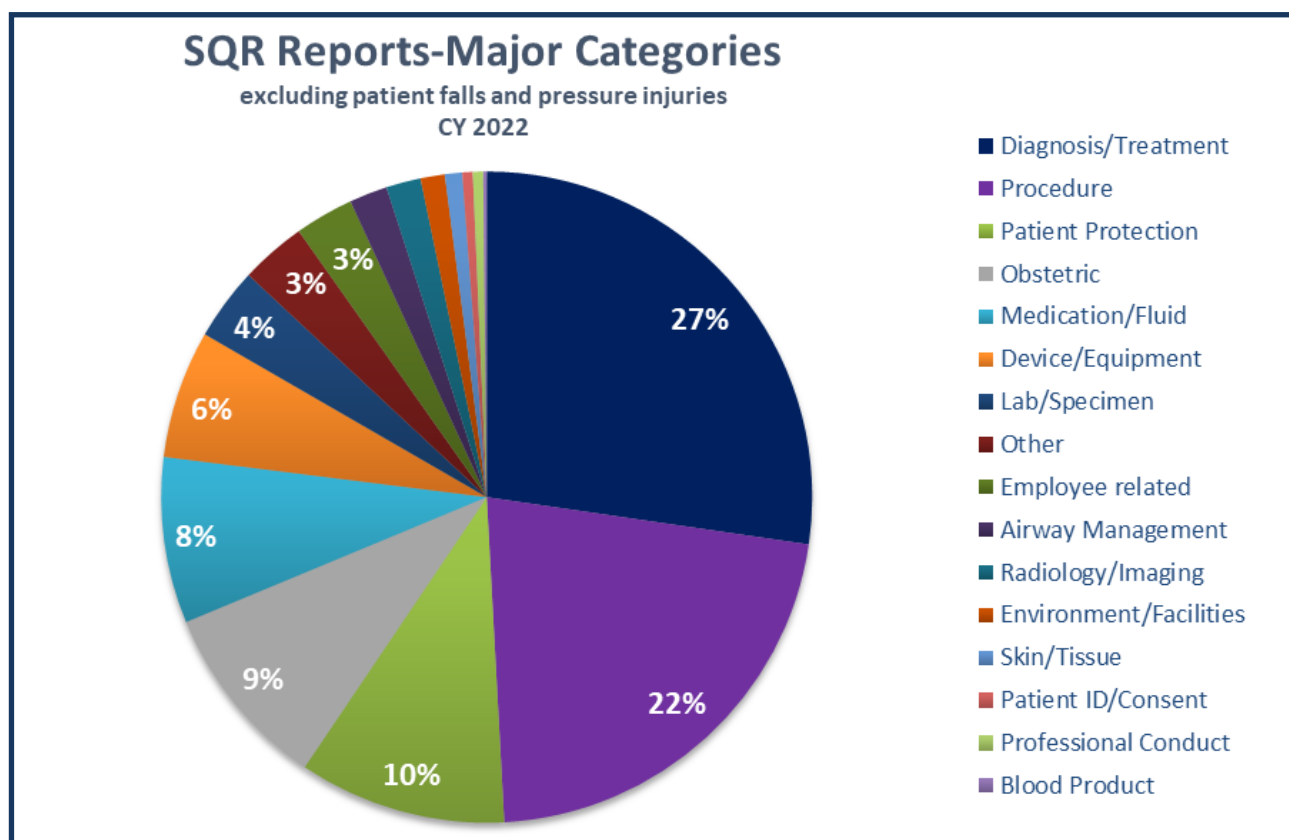
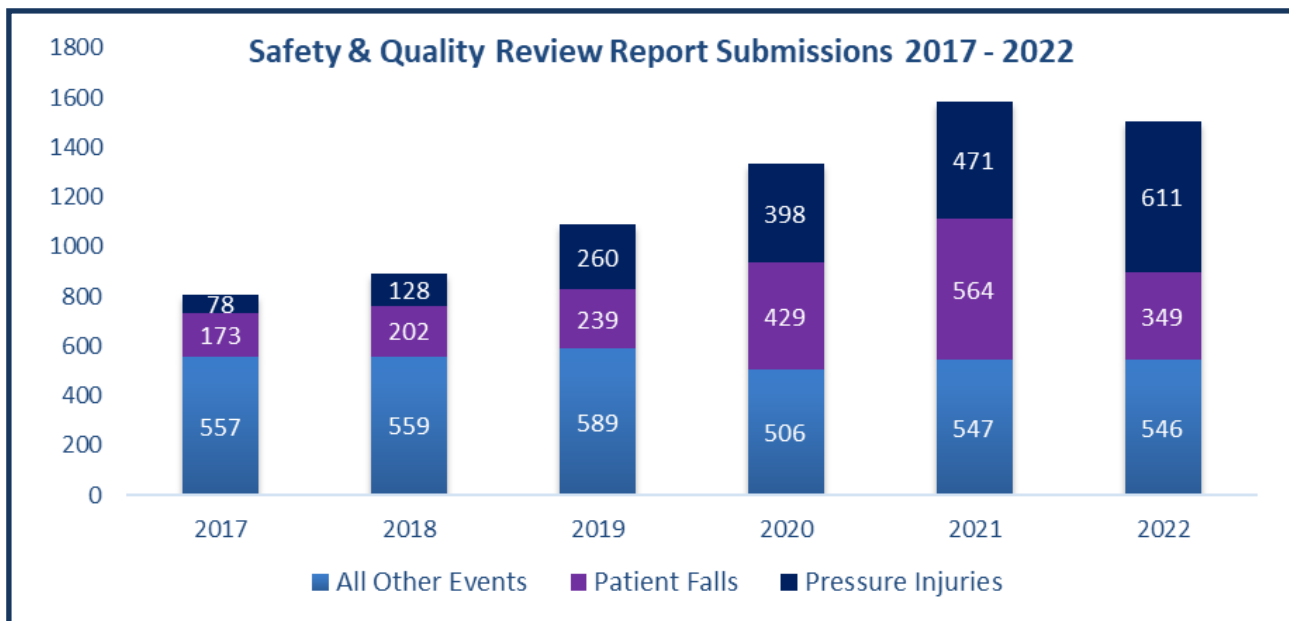
Healthcare Facility Reviews (HCFR) are provided to the HCF by a nurse analyst in order to provide feedback on their ongoing quality work. This document is a means to enhance communication to facilities to recognize the quality work that they have achieved and provide recommendations and suggestions in areas that have been identified as best practices to assist in guiding their work.

Safety and Quality Review (SQR) Reports

SQR reports are peer-review protected reports for the HCF to review events or complaints that arise during the course of patient care. The reports are reviewed by the QPSD team to ensure the facility has address the issues with a robust process improvement plan when indicated.

Reports Received by the Quality and Patient Safety Division					
Type of Report	2022	2021	2020	2019	2018
Maternal Death (Type 1)	4	3	2	5	2
Ambulatory Procedure Death (Type 2)	2	8	17	10	12
Wrong-site Procedure (Type 3)	37	29	38	42	25
Unexpected Death/Disability (Type 4)	1429	1533	1268	1013	811

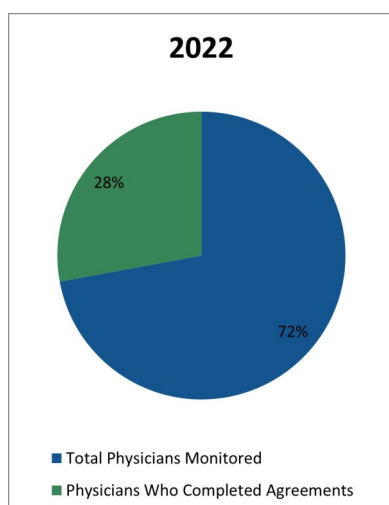
Types 1 through 4, as defined in PCA Regulations 243 CMR 3.08



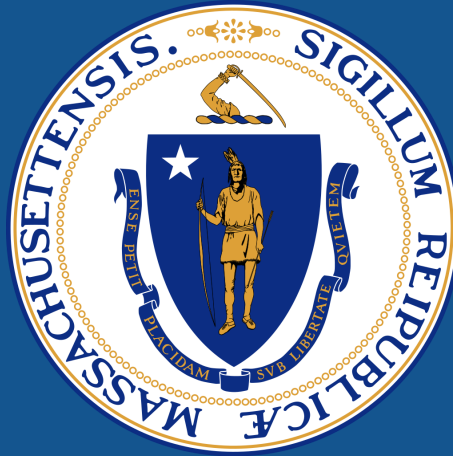
Division of Law and Policy

The Division of Law and Policy operates under the supervision of the General Counsel. Attorneys for the Division of Law and Policy research legal issues, provide legal analysis, and advise the Board in making legal determinations. The Board's Data Repository Unit (DRU) and Physician Health and Compliance Unit (PHC) are within the Division of Law and Policy. DRU staff is responsible for evaluating statutory reports, overseeing the accuracy of Physician Profiles, and reporting Board actions to the health care databanks. PHC is responsible for monitoring licensees who are on probation as a result of disciplinary action. Division of Law and Policy staff work with other Divisions of the Board on issues related to licensure, physician health, policy, statutory reports and public information.

Mandated Reports Received by the Data Repository Unit					
Source of Report	2022	2021	2020	2019	2018
Court Reports – malpractice	150	150	47	62	672
Court Reports – criminal	3	7	10	713	0
Malpractice Closed Claim Reports	882	478	1102	1025	730
Initial Disciplinary Action Reports	17	23	28	28	42
Subsequent Disciplinary Action Reports	2	8	12	15	19
Annual Disciplinary Action Reports	47	1	15	29	34
Professional Society Disciplinary Actions	0	4	16	17	9
5d (government agency) Reports	0	3	7	7	8
5f (peer) Reports	39	36	41	56	34
Self Reports (not renewal)	2	1	7	7	3



Licensees Being Monitored by the Board					
Reason for Monitoring	2022	2021	2020	2019	2018
Behavioral Health	2	2	2	5	3
Mental Health	0	0	2	0	0
Substance Use	14	17	16	26	23
Clinical Competence	4	5	7	19	13
Boundary Violations	1	1	4	5	4
BH/MH and SU	6	2	3	0	0
Misconduct	4	4	1	0	0
Physical Health	0	1	0	0	0



Board of Registration in Medicine

178 Albion Street, Suite 330
Wakefield, Massachusetts 01880

(781) 876-8200

www.mass.gov/massmedboard