

COMMONWEALTH OF MASSACHUSETTS

Middlesex, SS.

Board of Registration in Medicine

Adjudicatory Case No. 2023-0414

In the Matter of

MARY CHRISTINA SIMPSON, M.D.

STATEMENT OF ALLEGATIONS

The Board of Registration in Medicine (Board) has determined that good cause exists to believe the following acts occurred and constitute a violation for which a licensee may be sanctioned by the Board. The Board therefore alleges that MARY CHRISTINA SIMPSON, M.D. (Respondent) has practiced medicine in violation of law, regulations, or good and accepted medical practice as set forth herein. The investigative docket number associated with this order to show cause is Docket No. 22-183.

Biographical Information

1. The Respondent graduated from Temple University School of Medicine in 2004 and is certified by the American Board of Medical Specialties in Obstetrics and Gynecology. She has been licensed to practice medicine in Massachusetts under certificate number 273304 since January 11, 2018. The Respondent is also licensed to practice medicine in Rhode Island where she owns and operates a private practice that offers a variety of aesthetic services including Botox treatments.

Factual Allegations

2. The Respondent and the Rhode Island Board of Medical Licensure and Discipline (Rhode Island Board) executed a consent order that was ratified on or about March 9, 2022, and is attached hereto and incorporated herein by reference as **Attachment A**.
3. Pursuant to the consent order the Respondent agreed, in pertinent part, to the following facts:
 - a. While working at Women and Infants Hospital, the Respondent improperly accessed and viewed the electronic medical records of an individual who she knew socially and did not have a physician-patient relationship with at Women and Infants Hospital but did treat at a non-Women and Infants related outpatient office. She accessed the records without authorization out of concern for the patient's well-being and after she tried to contact the patient by traditional and non-traditional means in order to ascertain her health status.
 - b. Based on a review of the Respondent's medical records from her private practice, the Rhode Island Investigative Committee determined that (i) the records lacked sufficient documentation to justify the clinical course, treatment and procedures completed and did not meet the minimum accepted standard as determined by the Rhode Island Board; and (ii) the medical records also did not include evidence of patients' chief complaint, history of present illness, review of systems or physical exam; and (iii) the records were not signed by a physician and the identity of the person performing a given procedure was unclear.

4. Pursuant to the consent order the Respondent agreed to a reprimand on her license, agreed to pay the Rhode Island Board an administrative fee of \$2,200.00 and agreed to complete and successfully pass the Center for Personalized Education for Physicians (CPEP), Problem Based Ethics and Boundaries Course (Probe).

Legal Basis for Proposed Relief

A. Pursuant to 243 CMR 1.03(5)(a)12, the Board may discipline a physician upon proof satisfactory to a majority of the Board, that said physician has been discipline in another jurisdiction in any way by the proper licensing authority for reasons substantially the same as those set forth in G.L. c. 112, § 5 or 243 CMR 1.03(5), specifically:

1. The Respondent committed misconduct in the practice of medicine. *See* 243 CMR 1.03(5)(a)18.
2. The Respondent committed an offense against any provision of the laws of the Commonwealth relating to the practice of medicine, or any rule or regulation adopted thereunder, to wit: failing to maintain a medical record for each patient, which is adequate to enable the licensee or another provider to provide proper diagnosis and treatment. *See* 243 C.M.R 2.07(13)(a)

B. The Board may discipline a physician upon proof satisfactory to a majority of the Board that said physician has engaged in conduct which undermines the public confidence in the integrity of the medical profession. *See Levy v. Board of Registration in Medicine*, 378 Mass. 519 (1979); *Raymond v. Board of Registration in Medicine*, 387 Mass. 708 (1982).

The Board has jurisdiction over this matter pursuant to G.L. c. 112, §§ 5, 61 and 62. This adjudicatory proceeding will be conducted in accordance with the provisions of G.L. c. 30A and 801 CMR 1.01.

Nature of Relief Sought

The Board is authorized and empowered to order appropriate disciplinary action, which may include revocation or suspension of the Respondent's license to practice medicine. The Board may also order, in addition to or instead of revocation or suspension, one or more of the following: admonishment, censure, reprimand, fine, the performance of uncompensated public service, a course of education or training or other restrictions upon the Respondent's practice of medicine.

Order

Wherefore, it is hereby **ORDERED** that the Respondent show cause why the Board should not discipline the Respondent for the conduct described herein.

By the Board of Registration in Medicine,



Julian N. Robinson, M.D.
Board Chair

Date: December 7, 2023

**Rhode Island Board of Medical Licensure and Discipline
Consent Order, March 9, 2022**



IN THE MATTER OF:
Mary Christina Simpson M.D.
License Number MD 12579
Case # C210784, 210788

CONSENT ORDER

Mary Christina Simpson, MD ("Respondent") is licensed as a physician in Rhode Island.
The Board of Medical Licensure and Discipline ("Board") makes the following

FINDINGS OF FACT

1. The Rhode Island Board of Medical Licensure and Discipline (hereinafter "Board") has reviewed and investigated the above referenced complaint pertaining to (hereinafter Respondent) through its Investigative Committee.
2. Respondent has been a licensed physician in the State of Rhode Island since January 11th, 2008. Respondent is a 2004 graduate of Temple University School of Medicine. Her specialty is Obstetrics and Gynecology.
3. The Board received complaints alleging Respondent had violated Patient A's (alias) privacy by viewing Patient A's electronic medical record without authorization.
4. Respondent is a physician with clinical privileges at Women and Infants Hospital.
5. Respondent is not the attending physician for Patient A, yet did know Patient A socially and via other professional avenues.
6. Respondent admits she did access Patient A's medical record at Women and Infants Hospital and did not have authorization to do this. The breach was intentional and

Respondent asserts that she was motivated by concern for Patient A's well-being.

Respondent had tried to contact Patient A via traditional and non-traditional means and was not successful at doing so, therefore checked her medical record to ascertain the health status of Patient A -- with whom she did not have a physician-patient relationship at Women and Infants Hospital but did treat at a non-Women and Infants Hospital related outpatient office.

1. Respondent appeared before the Investigative Committee via Zoom October 7th, 2021 and admitted that this was inappropriate, also that her privileges were suspended at for 30 days at Women and Infants and she was required to undergo additional HIPAA training.
2. The Board did obtain Respondents credentialing file via subpoena and verified that Respondent's clinical privileges were suspended from May 26, 2021 until June 28, 2021 and that she completed the required HIPPA training.
3. The Board was notified via complainant of complainant's allegation that Respondent had a practice of ordering syringes for office use to administer Botox, using other people's (not patients') insurance to procure these syringes, presumably to reduce office overhead.
4. Respondent addressed this situation in her appearance and her position was that these were patients, and she utilized these syringes to administer Botox for these individuals.
5. Respondent supplied medical records of some of these individuals who were patients.
6. The Investigative Committee reviewed these medical records and determined the medical records lacked sufficient documentation to justify the clinical course, treatment and procedures completed. The identity of the person performing the procedure on any patient is not clear and the records are not signed by a physician. Additionally, there was no evidence of patients' chief complaint, history of present illness, review of systems, or physical exam. These medical records did not meet the accepted minimum standard as determined by the Board.

7. The Investigative committee reviewed several images supplied by complainant of prescriptions filled for several individuals – patients and potential patients -- for syringes used in her practice.
8. Respondent addressed this in her appearance and explained that she had patients procure syringes for planned Botox treatments, she stored these syringes, then utilized them for the patients then disposed of these syringes. Respondent further explained that complainant and spouse of complainant did not elect to go forward with treatments and that those syringes were disposed of.
9. The Investigative committee thought this practice was unusual, wasteful, and an unnecessary expense. The Investigative committee determined that the Respondent did not employ adequate procedures to store these supplies or audit their use.
10. Respondent violated Rhode Island General Laws, specifically, § 5-37-5.1 (21) *Surrender, revocation, suspension, limitation of privilege based on quality of care provided, or any other disciplinary action against a license or authorization to practice medicine in another state or jurisdiction; or surrender, revocation, suspension, or any other disciplinary action relating to a membership on any medical staff or in any medical or professional association or society while under disciplinary investigation by any of those authorities or bodies for acts or conduct similar to acts or conduct which would constitute grounds for action as described in this chapter;).* As well as Rhode Island General Laws, specifically, § 5-37-5.1 (24) *Violating any provision or provisions of this chapter or the rules and regulations of the board or any rules or regulations promulgated by the director or of an action, stipulation, or agreement of the board;* because there was a violation of Rules and Regulations for Licensure of Physicians 216-RICR-40-05-1 Section 1.5.12 D *Medical Records shall be legible and contain the*

identity of the physician or physician extender and supervising physician by name and professional title who is responsible for rendering, ordering, supervising or billing each diagnostic or treatment procedure. The records must contain sufficient information to justify the course of treatment, including, but not limited to: active problem and medication lists; patient histories; examination results; test results; records of drugs prescribed, dispensed, or administered; and reports of consultations and hospitalizations. Respondent also violated § 5-37-5.1 (16), which includes, in pertinent part, Gross and willful overcharging for professional services.

Based on the foregoing, the parties agree as follows:

1. Respondent admits to the jurisdiction of the Board.
2. Respondent has agreed to this Consent Order and understands that it is subject to final approval of the Board, and this Consent Order is not binding on Respondent until final ratification by the Board.
3. If ratified by the Board, Respondent hereby acknowledges and waives:
 - a. The right to appear personally or by counsel or both before the Board;
 - b. The right to produce witnesses and evidence on her behalf at a hearing;
 - c. The right to cross examine witnesses;
 - d. The right to have subpoenas issued by the Board;
 - e. The right to further procedural steps except for those specifically contained herein;
 - f. Any and all rights of appeal of this Consent Order;

- g. Any objection to the fact that this Consent Order will be presented to the Board for consideration and review; and
 - h. Any objection that this Consent Order will be reported to the National Practitioner Data Bank and Federation of State Medical Boards, as well as posted on the Department's public web site.
4. Respondent agrees to a Reprimand on her license.
 5. Respondent at her own expense, shall complete and successfully pass the Center for Personalized Education for Physician (CPEP), Problem Based Ethics and Boundaries and Course (Probe) within 6 months of ratification of this order
 6. Respondent agrees to pay to the Board, within five days of the ratification of this Consent Order, an administrative fee in the amount of \$2200.00, for costs associated with investigating the above-referenced complaint. Such administrative fee is to be paid by check, made payable to the "Rhode Island General Treasurer." Respondent will send notice of compliance with this condition to DOH.PRCCompliance@health.ri.gov within 30 days of mailing the above-referenced payment.
 7. If Respondent violates any term of this Consent Order after it is signed and accepted, the Director of the Department of Health shall have the discretion to impose further disciplinary action, including immediate suspension of her medical license. If the Director imposes further disciplinary action, Respondent shall be given notice and shall have the right to request a hearing within 20 days of the suspension and/or further discipline. The Director of the Department of Health shall also have the discretion to request a hearing after notice to Respondent of a

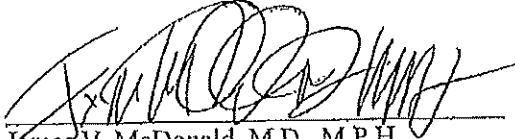
violation of any term of this Consent Order. The Board may suspend Respondent's license, or impose further discipline, for the remainder of Respondent's licensure period if any alleged violation is proven by a preponderance of evidence.

Signed this 22 day of February 2022.



Mary Christina Simpson, MD

Ratified this 24 day of March 2022 by the Board of Medical Licensure and Discipline.



James V. McDonald, M.D., M.P.H.
Chief Administrative Officer Board of Medical Licensure and Discipline
Rhode Island Department of Health
3 Capitol Hill, Room 401
Providence, Rhode Island 02908