

# Georgia Composite Medical Board Newsletter



Volume 2013, No. 1

July 2013



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## Board Releases New Pain Clinic Management Application and Guidelines



The Georgia Composite Medical Board approved and released the application and guidelines for the state's new pain management clinic license on Friday, June 21, 2013. The Board's publication of the application represents the final step in implementing House Bill 178, the **Georgia Pain Management Clinic Act**.

Passed with overwhelming support in both the House and Senate, HB 178 creates a licensure process for pain management clinics operating in Georgia, and charges the Georgia Composite Medical Board with the responsibility of licensing and regulating pain management clinics. The *Wall Street Journal* reported that the number of pain clinics in Georgia rose by 1,300% from 2010 to 2012, following a crackdown on illicit pain clinics in Florida. ("New Georgia Law Aims to Control Pill Mills", May 2, 2013)

The application process includes payment of a \$500 application fee, a criminal background of each person with an ownership interest in the clinic, affidavits, and other documentation. The application and checklist can be downloaded at [www.medicalboard.georgia.gov/pain-management-clinic-license-forms](http://www.medicalboard.georgia.gov/pain-management-clinic-license-forms).

*(Continued on page 4)*

## Georgia Earns "A" for Pain Management Policies - Largest Grade Improvement in Nation

The University of Wisconsin School of Medicine and Public Health's Pain and Policy Studies Group (PPSG) awarded Georgia a grade of "A" for its pain management policies in 2012, marking the largest improvement in the nation from 2006 to 2012. The PPSG's goal, guided by a public health approach, is to improve global pain relief through public policies that balance the need to prevent illicit trafficking, drug abuse, and substandard prescribing practices with access to legitimate prescription opioid analgesics that are essential for severe pain relief and palliative care.

In 2012, Georgia became one of 13 states to earn an A from the PPSG, a remarkable turnaround from its last-place standing in 2006 as the only state with a D+. Determined to change its position, the Medical Board collaborated with other leading health care bodies to accomplish a feat reminiscent of the Atlanta Braves' 1991 "worst-to-first" finish. *(Continued on page 5)*

## Board Elects Richard Weil, MD as New Chair, David Retterbush, MD as New Vice-Chair



On June 7, 2013, the Georgia Medical Board (GCMB) elected Vice-Chairman **Richard L. Weil, MD** of Atlanta to chair the Board for the July 2013 – June 2014 term. Dr. Weil, a board-certified pediatrician at Piedmont Pediatrics, serves as Chief of Pediatrics at Piedmont Hospital and on the Board of Directors for Kids Health First Pediatric Alliance.

A member of the Composite Medical Board since April 2008, Dr. Weil has been honored as a “Top Doc” in pediatrics by *Atlanta Magazine* for five consecutive years beginning in July 2008. In May 2012, he was named by *U.S. News & World Report* as one of the top 1% pediatric physicians in the nation. Dr. Weil has been licensed in Georgia since 1982.



The Board also elected **David Retterbush, MD** of Valdosta as Vice-Chairman of the Board. Originally appointed in November 2009, Dr. Retterbush, a board-certified general surgeon and Fellow of the American College of Surgeons, has served as a member

of the Wellness Committee, and as Chair of the Physician Assistant Advisory Committee and Perfusion Advisory Committee. He has also served as chief of staff and as chief of general surgery at South Georgia Medical Center. Licensed in Georgia since 1978, Dr. Retterbush has been in private practice for over 25 years, practicing as a broad-based general surgeon in Valdosta.

## Georgia Professionals Health Program Is Young, Growing

By Paul H. Earley, MD and Robin McCown

The Georgia Professionals Health Program (GA-PHP), a small, not-for-profit organization committed to the doctors in Georgia, opened its doors in September 2012. Like all such programs, our mission is to help physicians who have substance-related disorders get help. Powered by recent legislation and supported by the Georgia Medical Board, we are on our way to realizing this goal. We currently monitor over 80 physicians and accept several new referrals each week. GA-PHP is not a treating facility, instead functioning more like an employee assistance program, triaging referrals, funneling them for assessment, ensuring they obtain the proper initial treatment, and providing the long-term monitoring that generates an astounding record of recovery.

Physicians who develop substance abuse disorders live in secrecy and shame. We are supposed to know better. The data show something different. Physicians develop addiction disorders about as frequently as the general public. Alcohol is the most common substance physicians abuse. Dependence upon the medications we prescribe seems to be an occupational hazard, accelerating and worsening our illness in individuals who began abusing addictive drugs. Despite the frequency and severity of addiction among physicians, we do exceedingly well once we obtain proper care. Multiple well-designed studies demonstrate that over 80% of physicians who engage in a PHP program maintain

verified abstinence over five years. Although we become ill with addiction, with proper care, we regain our health and our families’ trust, and public safety is ensured.

In the past, if a physician became ill with a substance-related disorder, this would have to be reported to the Board. No one liked this arrangement. Today, a physician suspected of having an addiction problem can be referred directly to GA-PHP. As long as they cooperate with assessment and treatment, they do not have to be reported to the Board. Concerned partners and hospitals can call us directly. We often find that substance abuse is not a problem, and direct that individual to other types of care, if indicated. If you are concerned about someone you care about, please call us or email us.

Our growth is not without its growing pains. The program is supported solely by participant fees. It makes sense that physicians who become ill should pay something. In most states, however, funding comes from multiple sources, including direct state funds, licensure fees, assistance from malpractice carriers, hospital associations, and physician societies. We ask for your help in this regard. Our vision is to improve the health of all Georgians through the health of Georgia’s physicians.

**To make a donation or to get additional information, please visit [www.gapghp.org](http://www.gapghp.org) or call 855-MY-GAPHP.**

## Deal Appoints Four to Board, Reappoints Two

During the 2013 state fiscal year (July 2012 to June 2013), Governor Nathan Deal appointed four new Board members and reappointed two sitting Board members.



**E. Daniel DeLoach, MD** (Savannah) was appointed July 2, 2012 to succeed Eddie R. Cheeks, MD (Augusta). Dr. DeLoach is a board-certified plastic surgeon who also serves on the board of the Chatham County Hospital Authority and the Medical Association of Georgia (MAG) Mutual Insurance Company, and served as president of MAG from 2010 to 2011.



**Jane "Cami" McGarity** (Gainesville) was appointed July 2, 2012 to succeed Rhonda M. Kunes (Tifton). Ms. McGarity serves as the marketing manager for McGarity's Business Products. She fills the one of the two consumer member Board positions.



**G. E. "Trey" Powell III, MD** (Valdosta) was appointed August 15, 2012 to succeed Roland Summers, MD (Savannah). Dr. Powell is a board-certified cardiologist with Valdosta Medical Clinic, and serves as Chief of Cardiological Services at South Georgia Medical Center.



**B.K. Mohan, MD** (Jonesboro) was appointed February 15, 2013 to fill the unexpired term of Marion O. Lee Jr., MD, who resigned. Dr. Mohan is a board-certified cardiologist and a founding partner of Southern Health Specialists. Dr. Mohan has served and led the Clayton County Health Education Board and the Indian Professional Association. He received the Telugu Association of Metro Atlanta's Lifetime Achievement Award in 2011.



**Charles L. White, DO** (Cleveland) was reappointed to a third term. First appointed to fill the unexpired term of Roger Hill, DO in 2007, Dr. White is a board-certified family practice physician who served as the Board's chairman from 2011 to 2012. Dr. White was recognized by the Falcons Football Club in 2010 for his charitable work at the Caring Hands Health Clinic, and has chaired several committees during his distinguished tenure on the Board.



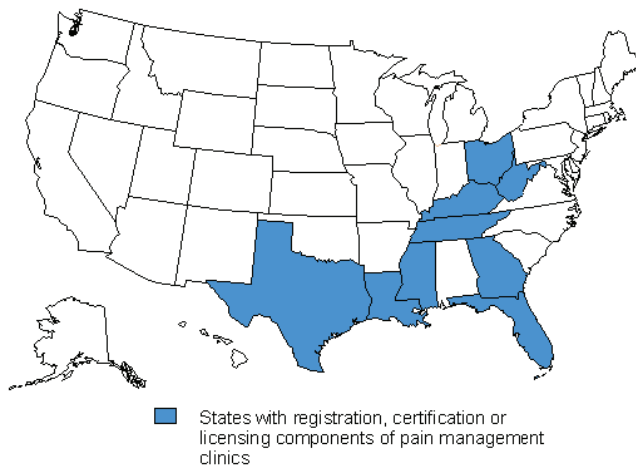
**Richard L. Weil, MD** (Atlanta) was reappointed to a third term. First appointed to fill the unexpired term of J. Grant Lewis, MD in 2008, Dr. Weil is the incoming chairman of the Board. A board-certified pediatrician, Dr. Weil has been honored as a "Top Doc" in pediatrics by *Atlanta Magazine* for five consecutive years since 2008, and was named one of the top 1% of pediatric physicians in the nation in 2012 by *U.S. News & World Report*.

*At right: Governor Nathan Deal with the members of the Georgia Composite Medical Board, 2013. (Also pictured at far right are Dr. Jean Sumner, Medical Director, and Dr. Carl Bedingfield, Medical Consultant.*



## Pain Management Clinic Bill Passes

When Governor Nathan Deal signed HB 178 on May 2, 2013, Georgia became the ninth state in the nation to require pain clinics to be licensed or registered, and to be owned by physicians, according to the National Alliance for Model State Drug Laws and the National Safety Council. Under the new law, which takes effect July 1, 2013, all pain management clinics must be licensed by the Board, and must renew their licenses biennially. The Board can deny, suspend and revoke licenses if the board finds that the licensee or a physician practicing at a licensed pain management clinic has furnished false information on the application, has been convicted of a crime relating to controlled substances, has had their DEA registration suspended or revoked, or who has violated any provision of the Pain Management Clinic Act.



The new law includes other notable provisions, including:

**Physician Ownership:** Clinics that were not operating in Georgia before July 1, 2013 must be owned wholly by physicians. (Clinics that were already operating may be licensed under certain “grandfather” provisions.)

### Definition of Pain Management Clinic:

- A clinic or practice that advertises pain treatment services
- A clinic or practice that uses the word “pain” in the clinic or practice name
- A clinic or practice that treats more than 50 percent of its annual patient population with Schedule II or III substances for chronic, non-terminal pain conditions.

**Exemptions:** Clinics or practices owned or operated by hospitals are exempt from licensing, but must file annual notifications with the Board.

**Registration as Dispensing Clinic:** All pain management clinics that dispense controlled substances or dangerous drugs must be registered with the Georgia State Board of Pharmacy.

**Criminal Penalties:** Any person who operates a pain management clinic without a license shall be guilty of a felony.

## Pain Clinic Management Act Implemented *(continued from page 1)*



Governor Nathan Deal signs HB 178 as bill sponsor Rep. Tom Weldon (R-Ringgold) looks on.

“When our state goes from housing 10 pain management clinics to 125 in just three years, we must do something to ensure the continued safety of our citizens,” Governor Nathan Deal declared as he signed HB 178 in Ringgold on May 2, 2013. “We know this process works, because we can observe the successes that have happened around us. When Florida enacted tougher laws, the number of pain clinics there dropped dramatically, as did deaths from oxycodone and hydrocodone. I hope to see similar results in Georgia.”

## Georgia Vaults from Worst to First in Pain Policy

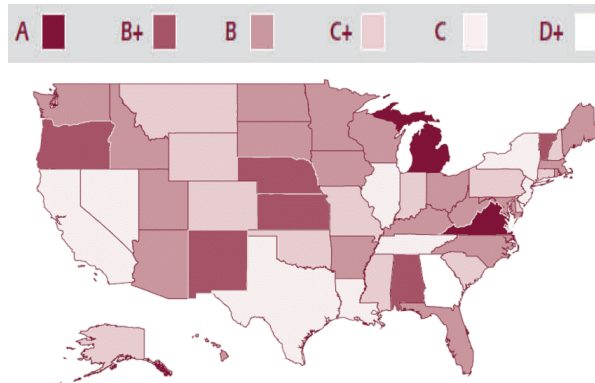
*(continued from page 1)*

As a member of the Georgia Pain Initiative, along with the American Cancer Society, the Georgia General Assembly, the Georgia Drugs and Narcotics Agency, the Georgia Cancer Coalition, and several other organizations, the Board embarked on an ambitious plan to reshape the state’s regulatory environment. In just two years, the PPSG’s 2008 grade report showed that Georgia had set the bar for improvement, outpacing all other states by vaulting from 51st place to 19th place (with 12 other states with a grade of B).

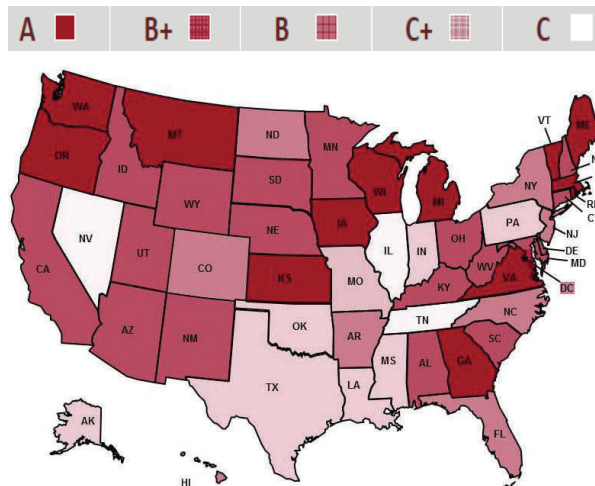
The Georgia Pain Initiative and the Board were not satisfied with their achievement, however, and in June 2013, the PPSG’s 2012 grade report announced that Georgia had once again set the pace for the nation, moving all the way to a grade of A, completing a remarkable journey from the nation’s worst grade for pain policy to one of 13 states with the nation’s best grade.

“The Board, the state, and the Georgia Pain Initiative can be justifiably proud of the progress we made since 2006,” said LaSharn Hughes, the Board’s Executive Director. “But the winners here are the people of Georgia, and that’s why we continue to work to improve.”

**THEN:** In 2006, Georgia was the only state with a D+.



**NOW:** In 2012, Georgia was one of 13 states with an A.



## Federation of State Medical Boards Appoints Kathy Kinlaw, M.Div. to Ethics and Professionalism Committee



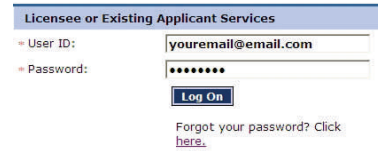
Board member Kathy Kinlaw was appointed to the Federation of State Medical Boards (FSMB) Ethics and Professionalism Committee. Originally appointed as a consumer member of the Georgia Composite Medical Board in 2006, Ms. Kinlaw is Associate Director of the Emory University Center for Ethics, and Director of the

Center’s Program in Health Sciences and Ethics. She also serves as Executive Director of the Health Care Consortium of Georgia, as a member of the Centers for Disease Control’s Ethics Subcommittee, and as Bioethics Associate in Pediatrics for the Emory School of Medicine. Ms. Kinlaw’s publications are primarily in the areas of palliative and end-of-life care, ethics and medical education, perinatal and neonatal ethics, and public health ethics.

## Don't know your user ID or password? Follow these tips.

### Your user ID is an email address.

Your GCMB user ID should be a valid email address. That's because if you ever forget your password and request a new one, the system will send you a new temporary password to your user ID (email address). So try to think of the email address you may have used the last time you accessed our online services.



### You can reset your password online.

If you know your user ID, you can probably reset your password yourself. Go to the login page, and instead of trying to log in, just click the link below the password field. Then, you'll be asked to type your user ID. Once



you enter your user ID and click "Next," you'll be asked to provide the correct answer to the security question you set up.

After you provide the correct answer to the security question, the system will reset your password to a temporary password and email that to the email address you used as your user ID. The email message will contain a temporary password you can use to log in.



### If you can't see your license number after you log in successfully, call the Board.

If you logged in successfully, but don't see your license number, you may have logged in as a new user, rather than trying to use your existing user ID and password. This means you created an account as a user who has never before been known to the Board. If you encounter this issue, or cannot log in or reset your

password after trying to follow the preceding steps, call the Board at 404-463-8900 or 404-656-3913 for assistance in resetting your account.

### Note for renewing licensees

After you've paid your renewal fee online, click the License Menu button at the top of the screen. If your expiration date has been updated, you're done. If your expiration date hasn't changed, click the Main Menu link and then click "Pending Application Status Inquiry" for instructions.



To log in now, click here: [Log In](#)

Or scan this code with your smartphone or tablet:



## Updating your contact information can save you time, and thousands of dollars in fees, income, and fines

Approximately 45 to 60 days before your license expires, the Board mails a courtesy reminder to your address of record. Each month, many of these notices are returned because the licensee's address has changed.

Almost 7 percent of lapsed licenses are subsequently reinstated. Renewing a physician license costs \$230 for two years and typically takes less than 15 minutes to complete. Reinstating a physician license is a much more costly undertaking, both in time and money, with application fees ranging from \$500 to \$2,000 and often taking two months or more to complete. Add the cost of a fine and reprimand if the licensee practices medicine without a license, as well as lost income from being unable to practice until the license is finally reinstated, and the cost for inadvertently allowing a license to lapse could be \$20,000 or more.

You can view and update your license online any time, and if you are not online, you can fax your update to 404-656-9723. The few minutes you spend keeping the Board updated could save you thousands of dollars down the road.

## Frequently Asked Questions about Rules and Laws

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Every month, the Board reviews complaints against licensees that arise from a misunderstanding of the governing rules or laws, or a complete ignorance of them. Do you know the rules and laws that you must follow to ensure that your license is kept in good standing?

**Q: Is the placement of micro-dermal implants considered the practice of medicine?**

**A:** The Board considers any alteration of the skin to be a surgical procedure, and therefore the practice of medicine.

**Q: What acts can a physician delegate to a medical assistant?**

**A:** A physician may delegate the following tasks to a medical assistant: subcutaneous and intramuscular injections; obtaining vital signs; administering nebulizer treatments; removing sutures and changing dressings.

**Q: Can I write a prescription for a 90-day supply of a Schedule II drug?**

**A:** In Georgia, unlike in many other states, there are no limits on quantity.

**Q: If I change my legal name, may I continue to practice under my “professional name” (old name)?**

**A:** You must use your legal name on your Georgia license. If you are getting married or divorced, you should consider any implications on your “professional name” as you make your decision on a name change.

**Q: What are the rules for cosmetic laser licensure in Georgia?**

**A:** Although the state has a Cosmetic Laser Services Act, passed in 2007 and amended in 2009, the law has never been funded by the Legislature. The law was passed with a clause that it would become effective once it was funded by specific reference in the state budget, so the law is not in effect yet.

**Q: At what point is it permissible for me to date a former patient?**

**A:** You should be extremely careful in any situation that could be construed as a boundary violation. Remember that no matter how difficult it may be to maintain appropriate boundaries with a patient, it is **always** the professional’s responsibility to maintain those boundaries. You should refer difficult or boundary-testing patients for competent help or counsel. This applies even to former patients, if you did not terminate the physician/patient relationship in writing.

**Q: Can I contract with online coupon or “deal-finder” services to market my medical services?**

**A:** You should be careful to make sure you are not in violation of O.C.G.A. 43-34-8 (a)(9). The law specifically forbids you from dividing fees or agreeing to divide fees received for professional services with any person, firm, association, corporation, or other entity for bringing or referring a patient. As the AMA says in AMA Opinion 6.02, payment by or to a physician solely for the referral of a patient is fee-splitting, and is unethical.

**Q: Do I have to send my APRN protocol to the Board for review?**

**A:** If your protocol with the APRN does not include the authority for the APRN to write and sign prescriptions or order tests and/or medical devices, you do not need to send the protocol to the Board. The Board is required by OCGA 43-34-25 to review APRN protocols that include prescriptive authority. However, the APRN would still need to enter into an agreement with a physician to comply with OCGA 43-34-23, and a copy of that agreement must remain onsite at each practice location where the APRN is practicing under that agreement.

*The Medical Board cannot provide legal advice to you, so for specific issues, you should consult a qualified attorney.*

## Knowing the Rules to Maintain Patient Records After Retiring From or Leaving a Practice Can Help Keep Your License Record Clean

### Abandoned Medical Records

The Board receives calls each week from patients and their families looking for medical records. You can be sanctioned for unprofessional conduct to fail to maintain a patient's records for at least ten years from the patient's last visit.

In many cases, the physicians have become ill, have died, or have simply moved their practices. In the event of a serious illness or other reason that keeps you from practicing, please make sure that you have made arrangements with your family, business partners, agents, or executors.

### What should I do with my records if I retire or sell my practice?

The 10-year requirement does not apply to you if you are a physician who has retired from or sold your medical practice, and you have notified your patients of your retirement or sale of practice:

1. By **mail**, to the last known address of your patients;
2. By **public notice** in the newspaper of greatest circulation in each county in which you practice or practiced, and in a local newspaper that serves the

immediate practice area; and

3. By **placing a sign**, in a conspicuous location in or on the façade of your office, announcing your retirement or sale of the practice at least 30 days prior to the retirement or sale. The sign must remain posted until the date of the retirement or sale, and must advise patients of their opportunity to transfer or receive their records.

Each notification method must offer to provide the patient's records (or copies) to another provider of the patient's choice, and, if the patient requests it, to the patient.

### Consult with your own legal counsel for specific issues

The periods specified in Rule 360-3-.02 may be less than the length of time necessary for you to protect yourself against other adverse actions, and pediatric and psychiatric records may have other stipulations. You should consult your own legal counsel or malpractice insurer for advice applicable to your particular circumstances. To read Rule 360-3-.02 in its entirety, go to <http://rules.sos.state.ga.us/docs/360/3/02.pdf>

## Prescriber Tips from the Georgia Drugs and Narcotics Agency

1. Stamped signatures are not valid for any prescription issued in Georgia. *OCGA 26-4-80(i)*
2. All prescriptions must be issued for a specific patient. Prescriptions issued for "office use" are not valid. *OCGA 16-13-74 and 16-13-41*
3. Practitioners may not issue pre-signed prescriptions to anyone, including physician assistants or nurse practitioners. *OCGA 16-13-41*
4. Practitioners may not post-date prescriptions. All prescriptions must be dated with the date they were issued. It is permissible to write "Do not fill until \_\_\_\_." *OCGA 16-13-41*
5. Practitioners may not authorize anyone, including physicians, PAs, and APRNs to use his or her DEA number.
6. Only a licensed veterinarian may authorize prescriptions for animals. *OCGA 40-5-3*
7. Dispensing physicians (samples excluded) must adhere to specific Georgia laws, rules, and regulations. See *OCGA 26-4-40, 26-4-130, and Pharmacy Board Rules 480-28.*



Visit the Georgia Drugs and Narcotics Agency website at [www.gdna.georgia.gov](http://www.gdna.georgia.gov) for more information.



## The Top 10 About ICD-10

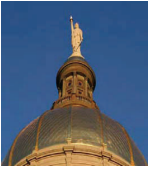


The October 1, 2014, compliance date for ICD-10 is firm and the Department of Community Health (DCH) will be ready. ***If your practice is not ready for ICD-10, your claims will be rejected, denied or suspended and your claims cannot be paid.*** To get you started, here's the Department of Community Health's *Top 10 About ICD-10*.

1. **What is ICD-10?** It's the new system for delineating medical diagnoses and procedures for care management and billing purposes. ICD-10 will replace the outdated and limited functionality of the ICD-9 codes for services rendered starting on October 1, 2014.
2. **Why should you care about ICD-10?** As a physician or other health care provider, payer (including Georgia Medicaid), vendor or related business associate, you must be compliant on October 1, 2014. It's the law. ***If you submit a claim to any payer for services rendered on or after October 1, 2014, you must be ICD-10 compliant to be paid.***
3. **Who will be using these code sets and how are they different from ICD-9?** All HIPAA-covered entities in the U.S. that submit claims to any payer must transition from ICD-9 to ICD-10. These codes require detailed documentation by the provider. Plus, they're expandable to adapt to future changes in medical science.
4. **Is ICD-9 going away on October 1, 2014?** No. ICD-9 codes must be used for services rendered before October 1, 2014...even if you don't submit your claim until several days or weeks after October 1, 2014. For any service rendered on/after October 1, 2014, you must use ICD-10 codes. Remember that ICD-10 is service-based, not transaction-based.
5. **Will IT systems need to accommodate both ICD-9 and ICD-10 codes?** Yes. The need for both code sets will impact your Practice Management, Billing and Electronic Health Records (EHR) systems and other software that you may be using to manage your business. ***As a reminder, providers, payers, vendors and trading partners must be using 5010 transaction standards for their claims. These 5010 standards replaced 4010 standards and were federally mandated for compliance in 2012. 5010 is a prerequisite for using ICD-10 codes.***
6. **Is ICD-10 really a big deal?** Yes. ICD-10 is more than an IT system change. It is change that will also impact your business processes and every area of your practice, from the front desk and the nurse's station to the physician's office and coding and billing areas. ***With ICD-10, an increased level of detailed specificity will be required by the clinician. Without it, coders and billers can't do their jobs correctly and claims won't get processed or paid.***
7. **What happens to a provider's claim if it is not properly coded using ICD-10 codes?** These claims will be rejected, denied or suspended. This means the provider won't get paid until they have invested additional time and resources to have the claims corrected. Additionally, the providers' business financial statements and their audit experience with payers could be negatively impacted.
8. **Will ICD-10 affect the health and well-being of patients served?** Yes. The use of ICD-10 codes can improve care management of beneficiaries; boost efficiencies by identification of specific health conditions, diagnoses and procedures; and improve the quality assurance of clinical and administrative processes.
9. **Is there any real benefit to our nation's health care system changing from ICD-9 to ICD-10 code sets?** In addition to the benefits to patients mentioned above, we can make more effective coverage and payment determinations; have access to better data for fraud and abuse monitoring; easily link to EHRs and other information for better and more coordinated care; enhance performance monitoring and research; and increase our capacity to report quality measures.
10. **What are DCH and Georgia Medicaid doing to help physicians, other providers and trading partners prepare for this transition?** DCH is conducting an extensive external communications and educational outreach campaign. In addition, DCH and Georgia Medicaid will begin external testing with ICD-10 codes later this year.

For more on this topic, go to [www.dch.georgia.gov/icd-10](http://www.dch.georgia.gov/icd-10)

## Pain Management Clinic, Administrative License Bills Pass



**HB 178: Passed.** Requires licensure of pain management clinics (See stories, pages 1 and 4).

**HB 317: Passed.** Authorizes Board to issue licenses to physicians who are practicing administrative medicine; also authorizes Board to issue temporary certificates to out-of-state physicians to participate in educational training that involve patient care in Georgia.

**HB 68: Passed.** Authorizes the Board to revise continuing education requirements for orthotists and prosthetists.

**SB 160: Passed.** Amends the Illegal Immigration Reform and Enforcement Act to only require that a U.S. citizen provide a notarized affidavit and documentation of citizenship one time to the same state agency, instead of each time he or she renews their professional license.

*Click the bill numbers to view the bills online.*

## Medicaid Enrollment Required for Ordering, Prescribing, and Referring OPR Providers

If you're currently ordering, prescribing or referring on behalf of Medicaid beneficiaries, but you do not file claims to Medicaid, the Patient Protection and Affordable Care Act (ACA) now requires that you enroll in the Medicaid Program as an OPR Provider beginning later this year. Your NPI number must also be included on the claim from the participating Medicaid provider. Otherwise, the participating (or rendering) provider filing the claim cannot be paid.

The Georgia Department of Community Health (DCH) is alerting physicians and other providers of this new rule and began accepting applications for these OPR providers as of April 1, 2013.

DCH has created an expedited and streamlined enrollment process for OPR providers. Additionally, OPR providers will not be required to submit financial documentation or complete certain sections of the application that pertain to claims or payee information.

### Enrolling as an OPR Provider:

Does not obligate you to see Medicaid patients;

Does not mean you will be listed as a Medicaid provider for patient assignment or referral; and

Does help to ensure that your orders, prescriptions and referrals for Medicaid patients are accepted, processed and paid appropriately.

Starting later this year, claims for services that contain a National Provider Identification number (NPI) of an Ordering, Prescribing, or Referring provider not enrolled in Medicaid (either as a participating provider or as an OPR provider) will be denied. Providers already enrolled as active Medicaid participating providers do not need to enroll again as OPR providers. Georgia Medicaid requires that NPIs for OPR providers be included on all claims.

OPR providers are encouraged to enroll in Medicaid through the Georgia Medicaid Management Information System (GAMMIS) Web Portal at: <https://www.mmis.georgia.gov/portal/default.aspx>.

OPR providers may submit a paper application in lieu of completing an online application. The paper application (with instructions) can also be found on GAMMIS at: <https://www.mmis.georgia.gov/portal/default.aspx>.

Additional information may be found in the Frequently Asked Questions (FAQ) document which is posted at: <https://www.mmis.georgia.gov> (from there, click "Provider Information", and click "FAQ for Providers").

For questions, please contact Hewlett Packard Enterprise Services (HPES) at 800-766-4456, and press option #0.

## Follow These Tips to Avoid Board Actions and Sanctions

**Do not prescribe controlled substances to yourself, and only prescribe controlled substances to a family member in the case of a documented emergency.**

According to [Rule 360-3-.02](#), it is unprofessional conduct to write prescriptions for controlled substances for personal use. It is also unprofessional conduct to write controlled substance prescriptions, except for documented emergencies, for immediate family members. Make sure you maintain a documented medical record if you provide any medical care for a family member. As with any patient, the minimum that a record must contain are the patient's name and address; the date, drug name, quantity, and diagnosis necessitat-

ing any controlled substance; and records concerning the patient's medical history.

**Renew your license on time.**

It is illegal to practice on an expired license. Doing so can result in sanctions against your license, including fines and public reprimands, and can expose you to liability and financial risk from insurers, third-party payers, etc.

**Do not prescribe controlled substances to a known or habitual drug abuser in the absence of a legitimate medical purpose.**

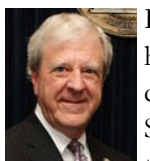
Rule 360-3-.02 specifically defines such an act as unprofessional conduct.

## Board Recognizes Former Board Members, Investigations Director for Faithful Service

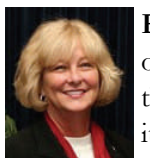
The Georgia Composite Medical Board recognized four former Board members and the retiring Director of Investigations for their faithful service to the people of Georgia during the July 2012—June 2013 term.



**Eddie Cheeks, MD** completed his third term July 1, 2012. Dr. Cheeks served on the Medical Board since it became an independent agency in 1999. He led the Board as president twice, from July 2002 to June 2003, and from July 2007 to June 2008. Dr. Cheeks is board-certified by the American Board of Obstetrics and Gynecology. He practices in Augusta, Georgia.

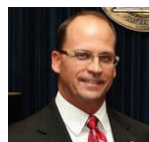


**Roland Summers, MD** also completed his third term July 1, 2012. A pulmonary disease specialist in Savannah, Dr. Summers served the people of Georgia on the Medical Board since its inception in 1999. He led the Board as president from July 2004 to June 2005.



**Rhonda Kunes** completed her third term of office July 1, 2012. Ms. Kunes served as the Board's first consumer member after its inception as an independent agency

from 1999 to 2005. In 2010, she was reappointed to a two-year term in the new consumer member position created in 2009 to expand consumer representation on the Board. Ms. Kunes owns Rhonda Kunes Court Reporting in Tifton, Georgia.



**Marion O. Lee, MD** resigned from the Board in December 2012. Originally appointed to the Board in 2008, and reappointed in 2012, Dr. Lee was elected to the Federation of State Medical Boards' Nominating Committee in April 2010. Dr. Lee is a pain management specialist and is board-certified by the American Board of Anesthesiology. He practices in Tifton, Georgia.



**Jeffrey D. Lane, MS** retired as the Board's Director of Investigations after 34 years of service to the State of Georgia in October 2012. Originally hired as a Regulatory Agent for the Secretary of State's Professional Licensing Division in 1981, Mr. Lane rose to the position of Director of Investigations for the division in 1991. In 1999, he was appointed as the Medical Board's first Director of Investigations, a position he held until his retirement.

## Board Disciplinary Action Report

The following report lists public disciplinary actions taken by the Board between July 1, 2012 and June 30, 2013. These cases have been investigated and are now part of the public record. Although every effort is made to ensure that the information is correct, you should read the order in its entirety. The Board may include several provisions in an order, and the description of the discipline in this report may not reflect all the actions in the order. You may view these public orders on our website at [www.medicalboard.georgia.gov](http://www.medicalboard.georgia.gov).

### Revocations, Voluntary Surrenders, and Suspensions

Profession	Lic #	Name	Date	Discipline
Physician	56512	Azmat, Najam	3/21/2013	Summary Suspension
Physician	12420	Bacon, Merrill Philip	6/7/2013	Suspension (Final Decision)
Physician	26444	Bailey, Donald Hosford	11/2/2012	Suspension
Physician	35133	Bailey, Susan Lynn	9/5/2012	Summary Suspension
Physician	68107	Battista, David Mark	6/10/2013	Summary Suspension
Physician	36109	Brown, Kevin Emory	3/15/2013	Voluntary Surrender
Physician	30595	Desantis, James Michael	4/23/2013	Summary Suspension
Physician	58874	Ellien, William George	3/20/2013	Voluntary Surrender
Physician Assistant	3334	Fouch, Scott Ashley	5/20/2013	Summary Suspension
Physician	64541	Frede, James Richard	3/8/2013	Suspension
Physician	52723	Frost, Bradley Lane	5/28/2013	Voluntary Surrender
Physician	24242	Glavey, Christine Patricia	6/13/2013	Summary Suspension
Physician	67476	Jackson, Lewis Jr	2/7/2013	Voluntary Surrender
Physician	24827	Johnson, George Croom	1/10/2013	Suspension (Final Decision)
Physician	19967	Levy-Eliceiri, Carlos Alberto	3/8/2013	Suspension
Physician	26336	Maynor, Michael Lee	10/4/2012	Suspension
Physician	65873	Patel, Vikul Vinodbhai	10/25/2012	Summary Suspension
Physician	26745	Piracha, Nisar Ahmed	6/5/2013	Voluntary Surrender
Physician	49211	Taylor, John Nicholas	5/31/2013	Summary Suspension
Physician	52491	Thrasher, Kelly Burton	1/29/2013	Suspension
Physician	29964	Walker, David Morris	6/10/2013	Summary Suspension
Orthotist/Prosthetist	73	Walker, Lance Andrew	1/10/2013	Suspension
Physician Assistant	5394	Wilkins, Beverly Lynne	10/4/2012	Suspension
Physician Assistant	1844	Williams, Norris	4/3/2013	Summary Suspension
Physician Assistant	1844	Williams, Norris	8/10/2012	Suspension (Final Decision)
Physician	34983	Williams, Robert James	12/7/2012	Revocation

## Public Reprimands, Public Practice Restrictions, Fines, Probation, and Amended Public Orders

Profession	Lic #	Name	Date	Discipline
Physician	33014	Abell, John Bruce	6/8/2012	Probation
Physician	37122	Amerson, Jennifer Low	4/4/2013	Public Reprimand
Physician	68846	Beirne, Mark Josph	10/4/2012	Practice Restriction
Physician	31383	Bell, Stephen Franklin	2/7/2013	Probation
Physician	43172	Brownlee, Richard Earl	5/3/2013	Probation
Physician Assistant	3497	Chao, Tomas Jorge	2/7/2013	Public Reprimand
Physician	46745	Chapkowski, Sandra Lee	6/6/2013	Amended Consent Order
Physician	47580	Chun, Thomas Hong	8/9/2012	Public Reprimand
Physician	33910	Constantine, Jeffrey Moore	3/8/2013	Public Reprimand
Physician	45753	Cooper, Melanie Linda	1/10/2013	Public Reprimand
Physician	60820	Crusor, Julie Michele	6/8/2012	Probation
Physician	58178	Gaines, Carol Marie	6/6/2013	Fine
Physician	57621	Gamble, Kendra Vanice	6/6/2013	Public Reprimand
Physician	12470	Golightly, Daniel Paul Jr	11/2/2012	Probation
Physician	40088	Hall, Hugh Wood	3/8/2013	Amended Consent Order
Physician	31013	Harding, Susan Mildred	2/7/2013	Public Reprimand
Physician	65259	Heldzinger, Derek	9/13/2012	Probation
Physician	40698	Hutcheson, Lou Ellen	2/7/2013	Fine
Physician	38821	Junco, Anthony Jr	7/12/2012	Amended Consent Order
Physician	42622	Kamaleson, Sunderraj Mark	3/8/2013	Public Reprimand
Physician	54759	Kapasi, Amarish R	10/4/2012	Fine
Physician	54759	Kapasi, Amarish R	1/10/2013	Amended Consent Order
Physician	42068	Kavuri, Sreekanth	9/13/2012	Public Reprimand
Physician	17841	Kelly, James Corbitt	11/1/2012	Amended Consent Order
Physician	54912	Knight, Vincent Karl	7/12/2012	Probation
Physician	43077	Lanade, Raphael Dada	12/7/2012	Public Reprimand
Physician	10220	Lassiter, Nolan Maddox	1/11/2013	Public Reprimand
Physician	61914	Leveen, Eric Gifford	2/7/2013	Public Reprimand
Physician	33397	Manning, Michael Joseph	12/7/2012	Public Reprimand
Physician Assistant	2735	Markes, Alvina C	5/3/2013	Probation
Physician	22444	Mayberry, William Stoy	5/3/2013	Amended Consent Order
Physician	27223	McDonald, Harry C	8/9/2012	Probation
Physician	35688	McEwan, Richard Patrick	12/7/2012	Probation
Physician	52108	Merritt, Tasha Lavette	10/5/2012	Public Reprimand
Physician	62259	Minnis, Jamil Angelo	8/9/2012	Public Reprimand
Physician	47351	Muehrcke, Derek David	2/7/2013	Fine
Physician	64232	Nelson, Celia	11/2/2012	Fine
Physician	31085	Nelson, David Monroe	3/8/2013	Public Reprimand
Physician	61991	Ojewole, Abiola Olutayo	8/9/2012	Probation
Physician	53348	Onyegbula, Anthony Chinyere	2/7/2013	Public Reprimand
Physician	35721	Panara, Jaysukhlal Velji	6/6/2013	Fine
Physician	60189	Roca, Margo Hirshman	9/13/2012	Fine

## Public Reprimands, Public Practice Restrictions, Fines, Probation, and Amended Public Orders *(continued from page 13)*

Profession	Lic #	Name	Date	Discipline
Physician	62766	Samuels, Todd Louis	6/6/2013	Fine
Physician	27712	Sanchez-Gonzalez, Armando	3/8/2013	Amended Consent Order
Physician	38955	Shah, Chandresh Bhauvat	3/8/2013	Amended Consent Order
Physician	36001	Sheridan, Kim Markl	4/4/2013	Public Reprimand
Resp Care Prof	2099	Tucker, Christopher	6/6/2013	Amended Consent Order
Physician	28696	Ulbrich, Peter John	6/8/2012	Amended Consent Order
Physician	18123	Volpitto, George David	9/13/2012	Public Reprimand
Physician	9289	Wallace, Russell Willis Jr	9/13/2012	Fine
Physician	32075	Ward, Jacob Tucker	7/12/2012	Probation
Physician	65196	Waters, Harris J	6/6/2013	Public Reprimand
Physician	20846	Webb, George Steven	2/7/2013	Fine
Physician	37929	Yarboro, Theodore Leon Jr	6/6/2013	Public Reprimand

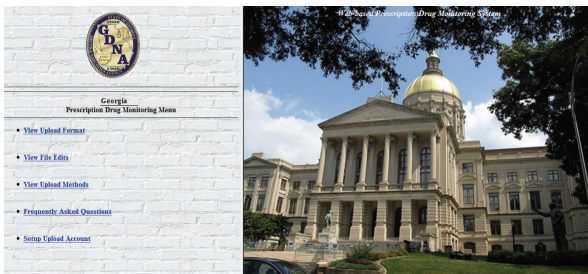
## Terminations of Public Orders

Profession	Lic #	Name	Date	Discipline
Physician	36915	Anfinson, Theodore Joseph	2/7/2013	Terminated Probation
Physician	31383	Bell, Stephen Franklin	2/7/2013	Terminated Probation
Physician	39735	Blount, Ronnie	12/7/2012	Terminated Probation
Physician	43172	Brownlee, Richard Earl	5/3/2013	Terminated Probation
Physician	55930	Bullington, Karen Patricia	5/3/2013	Terminated Terms
Physician	57056	Chavez, Eric M	10/4/2012	Terminated Probation
Physician	39073	Cline, Horace Lee Iii	11/1/2012	Terminated Probation
Physician	48345	Cumberbatch, Karyn-Anne B	2/13/2013	Terminated Terms
Physician	43925	Dupree, Michael Gregg	8/2/2012	Terminated Terms
Physician	47772	Ferree, Suzanne Jeannette	6/8/2012	Terminated Terms
Physician	30062	Foster, Gregory Allen	3/30/2013	Terminated Probation
Physician	61748	Hayek, Brent Richard	6/6/2013	Termination
Physician Assistant	3640	Holloway, Charles William	10/4/2012	Terminated Probation
Physician	20219	Hudson, James Hurn Jr	12/7/2012	Terminated Probation
Physician	54745	Huynh, Tuan Anh	5/3/2013	Terminated Terms
Physician	30630	Jordan, William Richie	6/6/2013	Terminated Probation
Physician	34630	Kinsey, Steven Wayne	9/19/2012	Terminated Probation
Physician Assistant	4679	Moulton, Amber Adele	6/8/2012	Terminated Terms
Physician	49861	Nariani, Sanjay Anand	6/6/2013	Terminated Terms
Physician Assistant	2569	Nobles, Jenifer Denise	6/6/2013	Terminated Monitoring
Physician	25656	Riley, Roth Leon	1/10/2013	Terminated Revocation Order
Physician	38358	Schley, Robert Sommerville	1/10/2013	Terminated Probation
Physician	48721	Siblsky, Dana Lynn	1/10/2013	Terminated Order

## Terminations of Public Orders *(continued from page 14)*

Profession	Lic #	Name	Date	Discipline
Physician	55436	Sipsy, Lonnie Keith	4/4/2013	Terminated Probation
Physician	31334	Stuart, Lloyd S	12/7/2012	Terminated Probation
Resp Care Prof	2099	Tucker, Christopher	6/6/2013	Terminated Probation
Physician	63747	Wang, Yihan	7/19/2012	Terminated Terms
Physician	40283	Wilson, Brummitte Dale	5/4/2013	Terminated Probation
Physician	39984	Wright, Terrill Mark	7/12/2012	Terminated Probation

## Prescription Drug Monitoring Program Goes Live



The Georgia Drugs and Narcotics Agency (GDNA) Prescription Drug Monitoring Program (PDMP) went live in June 2013. Passed in 2012, the PDMP's purpose is to help reduce the abuse of controlled substances by creating and maintaining an electronic database of Schedule II, III, IV, and V prescriptions dispensed. Dispensers must file electronic reports within ten days after dispensing the monitored prescriptions. Hospital pharmacies, institutional pharmacies

serving healthcare facilities, correctional pharmacies, and practitioners who administer the controlled substances are exempt from the reporting requirements. For more information, or to download the program guidelines, go to [www.gdna.georgia.gov/press-releases](http://www.gdna.georgia.gov/press-releases).

## Board Issues Call for Advisory Committee Nominations

The **Acupuncture Advisory Committee** has a vacancy for the position of Physician member. The candidate must be a licensed physician who practices or teaches acupuncture. The candidate must provide a resume or CV and three reference letters to the Committee. The Committee typically meets once a month. Please forward your nomination and candidate materials to Carol Dorsey at [cdorsey@dch.ga.gov](mailto:cdorsey@dch.ga.gov).

The **Orthotics & Prosthetics Advisory Committee** has vacancies for Orthotist and Prosthetist members. Qualified candidates must be licensed in good standing to practice orthotics and/or prosthetics in Georgia, and must provide the Committee with a resume and three reference letters. The Committee typically meets once a month. Please forward your nomination and candidate materials to Katonya Reynolds at [kreynolds@dch.ga.gov](mailto:kreynolds@dch.ga.gov).

The **Perfusion Advisory Committee** has vacancies for Clinical Perfusionist members. Qualified candidates must be licensed to practice clinical perfusion in Georgia, and must provide the Committee with a resume and three reference letters. The Committee typically meets once a month. Please forward your nomination and candidate materials to Lynette Riddle at [lriddle@dch.ga.gov](mailto:lriddle@dch.ga.gov).

**Notice of Fee Increase (APRN Protocol Review):** Effective July 1, 2013, the fee for Physician/APRN protocol reviews increased from \$75.00 to \$150.00. This is the first time the fee has been increased since the Board began reviewing protocols in 2009.

## Calendar of Upcoming Board Meetings and Holidays, 2013

Wednesday, July 4	<b>Independence Day</b> (closed)
Thursday, July 11 and Friday, July 12	<b>GCMB Board meeting</b> 2 Peachtree St, NW, 36th Floor Atlanta, Georgia 30303
Thursday, August 8 and Friday, August 9	<b>GCMB Board meeting</b> 2 Peachtree St, NW, 36th Floor Atlanta, Georgia 30303
Monday, September 2	<b>Labor Day</b> (closed)
Thursday, September 12 and Friday, September 13	<b>GCMB Board meeting</b> 2 Peachtree St, NW, 36th Floor Atlanta, Georgia 30303
Thursday, October 10 and Friday, October 11	<b>GCMB Board meeting</b> 2 Peachtree St, NW, 36th Floor Atlanta, Georgia 30303
Monday, October 14	<b>Columbus Day</b> (closed)
Thursday, November 7 and Friday, November 8	<b>GCMB Board meeting</b> 2 Peachtree St, NW, 36th Floor Atlanta, Georgia 30303
Monday, November 11	<b>Veterans Day</b> (closed)
Thursday, November 28	<b>Thanksgiving Day</b> (closed)
Friday, November 29	<b>Robert E. Lee's Birthday</b> (closed) (observed)
Thursday, December 5 to Friday, December 6	<b>GCMB Board meeting</b> 2 Peachtree St, NW, 36th Floor Atlanta, Georgia 30303
Tuesday, December 24	<b>Washington's Birthday</b> (closed) (observed)
Wednesday, December 25	<b>Christmas Day</b> (closed)

## State Holidays, 2014

The Board office will be closed the following state holidays in 2014. Our online services will still be available.

### Wednesday, January 1

New Year's Day

### Monday, January 20

Martin Luther King Jr.'s Birthday

### Monday, April 28

Confederate Memorial Day

### Monday, May 26

Memorial Day

### Friday, July 4

Independence Day

### Monday, September 1

Labor Day

### Monday, October 13

Columbus Day

### Tuesday, November 11

Veterans Day

### Thursday, November 27

Thanksgiving Day

### Friday, November 28

Robert E. Lee's Birthday (observed)

### Thursday, December 25

Christmas Day

### Friday, December 26

Washington's Birthday (observed)



## Contact Information for GCMB Services

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### Licensure Applications

#### Physician

**Kia Hargrove** (last names A-G)  
404-463-6162; khargrove@dch.ga.gov

**Candis Dickerson** (last names H-O)  
404-657-6491; cdickerson@dch.ga.gov

**Deborah Bruce** (last names P-Z)  
404-656-7067; dbruce@dch.ga.gov

#### Physician Assistant, Clinical Perfusionist

**Lynette Riddle**  
404-657-6495; lriddle@dch.ga.gov

#### Respiratory Care Professional, Orthotist & Prosthetist

**Katonya Reynolds**  
404-463-2292; kreynolds@dch.ga.gov

#### Acupuncturist, Residency Training Permit, APRN Protocol Review

**Carol Dorsey**  
404-463-5038; cdorsey@dch.ga.gov

#### License Renewal Issues

**Tommy Kelly**  
404-463-8900; tkelly@dch.ga.gov

**Carol Dorsey**  
404-657-6490; cdorsey@dch.ga.gov

**Pearl Mason-Stokes**  
404-656-3913; pmstokes@dch.ga.gov

#### Online Services and Payments Issues

**Tommy Kelly**  
404-463-8900; tkelly@dch.ga.gov

### Enforcement, Compliance, and Other Services

#### Filing Complaints, Malpractice Reports, and Other Enforcement Reports

**Shonda Roberts, Unit Supervisor**  
404-657-6489; sroberts@dch.ga.gov

**Sharon Cloud**  
404-657-6494; scloud@dch.ga.gov

**Phyllis Perry**  
404-657-1725; pperry@dch.ga.gov

**Jeanette Carter**  
404-463-8903; jecarter@dch.ga.gov

#### Obtaining Certified Copies of Public Board Orders

**Sharon Cloud**  
404-657-6494; scloud@dch.ga.gov

#### Consent Order Compliance Issues

**Franchesca Virgil**  
404-651-7852; fvirgil@dch.ga.gov

#### Open Records Requests

**Betsy Cohen, Esq.**  
404-657-3194; bcohen@dch.ga.gov

#### Ordering Verification of Georgia Licensure

##### Physician:

[www.veridoc.org](http://www.veridoc.org)

##### All other GCMB professions:

**Phyllis Perry**  
404-657-1725; pperry@dch.ga.gov

#### Ordering License Cards and Certificates, Ordering a Database of Licensees

**Pearl Mason-Stokes**  
404-656-3913; pmstokes@dch.ga.gov

## Georgia Composite Medical Board

2 Peachtree St NW  
36th Floor  
Atlanta, GA 30303-3465  
Phone: 404-656-3913  
Fax: 404-656-9723  
E-mail: [medbd@dch.ga.gov](mailto:medbd@dch.ga.gov)

**The Georgia Medical Board is  
online! Go to  
[www.medicalboard.georgia.gov](http://www.medicalboard.georgia.gov)**

*(or scan this code with your  
smartphone/tablet)*



### Active Licenses on July 1, 2013:

Physician	32,698
Respiratory Care Professional	5,252
Physician Assistant	3,679
Resident Physician	2,355
Acupuncturist	224
Orthotist & Prosthetist	231
Perfusionist	145
Pain Management Clinic	16

*The Georgia Composite Medical Board's mission is to protect the health of Georgians through the proper licensing of physicians and certain members of the healing arts and through objective enforcement of the Medical Practice Act.*

## Georgia Composite Medical Board Members

<b>Richard L. Weil, MD</b> (Atlanta), Chairman	<b>Kathy Kemle, PA-C</b> (Lizella)
<b>David W. Retterbush, MD</b> (Valdosta), Vice Chairman	<b>Kathleen "Kathy" Kinlaw</b> (Decatur)
<b>John S. Antalis, MD</b> (Dalton)	<b>Jane Camille "Cami" McGarity</b> (Gainesville)
<b>William Butler, MD</b> (Macon), Immediate Past Chairman	<b>B.K. Mohan, MD</b> (Riverdale)
<b>Gilbert S. Chandler III, MD</b> (Thomasville)	<b>George E. "Trey" Powell III, MD</b> (Hahira)
<b>E. Daniel DeLoach, MD</b> (Savannah)	<b>William S. Sightler, DO</b> (McRae)
<b>Alexander S. Gross, MD</b> (Atlanta), Past Chairman	<b>Wendy A. Troyer, MD</b> (Atlanta)
<b>Alice House, MD</b> (Warner Robins)	<b>Charles L. White, DO</b> (Cleveland), Past Chairman

## Georgia Composite Medical Board Management Staff

<b>LaSharn Hughes, MBA</b> , Executive Director	<b>Jean Rawlings Sumner, MD</b> , Medical Director
<b>Robert Jeffery, MBA</b> , Director of Operations	<b>Tony Winborn, MPA, CFE</b> , Director of Investigations
<b>Diane Atkinson</b> , Board Secretary	<b>Betsy Cohen, JD</b> , Legal Services Officer
<b>Phyllis White</b> , Operations Analyst	<b>Shonda Roberts</b> , Enforcement Supervisor