



**Department
of Health**

KATHY HOCHUL
Governor

JAMES V. McDONALD, M.D., M.P.H.
Acting Commissioner

MEGAN E. BALDWIN
Acting Executive Deputy Commissioner

May 9, 2023

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Melissa Cullinan, P.A.

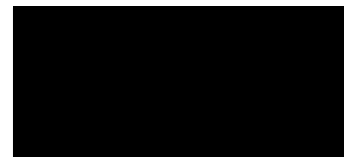

Re: License No. 014063

Dear Melissa Cullinan:

Enclosed is a copy of the New York State Board for Professional Medical Conduct (BPMC) Modification Order No. 23-104. This order and any penalty provided therein goes into effect May 16, 2023.

Please direct any questions to: Board for Professional Medical Conduct, Riverview Center, 150 Broadway, Suite 355, Albany, New York 12204, telephone # 518-402-0846.

Sincerely,



David Besser, M.D.
Executive Secretary
Board for Professional Medical Conduct

Enclosure

cc: Andrew M. Knoll, M.D., J.D.
Cohen, Compagni, Beckman, Appler & Knoll, PLLC.
507 Plum Street, Suite 310
Syracuse, New York 13204

NEW YORK STATE DEPARTMENT OF HEALTH
STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT

BPMC No. 23-104

IN THE MATTER	MODIFICATION
OF	OF
MELISSA CULLINAN, PA	CONSENT ORDER

This matter was brought to the New York State Board for Professional Medical Conduct (BPMC) for decision at the request of Melissa Cullinan, PA (Licensee), License No. 014063. Licensee was subject to BPMC Order No. 20-271 (Order), effective November 3, 2020. The Order suspended Licensee's license to perform medical services as a physician assistant for an indefinite period. The purpose of this proceeding was to determine whether the suspension was to be terminated upon a showing to the satisfaction of a Committee on Professional Conduct of the State Board for Professional Medical Conduct that Licensee, among other things, has successfully complied with or completed a course of therapy and ongoing evaluation, and is no longer incapacitated for the performance of medical services as a physician assistant and that Licensee is both fit and clinically competent to perform medical services as a physician assistant.

A meeting of the Committee was held in the above-entitled proceeding on December 14, 2022, via WebEx video conference. Licensee appeared with attorney, Andrew M. Knoll, MD, JD, before a Committee of the State Board for Professional Medical Conduct consisting of C. Deborah Cross, MD, Chair, Susan C. Ferrary, MD and Richard S. Goldberg, Esq. The Committee determined, by unanimous decision, after review of the documents submitted for the petition and careful consideration of all evidence and testimony provided, that the suspension of Licensee's license shall be terminated and that Licensee shall be allowed to perform medical services as a physician assistant subject to the following conditions.

THEREFORE, IT IS HEREBY ORDERED THAT:

The suspension of the Licensee's license to perform medical services as a physician assistant in the State of New York is terminated and that Licensee shall be subject to the following conditions. Licensee shall cooperate fully with the Office of Professional Medical Conduct (OPMC) in its administration and enforcement of this Order and in its investigation of all matters concerning Licensee. Licensee shall respond in a timely manner to all OPMC requests for written periodic verification of Licensee's compliance with this Order. Licensee shall meet with a person designated by the Director of OPMC, as directed. Licensee shall respond promptly and provide all documents and information within Licensee's control, as directed. These conditions shall take effect upon the Board's issuance of this Order and will continue so long as Licensee remains licensed in New York State.

Licensee shall maintain active registration of Licensee's license with the New York State Education Department Division of Professional Licensing Services and pay all registration fees. This condition shall take effect 120 days after the effective date of the Order and will continue for as long as Licensee remains licensed as a physician assistant in New York State.

Licensee shall provide the Director of OPMC with the following information, in writing, and shall ensure that such information is kept current: a full description of Licensee's employment and practice; all professional and residential addresses and telephone numbers within and outside New York State; all current and past hospital, facility, medical practice affiliations and/or applications for such affiliations; all professional licenses held and applied for; and all investigations, arrests, charges, convictions or disciplinary actions by any local, state or federal agency, institution or facility. Licensee shall notify OPMC, in writing, within thirty (30) days of any additions to or changes in the required information. This condition shall continue at all times until the Licensee receives written notification from OPMC, Physician Monitoring Program, that OPMC had determined that Licensee has fully complied with and satisfied the requirements of this Order, regardless of tolling.

Licensee shall provide the Director of OPMC with, and ensure to keep current and effective, fully executed waivers of patient confidentiality for any prior or prospective evaluation and treatment records; these waivers shall comply with the requirements of federal confidentiality laws and regulations, including but not limited to: HIPAA, Public Law 104-191, et seq., and the laws governing confidentiality of substance abuse records, at 42 U.S.C. § § 290dd-3 and ee-3 and 42 C.F.R., Part 2. This condition shall continue at all times until the Licensee receives written notification from OPMC, Physician Monitoring Program, that OPMC has determined that Licensee has fully complied with and satisfied the requirements of this Order, regardless of tolling.

Licensee's failure to comply with any conditions of this Order shall constitute misconduct as defined in NY Education Law § 6530(29).

Licensee's return to practice is subject to the probation terms in attached Document A. Unless otherwise indicated, these probation terms shall remain in effect for a period lasting five (5) years from the effective date of this Order.

Licensee may not commence practice as a physician assistant in New York State until all proposed monitors have been approved in writing by the Director of OPMC.

DOCUMENT A – TERMS OF PROBATION

1. The period of probation shall be tolled during periods in which Licensee is not engaged in active practice as a physician assistant in New York State for a period of thirty (30) consecutive days or more. Licensee shall notify the Director, in writing, if Licensee is not currently engaged in or intends to leave the active practice as a physician assistant in New York State for a period of thirty (30) consecutive days or more. Licensee shall then notify the Director again at least fourteen (14) days before returning to active practice in New York State. Upon the Licensee's return to active practice in New York State, the period of probation shall resume, and Licensee shall fulfill any unfulfilled probation terms and such additional requirements as the Director may impose as reasonably relate to Licensee's history or as are necessary to protect the public health.

2. Licensee's conduct shall conform to moral and professional standards of conduct and governing law.

3. Licensee shall remain free from alcohol and all other mood-altering substances other than those prescribed for Licensee's treatment by a physician or other licensed health care practitioner aware of Licensee's history of substance use disorder and mental illness. Licensee shall not self-prescribe any medications.

4. Licensee shall be monitored by a qualified health care professional (Toxicology Monitor) proposed by Licensee and approved in writing by the Director of the OPMC. The Toxicology Monitor shall not be a personal friend, current treatment provider or relative of the Licensee. The Toxicology Monitor shall be familiar with and shall execute an acknowledgment form provided by OPMC certifying familiarity with Licensee's history of substance use disorder and mental illness, with this Order and its terms, including the terms of probation and acknowledging a willingness to comply with the monitoring reporting responsibilities regarding the Licensee's compliance with the terms of this Order. Licensee shall submit the name of a proposed successor within seven (7) days of learning that the approved Toxicology Monitor is no longer willing or able to serve.

- a. The Toxicology Monitor shall oversee Licensee's compliance with the terms and conditions imposed herein and shall cause to be performed forensically valid, random, directly observed, unannounced hair, blood, breath, oral fluid and/or urine tests for the presence of alcohol and other drugs in Licensee. **Licensee shall provide drug screens at a frequency of no less than six (6) times per month for the first year.** Additional specific testing may be added based upon information known to the Director of OPMC, at that time. The Licensee shall be called on a seven day a week basis and drug screens must include weekend and evening collections. After the first year, if Licensee has been fully compliant with this Order, a request for a reduction in the number of drug screens to no less than four (4) times per month may be submitted for approval in writing by the Director of OPMC.
- b. The Toxicology Monitor shall notify OPMC immediately if Licensee refuses such a test or fails to comply with the imposed conditions.
- c. The Toxicology Monitor shall notify OPMC immediately if any drug screen reveals, or if the monitor otherwise learns, the Licensee is not alcohol/drug free.
- d. Every three (3) months, the Toxicology Monitor shall submit to OPMC a report certifying compliance with each of the terms of this Order or describing in detail any failure to comply. The quarterly reports shall include forensically valid results of all tests for the presence of alcohol and other drugs performed during that quarter. Licensee shall be responsible for ensuring that the Toxicology Monitor submits such reports.
- e. Licensee shall report to the Toxicology Monitor for routine testing **within four (4) hours** of being contacted by the Toxicology Monitor to submit a hair, blood, breath, oral fluid and/or urine specimen.

f. Licensee shall avoid all substances that may cause positive results such as poppy seeds, alcohol-based mouthwash, alcohol-based cough medication, hand sanitizer, herbal teas, and CBD products. **Any positive result will be considered a violation of this Order.**

g. If Licensee is to be unavailable for toxicology monitoring for a period of 15 days or more, Licensee shall notify the Toxicology Monitor and seek and receive prior written permission from the Director of OPMC subject to any additional terms and conditions required by the OPMC.

5. Licensee shall be supervised in Licensee's practice by a licensed physician (Practice Supervisor) proposed by Licensee and approved in writing by the Director of OPMC. The Practice Supervisor shall not be a personal friend, current treatment provider or relative of the Licensee. The Practice Supervisor must be on-site at all locations and must be in a position to regularly observe and assess Licensee's practice. The Licensee shall make available to the Practice Supervisor any and all records or access to the practice requested by the Practice Supervisor. The Practice Supervisor shall be familiar with and execute an acknowledgment form provided by OPMC certifying familiarity with Licensee's history of substance use disorder and mental illness, with this Order and its terms, and acknowledging a willingness to comply with the reporting responsibilities regarding the Licensee's compliance with the terms of this Order. Licensee shall submit the name of a proposed successor within seven (7) days of becoming aware that Licensee's approved Practice Supervisor is no longer willing or able to serve in that capacity.

a. The Practice Supervisor shall submit a report to OPMC every three (3) months regarding the quality of Licensee's practice, any unexplained absences from work, and certifying Licensee's compliance or detailing Licensee's failure to comply with each condition described within this Order. Licensee shall also be responsible for ensuring that the Practice Supervisor submits such reports.

b. The Practice Supervisor shall immediately order or obtain a forensic drug screen on Licensee in response to any complaint or observation that indicates Licensee may not be drug or alcohol free. The Practice Supervisor shall also have the authority to direct Licensee to submit to unannounced tests of Licensee's blood, breath, and/or urine for the presence of drugs or alcohol.

c. The Practice Supervisor shall oversee the Licensee's prescribing, administering, dispensing, ordering, inventory and wasting of controlled substances.

d. The Practice Supervisor shall immediately report any suspected or actual impairment, refusal to provide a drug screen, inappropriate behavior, deviation from accepted standards of care or possible misconduct to OPMC.

f. The Practice Supervisor shall notify OPMC immediately if Licensee violates any term(s) of this Order.

6. Licensee shall continue in group and individual therapy with qualified health care professionals (Therapists), proposed by Licensee and approved, in writing, by the Director of OPMC. The Therapists shall not be personal friends or relatives of the Licensee. The Therapists shall be familiar with and shall execute acknowledgment forms provided by OPMC certifying familiarity with Licensee's history of substance use disorder and mental illness, with this Order and its terms, and acknowledging a willingness to comply with the reporting responsibilities regarding the Licensee's compliance with the terms of this Order. The Licensee shall cause the Therapists to submit proposed treatment plans to OPMC. Licensee will continue in treatment with the group Therapist at a frequency determined by the group Therapist for as long as the group Therapist deems necessary. Licensee will continue in treatment with the individual Therapist for as long as the individual Therapist deems necessary. OPMC, at its discretion, may provide information or documentation from its investigative files concerning Licensee to Licensee's Therapists. Licensee

shall submit the name of a proposed successor within seven (7) days of becoming aware that one or both of the Licensee's approved Therapists is no longer willing or able to serve in that capacity.

a. The Therapists shall submit reports to OPMC every three (3) months certifying Licensee's compliance with treatment and describing in detail any failure to comply. Licensee shall also be responsible for ensuring that the Therapists submit such reports regarding Licensee's condition and Licensee's fitness or incapacity to practice as a physician assistant.

b. The Therapists shall report immediately to OPMC any significant pattern of absences, any suspected or actual impairment or relapse, and any failure to comply with the treatment plan or discontinuation of recommended treatment, including any prescribed medications, by Licensee.

7. At the direction of the Director of OPMC, Licensee shall submit to independent evaluation(s) by a practitioner or facility (Evaluator) approved by the Director of OPMC that specializes in alcohol/substance use disorders and/or mental illness. The Licensee shall execute authorizations to provide the Evaluator with copies of all previous treatment records and provide the Evaluator with a copy of this Order. The Licensee shall execute authorizations, and keep said authorizations active, allowing the Evaluator to obtain collateral information and communicate with the Director of OPMC or the Director's designee. OPMC, at its discretion, may provide information or documentation from its investigation files concerning the Licensee to the Evaluator. Reports of such evaluations shall be submitted directly to the Director of OPMC. Licensee shall follow treatment recommendations made by the Evaluator. If the Evaluator determines that the Licensee is not fit to practice, the Licensee shall immediately cease practice until it is determined Licensee is fit to resume practice. Failure to comply with the treatment recommendations will be considered a violation of this Order.

8. Licensee shall remain active in self-help groups (e.g., AA, NA, Caduceus, SMART Recovery, other). Licensee shall maintain an ongoing relationship with a sponsor.

9. Licensee shall continue enrollment in the Committee for Physician Health (CPH) and shall engage in a contract with CPH that fully describes the terms, conditions and duration of a recovery program. Licensee shall fully comply with the contract.

a. Licensee shall provide a written authorization for CPH to provide the Director of OPMC with any/all information or documentation requested by OPMC to determine whether Licensee is in compliance with the CPH contract and with this Order, including full access to all records maintained by CPH with respect to Licensee.

b. Licensee shall cause CPH to report to OPMC if Licensee refuses to comply with the contract, refuses to submit to treatment or if Licensee's impairment is not substantially alleviated by treatment. CPH shall report immediately to OPMC if Licensee is regarded at any time to be an imminent danger to the public.

10. Licensee shall inform all treating physicians or other health care practitioners of Licensee's history of substance use disorder and mental illness. Licensee shall advise OPMC, within seven (7) days of any controlled or mood-altering substances dispensed, administered or prescribed to Licensee by any treating physician or other health care practitioner.

11. Licensee shall neither treat nor prescribe medications to Licensee, any friends or family members. Licensee shall only treat or prescribe medications to patients with whom Licensee has established a legitimate physician assistant/patient relationship and for a legitimate medical purpose.

12. Licensee shall enroll in and successfully complete a minimum of fifty (50) hours of Category 1 continuing medical education (CME) per year for the first two (2) years of probation in Licensee's practice specialty. Licensee shall provide written confirmation to OPMC of completion of the CME courses.

13. Licensee's professional performance may be reviewed by the Director of OPMC. This review may include, but shall not be limited to, a review of records, whether in electronic, paper, or other formats, including but not limited to office records, patient records and/or hospital charts, as well as interviews with or periodic visits with Licensee and staff at practice locations or OPMC offices.

14. Licensee shall maintain legible and complete medical records that accurately reflect the evaluation and treatment of all patients. The medical records shall contain all information required by federal and state statutes, rules and regulations regarding controlled substances.

15. Licensee shall adhere to federal and state guidelines and professional standards of care with respect to infection control practices. Licensee shall ensure education, training, and oversight of all office personnel involved in medical care, with respect to those practices.

16. Licensee shall personally meet with a person designated by the Director of OPMC as requested by the Director, at a time and location determined by OPMC.

17. Licensee shall provide a complete copy of this Restoration Order to all entities to which Licensee applies for employment, credentialing and/or licensure.

18. Should Licensee perform medical services as a physician assistant in another state, Licensee shall provide written authorizations for the relevant State Medical Board and/or the Physician Health Program to provide the Director of OPMC with any/all information or documentation as requested by OPMC.

19. Licensee shall comply with this Order and all its terms, conditions, restrictions and limitations, and shall be responsible for all associated compliance costs. Upon receiving evidence of non-compliance with this Order, or any violation of its terms, the Director of OPMC and/or the Board may initiate a violation of probation proceeding and/or any other proceeding against Licensee as authorized by law.

This Order shall be effective upon issuance.

Dated: _____

4/27/23



C. Deborah Cross, MD
Committee Chair
NYS Board for Professional Medical Conduct