

HOWARD A. ZUCKER, M.D., J.D. Commissioner

KRISTIN M. PROUD
Acting Executive Deputy Commissioner

September 23, 2021

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Alan Geringer, M.D.

Governor

Hannah E.C. Moore, Associate Counsel New York State Department of Health Bureau of Professional Medical Conduct Corning Tower – Room 2512 Empire State Plaza Albany, New York 12237

RE: In the Matter of Alan Geringer, M.D.

Dear Parties:

Enclosed please find the Determination and Order (No. 21-202) of the Hearing Committee in the above referenced matter. This Determination and Order shall be deemed effective upon the receipt or seven (7) days after mailing by certified mail as per the provisions of §230, subdivision 10, paragraph (h) of the New York State Public Health Law.

As prescribed by the New York State Public Health Law §230, subdivision 10, paragraph (i), (McKinney Supp. 2015) and §230-c subdivisions 1 through 5, (McKinney Supp. 2015), "the determination of a committee on professional medical conduct may be reviewed by the Administrative Review Board for professional medical conduct." Either the Respondent or the Department may seek a review of a committee determination.

All notices of review must be served, by certified mail, upon the Administrative Review Board and the adverse party within fourteen (14) days of service and receipt of the enclosed Determination and Order.

The notice of review served on the Administrative Review Board should be forwarded to:

Jean T. Carney, Administrative Law Judge New York State Department of Health Bureau of Adjudication Riverview Center 150 Broadway – Suite 510 Albany, New York 12204

The parties shall have 30 days from the notice of appeal in which to file their briefs to the Administrative Review Board.

Six copies of all papers must also be sent to the attention of Judge Carney at the above address and one copy to the other party. The stipulated record in this matter shall consist of the official hearing transcript(s) and all documents in evidence.

Parties will be notified by mail of the Administrative Review Board's Determination and Order.

Sincerely,

James F. Horan Chief Administrative Law Judge

Bureau of Adjudication

JFH:nm Enclosure

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



IN THE MATTER

DETERMINATION

OF

AND

ALAN GERINGER, M.D.

ORDER

BPMC-21-202

A hearing was held on August 12, 2021, via WebEx videoconference. Pursuant to § 230(10)(e) of the Public Health Law (PHL), WILLIAM A. TEDESCO, M.D., Chairperson, GREGORY ALLEN THREATTE, M.D. and DAVID F. IRVINE, DHSc, P.A., duly designated members of the State Board for Professional Medical Conduct, served as the hearing committee in this matter. NATALIE BORDEAUX, ADMINISTRATIVE LAW JUDGE, served as the administrative officer.

The Department appeared by Hannah E.C. Moore, Associate Counsel. A Notice of Referral Proceeding and Statement of Charges dated May 12, 2021¹ (Exhibit 1 and attached as Appendix I), were duly served upon Alan Geringer, M.D. (Respondent) pursuant to PHL § 230(10)(d)(i). (Exhibit 2.) The Respondent appeared and testified on his own behalf. There were no other witnesses at the hearing. The Hearing Committee received and examined documents from the Department (Exhibits 1-4) and the Respondent (Exhibits A-B). A transcript of the proceeding was made. The Hearing Committee unanimously votes 3-0 to sustain the charge that the Respondent committed professional misconduct, in violation of Education Law (Educ. Law) § 6530(9)(d), and to impose the penalty of probation for one year under the supervision of a practice monitor specializing in addiction medicine, along with successful completion of a continuing

¹ As shown in the Notice of Referral Proceeding, this hearing was originally scheduled for July 14, 2021, but was subsequently rescheduled for August 12, 2021 at the Respondent's request.

medical education (CME) course regarding New York's internet system for tracking overprescribing prescription monitoring program (I-STOP/PMP).

BACKGROUND

The Department brought the case pursuant to PHL § 230(10)(p), which provides for a hearing when a licensee is charged solely with a violation of Educ. Law § 6530(9). The Respondent is charged with professional misconduct pursuant to Educ. Law § 6530(9)(d), by having disciplinary action taken against his license to practice medicine in Maryland where the conduct resulting in the disciplinary action taken would, if committed in New York state, constitute professional misconduct under the laws of New York state.

FINDINGS OF FACT

The Hearing Committee, by unanimous vote, hereby makes the following findings of fact:

- The Respondent was authorized to practice medicine in New York on November 24,
 1978 under license number 136860. (Exhibit 4.)
- 2. On September 4, 2020, a disciplinary panel of the Maryland State Board of Physicians (Maryland Board) charged the Respondent with failing to meet the appropriate standards for the delivery of quality medical and surgical care performed in an outpatient surgical facility, office, hospital, or any other location in the state of Maryland, based upon allegations that the Respondent failed to address inconsistent urine toxicology screen results of four patients he was treating for opioid dependency and for whom he prescribed controlled substances. (Exhibit 3.)
- 3. On November 18, 2020, the Respondent entered into a consent order with the Maryland Board to resolve the September 4, 2020 charges, whereby he waived his right to contest the stated charges. Pursuant to this order, the Respondent was reprimanded and placed on probation for at least one year. During his probation term, he is required to be supervised by

a Maryland Board-approved practice monitor who is board-certified in addiction medicine. In addition, the Respondent was required to successfully complete courses in the appropriate prescribing of controlled dangerous substances within the first six months of his probationary period. (Exhibit 3.)

CONCLUSIONS OF LAW

The Respondent entered into a consent decree with the Maryland Board to resolve charges of failing to meet appropriate standards of care with respect to the prescribing of controlled substances for four patients. (Exhibit 3.) The Department's May 12, 2021 Statement of Charges alleges that the Respondent's misconduct in Maryland described in the November 18, 2020 consent order would, if committed in New York, constitute professional misconduct as defined in Educ. Law § 6530(3), practicing the profession with negligence on more than one occasion. (Exhibit 2.)

The Maryland Board found that the Respondent's treatment of four patients for opioid dependence deviated from acceptable medical standards when he continued to prescribe controlled substances for them after urine toxicology screen results showed that the patients were not compliant with their treatment. (Exhibit 3.) The Hearing Committee unanimously agreed that the Respondent's conduct resulting in the Maryland Board's disciplinary actions would, if committed in New York, constitute misconduct pursuant to Educ. Law § 6530(3) and thus determined that the Respondent violated Educ. Law § 6530(9)(d).

The Hearing Committee considered all possible penalties authorized by PHL § 230-a, including revocation, suspension and/or probation, censure and reprimand, and the imposition of monetary penalties. The Department requested revocation of the Respondent's medical license or, at minimum, a censure and reprimand combined with a three-year term of probation under the

supervision of a practice monitor and successful completion of a CME course addressing the basis for the disciplinary action taken by the Maryland Board. The Respondent asked the Hearing Committee to impose a censure and reprimand, as the Pennsylvania State Board of Medicine imposed in response to the Maryland Board's action. (Exhibit B.)

The Hearing Committee did not agree with the Department that revocation of the Respondent's license or a three-year probation term was warranted. The Respondent's main area of practice is urology, and he treats only a small number of patients for drug addictions. The Hearing Committee was impressed by the Respondent's commitment to helping an underserved segment of patients with very complex needs in a practice area completely unrelated to his original specialty and that, despite earlier mistakes, he has continued to work with addiction medicine. The Respondent has unequivocally accepted responsibility for his mistakes. He has also made changes to his treatment methods for drug-addicted patients, specifically, employing medical assistants experienced in addiction medicine and ensuring frequent urine toxicology testing.

Notwithstanding the Respondent's demonstrated attempts to enhance his treatment of patients with addictions, the Hearing Committee did not deem a censure and reprimand sufficient to address practical concerns regarding treatment of drug-addicted patients, either. Therefore, the Hearing Committee concluded that the most appropriate penalty in this matter is a one-year probation term under the supervision of a practice monitor regarding the Respondent's practice of addiction medicine only, and the Respondent's successful completion of a course describing I-STOP/PMP. Such coursework would educate the Respondent in New York's system for reporting and verifying controlled substance prescriptions given to patients, and thus directly address the findings in the Maryland Board Order.

ORDER

IT IS HEREBY ORDERED THAT:

- 1. The specification of professional misconduct, as set forth in the Statement of Charges, is sustained.
- 2. The Respondent is placed on probation for a period of one year. The Respondent must comply with the terms of probation set forth in Appendix II.
- 3. The probation period shall toll whenever the Respondent is not engaged in active medical practice in the state of New York for a period of 30 consecutive days or more.
- 4. During the period of probation, the Respondent shall practice addiction medicine in New York only under the supervision of a Board-approved practice monitor specializing in addiction medicine as detailed in paragraph seven of Appendix II.
- 5. Before engaging in the practice of medicine in the state of New York, the Respondent shall complete one professional course regarding New York's internet system for tracking over-prescribing prescription monitoring program (I-STOP/PMP). PHL § 230-a(8).
- 6. This Order shall be effective upon service on the Respondent in accordance with the requirements of PHL § 230(10)(h).

DATED: Menands, New York, 2021

NYS DEPT OF HEALTH

SEP 2 2 2020

Division of Legal Affairs Bureau of Adjudication William A. Tedesco, M.D. Chairperson

Gregory Allen Threatte, M.D. David F. Irvine, DHSc, P.A.

To: Alan Geringer, M.D.

Hannah E.C. Moore, Associate Counsel New York State Department of Health Bureau of Professional Medical Conduct Corning Tower – Room 2512 Empire State Plaza Albany, NY 12237

APPENDIX I

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

IN THE MATTER

OF

ALAN GERINGER, M.D.

OF CHARGES

Alan Geringer, M.D., the Respondent, was authorized to practice medicine in New York State on or about 11/24/1978 by the issuance of license number 136860 by the New York State Education Department.

FACTUAL ALLEGATIONS

- A. On or about 11/18/2020, Respondent entered into a Consent Order with the Maryland State Board of Physicians. The Consent Order imposed disciplinary action against Respondent, a urologist, for failing to meet appropriate standards of care, following allegations of inappropriate prescribing of controlled substances to four patients. Pursuant to the Consent Order, Respondent was placed on supervised probation for a minimum of one year and ordered to take courses regarding the prescribing of controlled dangerous substance.
- B. The conduct resulting in the Maryland Consent Order could constitute misconduct under the laws of New York State pursuant to the following section of New York State Law:
 - 1. New York Education Law § 6530(3) (practicing the profession with negligence on more than one occasion)

SPECIFICATION OF CHARGES HAVING HAD DISCIPLINARY ACTION TAKEN

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(9)(d) by having his or her license to practice medicine revoked, suspended or having other disciplinary action taken, or having his or her application for a license refused, revoked or suspended or having voluntarily or otherwise surrendered his or her license after a disciplinary action was instituted by a duly authorized professional disciplinary agency of another state, where the conduct resulting in the revocation, suspension or other disciplinary action involving the license or refusal, revocation or suspension of an application for a license or the surrender of the license would, if committed in New York state, constitute professional misconduct under the laws of New York state (namely N.Y. Educ. Law § 6530[3]) as alleged in the facts of the following:

1. Paragraphs A and B.

DATE:May 12, 2021 Albany, New York

> TIMOTHY J. MAHAR Deputy Counsel Bureau of Professional Medical Conduct

APPENDIX II

Terms of Probation

- 1. Respondent's conduct shall conform to moral and professional standards of conduct and governing law. Any act of professional misconduct by Respondent as defined by Educ. Law § 6530 or § 6531 shall constitute a violation of probation and may subject Respondent to an action pursuant to PHL § 230(19).
- 2. Respondent shall maintain active registration of his license with the New York State Education Department Division of Professional Licensing Services, and shall pay all registration fees.
- 3. Respondent shall provide the Director, Office of Professional Medical Conduct (OPMC), Riverview Center, 150 Broadway, Suite 355, Albany, New York 12204 with the following information, in writing, and ensure that this information is kept current: a full description of his employment and practice; all professional and residential addresses and telephone numbers within and outside New York State; and all investigations, arrests, charges, convictions or disciplinary actions by any local, state or federal agency, institution or facility. Respondent shall notify OPMC, in writing, within 30 days of any additions to or changes in the required information.
- 4. Respondent shall cooperate fully with and respond in a timely manner to OPMC requests to provide written periodic verification of his compliance with these terms. Upon the Director of OPMC's request, Respondent shall meet in person with the Director's designee.
- 5. The probation period shall toll when Respondent is not engaged in active medical practice in New York State for a period of 30 consecutive days or more. Respondent shall notify the Director of OPMC, in writing, if he is not currently engaged in, or intends to leave, active medical practice in New York State for a consecutive 30-day period. Respondent shall then notify the Director again at least 14 days before returning to active practice. Upon Respondent's return to active practice in New York State, the probation period shall resume and Respondent shall fulfill any unfulfilled probation terms and such additional requirements as the Director may impose as reasonably relate to the matters set forth in the Determination and Order or as are necessary to protect the public health.
- 6. The Director of OPMC may review Respondent's professional performance. This review may include but shall not be limited to: a review of office records, patient records, hospital charts, and/or electronic records; and interviews with or periodic visits with Respondent and staff at practice locations or OPMC offices.
- 7. The Respondent shall practice addiction medicine in New York State only when monitored by a licensed physician, board certified in addiction medicine (practice monitor), who is proposed by Respondent and subject to the written approval of the Director of the OPMC.
 - a. The Respondent shall make available to the monitor any and all records or access to the practice requested by the monitor, including on-site observation. The

practice monitor shall visit the Respondent's medical practice at each and every location, on a random, unannounced basis at least monthly and shall examine a selection (no fewer than 20) of records maintained by the Respondent, including patient records, prescribing information and office records. The review will determine whether the Respondent's medical practice is conducted in accordance with generally accepted standards of professional medical care. Any perceived deviation of accepted standards of medical care or refusal to cooperate with the monitor shall be reported within 24 hours to the OPMC.

- b. Respondent shall cause the practice monitor to report quarterly, in writing, to the Director of the OPMC.
- c. Respondent shall be solely responsible for all expenses associated with monitoring, including fees, if any, to the monitoring physician.
- d. Respondent shall maintain medical malpractice insurance coverage with limits no less than \$2 million per occurrence and \$6 million per policy year, in accordance with § 230(18)(b) of the Public Health Law. Proof of coverage shall be submitted to the Director of OPMC prior to Respondent commencing practice within the State of New York.
- 8. The terms set forth in the paragraphs above are the minimum probation terms to be imposed on the Respondent, and other terms may be added by the Director of the OMPC. All compliance costs, including expenses and fees associated with the practice monitor, shall be the Respondent's responsibility.
- 9. Respondent shall comply with these probationary terms, and shall bear all associated compliance costs. Upon receiving evidence of noncompliance with, or a violation of, these terms, the Director of OPMC and/or the Board may initiate a violation of probation proceeding, and/or any other such proceeding authorized by law, against Respondent.