

IN THE MATTER OF

*

BEFORE THE

JENNIFER L. MOHLER, PA-C

*

MARYLAND STATE

Respondent

*

BOARD OF PHYSICIANS

License Number: C03725

*

Case Number: 2222-0110A

* * * * *

CONSENT ORDER

On April 11, 2023, Disciplinary Panel A (“Panel A”) of the Maryland State Board of Physicians (the “Board”) charged **JENNIFER L. MOHLER, PA-C** (the “Respondent”), License Number C03725, under the Maryland Physician Assistants Act (the “Act”), Md. Code Ann., Health Occ. (“Health Occ.”) §§ 15-101 *et seq.* (2021 Repl. Vol.). The Respondent was charged under the following provisions of Health Occ. § 15-314:

(a) *Grounds for discipline.* - Subject to the hearing provisions of § 15-315 of this subtitle, a disciplinary panel, on the affirmative vote of a majority of the quorum, may reprimand any physician assistant, place any physician assistant on probation, or suspend or revoke a license if the physician assistant:

...

(3) Is guilty of:

...

(ii) Unprofessional conduct in the practice of medicine;

...

(41) Performs delegated medical acts beyond the scope of the delegation agreement filed with the Board or after notification from the Board that an advanced duty has been disapproved;

...

- (45) Fails to comply with any State or federal law pertaining to the practice as a physician assistant.

On June 14, 2023, Panel A was convened as a Disciplinary Committee for Case Resolution (“DCCR”) in this matter. Based on negotiations occurring as a result of this DCCR, the Respondent agreed to enter into this Consent Order, consisting of Findings of Fact, Conclusions of Law, Order, and Consent.

FINDINGS OF FACT

Disciplinary Panel A finds the following:

A. INTRODUCTION

1. A Board investigation determined that the Respondent performed advanced duties for 10 years without submitting a Delegation Agreement Addendum for Advanced Duties to the Board for its approval.

B. LICENSING INFORMATION

2. The Respondent was and is a physician assistant (“PA”) licensed in the State of Maryland. She was initially licensed in Maryland on February 7, 2008. Her license is scheduled to expire on June 30, 2025.

3. From 2008 through 2022, the Respondent was employed at an internal medical practice in Solomons, Maryland.¹ On or around January 2022, the Respondent

¹ To ensure confidentiality and privacy, the names of individuals and facilities involved in this case are not disclosed in this Order.

opened, is a partial owner of, and currently practices at a primary care office in Hughesville, Maryland.

C. FACTS

4. On or about October 13, 2021, the Respondent submitted to the Board a “Delegation Agreement Addendum for Advanced Duties” (“2021 Delegation Agreement Addendum for Advanced Duties”). The form listed “Physician B” as her primary supervising physician.

5. As set forth below, neither the Respondent nor Physician B transmitted to the Board a log of advanced duty procedures performed by the Respondent and supervised by Physician B, as required by the 2021 Delegation Agreement Addendum for Advanced Duties.

6. In 2012, the Board had approved a Delegation Agreement for Core Duties between the Respondent and “Physician A,” who was listed as the Respondent’s then primary supervising physician. The 2012 Delegation Agreement for Core Duties was the only Delegation Agreement the Board had approved regarding the Respondent’s duties.

7. Upon review of the Respondent’s 2021 Delegation Agreement Addendum for Advanced Duties, Board staff noted that the Respondent had not previously requested, nor had she been approved by the Board to perform advanced duties under a Delegation Agreement with Physician A.

8. The Board thereafter initiated an investigation of the Respondent's PA duties. The investigation included conducting under-oath interviews of the Respondent and Physician A. The results are summarized below.

I. The Respondent's Delegation Agreement Prior to 2021

9. On or about March 29, 2012, the Respondent and Physician A jointly submitted to the Board a "Physician Assistant/Primary Supervising Physician Delegation Agreement for Core Duties" application ("2012 Core Duties Agreement").

10. Board regulations define "core duties" as "medical duties that are included in the standard curricula of accredited physician assistant education programs." COMAR 10.32.03.02.B(10).

11. The Respondent listed "Physician A" as her Primary Supervising Physician on her 2012 Core Duties Agreement.

12. The Respondent listed the following as her core duties:

- a. Core duties included evaluation and management of both acute and chronically ill patients as well as evaluation and management of healthy patients, generally adults and children twelve and over.
- b. This involves physical exams, ordering appropriate labs and diagnostic studies and interpretation of those studies. EKGs and radiology studies would involve initial interpretation by the PA with final interpretations by the MD, if indicated.
- c. Treatment may include prescriptions, as authorized, appropriate consultation with back up physician, referral to appropriate specialist, or counseling and education.
- d. Minor surgical procedures such as I&D [incision and drainage] of abscess, wart or skin lesion removals, suturing and appropriate splinting may be performed.

13. The Respondent had initially written “skin tag removals,” but crossed out “tag” and inserted “lesion removals.”

14. On April 10, 2012, Board staff requested Physician A to clarify the Respondent’s scope of duty regarding the removal of skin lesions.

15. On or about June 4, 2012, the Board approved the Respondent’s 2012 Core Duties Agreement.

II. 2021 Core Duties Delegation Agreement

16. On or about August 12, 2021, the Respondent and Physician B jointly submitted to the Board a “Physician Assistant/Primary Supervising Physician Delegation Agreement for Core Duties” (“2021 Core Duties Agreement”).

17. The Respondent listed on her 2021 Core Duties Agreement “Physician B” as her Primary Supervising Physician. The Respondent also listed her new practice location.

18. The Respondent and Physician B attested in the 2021 Core Duties Agreement that it included only core duties to be delegated to the PA.

19. In Section 3 of the 2021 Core Duties Agreement, it is noted:

NOT TO BE INCLUDED ON THIS APPLICATION – “Advanced duties” are defined as medical acts that require additional training beyond the basic physician assistant education program required for licensure. (Examples include” Joint injections, Botox, stress tests) TO APPLY FOR APPROVAL TO PERFORM ADVANCED DUTIES, YOU MUST HAVE AN APPROVED CORE DUTY DELEGATION AGREEMENT AND SUBMIT A DELEGATION AGREEMENT ADDENDUM.

(Emphasis in original).

20. The Board approved the Respondent's 2021 Core Duties Delegation Agreement effective September 27, 2021.

III. 2021 Delegation Agreement Addendum for Advanced Duties

21. On or about October 12, 2021, the Respondent submitted to the Board a "Delegation Agreement Addendum for Advanced Duties" ("2021 Addendum for Advanced Duties" or "Addendum for Advanced Duties").

22. Regarding the Board's approval of advanced duties, Health Occ. § 15-302(c) provides in pertinent part:

§ 15-302. Physician delegations to physician assistants; delegation agreements.

(a) *In general.* – A physician may delegate medical acts to a physician assistant only after:

- (1) A delegation agreement has been executed and filed with the Board; and
- (2) Any advanced duties have been authorized as required under subsection (3) of this section.

...

(c)(2)(i) In any setting that does not meet the requirements of paragraph (1) of this subsection,² a primary supervising physician shall obtain the Board's approval of a delegation agreement before the physician assistant performs the advanced duties.

23. Board regulations define "advanced duties" as "medical acts that require additional training beyond the basic physician education program required for licensure." COMAR 10.32.03.02B(2).

² The requirements of Health Occ. § 15-302(c)(1)(i) – (iii) are not relevant to this Order.

24. On the 2021 Addendum for Advanced Duties, the Respondent listed Physician B as her supervising physician.

25. Section 7 of the Addendum for Advanced Duties requested the Respondent to list the procedures that were being delegated to her. The Respondent listed:

skin excisions, excision and repair of malignant lesions, arthrocentesis³ (without ultrasound or fluoroscopic guidance- shoulder, knee, bursa at elbow, hip, & knee, carpal tunnel), myofascial injections, trigger point injections/greater trochanteric.

26. Section 8 of the Addendum for Advanced Duties states: Has the health care facility approved the PA to perform the requested procedure(s)?

27. The Respondent checked the response option, “N/A.” The option required the Respondent to “[a]ttach a copy of the procedure logs for each requested procedure showing at least 10 – 25 successful procedures. Include the dates of the procedure and type of procedure . . . The name and signature of the PA and the training/supervising physician should be on all procedure logs.” (Emphasis in original).

28. Neither the Respondent nor Physician B transmitted to the Board any procedure logs with the 2021 Addendum for Advanced Duties.

29. Section 9 of the Addendum for Advanced Duties requested the Respondent to describe “in detail, the additional training and education that prepared the PA to perform the perform the requested duties.” (Emphasis in original)

³ Arthrocentesis is an injection used to remove fluid from a joint.

30. The Respondent listed: AAPA [American Academy of Physician Assistants] Dermatology Procedures and Joint Injections workshops, including hands-on practice, ongoing CME, teaching suturing to basic primary care office skin procedures workshops.

31. By email dated November 29, 2021, Board licensing staff notified the Respondent and Physician B that the Board had received the 2021 Delegation Agreement Addendum for Advanced Duties. Board staff requested the Respondent and Physician B provide “a procedure log documenting [the Respondent]’s performance of at least 10 to 25 of each of the [requested] advanced duties, performed under [Physician B]’s direct supervision.”

32. By response email dated November 30, 2021, the Respondent stated, “this delegation agreement is for a new business (not opening until 1/31/22 and a new PA/MD collaboration, and as such [Physician B] has not had the opportunity to supervise me doing these procedures.”

33. By email dated December 2, 2021, Board licensing staff notified the Respondent that the Board had no record of the Respondent requesting or the Board approving the Respondent to perform “any advanced duties under [Physician A]’s supervision.” Board staff inquired whether the Respondent was able to provide “official documentation that you were approved to perform the requested advanced duties under [Physician A] . . . The Board will accept a procedure log documenting your performance of at least 10 to 25 of the [requested] advanced duties, performed under [Physician A]’s direct supervision. However, the procedures would have had to have been performed within the last 2 years.”

34. The Board's December 2, 2021 email continued, "if you provide the requested procedure logs documenting procedures performed under [Physician A]'s supervision . . . you will also have to submit a letter from [Physician B] . . . stating that he's requesting the Board's approval for you to perform the requested advanced duties under his supervision based on the training that [Physician A] provided for you in the performance of all the requested advanced duties."

35. By email dated December 13, 2021, the Respondent informed Board staff in pertinent part, "I am sure at my current practice (supervising MD [Physician A]) we submitted documentation for advanced duties over 10 years ago but unfortunately I did not keep a copy of this documentation."

36. The Respondent continued, "[t]herefore I am submitting a procedure log from my current practice under the supervision of [Physician A]. Due to the Covid pandemic and a significant reduction of in office patients and procedures in the last 2 years, not all the dates are within 2 years. They are within the last 3 years or so with the exception of arthrocentesis. Finally, I just recently started offering trigger point injections, so I do not have 10 of those but they are much less complicated and have less risk of adverse outcome than arthrocentesis with which I am more experienced."

37. The Respondent's December 13, 2021 email included a procedure log for the requested advanced duties. The log identified the procedure, the number of times the Respondent performed the procedure and the dates the procedures were performed.

38. The Respondent listed the following procedures:

- 25 skin excisions performed between October 2018 and November 2021;

- 10 excision and repair of malignant lesions performed between November 2019 and May 28, 2021;
- 10 arthrocentesis procedures performed between September 2009 and November 2021; and
- 2 trigger point injections performed in April 2019 and October 2021.

39. The procedure log was signed by Physician A.

40. By letter dated February 8, 2022, Board staff notified the Respondent that the Board had initiated an investigation regarding the Respondent's performance of advanced duties.

41. By letter dated February 17, 2022, the Respondent responded in pertinent part:

In March 2012, [Physician A] and I submitted to the Maryland Board of Physicians a Delegation Agreement. Under section 15, 'Delegated Medical Acts' we wrote 'see attached.' The attachment specifically listed 'Minor surgical procedures such as I&D of abscess, wart or skin lesion removals, and appropriate splinting. That Delegation Agreement was approved by the Board of Physicians. Therefore, [Physician A] and I were under the impression that I had been granted duties including skin excisions and excision and repair of malignant lesions. Furthermore we believed that 'arthrocentesis, myofascial injections, and trigger point injections' would be covered under the 'minor surgical procedures' listed in that attachment.

I acted in good faith believing that I had been granted the authority by the Board to perform such procedures, with the knowledge of and under the capable supervision of my supervising doctor. I only began performing these procedures after having completed intensive workshops including hands-on skill practice and joint and tissue injections at the AAPA conference in San Diego in 2009 (in addition to training in both skin procedures and injections during didactic and clinical education during my PA training at GWU [George Washington

University] 2006 – 2007, which included an elective orthopedics rotation)[.]

IV. Physician A's Under-Oath Interview

42. In furtherance of its investigation, Board staff interviewed Physician A under oath on December 5, 2022.

43. Physician A affirmed that it was his understanding that the 2012 Core Duties Delegation Agreement encompassed excision repair of malignant lesions, arthrocentesis, and trigger point injections.

44. Physician A further affirmed that once he and the Respondent filed the 2012 Core Duties Delegation Agreement, the Respondent was able to perform the duties listed in ¶ 37, above under his supervision.

45. Physician A stated that he did not train the Respondent to excise malignant lesions or to perform arthrocentesis or trigger point injections. He recalled that he observed her performing arthrocentesis on one or more occasions to ensure she was performing the procedure properly.

V. The Respondent's Under-Oath Interview

46. On December 6, 2022, in furtherance of the Board's investigation, Board staff interviewed the Respondent under oath.

47. The Respondent stated that when completing the 2012 Core Duties Delegation Agreement, she listed "the examples of the five advanced duties that I performed most often in descending order, so that was, 'incision and drainage of abscess, wart or skin-lesion removal, suturing, an appropriate splinting,' so that was a list of the five

examples . . . I would have put – as a sixth would have been versa, aspiration and injection, trigger-point injections, joint injections, but it was my understanding that, you know, I had listed five examples and included in that minor surgical procedures such as joint injections, even though it wasn't specifically listed.”

48. The Respondent affirmed she was “was under the impression” that she was authorized to perform the advanced duties at issue in the instant case because the Board had approved those duties when it approved the 2012 Core Delegation Agreement.

49. The Respondent further stated that she believed that in 2011 she had filed the paperwork to receive Board authorization to perform the advanced duties at issue but could not locate a copy of that submission.

50. The Respondent continued: “I thought, again, it was the – the request for the advanced duties, which we included on that [2012] delegation agreement, but I thought I had requested that previously as well as on the delegation agreement.”

51. The Respondent confirmed that from 2012 to 2021, she had not transmitted to the Board any procedure logs to obtain authorization to perform advanced duties while under the supervision of Physician A.

CONCLUSIONS OF LAW

Based on the foregoing Findings of Fact, Panel A concludes as a matter of law that the Respondent is guilty of performing delegated medical acts beyond the scope of the delegation agreement filed with the Board or after notification from the Board that an advanced duty has been disapproved, in violation of Health Occ. § 15-314(a)(41); and failing to comply with any State or federal law pertaining to the practice as a physician

assistant, in violation of Health Occ. § 15-314(a)(45). Panel A dismisses the charge of unprofessional conduct in the practice of medicine, Health Occ. § 15-314(a)(3)(ii).

ORDER

It is thus by a majority of a quorum of Disciplinary Panel A of the Board hereby:

ORDERED that the Respondent is **REPRIMANDED**; and it is further

ORDERED that within **ONE (1) YEAR**, the Respondent shall pay a civil fine of **\$2,500.00 (TWO THOUSAND AND FIVE HUNDRED DOLLARS)**. The Payment shall be by money order or bank certified check made payable to the Maryland Board of Physicians and mailed to P.O. Box 37217, Baltimore, Maryland 21297. The Board will not renew or reinstate the Respondent's license if the Respondent fails to timely pay the fine to the Board; and it is further

ORDERED that the effective date of the Consent Order is the date the Consent Order is signed by the Executive Director of the Board or her designee. The Executive Director signs the Consent Order on behalf of the disciplinary panel which has imposed the terms and conditions of this Consent Order; and it is further

ORDERED that this Consent Order is a public document. *See* Health Occ. §§ 1-607, 14-411.1(b)(2) and Gen. Prov. § 4-333(b)(6).

07/11/2023
Date

Signature On File

Christine A. Farrelly, Executive Director
Maryland State Board of Physicians

CONSENT

I, Jennifer L. Mohler, PA-C, acknowledge that I have consulted with counsel before signing this document.

By this Consent, I agree to be bound by this Consent Order and all its terms and conditions and understand that the disciplinary panel will not entertain any request for amendments or modifications to any condition.

I assert that I am aware of my right to a formal evidentiary hearing, pursuant to Md. Code Ann., Health Occ. § 15-315 and Md. Code Ann., State Gov't §§ 10-201 *et seq.* concerning the pending charges. I waive this right and have elected to sign this Consent Order instead.

I acknowledge the validity and enforceability of this Consent Order as if entered after the conclusion of a formal evidentiary hearing in which I would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on my behalf, and to all other substantive and procedural protections as provided by law. I waive those procedural and substantive protections. I acknowledge the legal authority and the jurisdiction of the disciplinary panel to initiate these proceedings and to issue and enforce this Consent Order.

I voluntarily enter into and agree to comply with the terms and conditions set forth in the Consent Order as a resolution of the charges. I waive any right to contest the Findings of Fact and Conclusions of Law and Order set out in the Consent Order. I waive all rights to appeal this Consent Order.

I sign this Consent Order, without reservation, and fully understand the language and meaning of its terms.

6/24/23
6/20/23 J
Date

Signature On File

Jennifer L. Mohler, PA-C

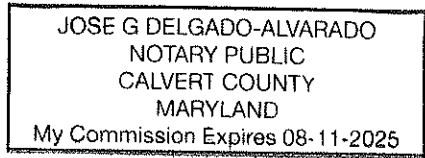
NOTARY

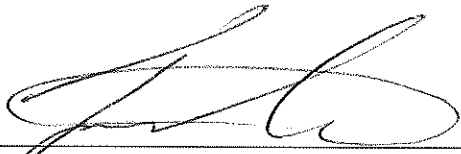
STATE OF Maryland

CITY/COUNTY OF Calvert

I HEREBY CERTIFY that on this 29 day of June,
2023, before me, a Notary Public of the State and County aforesaid, personally appeared
Jennifer L. Mohler, PA-C, and gave oath in due form of law that the foregoing Consent
Order was her voluntary act and deed.

AS WITNESS, my hand and Notary Seal.





Notary Public

My Commission Expires: 08-11-25