

IN THE MATTER OF

*

BEFORE THE

RONALD E. MILLER, M.D.

*

MARYLAND STATE

Respondent

*

BOARD OF PHYSICIANS

License Number: D26499

*

Case Number: 2221-0146

* * * * *

CONSENT ORDER

On June 7, 2022, Disciplinary Panel A (“Panel A”) of the Maryland State Board of Physicians (the “Board”) charged **Ronald E. Miller, M.D.** (the “Respondent”), License Number D26499, under the Maryland Medical Practice Act (the “Act”), Md. Code Ann., Health Occ. §§ 14-101 *et seq.* (2021 Repl. Vol.). Panel A charged the Respondent under the following provisions of the Act:

Health Occ. § 14-404. License denial, suspension, or revocation.

(a) *In general.* - Subject to the hearing provisions of § 14-405 of this subtitle, a disciplinary panel, on the affirmative vote of a majority of the quorum of the disciplinary panel, may reprimand any licensee, place any licensee on probation, or suspend or revoke a license if the licensee:

...

(22) Fails to meet appropriate standards as determined by appropriate peer review for the delivery of quality medical and surgical care performed in an outpatient surgical facility, office, hospital, or any other location in this State;

...

(40) Fails to keep adequate medical records as determined by appropriate peer review[.]

On September 14, 2022, 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 and Order.

FINDINGS OF FACT

Panel A finds:

I. BACKGROUND

1. At all times relevant to the charges, the Respondent was and is licensed to practice medicine in the State of Maryland. The Respondent was initially licensed to practice medicine in Maryland on or about June 11, 1981, under License Number D26499. His license is currently active through September 30, 2023, subject to renewal.

2. The Respondent is a solo practitioner with a medical office in Frederick County, Maryland (the “Office”)¹. He also practices at a medical facility in Frederick County and a medical facility in Carroll County, Maryland.

3. On or about April 1, 2021, the Board received an anonymous complaint (the “Complaint”) from an individual claiming to be a “board-certified physician in Maryland” who alleged that he or she has treated “several” of the Respondent’s patients over the last few years and these patients say the Respondent “‘needs to retire,’ and ‘He takes a very hands-off approach.’” Further, the Complainant alleged that he or she recently saw one of the Respondent’s patients “and noticed that [the Respondent] had severely mismanaged

¹ To ensure confidentiality and privacy, the names of individuals and entities involved in this case, other than the Respondent, are not disclosed in this document. The Respondent may obtain the identity of all individuals/entities referenced in this document by contacting the Administrative Prosecutor.

this person's medical problems," which caused the Complainant to be concerned about "patient safety."

II. INVESTIGATION

4. The Board opened an investigation into the Complaint.

5. On or about May 12, 2021, the Board sent a *subpoena duces tecum* and Certification of Medical Records forms to the Respondent. The *subpoena duces tecum* directed him to produce the complete medical records for six named patients to the Board within 10 business days.

6. On or about June 4, 2021 and on or about June 9, 2021, the Board received medical records for the six named patients and signed Certification of Medical Records forms from the Respondent.

7. On or about July 21, 2021, the Board notified the Respondent about the Complaint and requested that he provide a written response to the allegations. The Board enclosed a *subpoena duces tecum* and Certification of Medical Records forms. The *subpoena duces tecum* directed the Respondent to produce the complete medical records for another six named patients to the Board within 10 business days.

8. On or about August 9, 2021, the Board received the Respondent's response to the allegations, medical records for the six named patients, and signed Certification of Medical Records forms.

9. On or about September 7, 2021, the Board referred the 12 patient records obtained through its investigation to a peer review entity for review. Two peer reviewers, each board-certified in internal medicine, separately reviewed the patient records.

10. On or about November 6, 2021, the Board received the peer reviewers' completed reports.

11. The peer reviewers concurred that the Respondent failed to meet appropriate standards for the delivery of quality medical and surgical care for eight patients (patients 3, 5, 6, 7, 8, 9, 10, and 11). The peer reviewers cited the following reasons, among others, for their conclusion that the Respondent did not meet the standards for the delivery of quality medical care:

- a. The Respondent prescribed and refilled medications, including but not limited to opioid pain medications and benzodiazepines, without sufficient diagnostic and/or clinical findings (patients 3, 5, 7, 8, 9, 10, and 11);
- b. The Respondent continued to prescribe and refill medications, including but not limited to opioid pain medications, in the presence of noncompliant behavior (e.g., discordant urine screens) with no termination of treatment or attempts to taper the patients off of opioids (patients 9 and 10);
- c. The Respondent prescribed a combination of opioids with benzodiazepines and/or sedatives without clear counseling about the risks of taking the medications together (patients 8 and 11);
- d. The Respondent failed to conduct routine review of patients' Prescription Drug Monitoring Program (PDMP) reports (patients 5, 7, 8, 9, and 11);
- e. The Respondent failed to consider or routinely attempt to refer patients for alternative treatments, such as physical therapy (patients 3, 5, 6, 8, 9, and 10); and
- f. The Respondent prescribed opioids in excess of 90 morphine milligram equivalents (MME) per day without also prescribing naloxone (patients 9 and 11).

12. The peer reviewers also concurred that the Respondent failed to maintain adequate medical records for two patients (patients 7 and 9). The peer reviewers cited the following reasons, among others, for their conclusion that the Respondent failed to maintain adequate medical records: the failure to clearly document patients' symptoms; the failure to document which symptoms indicated which medications; the failure to document attempts to re-evaluate opioid therapy; the failure to conduct regular laboratory tests to monitor use of medications; and the failure to include documentation, such as magnetic resonance imaging ("MRI") reports and discharge summaries from hospitalizations, in patient charts.

CONCLUSIONS OF LAW

Based on the foregoing Findings of Fact, Panel A concludes as a matter of law that the Respondent failed to meet appropriate standards as determined by appropriate peer review for the delivery of quality medical and surgical care, in violation of Health Occ. § 14-404(a)(22) and failed to keep adequate medical records as determined by appropriate peer review, in violation of Health Occ. § 14-404(a)(40).

ORDER

It is thus by Disciplinary Panel A hereby:

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

ORDERED that the Respondent is placed on **PROBATION** for a minimum of **ONE (1) YEAR.**² During probation, the Respondent shall comply with the following terms and conditions of probation:

1. The Respondent is prohibited from prescribing and dispensing opioids and benzodiazepines until after the Respondent has successfully completed the courses described in probation condition two (2) and has a supervisor approved by the Panel as described in probation condition (3). The prohibition on prescribing and dispensing may be administratively terminated through an Order of the Panel upon the Respondent's proof of successful completion of the courses and after the Panel has approved the Respondent's proposed supervisor;
2. Within **SIX (6) MONTHS**, the Respondent is required to take and successfully complete a course in medical recordkeeping and a course in prescribing opioids and benzodiazepines. The following terms apply:
 - (a) it is the Respondent's responsibility to locate, enroll in and obtain the disciplinary panel's approval of the course before the course is begun;
 - (b) the Respondent must provide documentation to the disciplinary panel that the Respondent has successfully completed the course;
 - (c) the courses may not be used to fulfill the continuing medical education credits required for license renewal;
 - (d) the Respondent is responsible for the cost of the courses;

² If the Respondent's license expires during the period of probation, the probation and any conditions will be tolled.

3. The Respondent shall be subject to supervision for a minimum of one year (four quarterly reports)³ by a disciplinary panel-approved supervisor who is board-certified in internal medicine as follows:

- (a) within **30 CALENDAR DAYS** of the effective date of this Consent Order, the Respondent shall provide the disciplinary panel with the name, pertinent professional background information of the supervisor whom the Respondent is offering for approval, and written notice to the disciplinary panel from the supervisor confirming his or her acceptance of the supervisory role of the Respondent and that there is no personal or professional relationship with the supervisor;
- (b) the Respondent's proposed supervisor, to the best of the Respondent's knowledge, should not be an individual who is currently under investigation, and has not been disciplined by the Board within the past five years;
- (c) if the Respondent fails to provide a proposed supervisor's name within 30 calendar days from the effective date of the order, the Respondent's license shall be automatically suspended from the 31st day until the Respondent provides the name and background of a supervisor;
- (d) the disciplinary panel, in its discretion, may accept the proposed supervisor or request that the Respondent submit a name and professional background, and written notice of confirmation from a different supervisor;
- (e) the supervision begins after the disciplinary panel approves the proposed supervisor;
- (f) the disciplinary panel will provide the supervisor with a copy of this Consent Order and any other documents the disciplinary panel deems relevant;

³ If the Respondent is not practicing medicine, the supervision shall begin when the Respondent resumes the practice of medicine and the disciplinary panel has approved the proposed supervisor. The Respondent shall submit the name of a proposed supervisor within 30 days of resuming the practice of medicine and shall be subject to supervision by a disciplinary panel approved supervisor upon the return to the practice of medicine.

- (g) the Respondent shall grant the supervisor access to patient records selected by the supervisor, which shall, to the extent practicable, focus on the type of treatment at issue in the Respondent's charges;
- (h) if the supervisor for any reason ceases to provide supervision, the Respondent shall immediately notify the Board and shall not practice medicine beyond the 30th day after the supervisor has ceased to provide supervision and until the Respondent has submitted the name and professional background, and written notice of confirmation, from a proposed replacement supervisor to the disciplinary panel;
- (i) it shall be the Respondent's responsibility to ensure that the supervisor:
 - (1) reviews the records of 10 patients each month, such patient records to be chosen by the supervisor and not the Respondent;
 - (2) meets in-person with the Respondent at least once each month and discuss in-person with the Respondent the care the Respondent has provided for these specific patients;
 - (3) be available to the Respondent for consultations on any patient;
 - (4) maintains the confidentiality of all medical records and patient information;
 - (5) provides the Board with quarterly reports which detail the quality of the Respondent's practice, any deficiencies, concerns, or needed improvements, as well as any measures that have been taken to improve patient care; and
 - (6) immediately reports to the Board any indication that the Respondent may pose a substantial risk to patients;
- (j) the Respondent shall follow any recommendations of the supervisor;
- (k) if the disciplinary panel, upon consideration of the supervisory reports and the Respondent's response, if any, has a reasonable basis to believe that the Respondent is not meeting the standard of quality care or failing to keep adequate medical records in his or

her practice, the disciplinary panel may find a violation of probation after a hearing; and it is further

ORDERED that the Respondent shall not apply for early termination of probation; and it is further

ORDERED that, after the Respondent has complied with all terms and conditions of probation and the minimum period of probation imposed by the Consent Order has passed, the Respondent may submit to the Board a written petition for termination of probation. After consideration of the petition, the probation may be terminated through an order of the disciplinary panel. The Respondent may be required to appear before the disciplinary panel to discuss his petition for termination. The disciplinary panel may grant the petition to terminate the probation, through an order of the disciplinary panel, if the Respondent has complied with all probationary terms and conditions and there are no pending complaints relating to the charges; and it is further

ORDERED that a violation of probation constitutes a violation of the Consent Order;

ORDERED that, if the Respondent allegedly fails to comply with any term or condition imposed by this Consent Order, the Respondent shall be given notice and an opportunity for a hearing. If the disciplinary panel determines there is a genuine dispute as to a material fact, the hearing shall be before an Administrative Law Judge of the Office of Administrative Hearings followed by an exceptions process before a disciplinary panel; and if the disciplinary panel determines there is no genuine dispute as to a material fact,

the Respondent shall be given a show cause hearing before a disciplinary panel; and it is further

ORDERED that after the appropriate hearing, if the disciplinary panel determines that the Respondent has failed to comply with any term or condition imposed by this Consent Order, the disciplinary panel may reprimand the Respondent, place the Respondent on probation with appropriate terms and conditions, or suspend with appropriate terms and conditions, or revoke the Respondent's license to practice medicine in Maryland. The disciplinary panel may, in addition to one or more of the sanctions set forth above, impose a civil monetary fine on the Respondent; and it is further

ORDERED that the Respondent is responsible for all costs incurred in fulfilling the terms and conditions of this Consent Order; 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 or her designee 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).

Signature on File

10/17/2022
Date

Christine A. Farrelly
Executive Director
Maryland Board of Physicians

CONSENT

I, Ronald E. Miller, M.D., 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. § 14-405 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.

Signature on File

10-7-22
Date

Ronald E. Miller, M.D.

NOTARY

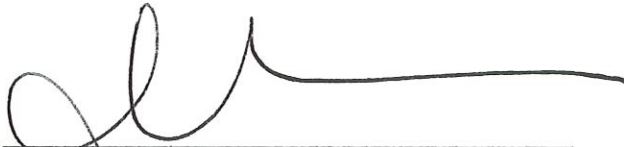
STATE OF Maryland

CITY / COUNTY OF Frederick

I HEREBY CERTIFY that on this 7 day of October 2022,
before me, a Notary Public of the foregoing State and City/County, personally appeared
Ronald E. Miller, M.D., and made oath in due form of law that signing the foregoing
Consent Order was his voluntary act and deed.

AS WITNESSETH my hand and notarial seal.

JENNIFER CABRERA
Notary Public-Maryland
Frederick County
My Commission Expires
August 31, 2024



Notary Public

My Commission expires: 8/31/24