

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF PROFESSIONAL LICENSING
BOARD OF MEDICINE
DISCIPLINARY SUBCOMMITTEE

In the Matter of

XAVIER WHITE, M.D.
License No. 43-01-405376,

File No. 43-20-001883

Respondent.

CONSENT ORDER AND STIPULATION

CONSENT ORDER

On July 30, 2021, the Department of Licensing and Regulatory Affairs executed an Administrative Complaint charging Respondent with violating the Public Health Code, MCL 333.1101 *et seq.*

The parties have stipulated that the Disciplinary Subcommittee (DSC) of the Michigan Board of Medicine may enter this Consent Order. The DSC of the Michigan Board of Medicine has reviewed this Consent Order and Stipulation and agrees that the public interest is best served by resolution of the outstanding Complaint.

Respondent neither admits nor denies the facts alleged in the Complaint but agrees that the Disciplinary Subcommittee (DSC) of the Michigan Board of Medicine shall treat the allegations as true for purposes of this Consent Order and Stipulation. Therefore, IT IS FOUND that the facts alleged in the Complaint are true and constitute violations of MCL 333.7303a(4), MCL 333.16221(a), and (w). Counts II and III, alleging violations of MCL 333.16221(b)(i) and (c)(iv), respectively, are dismissed with prejudice.

Accordingly, IT IS ORDERED that for the cited violations of the Public Health Code:

Respondent is FINED \$1,000.00, to be paid to the State of Michigan within 6 months of the effective date of this Order. Respondent shall **direct payment to the Department of Licensing and Regulatory Affairs, Enforcement Division, Compliance Section, P.O. Box 30189, Lansing, MI 48909**. The fine shall be paid by check or money order, made payable to the State of Michigan, and shall clearly display **File Number 43-20-001883**.

If Respondent violates any provision of this Order the DSC may take disciplinary action pursuant to Mich Admin Code, R 338.1632 and MCL 333.16221(h).

This Order shall be effective 30 days from the date signed by the Board, as set forth below.

MICHIGAN BOARD OF MEDICINE

By:  for
Chairperson, Disciplinary Subcommittee

Dated: March 15, 2023

STIPULATION

1. Respondent does not contest the allegations of fact and law in the Complaint. Respondent understands that, by pleading no contest, Respondent does not admit the truth of the allegations but agrees the DSC of the Michigan Board of Medicine may treat the allegations as true for the resolution of the complaint and may enter an order treating the allegations as true. Therefore, the DSC finds that the facts alleged in the Complaint are true and constitute violations of MCL 333.7303a(4), MCL 333.16221(a), and (w).

2. Respondent understands and intends that by signing this Stipulation, Respondent is waiving the right, pursuant to the Public Health Code, the rules promulgated thereunder, and the Administrative Procedures Act, MCL 24.201 *et seq.*, to require the Department to prove the charges set forth in the Complaint by presentation of evidence and legal authority, and Respondent is waiving the right to appear with an attorney and such witnesses as Respondent may desire to present a defense to the charges.

3. This matter is a public record required to be published and made available to the public pursuant to the Michigan Freedom of Information Act, MCL 15.231 *et seq.*, and this action will be reported to the National Practitioner Data Bank and any other entity as required by state or federal law.

4. Venkat Rao, MD, served as conferee and supports this resolution.

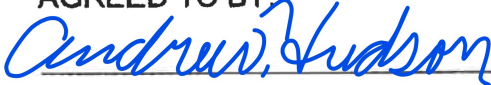
Dr. Rao and the Department took the following factors into consideration in the formulation of this Order:

- a. Respondent does not have a disciplinary history.
- b. In a compliance conference with a Bureau representative and a Board conferee, Respondent stated that patients with anxiety are tried on an antidepressant first and switched to a benzodiazepine if that does not work. He also stated that he receives a lot of referrals from primary care physicians for anxiety.
- c. Respondent stated that he has implemented procedures to correct the deficiencies identified in the complaint, including utilizing urine drug screens on patients with red flags for abuse, decreasing benzodiazepine usage, and ensuring MAPS is checked more consistently.
- d. Following the compliance conference, the Department verified through MAPS that Respondent's usage of MAPS has improved significantly and that his benzodiazepine prescribing has decreased.
- e. Following the compliance conference, Respondent provided the current records of some of the patients identified in the administrative complaint. These records showed that Respondent had implemented the changes he referenced above.
- f. Respondent submitted evidence of completing 8 hours of continuing education in addiction psychiatry and 10 hours in medical record keeping, specifically the Medical Record Keeping Seminar offered by the Center for Personalized Education for Physicians.

5. A Department representative or Dr. Rao may discuss this matter with the DSC and recommend acceptance of the resolution set forth in this Order.

6. This proposal is conditioned upon acceptance by the DSC. Respondent and the Department expressly reserve the right to further proceedings without prejudice should the Order be rejected.

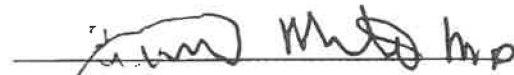
AGREED TO BY:

 signing for

Forrest Pasanski, Director
Enforcement Division
Bureau of Professional Licensing

Dated: 01/25/23

AGREED TO BY:



Xavier White, M.D.
Respondent

Dated: 1-23-23

AGREED TO BY:



Marissa A Cicotte (P73474),
Attorney for Respondent

Dated: 1-23-23

ses/pc

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF PROFESSIONAL LICENSING
BOARD OF MEDICINE
DISCIPLINARY SUBCOMMITTEE

In the Matter of

XAVIER WHITE, M.D.
License No. 43-01-405376,

File No. 43-20-001883

Respondent.

ADMINISTRATIVE COMPLAINT

The Michigan Department of Licensing and Regulatory Affairs, by Forrest Pasanski, Director, Enforcement Division, Bureau of Professional Licensing, complains against Respondent Xavier White, M.D. as follows:

1. The Michigan Board of Medicine is an administrative agency established by the Public Health Code, MCL 333.1101 *et seq.* Pursuant to MCL 333.16226, the Board's Disciplinary Subcommittee (DSC) is empowered to discipline licensees for Code violations.

2. Respondent is currently licensed to practice medicine in the state of Michigan. Respondent also holds an active controlled substance license.

3. At times relevant to this Complaint, Respondent was engaged in private practice in Detroit, Michigan.

4. Alprazolam (e.g. Xanax), a schedule 4 controlled substance, is a benzodiazepine used to treat anxiety disorders and panic disorder. Alprazolam is a commonly abused and diverted drug, particularly in its 1 mg and 2 mg dosages.

5. The federal Centers for Disease Control and Prevention (CDC) guidelines for opioid prescribing direct providers to avoid prescribing opioid pain medication and benzodiazepines concurrently whenever possible.

MAPS Data

6. The Department reviewed data from the Michigan Automated Prescription System (MAPS), the State of Michigan's prescription monitoring program, which gathers data regarding controlled substances dispensed in Michigan. MAPS data revealed that Respondent ranked among Michigan's highest-volume prescribers of commonly abused and diverted controlled substances in 2019, 2020 and the first two quarters of 2021:

<u>Drug</u>	<u>2019</u>	<u>2020</u>	<u>2021 Q1</u>	<u>2021 Q2</u>
Alprazolam 1mg	32	31	35	41
Alprazolam 2mg	10	11	9	8

7. From February 14, 2019, through February 14, 2021, records show that Respondent requested MAPS reports on patients around 40% of the time prior to authorizing a new controlled substance prescription.

8. MAPS records show that Respondent frequently prescribed a benzodiazepine when another prescriber had already prescribed an opioid.

Expert Overview of Respondent's Practice

9. As part of an investigation of Respondent's prescribing practices, the Department received and analyzed medical records of five (5) of Respondent's patients.

10. An expert reviewed the individual medical files Respondent produced and discovered the following deficiencies consistently across files:

- (a) Respondent failed to document informed consent prior to initiating treatment and prescribing controlled substances.

- (b) Respondent failed to document addressing the overdose risk of controlled substances with his patients and the risks of taking a benzodiazepine with an opioid.
- (c) Respondent failed to document obtaining and reviewing a MAPS report prior to prescribing a controlled substance.
- (d) Respondent failed to document a rationale for prescribing Xanax at the dosages prescribed over a prolonged period of time.
- (e) Respondent failed to document addressing inconsistent urine drug screens in patients.
- (f) Respondent's overall documentation fails to show that Respondent was engaged in a legitimate practice for the purposes of diagnosis and treatment of medical disorders.
- (g) Respondent's overall care of patients was negligent and below the minimum standard of care.

COUNT I

Respondent's conduct constitutes a violation of a general duty, consisting of negligence or failure to exercise due care, including negligent delegation to or supervision of employees or other individuals, or a condition, conduct, or practice that impairs, or may impair, the ability safely and skillfully to engage in the practice of the health profession in violation of MCL 333.16221(a).

COUNT II

Respondent's conduct, as set forth above, demonstrates Respondent's "departure from, or failure to conform to, minimal standards of acceptable and prevailing practice for the health profession, whether or not actual injury to an individual occurs", and accordingly "incompetence," in violation of MCL 333.16221(b)(i).

COUNT III

Respondent's conduct, as set forth above, constitutes selling, prescribing, giving away, or administering drugs for other than lawful diagnostic or therapeutic purposes, in violation of MCL 333.16221(c)(iv).

COUNT IV

Respondent failed to obtain and review a MAPS report prior to prescribing a controlled substance, contrary to MCL 333.7303a(4) and in violation of MCL 333.16221(w).

RESPONDENT IS NOTIFIED that, pursuant to MCL 333.16231(8), Respondent has 30 days from the date of receipt of this Complaint to submit a written response to the allegations contained in it. Pursuant to section 16192(2) of the Code, Respondent is deemed to be in receipt of the complaint three (3) days after the date of mailing listed in the attached proof of service. The written response shall be submitted by email to the Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing to BPL-DMS@michigan.gov. If unable to submit a response by email, Respondent may submit by regular mail to the Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing, P.O. Box 30670, Lansing, MI 48909.

Respondent's failure to submit an answer within 30 days is an admission of all Complaint allegations. If Respondent fails to answer, the Department shall transmit this complaint directly to the Board's Disciplinary Subcommittee to impose a sanction pursuant to MCL 333.16231(9).

MICHIGAN DEPARTMENT OF
LICENSING AND REGULATORY AFFAIRS

Dated: 7/30/2021

 signing for

By: Forrest Pasanski, Director
Enforcement Division
Bureau of Professional Licensing

ses/pc