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

In the Matter of

JOYCE MARIE GREGORY, M.D.
License No. 43-01-086608
Respondent .

File No. 43-21-003012

CONSENT ORDER

On January 5, 2023, 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 Michigan Board of Medicine's Disciplinary Subcommittee (DSC) may enter this Consent Order and Stipulation. The DSC has reviewed this Consent Order and Stipulation and agrees that the public interest is best served by resolution of the outstanding Complaint.

Therefore, IT IS FOUND that the facts alleged in the Complaint are true and constitute violations of MCL 333.16221(a) and (b)(i).

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

Respondent is placed on PROBATION for a minimum period of one (1) year not to exceed two (2) years, commencing on the effective date of this Order. The Probationary period is reduced only while Respondent is employed as a physician. The terms of probation are as follows:

1. MEETING WITH BOARD-APPROVED REVIEWER.

   a. Within 30 days of the effective date of this Order, Respondent shall submit to the Department written correspondence requesting approval of a proposed physician reviewer from a Board-accepted monitoring organization. Respondent shall provide a copy of this Order and the Administrative Complaint from file 43-20-001905, dated August 4, 2021, to the proposed physician reviewer before requesting approval of the proposed physician reviewer. Respondent shall not work in any capacity for which a physician license is required until Respondent receives written confirmation from the Department that a physician reviewer was approved.

      When requesting approval of a proposed physician reviewer from the Department, the request shall include, at a minimum, the reviewer's name, address, telephone number, curriculum vitae, and monitoring organization affiliation, if the reviewer is associated with a monitoring organization. **Respondent shall ensure that the correspondence is submitted to the Department as provided below.**

   b. The physician reviewer shall review Respondent's professional practice from the date on which the Board approves the physician reviewer forward and provide a total of four (4) reports to the Department focusing on Respondent's professional practice, records, and any deficiencies alleged in the Administrative Complaint.

      The reviewer must make a determination in his or her reports to the Department whether Respondent is complying with the minimal standards of acceptable and prevailing practice.

c. Respondent shall ensure that the correspondence is submitted to the Department at **BPL-Monitoring@michigan.gov**.

d. Respondent shall be responsible for scheduling the time and place of the meetings with the identified and approved reviewer.

Respondent shall ensure that the reviewer has access to reports from the prescription drug monitoring program from the jurisdiction that she is practicing in (ex., MAPS or I-STOP) so that the reviewer may select the patients to review.

Respondent shall meet with the reviewer every three (3) months to review Respondent's professional practice from the date on which the Board approves the physician reviewer forward, as described in (b) and at each meeting, shall review with Respondent a minimum of ten (10) patient charts randomly selected by the reviewer, or all patient charts, should the number of patients total fewer than ten (10). The initial meeting shall occur prior to the end of the third month of probation.

The reviewer shall submit reports to the Department as set forth below. In the event that Respondent, at any time,

i. fails to comply with the minimal standards of acceptable and prevailing practice; or

ii. appears unable to practice with reasonable skill and safety.

then the reviewer shall notify the Department immediately.

2. AUTHORIZATION TO CONTACT. Respondent authorizes the Department or any authorized representative periodically to contact the physician reviewer or his or her authorized representative.

3. RESIDENCY AND PRACTICE CHANGE. Respondent shall report any change of residency or practice no more than 15 days after the change occurs. Compliance with this provision does not satisfy the requirements of MCL 333.16192(1) and 333.16221(g), regarding Respondent's duty to report name or mailing address changes to the Department.

4. REPORT OF NON-EMPLOYMENT. If at any time during the period of probation Respondent is not employed in the licensed profession, Respondent shall file a report of non-employment with the Department within 15 days after becoming unemployed. Respondent shall file a report of non-employment on a quarterly basis until Respondent returns to employment in the licensed profession.

5. TIMELY FILING OF REPORTS. It is Respondent's responsibility to ensure timely filing of all reports and other documents required by this Order. Failure to file a report or other document within the time limitations provided is a violation of this Order.

6. COMPLIANCE WITH THE PUBLIC HEALTH CODE. Respondent shall comply with all applicable provisions of the Public Health Code and rules promulgated thereunder.

Respondent is FINED **$1,000.00** to be paid to the State of Michigan within 90 days of the effective date of this Order. The fine shall be paid electronically through Respondent's MiPLUS account OR by mail with a check or money order directly to: Department of Licensing and Regulatory Affairs, Enforcement Division, Compliance Section, P.O. Box 30189, Lansing, MI 48909. If the fine is paid by mail, the check or money order shall be made payable to the State of Michigan and shall clearly display File Number **43-21-003012.**

Respondent shall upload reports and other documents to the EDOC Record found under the Enforcement tab in Respondent's MiPLUS account or send as an email attachment to BPL-Monitoring@michigan.gov. Questions, requests for approval, or other communications shall be emailed to BPL-Monitoring@michigan.gov. Respondent shall be solely responsible for payment of all costs incurred in complying with the terms of this Order.

If Respondent fails to comply with the terms and conditions of this Order, Respondent shall be in violation of Mich Admin Code, R 338.1632 and MCL 333.16221(h) of the Public Health Code.

Respondent is currently subject to the terms of a Consent Order entered by the Board of Medicine's Disciplinary Subcommittee on July 20, 2022, under file number 43-20-001905. The July 20, 2022, Order remains in full force and effect. Respondent has successfully completed the continuing education and has timely paid the fine required by that Order. The remaining terms of the July 20, 2022, Consent Order are brought forth and fully incorporated into this Consent Order.

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

MICHIGAN BOARD OF MEDICINE

Lauram Brown for

By: Chairperson, Disciplinary Subcommittee

Dated: July 17, 2024

STIPULATION

The Department of Licensing and Regulatory Affairs and Respondent stipulate as follows:

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 that the Disciplinary Subcommittee may treat the allegations as true for 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 333.16221(a) and (b)(i).

2. Respondent understands and intends that, by signing this Stipulation, Respondent waives the right, under the Public Health Code, its administrative rules, and the Administrative Procedures Act, MCL 24.201 *et seq,* to require the Department to prove the charges set forth in the Complaint by presenting evidence and legal authority, and Respondent is waiving the right to appear with an attorney and witnesses 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. This Order is approved as to form and substance by Respondent and the Department and may be entered as the final order of the DSC in this matter.

5. Mustafa Hamad, M.D. supports this resolution. Dr. Hamad or a Department representative may discuss this matter with the DSC and recommend acceptance of the resolution set forth in this Order.

6. Dr. Hamad and the parties considered the following factors in agreeing to the above terms:

a. Respondent requested a settlement in this case in order to save the time and expense of an administrative hearing.

b. Dr. Hamad reviewed the case materials and recognized that the treatment of the patients in this case were close in time to the patients in case 43-20-001905. The deficiencies found were also similar to those in 43-20-001905.

c. Respondent, in case 43-20-001905, completed the intensive three-day controlled substance course offered by the Center for Personalized Education for Professionals (CPEP) and additional continuing education in the area of documentation as required by the resolution in case 43-20-001905.

d. Respondent has moved out of state and was employed as a psychiatrist. However, Respondent was unable to continue this employment due to the employer's refusal to participate in the physician monitoring required in case 43-20-001905. Respondent is currently seeking to obtain employment as a psychiatrist so she can complete the physician monitoring requirement.

7. This Order is effective only upon acceptance by the DSC. Respondent and the Department reserve the right to further proceedings without prejudice if the DSC rejects this Order.

Signatures on Next Page

Agreed to by:

Patrick Cole, Analyst
Regulation Section
Enforcement Division

Dated: May 29, 2024

Agreed to by:

Joyce M. Gregory, M.D.
Respondent

Dated: 05/28/24

Approved by:

Jason R. Sebolt (P66225),
Attorney for Respondent

Dated: 05/29/2024

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Respondent.

ADMINISTRATIVE COMPLAINT

The Michigan Department of Licensing and Regulatory Affairs, by Forrest Pasanski, Enforcement Division Director, Bureau of Professional Licensing, complains against Respondent Joyce M. Gregory, 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 violations of the Public Health Code.

2. Respondent holds a Michigan license to practice medicine. Respondent also holds an active controlled substance license and a drug treatment program prescriber license.

3. At times relevant to this Complaint, Respondent practiced medicine in Holland, Michigan.

4. Amphetamine salts (e.g., Adderall) are schedule 2 controlled substances.

5. Gabapentin (e.g., Neurontin) is a schedule 5 controlled substance used to treat, among other things, neuropathic pain and seizures. Gabapentin is known to be abused and diverted.

6. Hydrocodone is an opioid. Hydrocodone combination products (e.g., Norco), are Schedule 2 controlled substances due to their high potential for abuse.

7. Lisdexamfetamine (e.g., Vyvanse) is a central nervous system stimulant and a schedule 2 controlled substance.

8. Lorazepam (e.g., Ativan) is a schedule 4 benzodiazepine controlled substance.

9. 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.

DISCIPLINARY HISTORY

10. On October 4, 2021, The Department issued an Administrative Complaint against Respondent alleging over-prescribing and improper controlled substance practice for two patients.

11. On July 20, 2022, The Board of Medicine's DSC approved a Consent Order and Stipulation that placed Respondent on probation for a period of one year, which ordered Respondent to:

a. Meet with a physician reviewer quarterly for one year.

b. Complete four hours of continuing education in the area of documentation and also complete the Center for Personalized Education for Professionals course Prescribing Controlled Drugs: Critical Issues and Common Pitfalls; and

c. Pay a fine of $3,000.00.

CURRENT ALLEGATION

12. The Department received an allegation that Respondent was improperly prescribing controlled substances to patients RJ[1] and BO.

MICHIGAN AUTOMATED PRESCRIPTION SYSTEM (MAPS) DATA ANALYSIS

13. The Department reviewed data from MAPS, the State of Michigan's prescription monitoring program, which gathers data regarding controlled substances dispensed in Michigan.

14. MAPS data showed that Respondent prescribed patient RJ, on a long-term basis, Vyvanse 30mg one tablet per day, Vyvanse 40mg two tablets per day, and Adderall 20mg one tablet per day concurrently while another prescriber prescribed RJ hydrocodone-acetaminophen 10/325mg, four tablets per day. Additionally, Respondent would also intermittently prescribe RJ gabapentin 300mg or gabapentin 600mg.

15. MAPS data showed that Respondent prescribed patient BO, on a long-term basis, lorazepam 2mg two tablets per day concurrently with gabapentin 600mg four times per day. On July 3, 2019, Respondent last prescribed these medications to BO. The Department subsequently learned that BO passed away on July 17, 2019, with the cause of death listed as mixed-drug toxicity.

[1] Patient initials used to protect patient confidentiality.

INTERVIEW WITH RESPONDENT

16. As part of the investigation into Respondent's medical and prescribing practices, the Department obtained Respondent's records for patients RJ and BO, and a Department investigator interviewed Respondent.

17. On or about June 30, 2022, Respondent met with a Department investigator and provided the following general practice and patient-specific information:

a. Respondent is board-certified in psychiatry.

b. Respondent is currently employed in a practice in New York but was previously employed at Holland Hospital in Holland, Michigan.

c. In Holland, Respondent worked five days per week and saw approximately 10 patients per day.

d. Respondent stated she does not recall contacting BO's primary care physician (PCP) to discuss BO being prescribed an opioid by the PCP and concurrently being prescribed gabapentin and lorazepam by Respondent.

e. Respondent stated that she was unaware RJ had heart issues when she was prescribing RJ stimulants. However, Respondent stated that she did have access to RJ's medical records through the hospital system.

f. Respondent stated that she prescribed RJ two different stimulants concurrently despite RJ having a history of substance abuse.

EXPERT'S OBSERVATIONS

18. The Department retained an expert who reviewed the evidence collected during the Department's investigation and made the following general observations and patient-specific observations from reviewing patient RJ and BO's medical records:

a. Respondent failed to document assessing the risks and benefits of prescribing controlled substances.

b. Respondent failed to document assessing these patients for addiction and other substance abuse issues.

c. Respondent failed to document her rationale for prescribing controlled substances.

d. Respondent failed to document assessing her controlled substance prescribing as the cause of some of the patients' issues, such as anxiety, depression, and mania.

e. Respondent's controlled substance practice related to RJ and BO was 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, whether or not injury resulted.

f. Respondent's controlled substance practice to RJ and BO was a departure from or failure to conform to minimal standards of acceptable and prevailing practice for the profession whether or not actual injury to the individual occurred.

Patient BO:

g. Respondent failed to document whether her prescribing of gabapentin and lorazepam concurrently may have caused BO's lack of focus. Respondent prescribed Adderall for BO's lack of focus.

h. Respondent failed to document her rationale for prescribing lorazepam at the same time BO's PCP was prescribing opioids. These drugs can be dangerous in combination, which can lead to an overdose, and may have contributed to BO's overdose death.

Patient RJ:

i. Respondent failed to document her rationale for prescribing two stimulants to RJ, who has a substance

abuse history. Both Vyvanse and Adderall are contraindicated for a patient with a substance abuse history.

j. Respondent failed to document whether she assessed if RJ's depression was induced by the controlled substances prescribed to RJ. Vyvanse and Adderall are commonly associated with suicide attempts and overdoses. Respondent should have ruled out that her own prescribing caused the issues before making other diagnosis.

COUNT I

Respondent's conduct, as set forth above, evidences a violation of general duty, consisting of negligence or failure to exercise due care, including negligent delegation to or supervision of employees or other individuals, whether or not injury results, 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).

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

Andrew Hudson signing for

Dated: 1/5/23

By: Forrest Pasanski
Enforcement Division Director
Bureau of Professional Licensing

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