HEADLINES: Providers Who Make the News and Lessons we Learn

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Overview

- Why we look at bad providers
- What we learn from others
- How we can avoid a bad provider in our organization
- How we manage a surprise bad doctor

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We apologize in advance….

- This is not a reflection on any MSP or any hospital or medical organization
- The individuals who are included in this years presentation have practiced fraud and deceit on the organizations where they worked and the patient population they served
- Nothing in this presentation is meant to offend anyone or any organization and is offered only to help us learn and be aware

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Credentialing & Peer Review Purpose

- **Patient Safety!**

4

It Only Takes One

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Risk to the Organization of a Bad Provider

- Reputation
- Undesired Media Attention
- Third Party Lawsuits
- Reimbursement – Challenging Contract Negotiations
- Loss of Medical Staff
- Loss of Employees
- Unwillingness to engage in peer and quality review
- DOJ Investigation
- Loss of Accreditation

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Dr.(?) Christopher David Adams

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Dr.(?) Christopher David Adams 3/2/26

- A former Cookeville Regional Medical Center cardiologist has surrendered his medical license after admitting he faked a cancer diagnosis and falsified credentials to cover up an extramarital affair.
- Adams worked as a cardiologist for Tennessee Heart at Cookeville Regional Medical Center for five years until his termination in late 2023. **Hospital officials began an internal review of his cases in July 2023 after three patients associated with his care died within a two-day period.** Adams filed for medical leave on July 31 claiming he required treatment for cancer at Vanderbilt University Medical Center and the Cleveland Clinic.
- **Investigations revealed that Adams never suffered from cancer and did not train at the Cleveland Clinic as he had claimed. He admitted to submitting fraudulent letters of recommendation to support his fabrication regarding his medical training and treatment.**

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Dr.(?) Christopher David Adams

- The doctor moved to Baptist Health Lexington in Kentucky in 2024 where he subsequently resigned after staff reported he asked them to falsify supervision documents. The Virginia Department of Health Professions suspended the medical license held by Adams in August following the disciplinary actions taken in Kentucky and Tennessee.
- The Tennessee Board of Medical Examiners approved a consent order January 20 regarding Dr. Christopher David Adams following an investigation into his conduct. Adams voluntarily surrendered his license and waived his right to a hearing and judicial review regarding the findings.

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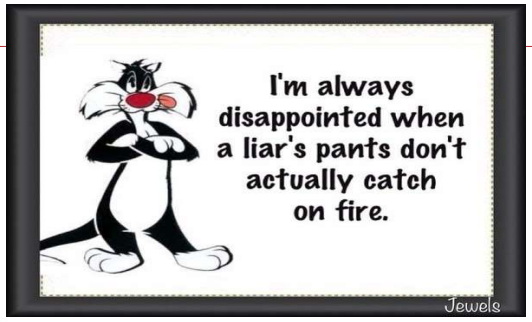

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Dr. Thomas Shaknovsky

- April 14, 2026 - A Florida grand jury recently indicted a general surgeon on second-degree manslaughter in connection with the death of a 70-year-old patient whose liver was removed during a procedure intended to remove his spleen. Arrested and charged with second degree manslaughter.
- In August 2024, Dr. Thomas Shaknovsky performed a laparoscopic splenectomy during which he mistakenly removed the patient's liver, resulting in fatal hemorrhage. Following the procedure, he reported that the patient died from a ruptured splenic artery aneurysm. However, the autopsy found no such rupture and instead confirmed that the patient's liver had been removed.
- **Importantly, this incident does not appear to have arisen in isolation.** Public reporting and regulatory materials reference prior adverse surgical events, including allegations of a wrong-organ procedure and another case resulting in patient death. **There are also reports that operating room staff had expressed concerns regarding the physician's competency, as well as allegations of inaccurate or misleading operative documentation.** Despite these indicators, public records from the Florida Dept. of Health state the physician has **"never been asked to or allowed to resign from or had any medical staff privileges restricted or revoked within the last 10 years."**

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Dr. Thomas Shaknovsky

- Florida's Surgeon General issued a 21-page emergency order suspending Shaknovsky's osteopathic physician license. His Alabama license was also suspended in 2024 and his New York license was suspended in 2025. In the filing from the Alabama Board of Medical Examiners seeking Shaknovsky's license suspension, Shaknovsky is accused of two other instances of malpractice, one of which the board alleges led to the death of another patient.
- In that case, the board accused Shaknovsky of removing part of a patient's pancreas during a routine surgery in May 2023, in which the patient was supposed to have their left adrenal gland removed. The board also accused Shaknovsky of removing part of a patient's intestine during another procedure in July 2023, causing a gastrointestinal perforation.

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Dr. Thomas Shaknovsky

- Licensed in multiple states (Florida, New York, Alabama)
- 2009 graduate Midwestern University
- Residency at Central Community Hospital
- Board certified general surgery
- Represented himself as colon and rectal surgeon in New Jersey but no evidence of verified training
- March 2023 surgery removed part of the pancreas rather than the adrenal gland
- August 2024 removed liver instead of spleen
- Staff questioned his competency

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Dr. Thomas Shaknovsky

- This case illustrates the risks "hiding in plain sight," where:
  - Adverse clinical outcomes and staff concerns may not have been meaningfully aggregated or escalated;
  - Credentialing and peer review mechanisms may have been underutilized or ineffective; and
  - Actionable warning signs did not result in timely intervention, including restriction or removal of privileges.
  - ***What could have been done differently?***

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New and Unfortunate Cases.....

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Dr. Derrick Todd

- Rheumatologist at Brigham and Women's Faulkner Hospital
- Master manipulator
- Groomed his patients
- He was their primary doctor and gynecologist
- Abused both men and women
- Opened office before and after hours
- Repeated rectal, vaginal and other sensitive exams
- Inappropriate comments during exams
- Complaints for years
- Two physicians submitted anonymous complaints

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Dr. Derrick Todd

- Class action lawsuits against, Todd, Brigham and Women's Hospital, other hospitals, and physician groups who employed him
- Legal theory: **"Failure to adequately supervise and protect patients"**

- In April 2024, NBC Boston reported the number of people to have accused Dr. Todd of sexual abuse to now be over 200. Patients claim Todd performed unnecessary, invasive exams for personal gratification. AP News tells the story of Kristin Fritz, where she recounts her harrowing experience with Dr. Derrick Todd. More than a decade after the incident, Fritz came forward, joining the over 200 women and several men in accusing Todd of sexual abuse and unnecessary exam.

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Protect Patients from Healthcare Abuse Act

- Introduced by Congresswoman Lori Trahan
- **WASHINGTON, DC** – Today, **Congresswoman Lori Trahan (MA-03)** partnered with **Representatives James P. McGovern (MA-02)** and **Debbie Dingell (MI-06)** to introduce the ***Protect Patients from Healthcare Abuse Act***, legislation that establishes clear, nationwide standards to protect patients during sensitive medical examinations and procedures. The bill follows outreach from survivors of physician sexual misconduct, including recent allegations involving Massachusetts doctor Derrick Todd.
- "Patients should never have to fear abuse in the exam room," said Congresswoman Trahan, a member of the House Energy and Commerce Committee's Health Subcommittee. **"The women who came forward to expose the sexual abuse they suffered at the hands of their physician showed extraordinary courage and made it impossible to ignore how badly the system failed to protect them.** This bill makes clear that abuse will not be excused, institutions will not be allowed to look the other way, and patients will finally have enforceable rights and real safeguards."

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Protect Patients from Healthcare Abuse Act

- Specifically the bill will require all Medicare-participating providers to comply with the following standards:
- **Patient Rights Notification:** Providers must give adult patients or their lawful surrogates written notice of their rights, including the right to be informed of their health status, to participate in planning their care, to provide informed consent before any service or procedure, and to request a trained chaperone during sensitive procedures.
- **Informed Consent Standards:** The bill defines "informed consent" as the patient's understanding of the risks, benefits, and alternatives of a service or procedure. Providers must ensure patients are fully informed before care is delivered.
- **Access to Trained Chaperones:** Upon request, providers must make a trained chaperone available during any sensitive procedure.
- **Chaperone Training Requirements:** Providers must train appropriate staff on how to protect patients' rights leading up to and during sensitive procedures.
- **Clear Definition of "Sensitive Procedures":** A sensitive procedure includes any exam, surgery, or procedure involving the genitalia, breasts, perianal region, or rectum, as well as any procedure the patient considers sensitive.

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Javaid Perwaiz, M.D.

Virginia Doctor Performed Hysterectomies Without Consent, Prosecutors Say

Javaid Perwaiz, an obstetrician and gynecologist, was arrested and charged with health care fraud. In one instance, he was accused of tying one patient's fallopian tubes without her knowledge, according to court documents.

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Javaid Perwaiz

- **Altered the estimated due dates of his pregnant patients to be earlier than they actually were**. By doing this, defendant ensured the appearance of compliance with the standard of care and medical necessity, while minimizing the chances that his patients would spontaneously deliver at a time when the defendant was not already scheduled to be at the hospital where he had privileges. As a result, he induced patients prior to 39 weeks of gestation, contrary to the medical standard of care.
- Persuaded women to undergo invasive and irreversible surgeries, such as hysterectomies, that were not medically necessary. For instance, **he falsely told patients that if they did not undergo a hysterectomy, they would develop (or that they already had) cancer.**

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Javaid Perwaiz

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Javaid Perwaiz

- May 18, 2021 – Sentenced to 59 years

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But what about the Hospital?????

- January 8, 2025 – Department of Justice Press Release
- NORFOLK, Va. – A federal grand jury returned an indictment today charging Chesapeake Regional Medical Center (CRMC) with healthcare fraud and conspiracy to defraud the United States and interference with government functions.

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Case 2:25-cr-00001-EWH-RJK Document 1 Filed 01/08/25 Page 1 of 31 PageID# 1

FILED
IN OPEN COURT
JAN - 8 2025
CLERK, U.S. DISTRICT COURT
NORFOLK, VA

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF VIRGINIA
Norfolk Division

UNITED STATES OF AMERICA
v.
CHESAPEAKE REGIONAL MEDICAL CENTER,
a/k/a CHESAPEAKE GENERAL HOSPITAL,
a/k/a CHESAPEAKE REGIONAL HEALTHCARE,
Defendant.

CRIMINAL NO. 2:25-cr-1

18 U.S.C. § 371
Conspiracy to Defraud the United States and Interfere with Government Functions
(Count 1)

18 U.S.C. §§ 1347 & 2
Health Care Fraud
(Count 2)

Criminal Forfeiture

INDICTMENT

January 2025 Term – At Norfolk, Virginia

THE GRAND JURY CHARGES THAT:

At all times relevant to this Indictment, unless otherwise stated:

Introductory Allegations

Health Care Benefit Programs

1. The term "health care benefit program" is defined in 18 U.S.C. § 24(b) to mean any public and private plan and contract, affecting commerce, under which any medical benefit, item,

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Chesapeake Regional Medical Center

- On staff 1984 – 2019
- Hospital knew he had been terminated from another hospital for performing unnecessary surgeries – Dept. of Surgery had recommended against appointment
- Convicted of two Federal Felonies in 1996
- From 2010 – 2019
  - CRMC and Perwaiz agreed to Perwaiz continually performing procedures in violation of rules, regulations, and healthcare benefit programs
  - Elective inductions at 39 weeks that were not medically necessary
  - Submitted OB flow sheets with two different delivery dates
  - Review of flowsheets in 2019 showed that 64% were altered
  - "CRMC employees and practitioners allegedly observed or were made aware of such discrepancies, but nonetheless allowed Perwaiz to continue these practiced and continued billing for them."

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Javid Perwaiz

- **"CRMC knowingly disregarded patient care and allowed Dr. Perwaiz's unnecessary surgeries, in order to increase its own revenue**. HHS – OIG and our life enforcement partners are committed to investigating allegations of patient harm and theft from federal health insurance programs"

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CRMC's Credentialing of Perwaiz

1. In order to perform a procedure at CRMC, a physician must either be a CRMC employee or have privileges at the hospital. Perwaiz applied to CRMC for privileges on or about September 1, 1983. While his application was pending, in who remained the President/Chief Executive Officer (CEO) until 2005, was notified by Maryview Hospital in Portsmouth, Virginia, that Perwaiz's privileges at Maryview had been terminated earlier that year. **Maryview terminated Perwaiz's privileges for performing unnecessary gynecological surgeries, including irreversible hysterectomies on approximately a dozen patients, including young patients of child-bearing age**. **After review of Perwaiz's application, CRMC's Department of Surgery initially declared him unacceptable for appointment, noting his suspension at Maryview for "unnecessary surgery."** Nonetheless, in April 1984, CRMC granted Perwaiz privileges to perform surgeries there. Later that year, **the Virginia Board of Medicine (which regulates physician licensing and is now called the Virginia Department of Health Professions (DHP)) addressed Perwaiz's conduct at Maryview by censuring him for lack of documentation and for having a sexual relationship with a patient.**

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CRMC's Credentialing of Perwaiz

- In 1995, Perwaiz was indicted **on six counts of felony tax fraud** in the U.S. District Court for the Eastern District of Virginia. He pleaded guilty to two of the counts, and admitted in public filings to extensive fraudulent conduct, including, among other things, falsely claiming a Ferrari luxury sports car as an ultrasound machine so that he could write it off as a business expense. CRMC's President wrote and submitted a letter of support for Perwaiz's 1996 sentencing, calling Perwaiz his "personal friend," and CRMC's Chief of the Department of OB/GYN attended the sentencing hearing. On April 10, 1996, the Court sentenced Perwaiz to four months of home confinement, probation, and community service.
- Following Perwaiz's felony conviction, on April 29, 1996, the Virginia Board of Medicine (the "Board") **revoked Perwaiz's medical license**. In June 1996, it held a hearing to determine whether Perwaiz's license should be reinstated, and ultimately reinstated it in July 1996 with stipulated terms and conditions. For the hearing, CRMC's President filed another letter of

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Chesapeake General Hospital
736 S. Battlefield Blvd.
Chesapeake VA, 23320

Dear Sirs:

After reviewing a recent operating room schedule where Dr. Perwaiz had seven cases scheduled back to back in one day with one case involving a 22 year old who was having both ovaries removed and none of the patients older than 44 years, I believe Dr. Perwaiz has returned to the type of behavior that has had him to be dismissed from two hospital staffs, convicted of two felonies, an admission that his life-style was out of control, and that he had bribed health professionals to maintain his practice.

After I was brought before this body last year to explain my testimony to the Virginia Board of Medicine, I was asked to go through proper channels if I saw any medical care that was inappropriate. I believe this body needs to look into Dr. Perwaiz's surgical indications and review his activities. I have elected not to go through the Department of OB/GYN since this department had not taken any action prior to his previous convictions and because the individuals in power in the department almost unanimously supported his bid to return immediately to the staff after his last dismissal. Enclosed is an operative schedule from November.

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CRMC's Credentialing of Perwaiz

- **CRMC periodically reviewed the credentials of practicing physicians, including** Perwaiz, every two years. It continually **re-credentialed** Perwaiz approximately every two years **between 1984 and 2019. Credentialing recommendations are ultimately approved by CRMC's CEO. Perwaiz was last re-credentialed** in or around June 2019, **and his re-credentialing packet contained information regarding his tax conviction** and Maryview suspension.
- Perwaiz's credentialing file also contained notes regarding medical malpractice lawsuits resulting from procedures he performed at CRMC. Public court records reflect that **Perwaiz was a defendant in at least eight medical malpractice** lawsuits between 1988 and 2019, including two where CRMC was named as a co-defendant.

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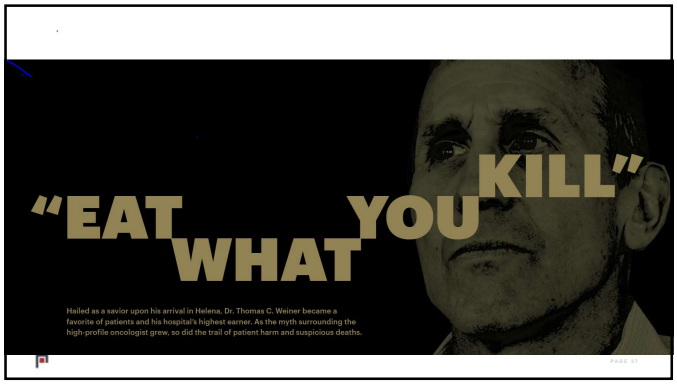

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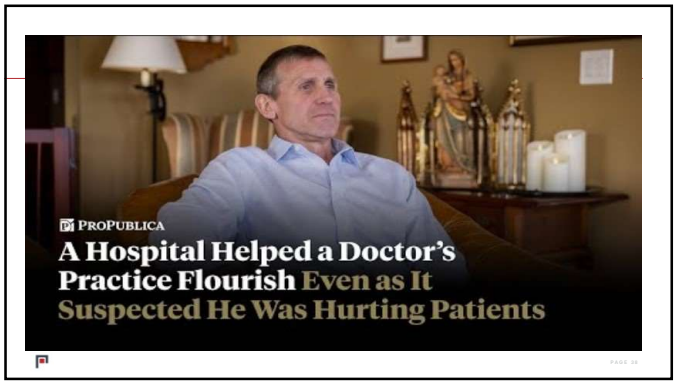

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St. Peter's agrees to pay $10.8 million to settle federal investigation

Authorities accused the Helena hospital of submitting false claims to federal health programs.

U.S. Attorney Jesse Laslovich announces a 2024 settlement reached with St. Peter's Health over charges that the hospital submitted false claims to federal health programs. Credit: JoVonne Wagner / MTFP

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Thomas Weiner, MD – Hospital Liability

- According to the Department of Justice, Weiner used his position to "order medically unnecessary treatment, such as chemotherapy and other infusions, blood tests, imaging, and office visits" and "upcoded" claims between Jan. 1, 2015, and Dec. 31, 2020, that indicated a higher level of service than was actually performed. U.S. Attorney Jesse Laslovich said at a press conference Tuesday that since Weiner was an employee of St. Peters Health, the hospital is responsible for the false claims.

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The Peer Review Action

- Investigation Starts 2019 – Poor documentation
- External Reviews of 8 cases highly critical
- Pain management caused addiction
- Suspended Oct. 15, 2020
- Terminated Nov. 17, 2020
- Staff support
- Community Support
- Weiner files lawsuit wrongful termination and defamation
- June 2021 Fair Hearing

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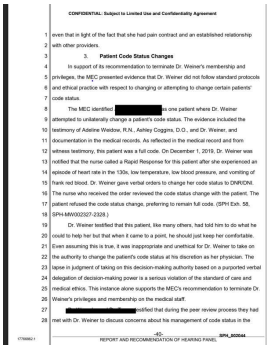

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even that in light of the fact that she had pain contract and an established relationship with other providers.

3. **Patient Code Status Changes**

In support of its recommendation to terminate Dr. Weiner's membership and privileges, the MEC presented evidence that Dr. Weiner did not follow standard protocols and ethical practice with respect to changing or attempting to change certain patients' code status.

The MEC identified [redacted] one patient where Dr. Weiner attempted to unilaterally change a patient's code status. The evidence included the testimony of Adeline Wiedow, R.N., Ashley Coggins, D.O., and Dr. Weiner, and documentation in the medical records. As reflected in the medical record and from witness testimony, this patient was a full code. On December 1, 2019, Dr. Weiner was notified that the nurse called a Rapid Response for this patient after she experienced an episode of heart rate in the 130s, low temperature, low blood pressure, and vomiting of frank red blood. Dr. Weiner gave verbal orders to change her code status to DNR/DNI. The nurse who received the order reviewed the code status change with the patient. The patient refused the code status change, preferring to remain full code. (SPH Exh. 58, SPH-MW002527-2328.)

Dr. Weiner testified that this patient, like many others, had told him to do what he could to help her but that when it came to a point, he should just keep her comfortable. Even assuming this is true, it was inappropriate and unethical for Dr. Weiner to take on the authority to change the patient's code status at his discretion as her physician. The lapse in judgment of taking on this decision-making authority based on a purported verbal delegation of decision-making power is a serious violation of the standard of care and medical ethics. This instance alone supports the MEC's recommendation to terminate Dr. Weiner's privileges and membership on the medical staff.

[redacted] testified that during the peer review process they had met with Dr. Weiner to discuss concerns about his management of code status in the

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What did they know....

- Over one dozen warnings of overprescribing since 2018
- 2013-2020 – Weiner's volumes of opiod prescriptions ranked ninth among all oncologists billing Medicare
- Poor documentation
- Viewed as too powerful to take action

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Thomas Weiner, MD - The Lawsuit

- "The district court was correct when it concluded that [St. Peter's Health] review was sufficient, that **it had made a reasonable effort to obtain the facts,** and that SPH **had a reasonable belief that its action was necessary to protect patients and quality health care,"** the ruling said.

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Thomas Weiner, MD – The Lawsuit

- The hospital's peer review committee began looking into Weiner's care in 2020 because of reports about his manipulation of patients' do-not-resuscitate statuses, "substandard care" for patients treated for non-cancer issues and the administration of end-of-life care.
- "**The professional review action in revoking Weiner's privileges and memberships was reasonable and warranted due to the quantity and severity of Weiner's inappropriate patient care**," the Tuesday ruling stated.

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Thomas Weiner, MD – The Lawsuit

- The ruling summarized that, in total, the hospital's medical executive committee considered dozens of case reviews from internal and external groups concerning Weiner's patient caseload, alleged medical errors and inadequate documentation, pain management prescription practices and coordination with other providers.
- Those cases included the care of Scot Warwick, who received 11 years of chemotherapy treatment for a lung cancer that, medical records and external reviews show, was never confirmed. Warwick was later found to have died from poisoning related to gemcitabine, a chemotherapy drug.

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Thomas Weiner – The Lawsuit

- Additionally, the hospital's actions grew from identified issues with Weiner's **prescribing of "high doses of narcotics to patients for conditions outside the scope of Weiner's clinical privileges or in quantities that were dangerous and inappropriate for the patients' complaints or medical history**; failure to identify medications in patients' current medication lists; and prescribing high-dosage opioids to patients without requiring patients to sign a pain contract and without monitoring patients for signs of abuse, performing urine drug tests and pill counts, or properly documenting a chronic treatment plan," the ruling said.
- Given these facts, which the peer reviewers had at the time of their decision, we have little difficulty concluding that **the [credentials committee] reasonably believed — as any peer review body would under these circumstances — that the decision to summarily suspend Weiner on November 17, 2020, would further the quality of health care**," the ruling said.

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Thomas Weiner – The Lawsuit

- The decision added that the core issue in question was whether the peer reviewers, "**with the information available to them at the time of the professional review action, would reasonably have concluded that their actions would restrict incompetent behavior or would protect patients.**"

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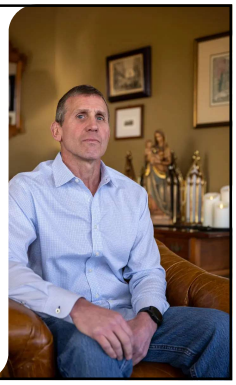
Thomas Weiner, MD



- https://www.propublica.org/article/thomas-weiner-montana-st-peters-hospital-oncology?src=longreads
- **the more patient visits and treatments a doctor bills to insurance, the more that doctor and the hospital earn.** Weiner described this system, which is common in American medicine, as **"eat what you kill."**

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February 28, 2025

- Despite being notified by St. Peter's that it had revoked Weiner's privileges, the Montana Board of Medical Examiners renewed his license in 2021 and 2023. **In 2025, the board renewed his license again for another two years.**
- The Montana Department of Justice has started a criminal investigation

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What can MSPs do????

- Promote Culture Change – Transparency, Reporting
- Reappointment – OPPE – FPPE
- Current Competency Evaluation
- Empower the peer review committee – investigation promote patient safety
- Never be afraid to be the squeaky wheel
- What else????

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We Are All In This Together

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