Attachment A

July 28, 2011 letter from PHS Director Sanchez to PHC Board counsel Harvey providing written confirmation of July 19, 2011 verbal report that a July 1, 2011 random drug test was reported positive for alcohol

PHYSICIAN HEALTH SERVICES, INC.

A Massachusetts Medical Society corporation

www.physicianhealth.org

Luis T. Sanchez, MD
Director

860 Winter Street
Waltham, MA 02451-1411
(781) 434-7404 • (800) 322-2303
Fax (781) 893-5321

July 28, 2011

Robert Harvey, Esq.
Physician Health & Compliance
Board of Registration in Medicine
200 Harvard Mill Square, Suite 330
Wakefield, MA 01880

RE: Michael Langan, M.D.

Dear Attorney Harvey:

This letter is to provide you with written documentation of a prior verbal report made on July 19, 2011 that Dr. Michael Langan had a positive test for phosphatidyl ethanol at a level of 365.4 ng/mL on a random drug test on July 1, 2011.

Physician Health Services has requested that Dr. Langan participate in reevaluation at this time.

If you have any questions, please do not hesitate to contact me.

Sincerely,

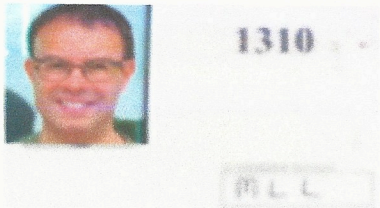
Luis T. Sanchez, M.D.

/mh
cc: Michael Langan, M.D.
Gary Chinman, M.D.
Scott Liebert, Esq.

Attachment B

"Litigation Packet" from USDTL drug-testing lab provided by Sanchez December 12, 2011 showing the July 1, 2011 positive alcohol test was falsely created by faxed request on July 19, 2011 (same day it was reported positive).

The fax from PHS requests the lab "update" a lab report positive for alcohol to "reflect the donor ID number as listed on the order" to 1310 and "reflect that chain-of-custody was maintained." 1310 is my donor ID number for random drug and alcohol testing. This fax requests the lab put my unique identifier for chain-of-custody procedure on an already positive test and falsely create a chain-of-custody. It is plainly clear this is <u>fraud</u> not <u>error</u>



A Massachusetts Medical Society corporation
www.physicianhealth.org

Luis T. Sanchez, MD
Director

860 Winter Street
Waltham, MA 02451-1414
(781) 434-7404 • (800) 322-2303
Fax (781) 893-5321

December 12, 2011

Michael L. Langan, M.D.
41 Kilsyth Road
Brookline, MA 02445

Dear Dr. Langan:

Per your request, US Drug Testing has supplied the enclosed litigation packet.

Please let us know if you have any questions.

Sincerely,

Luis Sanchez, MD

cc: Scott Liebert, Esq.

PHYSICIAN HEALTH SERVICES, INC.

A Massachusetts Medical Society corporation
www.physicianhealth.org

Luis T. Sanchez, MD
Director

860 Winter Street
Waltham, MA 02451-1414
(781) 434-7404 • (800) 322-2303
Fax (781) 893-5321

Date: July 19, 2011

To: United States Drug Testing Laboratories

Fax: 847-375-0775

Total number of pages: 3

Account Number: PHSWMA for Physician Health Services
attn: Kendyll

RE: Specimen Chain of: **461430**
Donor ID as listed: **461430**
Donor ID: 1310
Collection Date: **7/1/2011**
Received Date: **7/8/11**

Please update the lab report to reflect the donor ID number as listed on the order: to **1310**

Please update the lab report to reflect that chain of custody was maintained.

Requested by Mary Howard: M. Howard 7/19/11
(signed) (date)

If you have any questions, please call Linda Bresnahan781-434-7404

UNITED STATES DRUG TESTING LABORATORIES
1700 S. MOUNT PROSPECT ROAD
DES PLAINES, ILLINOIS 60018-1804
847-375-0770 fax 847-375-0775

Report Luis Sanchez MD
Physicians Health Services
860 Winter Street
Waltham, MA 02451

Cust ID PHSWMA
Client Physicians Health Services
Location
Collector

Sample Information

Chain of 461430
Name NA
Lab Sample ID 877649
Donor ID 461430

Test Reason Not given
Type Blood
Collected
Received 7/8/2011 10:46
Reported 7/14/2011 18:39

Tests Requested

PEth-BLD Phosphatidyl Ethanol (Blood) **Sample** POSITIVE

Test	Result	Quantitation	Screen Limit	Confirm
PHOSPHATIDYL ETHANOL	POSITIVE		20 ng/mL	
Phosphatidyl Ethanol (LCMSMS)	POSITIVE	365.4 ng/mL		20.0 ng/mL

Internal Certification Hardcopy

UNITED STATES DRUG TESTING LABORATORIES
1700 S. MOUNT PROSPECT ROAD
DES PLAINES, ILLINOIS 60018-1804
847-375-0770 fax 847-375-0775

Report Luis Sanchez MD
Physicians Health Services
860 Winter Street
Waltham, MA 02451

Cust ID PHSWMA
Client Physicians Health Services
Location
Collector

Sample Information

Chain of 1310
Name NA
Lab Sample ID 877649
Donor ID 461430

Test Reason Not given
Type Blood
Collected 7/1/2011 00:00
Received 7/8/2011 10:46
Reported 7/20/2011 16:17

Tests Requested

PEth-BLD Phosphatidyl Ethanol (Blood) **Sample** POSITIVE

Test	Result	Quantitation	Screen Limit	Confirm
PHOSPHATIDYL ETHANOL	POSITIVE		20 ng/mL	
Phosphatidyl Ethanol (LCMSMS)	POSITIVE	365.4 ng/mL		20.0 ng/mL

Sample Comments

REVISED REPORT PER CLIENTS REQUEST

CORRECTED DONOR ID FROM 46143 TO 1310

CORRECTED COLLECTION DATE TO 07/01/2011

Internal Certification Hardcopy

Jul 20 2011 4:17:08 PM

Laboratory Charles Bage, PhD
Scientific Director Douglas Lewis

United States Drug Testing Laboratories
1700 S. Mount Prospect Road Des Plaines, Illinois 60018
847.375.0770 Ph 847.375.0775 Fax
800.235.2367 Ph www.usdtl.com

SUMMARY OF RESULTS

ACCOUNT: Physician Health Services

USDTL NUMBER: 877649
SPECIMEN ID: 1310
461430
MATRIX: Blood

TEST REQUESTED: Phosphatidylethanol - Blood

INITIAL TEST
METHOD: Liquid Chromatography – Tandem Mass Spectrometry

Drug	Cutoff (ng/mL)	Response of Specimen (ng/mL)	Result
Phosphatidylethanol	20	255.4	**POSITIVE**

CONFIRMATION TEST
METHOD: Liquid Chromatography – Tandem Mass Spectrometry

Drug	Cutoff (ng/mL)	Response of Specimen (ng/mL)	Result
Phosphatidylethanol	20	365.4	**POSITIVE**

I certify that the specimen identified by the laboratory accession number above has been examined upon receipt, handled, and analyzed in accordance with this laboratory's Standard Operating Procedure.

Joseph Jones, MS, NRCC-TC
Vice President, Laboratory Operations

Dec 03, 2011
Date

Attachment C

"Litigation packet" provided to PHC Board counsel December 15, 2011 for consideration by the Board at December 21, 2011 meeting.

Copy of original letter submitting documents (note blue ink on signature) obtained under updated Public Records Law shows this letter and all 42-pages of the documents submitted are date-stamped January 17, 2012 (nearly one month after Board meeting at which they were submitted for consideration)

Digital copy of all documents can be seen here:

https://mllangan1.files.wordpress.com/2017/03/borimoriginaldocpost-dated3617.pdf

These documents directly invalidate the positive test and also provide clear evidence it was falsely created by PHS and the lab.

It can reasonably be concluded PHC Board counsel concealed this evidence

THE LAW OFFICE OF
W. SCOTT LIEBERT

THE CHATHAM CENTER
29 CRAFTS STREET, SUITE 500
NEWTON, MASSACHUSETTS 02460
PHONE: (617) 630-9098; FAX: (617) 964-1307

W. SCOTT LIEBERT
wsllaw@mac.com

SUSAN M. BERG
smblaw@mac.com

ELIZABETH CADDICK (OF COUNSEL)
DIRECT PHONE: (617) 566-1060
DIRECT FAX: (617) 566-1207
elizcaddick@mac.com

December 15, 2011

Debra Stoller, Esq.
Senior Board Counsel
Board of Registration in Medicine
200 Harvard Mill Square, Suite 330
Wakefield, MA 01880

Re: In the Matter of Michael Langan, M.D.

Dear Attorney Stoller:

Enclosed please find a copy of the "Litigation Package" related to Dr. Langan's July 1st blood test, which we received from PHS yesterday. We respectfully request that you include this information with the materials that the Board will review when it considers Dr. Langan's case.

We apologize for any inconvenience experienced by submitting this material at this time. Please contact this office if you have any questions or concerns regarding this matter.

Sincerely,

Susan M. Berg

Susan M. Berg

Enc.

cc: Tracy Ottina, Esq.

Attachment D

December 21, 2011: Board finds violation of letter of agreement for not beginning evaluation at 1of 3 out-of-state "approved" assessment centers within the 14-day time period requested by PHS following the July 28 written report of the positive test.

December 22, 2011: Board determination results in extension of 2-year contract and modified letter of agreement requiring attendance at 3 AA meetings per week and prohibition of metered dose-inhalers used to control severe asthma.

COMMONWEALTH OF MASSACHUSETTS
BOARD OF REGISTRATION IN MEDICINE

MIDDLESEX, SS

In the Matter of	)
Michael L. Langan, M.D.	)

ORDER

At its December 21, 2011 meeting, the Board of Registration in Medicine (hereinafter "Board") affirmed the Complaint Committee's finding that the Licensee violated Paragraph J of his October 8, 2008 Letter of Agreement.

The Licensee may request a hearing before a single designated Board member hearing officer on this matter. The purpose of the hearing is to determine, solely as a matter of fact, whether the Licensee has been in compliance with his Letter of Agreement.

A request for a hearing shall be made in writing and directed to the Executive Director of the Board. Said request must specify what facts are in dispute. The Board must receive any request by 5 p.m., Friday, December 30, 2011. If such a request is determined to raise an issue of fact as to whether the Licensee has been in compliance with his Letter of Agreement, the Board will promptly schedule a hearing at a mutually convenient time.

The Licensee shall provide a complete copy of this Order within ten (10) days by certified mail, return receipt requested, or by hand delivery to the following designated entities: any in- or out-of-state hospital, nursing home, clinic, other licensed facility, or municipal, state, or federal facility at which he practices medicine; any in- or out-of-state health maintenance organization with whom he has privileges or any other kind of association; any state agency, in- or out-of-state, with which he has a provider contract; any in- or out-of-state medical employer, whether or not he practices medicine there; the Drug Enforcement Administration, Boston Diversion Group; the Drug Control Program of the Bureau of Health Care Safety & Quality of the Massachusetts Department of Public Health; and the state licensing boards of all states in which he has any kind of

license to practice medicine. The Licensee shall also provide this notification to any such designated entities with which he becomes associated within one yar from today's date. The Licensee is further directed to certify to the Board within ten (10) days that he has complied with this directive. The Board expressly reserves the authority to independently notify, at any time, any of the entities designated above, or any other affected entity, of any action it has taken.

Date: December 21, 2011

Peter Paige, M.D.
Chair

Commonwealth of Massachusetts
Board of Registration in Medicine
Division of Law and Policy
200 Harvard Mill Square, Suite 330
Wakefield, Massachusetts 01880
Telephone: (781) 876-8200
Fax: (781) 876-8380

DEVAL L. PATRICK
GOVERNOR

TIMOTHY P. MURRAY
LIEUTENANT GOVERNOR

STANCEL M. RILEY, JR. MD.
EXECUTIVE DIRECTOR

December 22, 2011

(VIA CERTIFIED MAIL 7009 2820 0003 2164 6512)

W. Scott Liebert, Esq.
Law Office of W. Scott Liebert
29 Crafts Street, Suite 500
Newton, Massachusetts 02460

Re: Michael Langan, M.D.- Violation of Letter of Agreement

Dear Attorney Liebert:

Enclosed please find a copy of the Order in which the Board affirmed the Complaint Committee's September 7, 2011 finding that your client violated Paragraph J of his October 8, 2008 Letter of Agreement.

In lieu of imposing sanction, the Board has directed that, at a minimum, the Licensee's October 8, 2008 Letter of Agreement be extended for a minimum of twenty-four (24) months from March 18, 2013, the date on which the Licensee was originally eligible to terminate his Letter of Agreement. This extension means that the Licensee will not be eligible to terminate his Letter of Agreement until at least March 18, 2015.

In addition, the Board has indicated that the extended LOA should include, at a minimum, the following modification of terms:

(a) should the Licensee test positive for substances (i.e.: alcohol biomarkers, opioids, any non-PHS approved drugs), he agrees to immediately enter into a Voluntary Agreement Not to Practice (hereinafter "VANP") until PHC completes its review and the Board takes action;

(b) should the Licensee not enter into a VANP immediately, the Licensee understands that his license to practice medicine may be immediately suspended;

(c) the Licensee shall follow all PHS recommendations within seven (7) days and understands that, should he decline to do so (which includes an attempt to negotiate and/or dispute PHS' recommendation), his license may be immediately suspended;

(d) the Licensee shall provide toxicology samples as directed by PHS within the time frame recommended by PHS;

(e) the Licensee shall abstain from all non-prescribed intoxicants including ethanol;

(f) the Licensee shall continue ongoing treatment of his ADHD with Dr. Timothy Wilens, unless another provider is approved by the Complaint Committee;

(g) the Licensee shall participate in a minimum of three (3) 12-step meetings per week for the duration of his Letter of Agreement and shall submit proof of said participation to PHS in a form agreeable to PHS;

(h) the Licensee shall develop an active sponsor relationship with someone who is not a healthcare professional. The Licensee shall have weekly communications with the sponsor, which shall be verified by PHS;

(i) the Licensee shall comply with any additional recommendations or requirements from PHS, including their EtG, EtS and PEth tests, to screen for alcohol use in the Licensee for the duration of his Letter of Agreement. Any positive test results may, at the direction of PHS or the Board, require a leave of absence and re-evaluation by a program skilled in such evaluations;

(j) the Licensee shall avoid exposure to agents that would interfere with the capacity of PHS to monitor him for abstinence. The Licensee will abstain from the use of alcohol-based hand rubs and HFA inhalers, and any other agents that might produce positive EtG and PEth results; and

(k) the Licensee shall participate in Mindfulness-based stress reduction activities, such as the eight (8) week program developed by Jon Kabat-Zinn at the University of Massachusetts Medical Center. Any such program must be pre-approved by the Complaint Committee Designee.

Please contact me by December 30, 2011 to indicate whether your client agrees to the extension and modification of his current Letter of Agreement. Should your client decline to the modifications of his Letter of Agreement, this matter will go before the Board at its January 18, 2011 for consideration of sanction.

Sincerely,

Debra G. Stoller
Senior Board Counsel

DGS
Enclosure

cc: Tracy J. Ottina, Physician Health & Compliance Counsel

Attachment E

December 29, 2011 letter to PHC Counsel Stoller agreeing to letter of agreement but "reserving the right to petition the Board for Reconsideration of the Order" when I obtain additional evidence this was an "invalid test" (not what I requested but he would not go near the fraud).

Letter of agreement signed under threat of disciplinary action. These contracts and agreements are not genuine as they are signed under duress, undue influence and coercion.

On Jan 5, 2012, at 1:39 PM, "W. Scott Liebert" <wsllaw@mac.com> wrote:

Michael,

This is a follow up reminder to the email I sent to you on Tuesday with the corrected/ revised LOA addendum that I received that day from Atty. Ottina. Remember, we are supposed to have a signed copy back to the BRM by the end of the day tomorrow. I am assuming that a faxed signed copy will suffice as long as I indicate that the original is in the mail. So, please get it back to me with your signature today. Unfortunately the terms, as objectionable as they are given that all of this is based on invalid test results, are not negotiable. There is no viable alternative other than signing it, as refusal to do so will lead to imposition of a disciplinary action.

If you have any questions about it that I may be able to answer, please let me know.

Scott

Law Office of W. Scott Liebert
29 Crafts Street, Suite 500
Newton, MA 02460

W. SCOTT LIEBERT

THE CHATHAM CENTER
29 CRAFTS STREET, SUITE 500
NEWTON, MASSACHUSETTS 02460

W. SCOTT LIEBERT
SUSAN M. BERG
ELIZABETH CADDICK (OF COUNSEL)

PHONE: (617) 630-9098
FAX: (617) 964-1307

December 29, 2011

By Fax: 781-876-8380

Debra Stoller, Esq.
Senior Board Counsel
Board of Registration in Medicine
200 Harvard Mill Square, Suite 330
Wakefield, MA 01880

Re: In the Matter of Michael Langan, M.D.

Dear Attorney Stoller:

I am writing in response to your December 22nd letter forwarding the Board's December 21st Order in this matter, to confirm that Dr. Langan agrees to the extension and modification of his current Letter of Agreement.

While confirming his agreement to the terms set out in the Board's Order, Dr. Langan reserves his right to petition the Board for Reconsideration of the Order when he obtains additional evidence which establishes that the July 1, 2011 blood test reported to the Board as a positive test result was in fact an invalid test.

Sincerely,

W. Scott Liebert

cc: Tracy Ottina, Esq.

Attachment F

January 12, 2012

Complaint filed with College of American Pathologists (an accreditation agency that can force labs to correct invalid and fraudulent tests under threat of loss of accreditation but has no power to sanction). The non-FDA approved tests being used by PHPs have no oversight or regulation. There is no agency with the power to investigate and sanction)

January 12, 2012

Dr. Michael Langan
Langan.MichaelL@mgh.harvard.edu

Reference Number: 4989, 4990
CAP Number: 1147901
AU ID: 1176738

Dear Dr. Langan:

I am writing to confirm acknowledgement of your concerns regarding Quest Diagnostics Laboratory in Cambridge, MA and US Drug Testing Labs in Des Plaines, IL. Thank you for bringing your concerns to the attention of the College of American Pathologists (CAP). We are currently investigating the issues that you raised.

Most investigations are completed within four months. You will be notified when this investigation is completed. If you have any questions, please contact me at 800-323-4040, extension 7471.

Sincerely,

Amy Daniels, MT (ASCP)
Manager, Investigations
Laboratory Accreditation Program

Attachment G

October 4, 2012

Positive alcohol test report invalidated following CAP investigation and revised lab test reported to Sanchez on October 4, 2012.

USDTL Chief Operating Officer and Executive VP Joseph Jones who certified this test was "upon receipt, handled, and analyzed with this laboratory's Standard Operating Procedure on December 3, 2011 appends this revised test with

"External chain of custody protocol was not followed per standard protocol"

This was the first step in concealing the lab fraud. The test was invalidated as requested by CAP but this statement gives the impression this was an error.

UNITED STATES DRUG TESTING LABORATORIES
1700 S. MOUNT PROSPECT ROAD
DES PLAINES, ILLINOIS 60018-1804
847-375-0770 fax 847-375-0775

Report To Luis Sanchez MD
Physicians Health Services
860 Winter Street
Waltham, MA 02451

Cust ID PHSWMA
Client Physicians Health Services
Location
Collector

Sample Information

Chain of Custody 1310
Name NA
Lab Sample ID 877649
Donor ID 461430

Test Reason Not given
Type Blood
Collected 7/1/2011 00:00
Received 7/8/2011 10:46
Reported 10/4/2012 12:50

Tests Requested

PEth-BLD Phosphatidyl Ethanol (Blood) Sample POSITIVE

Test	Result	Quantitation	Screen Limit	Confirm
PHOSPHATIDYL ETHANOL	POSITIVE		20 ng/mL	
Phosphatidyl Ethanol (LCMSMS)	POSITIVE	365.4 ng/mL		20.0 ng/mL

Sample Comments

REVISED REPORT PER CLIENTS REQUEST

CORRECTED DONOR ID FROM 46143 TO 1310

CORRECTED COLLECTION DATE TO 07/01/2011

APPENDED REPORT: EXTERNAL CHAIN OF CUSTODY PROTOCOL WAS NOT FOLLOWED PER STANDARD PROTOCOL

Certification

Data approved by Joseph Jones on 10/4/2012

JOSEPH T. JONES
10/4/12

Attachment H

October 23, 2012 written confirmation of an October 19, verbal report to PHC Board counsel Harvey of "non-compliance" with attendance at support group meetings.

Sanchez and Jones kept the October 4, 2012 revised lab test to themselves. (the FSPHP pushed policy prohibiting doctors from obtaining drug and alcohol tests from the labs under the guise that doctors are clever and crafty and if they obtained these tests they would figure out a way to beat them. These PHP affiliated attorneys positioned within medical boards are tasked with getting the board to adopt these bad policies).

While concealing the revised test Sanchez reports "non-compliance" to PHC Board counsel Harvey to initiate new board proceedings. Harvey's responsibility is to present a case supporting the allegation and secure the desired judgment. Reporting "non-compliance" and initiating these proceedings is the second step in concealing the fraud.

PHYSICIAN HEALTH SERVICES, INC.

A Massachusetts Medical Society corporation
www.physicianhealth.org

LUIS T. SANCHEZ, MD
Director

860 Winter Street
Waltham, MA 02451-1414
(781) 434-7404 • (800) 322-2303
Fax (781) 893-5321

October 23, 2012

Robert Harvey, Esq.
Physician Health & Compliance
Board of Registration in Medicine
200 Harvard Mill Square, Suite 330
Wakefield, MA 01880

RE: Michael Langan, M.D.

Dear Attorney Harvey:

This letter is to provide you with written documentation of a prior verbal report made on October 19, 2012 that Michael Langan, M.D. was non compliant with his Physician Health Services (PHS) monitoring contract in that he repeatedly represented to PHS that he participated in required peer support group meetings that he did not, in fact, attend.

PHS has recommended that Dr. Langan participate in an evaluation at a facility skilled in working with health care professionals. Upon completion of this assessment, PHS will consider how and whether ongoing PHS monitoring will proceed.

If you have any questions, please do not hesitate to contact me.

Sincerely,

Luis T. Sanchez, M.D.

/mh
cc: Michael Langan, M.D.
Gary Chinman, M.D.

Attachment I

October 26, 2012

PHC Manager Harvey initiates Board proceedings in response to report of "non-compliance"

November 7, 2012

The Board's Complaint Committee (which contains one Board Member) determines violation of letter of agreement requiring attendance at support group meetings based on Sanchez October 23 letter alone. No notice of specific allegations (i.e. what meetings were missed and when) or evidence supporting allegations submitted

Commonwealth of Massachusetts
Board of Registration in Medicine
Division of Law and Policy
200 Harvard Mill Square, Suite 330
Wakefield, Massachusetts 01880
Telephone: (781) 876-8200
Fax: (781) 876-8380

DEVAL L. PATRICK
GOVERNOR

TIMOTHY P. MURRAY
LIEUTENANT GOVERNOR

STANCEL M. RILEY, JR. MD.
EXECUTIVE DIRECTOR

October 26, 2012

W. Scott Liebert, Esq.
Law Office of W. Scott Liebert
37 Walnut Street, Suite 200
Wellesley, Massachusetts 02481

Re: Michael Langan, M.D., Compliance with Letter of Agreement

Dear Mr. Liebert,

Pursuant to your client's October 8, 2008 Letter of Agreement, as modified on February 1, 2012, Dr. Langan must comply with his Physician Health Services ("PHS") contract, including all requirements that PHS may make during the term of the LOA.

On October 19, 2012, PHS orally reported that Dr. Langan was not compliant with his contract because he had repeatedly represented that he had been participating in required peer support group meetings when, in fact, he had not attended. On October 23, 2012, PHS confirmed this report in a written letter, a copy of which is enclosed.

In light of this report, the Complaint Committee will be considering your client's compliance with his Letter of Agreement at its November 7, 2012 meeting.

Sincerely,

Robert E. Harvey, J.D.
Physician Health and Compliance Manager

Commonwealth of Massachusetts
Board of Registration in Medicine
Division of Law and Policy
200 Harvard Mill Square, Suite 330
Wakefield, Massachusetts 01880
Telephone: (781) 876-8200
Fax: (781) 876-8380

DEVAL L. PATRICK
GOVERNOR

TIMOTHY P. MURRAY
LIEUTENANT GOVERNOR

STANCEL M. RILEY, JR. MD.
EXECUTIVE DIRECTOR

November 8, 2012

W. Scott Liebert, Esq.
37 Walnut St., Suite 200
Wellesley, MA 02481

Robert Harvey, Esq.
Board of Registration in Medicine
200 Harvard Mill Sq., Suite 330
Wakefield, MA 01880

Re: Michael Langan, M.D.

Dear Counsel,

Please be advised that on November 7, 2012, the Complaint Committee determined that Dr. Langan was in violation of his Letter of Agreement ("LOA"), as amended on February 1, 2012. The Complaint Committee based its decision on the following:

- Dr. Langan's LOA, as amended, includes the following provisions:

(J) Licensee entered into a Substance Use Monitoring Contract with PHS effective March 18, 2008. Licensee agrees to abide fully by all terms of such contract, which includes a provision that PHS will promptly inform the Committee of any lapse or violation of its terms by Licensee and provides for any necessary waivers of privilege or confidentiality by Licensee. The Licensee shall follow all PHS recommendations within seven (7) days and understands that, should he decline to do so (which includes an attempt to negotiate and/or dispute PHS' recommendation), his license may be immediately suspended. PHS shall submit quarterly reports to the Committee that shall summarize in detail the Licensee's compliance with the PHS contract.

Y) Licensee shall participate in a minimum of three (3) 12-step meetings per week for the duration of his Letter of Agreement and shall submit proof of said participation to PHS in a form agreeable to PHS. Licensee shall develop an active 12-step sponsor relationship with someone who is not a healthcare professional. The Licensee shall have weekly communications with the sponsor, which shall be verified by PHS in a manner agreeable to PHS.

- On October 19, 2012, Physician Health Services reported that Dr. Langan was not compliant with his monitoring contract in that he was repeatedly

representing that he participated in required peer support group meetings when, in fact, he had not attended.

Failure to attend these peer group meetings and failure to abide by his PHS contract are violations of Paragraphs J and Y of Dr. Langan's Letter of Agreement, as amended.

As a result of their determination, the Complaint Committee has referred this matter to the full Board of Registration in Medicine for consideration of sanction. A scheduling letter will follow under separate cover.

Sincerely,

Jeanette R. Macht
Deputy General Counsel

Attachment J

November 5, 2012

Letter from Dr. James Flood Director of MGH Chemistry and Toxicology stating the positive test was a "purposeful and intentional act" of PHS and that anything based on the test should be "reversed, rectified and remediated."

Letter provided directly to PHC Manager Harvey. Records obtained under updated Public Records Law has uncovered only copy in Board records is date-stamped August 15, 2014 (Board meeting suspending license was February 6, 2012). PCH Board counsel claim submitted evidence scanned into electronic record *after* Board meetings but a year and a half after is a bit of a stretch.

Given the materiality and significance of this letter affirming the fraud and the date-stamp it can reasonably be inferred that Harvey concealed it from the Board.

MASSACHUSETTS
GENERAL HOSPITAL

HARVARD
MEDICAL SCHOOL

Massachusetts General Hospital
Department of Pathology
55 Fruit Street, Bigelow 510
Boston, Massachusetts 02114-2696
Phone: 617-726-3635
Fax: 617-726-9386

08/15/14 SS3

11/05/2012

Jacob Hafter, Esq.
7201 W. Lake Mead Blvd, Suite 210
Las Vegas, NV 89128

Subject: Blood Collection/Testing Performed on Michael L. Langan, MD on July 1, 2011

Dear Sir:

I write you to provide my professional opinion regarding the quality and validity of testing performed on Michael Langan's (MLL) blood drawn on July 1, 2011 by a Quest Diagnostics specimen collector, at the request of Mary Howard of Physician Health Services, Inc (PHS).

As background, I have directed the MGH Chemistry and Toxicology Laboratories for nearly thirty years, and have both a clinical and academic interest in drug and drug-of-abuse testing. I have implemented many serum, urine, and oral fluid drug-of-abuse testing programs at MGH, including ones that dealt with "chain-of-custody" and Medical Review Officer issues. Much of my clinical work involves drug-of-abuse test interpretation for MGH clinicians.

I reviewed the documents MLL provided me relating to the July 1, 2011 testing. I was astonished at the large number of errors (including so-called "fatal" ones) and out-of-SOP events that occurred during the blood collection, processing, and transportation between 7/1 and when the specimen was finally received (seven!) days later by USDTLabs (where testing was actually done several days later). This is a very unusual delay; how the specimen was stored by the clinical (not forensic/"chain-of-custody") lab at Quest is not documented. This represents a serious, if not fatal flaw in the testing of MLL's blood. As a comparison, recall a recent very public case involving Major League Baseball vs. a league MVP. A positive urine performance-enhancing drug test was invalidated because there was only a 2-3 day explainable delay (because of a weekend transportation issue) in sending a sample to the testing lab. I think the seven day delay here is indefensible and will result in the overturning of any decisions based on MLL's very-flawed 7/1/2011 testing.

The many other errors in sample collection, processing, and transportation to USDTLabs include:

1. PHS directed Quest to use a chain-of-custody form (CCF) twice in PHS's order that initiated the 7/1/11 testing. The Quest specimen collector did not use the required form.

2. The collector then incorrectly used the PHS-to-Quest test order form, instead of a CCF. This resulted in fatal/significant errors noted in 3 below.

3. The documentation received by USDTLabs with the specimen on 7/8/11 did not have a date and time of specimen collection, proper ID of the collector, signature of the sample donor, or a tamper-proof seal affixed to the specimen.

4. On 7/1-7/2 someone (the 7/1 specimen collector?) incorrectly directed the sample to the clinical (not forensic/"chain-of-custody") QUEST lab in Cambridge, despite the clear instructions on the PHS order form. There the specimen sat for several days without documentation of its storage conditions.

By their own policy, upon receipt USDTLabs should have rejected the specimen because of the several fatal flaws involving chain-of-custody. They did not. Additionally, the Medical Review Officers (MROs) at both *PHS* and *USDTL* evidently ignored the fatal flaws and allowed the positive Phosphatidylethanolamine (PEth) result to be reported without any comment. As a standard of care, an MRO needs to investigate positive results to try and determine if there is an explanation(s) for them. The PHS MRO had an opportunity to clarify the 7/1/11 results when reviewing them. PEth is detectable for up to four weeks after exposure to ethanol, given its 4 day half-life. A repeat test drawn in the 7/15-7/20/2011 period, if negative for PEth, would have clarified the 7/1/11 result as a false-positive. Evidently the PHS MRO did nothing to clarify the situation, as PHS did not request a blood PEth test again on MLL until August, when it was too late to clarify the 7/1/11 test.

The actions PHS did take in July 2011 included requesting that Dr Langan's ID number be added to the already positive sample (19 days after specimen collection). They also requested that the lab report be updated to reflect that chain of custody was maintained. This second request is highly irregular. "Chain-of-Custody" never existed for MLL's 7/1/11 sample, and updating a report to say it did exist, many days after the fact, is wrong. Why PHS requested that chain of custody be added when there is not one is suspicious.

In conclusion, it appears from these documents that there is a purposeful and intentional act by PHS to show MLL's 7/1/11 test as valid when in reality this test was invalid, and

involved both fatal laboratory errors and lack of adequate MRO review of results. Anything based on MLL's 7/1/11 test as a confirmatory positive should be reversed, rectified, and remediated.

James G. Flood PhD

Dr. James G. Flood, PhD
Director, Chemistry Laboratory
Massachusetts General Hospital

Assistant Professor of Pathology
Harvard Medical School

Attachment K

December 5, 2012

Email to PHC Manager Harvey attaching 2 documents plainly showing fraud including the litigation packet and Dr. Floods expert opinion letter confirming the fraud. (The October 4, 2012 corrected test still being concealed)

Harvey, Robert (MED)

From: Michael Langan [mllangan1@me.com]
Sent: Wednesday, December 05, 2012 2:26 PM
To: Harvey, Robert (MED)
Cc: adaniel@cap.org; Teixeira, Roberta (DPH)
Subject: Documents regarding PHS misconduct
Attachments: Quest-ACP.pdf; USDTL Litigation Packet.pdf; MLLv3finalJacob Hafter Esq.pdf

Dear Mr. Harvey,

Have you ever seen the attached documents? Please let me know. If not please read them as they pertain to my current situation with PHS and show clearly and incontrovertibly the facts of the case. i.e. it is not I who have been noncompliant with PHS, but that certain people at PHS have engaged in misconduct and it is, in fact, they who have been non compliant with protocol, ethical norms, and the law. My prior attorney, Scott Liebert, was (understandably) reluctant to bring up these damaging facts as PHS is his primary referral source and is not going to "bite the hand that feeds him." My new attorney, Jacob Hafter, will be addressing these issues. The documents speak for themselves. Ancillary material regarding guidelines, regulations, and legal issues to follow.

Sincerely, Michael Langan, MD

Attachment L

December 11, 2012

Letter from PHS Director Sanchez reporting to Harvey reporting that the revised test was reported "yesterday" (67-days after it was) and that "PHS did not make a determination of relapse [following the false diagnoses of "substance use disorder" at the "approved" assessment centers the term "relapse" is used in reference to these positive tests] is unaware of any actions taken by the Board and would"continue to disregard" [the positive test].

On December 10, 2012 I was contacted by CAP investigator Amy Daniels who contacted me to see how things were going after the October 4, 2012 test revision. I informed her I was never notified and contacted PHS. This letter was issued the following day so that Harvey could present to the Board that the test revision was a mere "chain-of custody error" reported *after* my "non-compliance" meetings and inconsequential.

PHYSICIAN HEALTH SERVICES, INC.

A Massachusetts Medical Society corporation

www.physicianhealth.org

Luis T. Sanchez, M.D.
Director

860 White Street
Waltham, MA 02451-1414
(781) 434-7404 • (800) 322-2303
Fax: (781) 893-5521

December 11, 2012

Robert Harvey, Esq.
Physician Health & Compliance
Board of Registration in Medicine
200 Harvard Mill Square, Suite 330
Wakefield, MA 01880

RE: Michael Langan, M.D.

Dear Attorney Harvey:

Yesterday, December 10, 2012, Physician Health Services (PHS) received a revision to a laboratory test result for Dr. Michael Langan from a blood sample which he provided on July 1, 2011, which result was reported to you by letter of July 28, 2011 as positive for Phosphatidyl Ethanol (PEth). The amended report indicates that the "external chain of custody protocol [for that sample] was not followed per standard protocol."

PHS did not make a determination of relapse following that positive test, nor is PHS aware of any action taken by the Massachusetts Board of Registration in Medicine (MA BRM) as a result of the July 28, 2011 report. However, based on the amended report, PHS will continue to disregard the July 2011 PEth test result.

If you have any questions, please do not hesitate to contact me.

Sincerely,

Luis T. Sanchez, M.D.

cc: Michael Langan, M.D.
Gary Chinman, M.D.
Kenneth Minaker, M.D.
Timothy Wilens, M.D.

Attachment M

December 12, 2012

Email to Harvey attaching the revised test.

PHC Manager Harvey fully aware of the revised test.

Harvey, Robert (MED)

From: Langan, Michael L,M.D. [Langan.MichaelL@mgh.harvard.edu]
Sent: Wednesday, December 12, 2012 4:52 PM
To: Knight, John; Boyd, J. Wesley; Minaker, Kenneth Lloyd,M.D.; Wilens, Timothy,M.D.; Jacob Hafter
Cc: Harvey, Robert (MED)
Subject: Revised PEth test

Attachments: Revised PEth test.pdf

Revised PEth test.pdf (373 KB)...

Attached is the revised PEth test. It took almost 1.5 years to get this. As you know, PHS knew it was an invalid test all along. The import will now undoubtedly be minimized, and marginalized by PHS.

The correction of the test is not important. What is important is the gauntlet put forth by PHS to prevent the truth as it shows a lack of integrity, honesty, and fairness.

It took a formal complaint with the College of American Pathologists and a four month investigation as well as a lot of time and money to get what should have been available at the outset-the simple truth.

I am going to get this to the attorney at Hazelden as soon as possible as I have requested that the record be amended as well as the recommendations.

The PEth test was used as a confirmatory test because standard of care and SAMHSA guidelines dictate that you don't make decisions based on EtG's as they are unreliable and scientifically unsupported. As you all know there was not once scintilla of evidence to support alcohol use in July of 2011. So PHS sent a forensic sample as a clinical sample to confirm alcohol use and purposefully colluded with the lab to make it a positive. This then led to the recommendation that I be evaluated at Hazelden and because Hazelden did not have the litigation packet that showed subterfuge so they concluded they could not rule out alcohol use. Because they could not rule out alcohol use they made certain recommendations including increasing AA meetings to 3 times per week for three months and are now saying I am non-compliant with meetings. Hazelden would not have recommended 3x per week meetings had they known the test was false. Knowingly forcing me to go through the hurdles of evaluation and the subsequent cost in terms of time and monthly while knowing the whole time that the test was rigged is egregious. Trying to claim non compliance with stipulations directly caused by the falsified test are beyond egregious. It would be like a rogue cop planting drugs on someone and then recommending he not be paroled because he didn't clean his cell.--Michael