NEVADA STATE BOARD OF MEDICAL EXAMINERS

9600 Gateway Drive Reno, NV 89521

Rachakonda D. Prabhu, M.D. Board President Edward O. Cousineau, J.D. Executive Director



* * * M I N U T E S * * *

OPEN SESSION BOARD MEETING

Held in the Capital Room at the Renaissance Las Vegas Hotel 3400 Paradise Road, Las Vegas, Nevada 89169

and Videoconferenced to

the Conference Room at the Offices of the Nevada State Board of Medical Examiners 9600 Gateway Drive, Reno, Nevada 89521

FRIDAY, NOVEMBER 30, 2018 – 8:30 a.m.

Board Members Present

Rachakonda D. Prabhu, M.D., President
Wayne Hardwick, M.D., Vice President
Mr. M. Neil Duxbury, Secretary-Treasurer
Ms. Sandy Peltyn
Victor M. Muro, M.D.
Ms. April Mastroluca
Aury Nagy, M.D.
Michael C. Edwards, M.D., FACS
Weldon Havins, M.D., J.D.

Board Members Absent None

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(NSPO Rev. 6-18)

Staff/Others Present at Renaissance Las Vegas Hotel in Las Vegas

Edward O. Cousineau, J.D., Executive Director
Jasmine K. Mehta, J.D., Deputy Executive Director
Donya Jenkins, Finance Manager
Robert Kilroy, J.D., General Counsel
Laurie L. Munson, Chief of Administration and Information Systems
Pamela J. Castagnola, CMBI, Chief of Investigations
Lynnette L. Daniels, Chief of Licensing
Henna Rasul, J.D., Senior Deputy Attorney General

Staff/Others Present at Board Office in Reno Aaron Bart Fricke, J.D., Deputy General Counsel Donald K. White, J.D., Deputy General Counsel

Agenda Item 1

CALL TO ORDER AND ANNOUNCEMENTS

- Roll Call/Quorum

The meeting was called to order by President Rachakonda D. Prabhu, M.D., at 8:31 a.m.

Mr. Cousineau took roll call, and all Board members were present except Dr. Nagy. Mr. Cousineau announced there was a quorum.

Dr. Prabhu recognized Chief of Administration and Information Systems Laurie L. Munson for her long-term service to the Board of 15 years.

Ms. Daniels introduced new Licensing Administrative Assistant Jami Land, who was present in Reno.

Agenda Item 2

PUBLIC COMMENT

Dr. Prabhu asked whether there was anyone in attendance who would like to present public comment. No public comment was received.

Dr. Nagy joined the meeting at 8:38 a.m.

Agenda Item 3

APPROVAL OF MINUTES

- September 7, 2018 Board Meeting - Open/Closed Sessions

Ms. Munson stated an error had been discovered in the Open Session Minutes after they had been provided to the Board members for review. She said on page 10, Item 13(b), in the first paragraph, "Dr. Howard Baring" should be "Dr. Howard Baron," and requested the Board approve the Minutes with that change.

Dr. Edwards moved that the Board approve the Minutes of the September 7, 2018 Board Meeting – Open/Closed Sessions. Ms. Peltyn seconded the motion, and it passed unanimously.

(a) Investigative Committees

Dr. Hardwick reported that at its November 16, 2018 meeting, Investigative Committee A considered 123 cases. Of those, the Committee authorized the filing of a formal complaint in 19 cases, sent 10 cases out for peer review, requested an appearance in 6 cases, issued 30 letters of concern, referred 6 cases back to investigative staff for further investigation or follow-up, and recommended closure of a total of 52 cases.

Dr. Prabhu thanked Ms. Peltyn and Dr. Muro for the excellent job they were doing on the Investigative Committee. He then reported that at its November 7, 2018 meeting, Investigative Committee B considered 118 cases. Of those, the Committee authorized the filing of a formal complaint in 15 cases, sent 7 cases out for peer review, requested an appearance in 5 cases, issued 24 letters of concern, referred 1 case back to investigative staff for further investigation or follow-up, and recommended closure of a total of 66 cases.

(b) Nevada State Medical Association

Catherine O'Mara, Executive Director of the Nevada State Medical Association (NSMA), said the Legislative Session begins on February 4. She said the elections earlier in the month, and the change in the governorship, has created a little bit of a wait-and-see; NSMA is waiting to see who will be filling some critical positions that will have an impact on health care, such as in the Medicaid Department. The Governor has announced some of his transition team, and NSMA is waiting to see what his agenda on health care will be. NSMA does know that the two chairs of the Health Committees on the Assembly and Senate side are both returning, Senator Julia Ratti and Assemblyman Michael Sprinkle. She stated they are both collaborative people and like to hear physician perspectives, so NSMA looks forward to working with them during the legislative session. She said Governor Sandoval just released a proposed budget to help Governor Sisolak out. NSMA expects there to be some changes, but she thinks with a transition year, it will probably be pretty similar. She explained NSMA has two top priorities for legislation it would like to see accomplished this session. The first is a refinement to the prescriber guidelines in the opioid law that was passed last session. She thanked the staff at the Board and at the Board of Pharmacy, who worked a lot over the interim on the regulatory process to smooth out how provider protocols would work to allow for things like informed consents, and to bring a little more clarity to PMP checks and what you are and are not required to do based on those results. NSMA has submitted a refinement bill that Assemblyman Sprinkle is going to carry for it through the Assembly Health Committee. She said she hopes the Board's licensees will be pleased with the work NSMA has done to try to keep the sentiment, the goals and the public health focus that was intended in the last legislation but remove some of the barriers to treatment.

Ms. O'Mara stated NSMA's other legislative priority is establishing a Maternal Mortality Review Panel. Instances of maternal mortality have increased in the United States, and it is unclear why that is happening. The panel would allow Nevada physicians to report in and have an open and protected discussion about what happened so we can approach this from a public population health perspective, to determine why this is happening, and to develop some best practices and procedures for the future to help eliminate it. She thinks it is important for NSMA to advance public health initiatives that it thinks will help patients in Nevada.

Ms. O'Mara said there are several issues NSMA thinks will come up that it will be vocal on. Some are issues with the insurance industry, and NSMA is trying to work some of those out in the interim. Other issues deal with Medicaid reimbursement, reducing regulatory burdens, electronic health records, e-prescribing and tort reform.

Ms. O'Mara reported NSMA has two events planned for the legislative session, one being Nevada Physician Day at the Legislature on February 25. Ms. O'Mara thanked the Board for the good relationship NSMA shares with it.

(c) Clark County Medical Society

Alexandra P. Silver, Executive Director of the Clark County Medical Society (CCMS), reported that CCMS had held a CME on physician wellness and burnout, which was very well attended, and this is going to be an ongoing initiative CCMS will be working on in the coming months. CCMS will be hosting a resident and student mixer. It is currently seeking a new Executive Assistant to replace Janice Poblete, who is no longer with CCMS, and has a new Membership and Engagement Coordinator, Sarina Rohrig This past month, CCMS' current president, Dr. Roth, convened the first, to her knowledge, President's round table in the south. CCMS invited all of the Presidents and leadership from the other specialty board societies to convene so they could talk about ways the different organizations can support one another and collaborate. There was a great response, and this will be something that will be done twice annually, with the next one in May. As the year winds down and we look forward to 2019, CCMS focus is to continue to meet the needs of the community and its physicians. Two of the big things CCMS has noticed, particularly in the last three to six months, is an uptick in requests for referrals to physicians who take Medicare and an increase in requests for assistance to help them get appointments as new patients. Many community members are calling and saying they are having trouble getting in to see physicians within two to three months.

(d) Washoe County Medical Society

Mary Ann McCauley, Executive Director of the Washoe County Medical Society (WCMS), reported that WCMS is wrapping up the year. She said it has been one of change and process improvement in order to communicate more effectively with its members and also to be a more efficient office. WCMS is engaging much more often with the community and with its colleagues. Currently, WCMS is working on a CME program, to be presented in the spring, in collaboration with the University of Nevada, Reno School of Medicine, the American Heart Association and St. Mary's Medical Center. WCMS has more than doubled its face-to-face interaction with its members. CCMS' biggest event is its upcoming inaugural dinner on January 26, where it will install Dr. Reed Dopf as Board President. She said she has a great Board, and wanted to thank it for being so helpful with, and supportive of, the changes she has made. Next year, WCMS is looking at adding even more face-to-face interaction with its members because they are finding the collegial networking to be very beneficial. WCMS is also revising its bylaws, and has added a student and a resident as voting Board members. She thanked Sierra Neurosurgery for sponsoring WCMS' student and resident delegates to NSMA's Annual Meeting. WCMS currently has about 200 student members, which is more than it has ever had.

Agenda Item 5

CONSIDERATION AND ACTION REGARDING LEGISLATIVE INITIATIVES FOR 2019 LEGISLATIVE SESSION REGARDING NRS 622.400, NRS 630.100, NRS 630.306 AND NRS 630.352

Keith L. Lee, Esq. introduced Tom Clark and said they would be working together in the forthcoming legislative session. He explained they had been working together and with Board staff for the past several months to develop the Board's legislative initiatives, which were before the Board for approval that day.

Tom Clark explained that under NRS 622.400, the Board currently can recover certain costs for legal fees and the like. The proposed change will put into statute that the Board can also recover costs for hearing officers. The proposed change to NRS 630.100 puts into statute that in the event the video conference feed is cut off between meeting locations, the business of the Board can be continued using a dedicated phone line, which would still allow the public to participate. The proposed change in NRS 630.306 provides that disciplinary action that originates from the Board is excluded from the reporting requirement. The proposed change in NRS 630.352 provides clarity with respect to the prosecutorial process. Instead of the 30-day window starting at the hearing, it would begin at the time the adjudication takes place. The proposed change to NRS 630.306(1)(b)(3) adds the provision of NRS Chapter 639 that is applicable to a practitioner defined in NRS 639.0125.

Mr. Lee advised the Board that he and Mr. Clark had met with Assemblywoman Maggie Carlton. He said many know her to be sort of the point person with respect to all Title 54 matters and, of course, NRS chapter 630. She has served in this capacity since she was a State Senator. She termed out as a State Senator and is now a State Assemblywoman. She serves on the Commerce and Labor Committee and is Chairwoman of the Ways and Means Committee. At her request, they also met with Assemblywoman Sandra Jauregui, who will also be a sponsor of the bill. They vetted these initiatives with both of them, and some changes were made, which are reflected in what was being presented to the Board.

Ms. Peltyn moved that the Board authorize staff and its lobbyists to proceed with the proposed legislative initiatives and support those in the 2019 legislative session. Dr. Nagy seconded the motion, and it passed unanimously.

Agenda Item 6

PRESENTATION BY NEVADA ACADEMY OF PHYSICIAN ASSISTANTS (NAPA) REGARDING ITS 2019 LEGISLATIVE INITIATIVES

Brian Sady, DMSc, PA-C, President of the Nevada Academy of Physician Assistants (NAPA), said he had been practicing emergency medicine and family practice in Nevada for over 20 years. He explained that NAPA's lobbyist, Michael Hackett, was supposed to make the presentation, but he was terribly ill and could not attend the meeting. Mr. Sady said he was there speaking on behalf of physician assistants (PAs) in the state, as well as NAPA, and was not there speaking on behalf of his employer or any other organization he was associated with. He said there were two pieces of legislation NAPA will be putting forth in the legislative session. The first part of the first piece of legislation has to do with signatory authority. He explained they want to put physician assistants on equal par to be able to sign various different forms for their patients, such as disability placards. Currently, PAs have to interrupt the flow of the office, take additional time, and keep patients waiting to get a physician's signature rather than being able to provide that service. PAs want to provide more services for patients and improve the flow in their offices.

Mr. Sady explained the second part of the first piece of legislation is for PAs to have full voting membership on the boards of medicine, and the current draft proposes two members on each of the boards. He stated that across the country, in several states, PAs have their own boards, and in many states, PAs have full voting membership on boards to represent their profession.

Mr. Sady said the second piece of legislation regards "optimal team practice." He said he had worked on this concept for the physician assistant profession nationally. He said the key aspect the Board needs to be aware of is it would remove any linkage in the law to any provider in order to practice. He said they do not consider this independent practice or full practice authority, and they wanted to make clear they have always been partnered with physicians and they want to move forward with that partnership at the practice level. He explained the problem PAs run into is, for instance, in trying to provide voluntary free care in the community if a physician doesn't want to be a supervising physician. They have run into this in many circumstances because of the legalities involved. Many times, it is due to work burdens, administrative burdens, or it is a legal issue that they are concerned about. There have also been physicians who work for companies who want to volunteer and be supervising physicians, but because they are under contract with these companies, the companies don't want to extend and let them have these relationships, and that can cause legal issues as well. He said PAs have no issue with having supervisors at clinics and hospitals who are physicians. PAs work as part of a health care team, and they want to consult and refer, and do all those things with physicians they always do every day when they all practice medicine. However, if a physician doesn't want to provide that supervision, if he or she gets sick or ill and has to pull from that position, or if he or she passes away, that causes issues for PAs as far as finding another supervising physician. He said at the practice level, there are many safety and quality assurance measures, such as hospital credentialing and supervisors who are physicians and who are the head of teams at these facilities, so there are many different ways to provide quality assurance and safety for patients without a piece of paper at the Board with one person's name on it. He said Mr. Hackett had informed him he had already come to the Board and supplied the initial drafts of the proposed legislation to the Board. NAPA has two sponsors, but at this time is not releasing the names of those sponsors. Moving forward, they plan to have dialogue with the Board and they hope to have support from the Board regarding their legislative initiatives.

Discussion ensued regarding the second piece of legislation, specifically with respect to removal of the linkage to a supervising physician.

Dr. Hardwick asked what the term "legend drugs," as contained on page 3 of the materials, referred to.

Mr. Sady said that Mr. Hackett was prepared to go through the bills line by line, but he was not prepared to do so, and could only answer broader questions or comments. He said this was just an opening dialogue, and this was just a draft, not the final draft that will be submitted, and moving forward, they will be happy to address and answer any questions.

Discussion ensued regarding NAPA's proposal for representation on the Board. Dr. Hardwick asked how many PAs were in the state. Mr. Sady said there were about 1,000. Dr. Hardwick stated they were asking for 2 representatives on the Board, which is about 1 per 500 PAs, and there are 6 physicians on the Board representing about 9,000 MDs.

Further discussion ensued regarding NAPA's second piece of legislation, specifically with respect to removal of the supervising physician requirement.

Mr. Cousineau said he thought what NAPA was asking for that day was some kind of tacit blessing from the Board, and what he thought it should do is make sure the Board knows exactly what is being proposed. He said he thought the BDR could be reviewed at the Board's March meeting, before it has to go through certain committees, and that way areas where there is disagreement or concern and areas where there is support and agreement can be articulated, and then he and the Board's lobbyists could go before the legislative committees and tell them that the Board is comfortable with this and with that. There could also be a dialogue as to NAPA perhaps agreeing to modify, amend, remove or add language. But he wanted Mr. Sady to understand that, at that point, the Board was going to have difficulty doing anything but staying neutral. Mr. Cousineau added that some of the things NAPA had proposed already exist in regulation. He said he also had concerns with respect to the request that PAs with inactive-status licenses be exempt from paying renewal fees, as physicians have to pay a renewal fee to remain inactive.

Mr. Sady said he wasn't before the Board that day for its blessing; it was about giving the Board the courtesy of explaining what NAPA was pressing forward with.

Mr. Cousineau stated Mr. Sady's statement as far as a blessing was incongruent with what NAPA's lobbyist had indicated, and that is why the matter was agendized. Mr. Sady said that was not what he, personally, as the President representing NAPA, expected that day; he expected this to be a conversation that is ongoing.

Discussion ensued regarding the standard of care for PAs and the current educational requirements for PAs following high school.

Dr. Nagy said he was concerned with the greater potential for fraud and abuse by PAs than physicians due to the less significant investment of time in their education and training.

Agenda Item 7

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA*STATE BOARD OF MEDICAL EXAMINERS VS. JONATHAN B. BAKTARI, M.D., BME CASE
NO. 18-11602-1

Dr. Prabhu named the adjudicating Board members who would be considering the matter.

Mr. White stated a formal Complaint had been filed against Dr. Baktari alleging two violations of the Nevada Medical Practice Act, and outlined the terms of the proposed Settlement Agreement.

Ms. Mastroluca moved that the Board approve the Settlement Agreement. Dr. Muro seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 8

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. HUGH ARTHUR BURT, M.D., BME CASE NO. 18-12263-1*

Dr. Prabhu named the adjudicating Board members who would be considering the matter.

Mr. Kilroy stated a formal Complaint had been filed against Dr. Burt alleging one violation of the Nevada Medical Practice Act, and outlined the terms of the proposed Settlement Agreement.

Dr. Muro moved that the Board approve the Settlement Agreement. Ms. Mastroluca seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 9

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA* STATE BOARD OF MEDICAL EXAMINERS VS. RUSSELL P. GOLLARD, M.D., BME CASE NO. 18-11308-1

Dr. Prabhu named the adjudicating Board members who would be considering the matter.

Mr. White stated a formal Complaint had been filed against Dr. Gollard alleging one violation of the Nevada Medical Practice Act, and outlined the terms of the proposed Settlement Agreement.

Dr. Havins moved that the Board approve the Settlement Agreement. Ms. Mastroluca seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 10

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA*STATE BOARD OF MEDICAL EXAMINERS VS. IRFAN M. MIRZA, M.D., BME CASE NO. 18-12909-1

Dr. Prabhu named the adjudicating Board members who would be considering the matter.

Mr. White stated a formal Complaint had been filed against Dr. Mirza alleging one violation of the Nevada Medical Practice Act, and outlined the terms of the proposed Settlement Agreement.

Dr. Havins moved that the Board approve the Settlement Agreement. Dr. Edwards seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 11

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. CRISPINO SANTOS ANTOS, M.D.*, BME CASE NO. 18-11729-1

Dr. Prabhu named the adjudicating Board members who would be considering the matter.

Mr. Fricke stated a formal Complaint had been filed against Dr. Santos alleging three violations of the Nevada Medical Practice Act, and outlined the terms of the proposed Settlement Agreement.

Ms. Peltyn moved that the Board approve the Settlement Agreement. Dr. Muro seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 12

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA* STATE BOARD OF MEDICAL EXAMINERS VS. IVAN LEE GOLDSMITH, M.D., BME CASE NO. 18-8756-1

Dr. Prabhu named the adjudicating Board members who would be considering the matter.

Mr. Fricke stated a formal Complaint had been filed against Dr. Goldsmith alleging 10 violations of the Nevada Medical Practice Act, and outlined the terms of the proposed Settlement Agreement.

Dr. Edwards moved that the Board approve the Settlement Agreement. Ms. Mastroluca seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 13

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. ADAM JAMES LUCKETTE, PA-C*, BME CASE NO. 18-34553-1

Dr. Prabhu named the adjudicating Board members who would be considering the matter.

Mr. Fricke stated a formal Complaint had been filed against Mr. Luckette alleging one violation of the Nevada Medical Practice Act, and outlined the terms of the proposed Settlement Agreement.

Ms. Peltyn moved that the Board approve the Settlement Agreement. Ms. Mastroluca seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 14

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. KAREN RAE ABBOTT, M.D.*, BME CASE NO. 18-29273-2

Dr. Prabhu named the adjudicating Board members who would be considering the matter.

Mr. White stated a formal Complaint had been filed against Dr. Abbott alleging two violations of the Nevada Medical Practice Act, and outlined the terms of the proposed Settlement Agreement.

Dr. Hardwick moved that the Board accept the Settlement Agreement. Ms. Mastroluca seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 15

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA*STATE BOARD OF MEDICAL EXAMINERS VS. ALEXANDER IMAS, M.D., BME CASE NO. 18-32172-1

Dr. Prabhu named the adjudicating Board members who would be considering the matter.

Mr. Fricke stated a formal Complaint had been filed against Dr. Imas alleging one violation of the Nevada Medical Practice Act, and outlined the terms of the proposed Settlement Agreement.

Dr. Hardwick moved that the Board accept the Settlement Agreement. Mr. Duxbury seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 16

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA*STATE BOARD OF MEDICAL EXAMINERS VS. MAX L. CARTER, PA, BME CASE NO. 18-350-1

Dr. Prabhu named the adjudicating Board members who would be considering the matter.

Mr. Fricke stated a formal Complaint had been filed against Mr. Carter alleging one violation of the Nevada Medical Practice Act, and outlined the terms of the proposed Settlement Agreement.

Dr. Hardwick moved that the Board accept the Settlement Agreement. Ms. Peltyn seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 17

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA*STATE BOARD OF MEDICAL EXAMINERS VS. LUKE ST. JOHN CESARETTI, M.D., BME CASE NO. 18-7235-1

Dr. Prabhu named the adjudicating Board members who would be considering the matter.

Mr. Kilroy stated a formal Complaint had been filed against Dr. Cesaretti alleging two violations of the Nevada Medical Practice Act, and outlined the terms of the proposed Settlement Agreement.

Dr. Hardwick moved that the Board accept the Settlement Agreement. Ms. Mastroluca seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 18

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA*STATE BOARD OF MEDICAL EXAMINERS VS. JOHN WOOD GRINSELL, M.D., BME CASE NO. 18-27627-1

Dr. Prabhu named the adjudicating Board members who would be considering the matter.

Mr. Kilroy stated a formal Complaint had been filed against Dr. Grinsell alleging four violations of the Nevada Medical Practice Act, and outlined the terms of the proposed Settlement Agreement.

Dr. Hardwick moved that the Board accept the Settlement Agreement. Ms. Mastroluca seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 19

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF *THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. ROBERT WATSON, M.D.*, BME CASE NO. 18-12823-1

This matter was not discussed at the meeting.

Agenda Item 20

CONSIDERATION OF ACCEPTANCE OF VOLUNTARY SURRENDER OF MEDICAL LICENSE OF HORACE PAUL GUERRA, IV, M.D., LICENSE NO. 11608

Dr. Prabhu named the adjudicating Board members who would be considering the matter.

Mr. Kilroy explained that Dr. Guerra had pled guilty to Conspiracy to Distribute a Controlled Substance in federal court, and in his plea agreement, he was ordered to surrender his Nevada license to practice medicine. On October 23, Dr. Guerra signed a written, sworn statement surrendering his medical license.

Ms. Mastroluca moved that the Board accept Dr. Guerra's surrender of his medical license. Dr. Nagy seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 21

EXECUTIVE STAFF/STAFF REPORTS

(a) Investigations Division Report

Ms. Castagnola reported the current number of open investigative cases was 719 and the current number of cases per investigator was approximately 103. There were 92 peer reviews in the field and 20 peer reviews awaiting assignment.

(b) Quarterly Compliance Report

Ms. Jenkins reported the total number of files in collection with the State Controller's Office for the third quarter of 2018 was 8, for a total of \$45,951.66, no collections were written off during the quarter, the total outstanding in costs was \$68,323.82, total outstanding in fines was \$19,500.00, for a total outstanding of \$87,823.82, and total costs collected during the third quarter were \$18,635.91.

(c) Quarterly Update on Finances

Ms. Jenkins highlighted the various sections of the Balance Sheet for the third quarter of 2018. She stated it showed cash on hand in checking and CDs of \$3,151,000.00, total assets of \$7,798,000.00, and total liabilities and net position of \$7,798,000.00.

Ms. Jenkins then highlighted the various sections of the Profit and Loss Budget vs. Actual for the third quarter of 2018. Total income was \$1,134,000.00, which was at 99.7% of budget, personnel expenses were at exactly 100% of budget, total expenses were at 97.6% of budget, and the net loss was 17.4% better than budget for the quarter.

Dr. Nagy stated that one of the Board's initiatives for the upcoming legislative session is reimbursement for hearing officer fees. He asked whether it was anticipated this will result in a significant increase in the Board's revenue and, if so, whether there was a plan in place for how to use the increase.

Ms. Jenkins explained that the law already allows the Board to be reimbursed for fees, and this is just more of a delineation, so she didn't expect there to be any change in revenue related thereto.

Ms. Mastroluca asked why 529, Licensing Expense, was so high.

Ms. Jenkins explained that item is related to licensing peer reviews, which are paid to the Board by applicants up front, and paid out to the peer reviewers by the Board after the fact, and sometimes those occur over different quarters.

(d) Legal Division Report

Mr. Kilroy reported there were currently 150 cases in the Legal Division, 12 of which had been presented to the Board for action at this meeting; there were no cases pending the CMT process, and there won't be any more of those moving forward; there were 227 cases awaiting filing of a formal complaint, 22 cases in which a formal complaint had been filed that were pending hearings, and 68 letters of concern approved by the Investigative Committees during their November meetings. He provided an update regarding the pending civil court cases in which the Board was currently involved.

Agenda Item 22

LICENSURE RATIFICATION

Ratification of Licenses Issued, Reinstatements of Licensure and Changes of Licensure Status Approved Since the September 7, 2018 Board Meeting

Dr. Prabhu thanked the Board's Chief of the Licensing Division, Ms. Daniels, Chief of the Investigations Division, Ms. Castagnola, Chief of the Legal Division, Mr. Kilroy, the Finance Manager, Ms. Jenkins, and their teams, for the tremendous job they are doing.

Ms. Peltyn moved that the Board ratify the licenses issued, reinstatements of licensure and changes of licensure status approved since the September 7, 2018 Board Meeting. Dr. Edwards seconded the motion.

Ms. Daniels thanked her team for all of their hard work.

A vote was taken on the motion, and it passed unanimously.

Agenda Item 23

APPEARANCES FOR CONSIDERATION OF ACCEPTANCE OF APPLICATIONS FOR LICENSURE

(a) Mehran Salek, M.D.

Maria Nutile, Esq. appeared with Dr. Salek as his legal counsel.

Dr. Prabhu asked Dr. Salek whether he wanted his application to be considered in closed session, with the public being excluded, and he said that he did not.

Dr. Muro congratulated Dr. Salek on having passed the SPEX. Dr. Muro then explained that Dr. Salek had previously been licensed in Nevada, and due to some erroneous information that was since corrected or rescinded, Dr. Salek's license was revoked. This set in motion a series of legal challenges to get him back to practice and to move on with his career. A big part of it had to do with the situation in Iran and the relationships and the politics within the country itself. Dr. Salek persevered, came before the Board multiple times, and the last time, the Board understood what had happened, but found itself in a situation where it couldn't undo what was already done. So an opportunity was recognized which would allow Dr. Salek to move forward. Passing the SPEX would allow him to obtain a license, sit for his boards, and at that time, start practicing.

Dr. Hardwick moved that the Board grant Dr. Salek's application for licensure. Dr. Havins seconded the motion, and it passed unanimously.

(b) Michael Philip Chan, M.D.

Bridget Kelly, Esq. appeared with Dr. Chan as his legal counsel.

Dr. Prabhu asked Dr. Chan whether he wanted his application to be considered in closed session, with the public being excluded, and he said that he did.

Ms. Mastroluca moved that the Board go into closed session pursuant to NRS 241.030. Mr. Duxbury seconded the motion, and it passed unanimously.

Upon returning to open session, Dr. Hardwick moved that the Board grant Dr. Chan's application for licensure. Mr. Duxbury seconded the motion, and it passed unanimously.

(c) Michel Aaron Sucher, M.D.

Dr. Prabhu asked Dr. Sucher whether he wanted his application to be considered in closed session, with the public being excluded, and he said that he did not.

Ms. Mastroluca asked Dr. Sucher to tell the Board about his background and how he ended up in his current practice.

Dr. Sucher said he moved to Arizona in 1974 and began practicing emergency medicine. He practiced that for about 20 years. About 10 years into that, he developed a cocaine problem and sought treatment for cocaine addiction. He successfully completed treatment and was monitored for about two years by the Arizona Medical Board under a non-disciplinary stipulation. Over the subsequent 10 years, he gradually transferred his practice from emergency medicine to addiction medicine. He left the emergency department in about 1995, and has been exclusively practicing addiction medicine. He was asked by the Arizona Medical Board to become a consultant in addiction medicine in 1991, and along with his practice partner, Dr. David Greenberg, they took over the physician health program under contract with the Arizona Medical Board in July of 1992, and have been the operators of the program since that time. Dr. Sucher became certified in 1986 by the American Society of Addiction Medicine, recertified in 1996, and in 2009, the American Board of Addiction Medicine came into existence, and he became certified by that Board under the grandfather process based on his prior certifications. He then described the circumstances surrounding probation of his license in California, which ended in March of 2005.

Ms. Mastroluca asked Dr. Sucher whether he intended to again become board certified. Dr. Sucher explained he is not currently eligible to take the board exam; however, if he becomes eligible, he will do so.

Ms. Mastroluca asked Dr. Sucher what he planned to do if granted a license to practice medicine in Nevada.

Dr. Sucher explained that Dr. Peter Mansky, who operated the Nevada Professionals Assistance Program (NPAP), became quite ill a year or two ago, and asked him and John Southworth, who operated the Idaho PRN program for physicians and other professionals, if they would take over that program for him. They agreed to do so. Dr. Mansky and Mr. Southworth have since passed on. Dr. Sucher and Mr. Southworth's successor, Ben Seymour, continue to operate the NPAP, and it is Dr. Sucher's plan to set up more of a structured practice in Nevada, to grow and expand NPAP, so it can be as much of a resource for this Board and other regulatory boards as it can.

Dr. Hardwick moved that the Board grant Dr. Sucher's application for licensure. Dr. Edwards seconded the motion, and it passed unanimously.

Ms. Mastroluca thanked Dr. Sucher for bringing his expertise to Nevada.

(d) Christopher Joseph Galea, M.D.

Dr. Prabhu asked Dr. Galea whether he wanted his application to be considered in closed session, with the public being excluded, and he said that he did not.

Dr. Edwards outlined Dr. Galea's education and training. He explained that CODA is the Commission on Dental Accreditation, which is analogous to the American Board of Medical Specialties (ABMS) for dental training programs. He said it was important to note that Dr. Galea's training programs are CODA-approved programs, but are not ACGME-approved programs. He said Dr. Galea was currently boarded by the American Board of Oral and Maxillofacial Surgery, which is not recognized by the Board of Medical Examiners. He said Dr. Galea had initially applied to the Board for licensure in September 2017, and asked Dr. Galea why he withdrew that application.

Dr. Galea explained you are allowed six months to complete your application, and there were a couple of documents he was going back and forth on with the license specialist, up to the very last day, and on the very last day, he was told the window was closed and he had to reapply.

Dr. Edwards stated Dr. Galea was applying for a license by endorsement, and he had an active license in Louisiana. Dr. Edwards said only one year of Dr. Galea's training was considered approved by the ACGME, so he had not completed 36 months of ACGME-approved progressive postgraduate training. Dr. Edwards then questioned Dr. Galea regarding his affirmative response to Question 13 on his application for licensure.

Dr. Galea described the circumstances surrounding his arrest in New Orleans in 2009, which was subsequently expunged, and his arrest in Lake Tahoe in 2011.

Dr. Edwards asked Dr. Galea about his practice plans.

Dr. Galea explained he has an active Nevada dental license, he lives in Reno, and he owns a practice there. His fellowship training, which he completed following his residency training, was in cleft lip and palate/craniofacial surgery, which is fairly subspecialized, and he chose Reno because there is no real formal cleft lip and palate care continuity for a lot of these families. He has active hospital privileges at Renown and St. Mary's, and he had already done a lot of cleft procedures for patients who otherwise would have had to travel elsewhere for them.

Dr. Edwards said that if the Board were to grant Dr. Galea a medical license in Nevada, he would then be under the auspices of two boards, have two renewal fees, and he would need ACGME CME to renew his medical license, and he asked why Dr. Galea wanted to take on all of those additional burdens.

Dr. Galea explained that having done the cleft lip and palate/craniofacial training, working with Renown and trying to develop a team through Renown and having a clinic, he personally feels it is important to have an active medical license for what he would consider expanded scope procedures.

Dr. Edwards said that in his application, Dr. Galea indicated that, should the Board choose to exercise not to grant him a license by endorsement, he would be willing to undergo some form of peer review.

Discussion ensued regarding whether it would be appropriate to grant Dr. Galea a license by endorsement.

Dr. Galea stated that the institutions at which he completed his training recognized his training as ACGME-equivalent training. He said he had been in training the last eight years of his life, he continually pushed himself to provide himself with the best training possible, he has passed every exam, has received great remarks on every rotation he has ever been in, and has done everything that any other M.D. has accomplished.

Mr. Cousineau stated the requirement is 36 months of ACGME-recognized progressive postgraduate training, and Dr. Galea had only completed 1 year of ACGME-recognized training. Dr. Galea is entitled to apply for licensure by endorsement because he holds a license in good standing in another jurisdiction, and while Mr. Cousineau thinks his training is commendable, the Board must focus on what Nevada law requires.

Dr. Havins said Dr. Galea could use "M.D." after his name, but he would have to put an asterisk that says he is practicing under the Nevada Board of Dental Examiners.

Further discussion ensued regarding whether it would be appropriate to grant Dr. Galea a license by endorsement.

Dr. Hardwick moved that the Board grant Dr. Galea's application for licensure. Dr. Nagy seconded the motion, and it failed, with Dr. Hardwick and Dr. Nagy voting in favor of the motion and all other Board members voting against the motion.

(e) Steven Clarence Lore, M.D.

Alice Mercado, Esq. appeared with Dr. Lore as his legal counsel.

Dr. Prabhu asked Dr. Lore whether he wanted his application to be considered in closed session, with the public being excluded, and he said that he did.

Dr. Havins moved that the Board go into closed session pursuant to NRS 241.030. Dr. Edwards seconded the motion, and it passed unanimously.

Upon returning to open session, Dr. Muro moved that the Board grant Dr. Lore's application for licensure. Dr. Hardwick seconded the motion, and it passed unanimously.

(f) Daisy De Guia De Guzman, M.D.

- Dr. Prabhu asked Dr. De Guzman whether she wanted her application to be considered in closed session, with the public being excluded, and she said that she did not.
 - Dr. Havins asked Dr. DeGuzman about her FLEX scores.
- Dr. DeGuzman explained that the first time she took the SPEX, she passed the clinical but failed the basic. On her second attempt, she passed the basic and received an initial license from the state of Virginia. At that time, she also applied for a license in New York, and also received that. In New Jersey, she received an endorsement, and she practiced there.
- Dr. Havins stated that Dr. DeGuzman's scores on the FLEX were 73 and 73, which is below 75, but nonetheless, she was still issued a certificate.
- Ms. Daniels explained that in that era, it was at the discretion of the Board if they wanted to issue a license off the FLEX scores. So, for Nevada, she does not meet that component.
- Dr. Havins questioned Dr. DeGuzman regarding her affirmative response to Question 13 on her application for licensure.
 - Dr. DeGuzman described the circumstances surrounding her arrest in 2011.
- Dr. Havins asked whether Dr. DeGuzman was still on probation related to that arrest and subsequent proceedings, and Dr. DeGuzman said her probation ended on September 15, 2015.
- Dr. Havins questioned Dr. DeGuzman regarding her affirmative response to Question 12 on her application for licensure.
- Dr. De Guzman described the circumstances surrounding the two cases of malpractice that had been filed against her.
- Dr. Havins asked Dr. DeGuzman to describe her practice history, and Dr. DeGuzman did so. She said in the last four years, she had practiced under supervision for six months, and had not practiced other than that.
- Dr. Havins asked Dr. DeGuzman why she wanted a license in Nevada, and Dr. DeGuzman said her passion was to dedicate her life to the practice of medicine, and she wants to complete her dream and take care of patients and continue to practice her specialty, which is internal medicine. Her original internal medicine certification had been rescinded, so she took and passed the board exam again last year.

Dr. Havins asked Dr. DeGuzman about the status of her New Jersey license, and Dr. DeGuzman said it is "Reduced Active."

Ms. Mastroluca asked why Dr. DeGuzman specifically wanted to work in Nevada, and Dr. DeGuzman said the weather is better and there is no state tax in Nevada.

Dr. Nagy asked whether organized crime was part of the allegations against her, and Dr. DeGuzman said it was not.

Dr. Prabhu moved that the Board grant Dr. DeGuzman's application for licensure. Ms. Peltyn seconded the motion, and it passed unanimously.

(g) Matthew Peter Prekupec, M.D.

Dr. Prabhu asked Dr. Prekupec whether he wanted his application to be considered in closed session, with the public being excluded, and he said that he did.

Dr. Havins moved that the Board go into closed session pursuant to NRS 241.030. Dr. Edwards seconded the motion, and it passed unanimously.

Upon returning to open session, Mr. Duxbury moved that the Board grant Dr. Prekupec's application for licensure contingent upon completion of the NPAP program, and once that is completed, Dr. Prekupec is to come back to the Board to have the condition lifted. Ms. Peltyn seconded the motion, and it passed unanimously.

(h) Sabita Moktan-Sheikhai, M.D.

Dr. Prabhu asked Dr. Moktan-Sheikhai whether she wanted her application to be considered in closed session, with the public being excluded, and she said that she did not.

Dr Prabhu outlined Dr. Moktan-Sheikhai's medical education and training and stated that she was applying for licensure by endorsement because she had not passed a major examination with the last 10 years.

Dr. Moktan-Sheikhai said she had taken the SPEX at the beginning of the month, as it was the only exam that was currently available, and was waiting for the results. She said she will have to wait until next year to take the endocrine recertification exam.

Mr. Duxbury said he believed the state is deficient in endocrinologists.

Discussion ensued regarding whether it would be appropriate to grant Dr. Moktan-Sheikhai a license by endorsement.

Mr. Duxbury moved that the Board grant Dr. Moktan-Sheikhai's application for licensure by endorsement. Ms. Peltyn seconded the motion, and it passed, with Dr. Hardwick and Dr. Muro voting against the motion and all other Board members voting in favor of the motion.

(i) Cortland Jesse Lohff, M.D.

Annette Bradley, Esq., General Counsel for the Southern Nevada Health District (SNHD), appeared with Dr. Lohff, and provided materials to the Board for review.

Dr. Prabhu asked Dr. Lohff whether he wanted his application to be considered in closed session, with the public being excluded, and he said that he did not.

Dr. Hardwick said his concern was that Dr. Lohff had not practiced clinical medicine for 20 years. He said he had no problem granting Dr. Lohff an administrative license, but he couldn't imagine granting someone an unrestricted license who had been away from patient care for 20 years.

Dr. Havins said there are people who practice in fields of medicine where they don't actively see patients, dermatopathologists, for example, but they hold active licenses. The Director of the SNHD doesn't normally see patients. He said Dr. Lohff is eminently qualified to direct a residency program. He asked Dr. Lohff whether he planned to see patients.

Dr. Lohff explained that he is the Residency Director for the preventive medicine public health residency, and those residents will have to spend about two months per each of their two years providing direct patient care in their clinics. He felt it important that he be able to acquire the knowledge and skills to be able to practice in the clinic so he will have the appropriate ability to supervise the residents as they provide the care. He doesn't intend to spend a large amount of his time providing direct patient care, but he would like to be able to get back into the care to the point where he can adequately supervise the residents that are working there.

Dr. Havins asked Dr. Lohff how he was going to develop this expertise without some type of monitoring program.

Dr. Lohff said the plan going forward was that he would undergo some structured preceptorship at the clinic, which would provide supervised mentorship, and ultimately be able to provide unsupervised care himself.

Mr. Cousineau asked Dr. Lohff to describe for the Board what he thought would be an appropriate potential preceptorship plan.

Dr. Lohff said he had been in conversations with Dr. Fermin Leguen, the Director of Clinical Services at SNHD. They have very specialized public health clinics, and also have a new primary care clinic as well. Dr. Leguen would be his preceptor, for perhaps six months to a year, and, similar to other training programs, it would be sort of gradual, increasing his responsibilities and independence based on Dr. Leguen's understanding of Dr. Lohff's skills and feedback provided to Dr. Leguen by Dr. Lohff. He said they had spoken with Dr. Leguen just before the meeting, and he clarified he would be able to provide that preceptorship.

Mr. Cousineau asked Dr. Lohff whether, with respect to reporting to the Board, they had come up with an idea as to what they thought would be appropriate or whether they would defer to Board staff or the Board members for that recommendation.

Dr. Lohff said they had not discussed that thoroughly, and would defer to the Board for its recommendations.

Mr. Cousineau said he thought a year, at a minimum, would be appropriate as far as a preceptorship, and Dr. Lohff could come back to the Board six or nine months from now and petition the Board to remove the preceptorship requirement. As far as the reporting requirements, in cases like these, usually the first two to three months, a bimonthly status check and update are required, and then perhaps it could be reduced to once a month.

Ms. Bradley stated she had spoken with Dr. Leguen that afternoon. He confirmed he would be willing to be the preceptor for Dr. Lohff, and that he has had prior conversations with Dr. Lohff about the preceptorship, so once they receive the Board's approval, they are ready to move forward.

Dr. Hardwick said he couldn't recall seeing anyone who has been out of clinical practice for 20 years, and under these circumstances, at some point, either now or after the preceptorship, he would like to have Dr. Lohff evaluated by PACE for fitness for duty. He then asked whether the residency program was associated with any of the medical schools.

Dr. Lohff said the SNHD will be the sponsoring institution and the location where the program will be taking place.

Discussion ensued regarding whether it would be appropriate to require Dr. Lohff to undergo an evaluation at PACE in addition to the preceptorship.

Dr. Lohff said it wasn't his intent to say that he would be supervising the residents while they were providing the care in the clinics; that would be done by the clinical staff. His role would be to, at a much higher level, make sure they are doing what they need to do.

Dr. Hardwick moved that the Board grant Dr. Lohff a conditional license with the stipulation of a year of preceptorship to be followed by a PACE evaluation. Ms. Mastroluca seconded the motion.

Mr. Cousineau asked Dr. Lohff whether he would be willing to do that.

Dr. Lohff said he would be willing to do whatever the Board recommended. He said the PACE evaluation was an extra thing he didn't feel the need to undergo, but he understood the need for the preceptorship.

Ms. Bradley asked whether, at six months into the preceptorship, or at the end of the preceptorship, they have demonstrated that Dr. Lohff has the skill and ability to provide direct patient care to the public health patients, there was a possibility the requirement that he undergo the PACE evaluation would be taken off the table.

Mr. Cousineau said his feeling was that the Board members, although they respect the fact his preceptor will be providing reports, want a more independent, autonomous assessment. He said he would encourage Dr. Lohff to take the PACE evaluation anytime within the year time frame, and he would also say if Dr. Lohff came back and had that PACE evaluation and it supported him, it would probably be a lot more likely he could get the condition lifted earlier.

Mr. Cousineau asked Dr. Hardwick if he would be willing to amend his motion to allow Dr. Lohff to come back in advance of completion of the year of preceptorship.

Dr. Hardwick said not less than six months.

Ms. Daniels suggested the reports be provided to the Board bimonthly, with 100% signoff the first three months, and then they can whittle that down after that to 75% at some point, then 50%, then 25%.

Dr. Hardwick amended his motion that the Board grant Dr. Lohff a conditional license with a preceptorship of not less than six months, up to a year, with a final evaluation by PACE. Ms. Mastroluca seconded the amended motion.

Dr. Hardwick stated the amended motion included the reporting requirements as stated by Ms. Daniels.

A vote was taken on the amended motion, and it passed unanimously.

(j) Richard Alan Mitchell, M.D.

Dr. Prabhu asked Dr. Mitchell whether he wanted his application to be considered in closed session, with the public being excluded, and he said that he did not.

Dr. Prabhu questioned Dr. Mitchell regarding his affirmative response to Questions 12 and 12a on his application for licensure.

Dr. Mitchell described the circumstances surrounding the one case of malpractice filed against him that resulted in a settlement.

Dr. Prabhu stated Dr. Mitchell held active licenses in 15 states, and asked what he planned to do if granted a license to practice medicine in Nevada.

Dr. Mitchell said he would like to be able to read cases from Incline Village, and the company he works for has a policy that you hold a license in a state that you read from.

Dr. Havins asked whether he would be practicing teleradiology, reading cases from his home in Incline Village, and Dr. Mitchell said that was correct.

Dr. Havins moved that the Board grant Dr. Mitchell's application for licensure. Dr. Edwards seconded the motion, and it passed unanimously.

(k) Michael Robert Kane, M.D.

Dr. Prabhu asked Dr. Kane whether he wanted his application to be considered in closed session, with the public being excluded, and he said that he did not.

Dr. Edwards outlined Dr. Kane's medical education and training, and then asked Dr. Kane to explain why he changed specialties.

Dr. Kane explained why he decided to change specialties from internal medicine to ob/gyn and then from ob/gyn to emergency medicine.

Dr. Edwards questioned Dr. Kane regarding his affirmative responses to Questions 5a and 5b on his application for licensure.

Dr. Kane described the circumstances surrounding three of the cases of malpractice that had been filed against him that resulted in settlements.

Dr. Edwards asked Dr. Kane what he planned to do if granted a license to practice medicine in Nevada.

Dr. Kane said he planned to practice urgent care for CareNow as the Director of one of their urgent care clinics.

Dr. Hardwick moved that the Board grant Dr. Kane's application for licensure. Dr. Edwards seconded the motion, and it passed unanimously.

(1) Richard Craig McCauley, M.D.

Dr. Prabhu asked Dr. McCauley whether he wanted his application to be considered in closed session, with the public being excluded, and he said that he did not.

Ms. Peltyn stated that Dr. McCauley was applying for licensure by endorsement. She asked Dr. McCauley what he planned to do if granted a license to practice medicine in Nevada.

Dr McCauley outlined his medical education and training. He said he practiced for about 17 years, and never had a malpractice claim. His cousin had started Kinkos Copies, and he had watched it grow. In around 2008, he was in the emergency room, and thought of the concept of a "Kinkos for healthcare," and started Wellnessmart in 2008. They now have 19 locations in California, they've opened in Denver, Washington and Oregon, and he has a license in 35 states. He then described how Wellnessmart operates.

Ms Peltyn stated that Dr. McCauley had not taken a major examination within the last 10 years.

Ms. Daniels explained that if Dr. McCauley were to take a major examination, such as SPEX, and pass with 75 or better, or become recertified, that would fulfill the 10-year exam rule, and he wouldn't need to come before the Board again.

Discussion ensued regarding whether it would be appropriate to grant Dr. McCauley a license by endorsement.

Mr. Cousineau advised Dr. McCauley that he could withdraw his application, or the Board could vote on granting him licensure by endorsement.

Dr McCauley said he wanted to withdraw his application.

(m) Samir S. Hadi, M.D.

Dr. Prabhu asked Dr. Hadi whether he wanted his application to be considered in closed session, with the public being excluded, and he said that he did not.

Dr. Havins summarized Dr. Hadi's medical education, training, and practice history, and stated the issue was whether Dr. Hadi had completed 36 months of ACGME-approved progressive postgraduate training.

Or. Hadi explained he was participating in the ABP Alternative Pathway certification process. It is a four-year pathway, and he will complete that on June 30, 20.19, so he will be eligible to take his boards in July of 2019.

Dr. Nagy asked Dr. Hadi whether he was planning to practice primarily in endovascular neuroradiology or in nuclear medicine, and Dr. Hadi said his understanding was he will primarily be the interventional guy, but he will also provide other services.

Dr. Nagy said the state has a shortage of people in endovascular neuroradiology.

Discussion ensued regarding whether it would be appropriate to grand Dr. Hadi a license by endorsement.

Dr. Muro said Dr. Hadi brings a unique combination of skill set and training, and what he has done perhaps has given him more experience and training than if he had done the traditional 36 months' training. He thinks he has accumulated a broad wealth of experience and formal training.

Dr. Hadi said he was not planning to practice at this time; he is going to join the practice after July of 2019.

Dr. Prabhu said he thinks we really need someone like Dr. Hadi in Nevada.

Dr. Prabhu moved that the Board grant Dr. Hadi's application for licensure. Dr. Nagy seconded the motion, and it passed unanimously.

Agenda Item 24

AUTHORIZATION FOR STAFF TO ENGAGE IN A STUDY REGARDING FEES CHARGED TO LICENSES, INCLUDING FEES FOR BACKGROUND CHECKS, PURSUANT TO RECOMMENDATIONS OF THE SUNSET SUBCOMMITTEE OF THE LEGISLATIVE COMMISSION

Mr. Cousineau explained Board staff had appeared before the Sunset Subcommittee of the Legislative Commission in March of this year and in October, the Board received a letter from the Chairwoman of the Sunset Subcommittee with the Subcommittee's recommendations. First, and most importantly, the Subcommittee recommended continuation of the Board. Additionally, it urged the Board to review its fee schedule, including aligning fees charged for background checks with costs to obtain the information, as well as conducting an inquiry as to how the Board's biennial registration fees compare to those of surrounding states. Therefore, he was requesting the Board authorize staff to undertake a study along those lines and present the results to the Board at a future Board meeting. If the Board ratifies the study and the findings therefrom, the study and findings will be advanced to the next interim session of the Sunset Subcommittee, which will be held after the 2019 Legislative Session.

Dr. Nagy moved that the Board authorize staff to proceed with the study. Dr. Havins seconded the motion, and it passed unanimously.

Agenda Item 25

CONSIDERATION OF SALARY RANGES FOR BOARD EMPLOYEES PURSUANT TO RECOMMENDATIONS OF THE GOVERNOR'S FINANCE OFFICE, DIVISION OF INTERNAL AUDITS

Ms. Jenkins explained that staff had endeavored on this particular study at the recommendation of the Governor's Finance Office, Division of Internal Audits. The

recommendation was that we compare each position in the organization against similar positions in State government and that we keep the Board's salary and wage ranges within the ranges suggested for those positions. Staff took each position title and found similar positions inside the State, considered the job descriptions and found the closest matches, then assigned those to each of the Board's positions. She said where there is a classified position inside the State, there is a range; where there is an unclassified position, there is only one number, and in those cases, we consider that the cap for that particular position. She asked the Board to approve the proposed salary ranges and caps for all positions.

Dr. Havins said it was an excellent study and that staff had put in a good amount of time and a good-faith effort to find similarities between the positions of the Board employees and those in Nevada government, and he recommended the Board adopt this.

Dr. Havins moved that the Board approve the proposed salary ranges. Mr. Duxbury seconded the motion, and it passed unanimously.

Agenda Item 26

PERSONNEL

Annual Performance Evaluation of Executive Director

Dr. Prabhu said the Board members had been provided with a copy of Mr. Cousineau's evaluation. He stated that Mr. Cousineau is the best Executive Director the Board has ever had, and thanked him.

Ms. Peltyn concurred. She said Mr. Cousineau is always thinking about what is the best for the Board, he is right on target, he has a very good sense of humor, he treats everyone equally, and because of that, he has an awesome staff. The Board is very grateful to him and he makes its job much easier.

Mr. Cousineau thanked the Board, and said he is very blessed to have Board members that are very supportive of him, as well as supportive staff. He tries to remind staff how much he appreciates them, and always continues to try to improve the Board's metrics and productivity. He thinks we do a good job, but is never going to rest on our laurels.

Dr. Edwards said he has known Mr. Cousineau since 2003, that he has been a really strong, consistent face for the Board, and that he concurred with what the other Board members had said.

Dr. Hardwick said he has been with the Board for seven years, and he doesn't think he has seen the Board in better shape.

Mr. Duxbury concurred.

Agenda Item 27

CONSIDERATION AND ADOPTION OF BUDGET FOR CALENDAR YEAR 2019, TO INCLUDE ANY POTENTIAL STAFF SALARY INCREASES

Ms. Jenkins outlined the proposed budget for calendar year 2019. She thanked Mr. Duxbury, Mr. Cousineau and Ms. Mehta for their input. She explained staff is working on building the Board's reserves. As of the end of the third quarter of 2018, the Board's reserves were around two months, and the goal is to get to six months. Although the proposed budget is almost exactly a break-even budget, she expects the Board will perform well against the budgeted

numbers and be back in the mode of building the reserves. She stated almost all the numbers in the income section were based on 6% growth from the last renewal year. The Board's income is typically a little higher in renewal years, and the percentage was based on a 10-year average of growth of the Board's licensing base, and therefore its licensing fees, and the total projected income is around \$5 million.

Ms. Jenkins then outlined the proposed expenses. She explained the proposed budget for the personnel section includes a 3% cost-of-living (COLA) increase for the staff, with the exception of the Medical Reviewers. They just moved from being contractors to being employees, and staff has not proposed a COLA increase for them, primarily due to the salary and wage caps that have been set up, so they will stay at their current hourly rate. Additionally, Mr. Cousineau is not accepting a COLA at this time pending an opinion from the Attorney General's Office regarding his salary, which was brought up in the audit by the Governor's Finance Office. She said the remainder of the items in the expenses section were all based on either last year's budget, or exactly what we know we will be spending in the next year, or the actual numbers from the last renewal year. The total operating expenses are \$1,334,000.00, with total expenses of \$5,136,000.00, projected interest at \$66,300.00, and income at around \$3,600.00.

Dr. Havins moved that the Board approve the budget. Dr. Edwards seconded the motion.

Mr. Duxbury commended Ms. Jenkins on this excellent budget and her very diligent work.

A vote was taken on the motion, and it passed unanimously.

Agenda Item 28

STAFF COMMENTS/UPDATES

Mr. Cousineau reminded the Board that the Federation of State Medical Boards' Annual Meeting will be held April 25-27 in Fort Worth, and funds had been allocated for every Board member to attend, if they are inclined to do so. He encouraged any Board members who had not yet attended to do so.

Mr. Cousineau reported that the Board had recently undergone the triennial fingerprint audit by the Nevada Department of Public Safety (DPS), and he commended all staff involved in the audit, particularly Ms. Daniels, who led the audit effort on behalf of the Board. He then read from the letter received from DPS with regard to the audit, notifying the Board of its full compliance with FBI and State policies, and commending the Board, and Ms. Daniels in particular, for attention to detail and quality control.

Dr. Havins thanked Mr. Cousineau for making opportunities such as the FSMB Annual Meeting available to the Board, and encouraged the Board members to avail themselves of these opportunities.

Mr. Cousineau said that he, Ms. Mehta and Mr. Kilroy would be presenting the Board's two-hour outreach program at the Renown main campus in Reno the following Thursday, and would also be presenting the outreach program in Elko sometime in winter or early spring. He said he had attended the Annual Meeting of the Interstate Medical Licensure Compact and had been selected to serve as the Treasurer for the next year. As such, he hopes to effectuate some much needed change as it relates to some of the protocols.

Ms. Mehta advised the Board of a recent Nevada Supreme Court opinion in the case of Comstock Residents Association vs. Lyon County Board of Commissioners, which clarified that public records can exist on personal devices. The nature of the record is not where it resides, but whether it was transacted in the public interest. She said she believed that was everyone's understanding, but she wanted to be sure the Board members were aware, for example, if there are texts on their personal devices, they could be subject to a public records request.

Agenda Item 29

PUBLIC COMMENT

Dr. Prabhu asked whether there was anyone in attendance who would like to present public comment. No public comment was received.

Agenda Item 30

<u>ADJOURNMENT</u>

Mr. Duxbury moved to adjourn the meeting. Ms. Mastroluca seconded the motion, and it passed unanimously. Dr. Prabhu adjourned the meeting at 2:40 p.m.

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