

NEVADA STATE BOARD OF MEDICAL EXAMINERS

9600 Gateway Drive
Reno, NV 89521

Nick M. Spirtos, M.D., F.A.C.O.G.
Board President



Edward O. Cousineau, J.D.
Executive Director

*** * * MINUTES * * ***

OPEN SESSION BOARD MEETING

Held in the Conference Room at the Offices of the
Nevada State Board of Medical Examiners
325 E. Warm Springs Road, Suite 225, Las Vegas, Nevada 89119

and Videoconferenced to

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

FRIDAY, DECEMBER 13, 2024 – 8:00 a.m.

Board Members Present

Nick M. Spirtos, M.D., F.A.C.O.G., President
Bret W. Frey, M.D., Vice President
Ms. Maggie Arias-Petrel, Secretary-Treasurer
Chowdhury H. Ahsan, M.D., Ph.D., FACC
Ms. Pamela J. Beal
Carl N. Williams, Jr., M.D., FACS
Irwin B. Simon, M.D., FACS
Joseph Olivarez, P.A.-C
Jason B. Farnsworth, RRT, MBA
Hugh L. Bassewitz, M.D., FAAOS

Board Members Absent

Col. Eric D. Wade, USAF (Ret.)

Staff/Others Present

Edward O. Cousineau, J.D., Executive Director
Sarah A. Bradley, J.D., MBA, Deputy Executive Director
Donya Jenkins, Chief of Finance and Human Resources
Laurie L. Munson, Chief of Administration and Information Systems
Ernesto Diaz, Chief of Investigations
Deonne E. Contine, J.D., General Counsel
Donald K. White, J.D., Senior Deputy General Counsel
Ian J. Cumings, J.D., Senior Deputy General Counsel
William P. Shogren, J.D., Deputy General Counsel
Kory Linn, Chief of Licensing
Matthew P. Feeley, J.D., Deputy Attorney General

Agenda Item 1

CALL TO ORDER AND ANNOUNCEMENTS

- Roll Call/Quorum

The meeting was called to order by President Nick M. Spirtos, M.D., F.A.C.O.G., at 8:07 a.m.

Mr. Cousineau took roll call, and all Board members were present with the exception of Ms. Maggie Arias-Petrel, Chowdhury H. Ahsan, M.D., Ph.D., FACC, and Col. Eric D. Wade, USAF (Ret.). Mr. Cousineau announced there was a quorum.

Agenda Item 2

PUBLIC COMMENT

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

Agenda Item 3

APPROVAL OF MINUTES

- September 13, 2024 Board Meeting – Open/Closed Sessions

Mr. Farnsworth moved that the Board approve the Minutes of the September 13, 2024 Board Meeting – Open/Closed Sessions. Ms. Beal seconded the motion, and it passed unanimously.

Agenda Item 4

CONSIDERATION AND ACTION REGARDING LEGISLATIVE INITIATIVES FOR 2025 LEGISLATIVE SESSION REGARDING PROPOSED AMENDMENTS TO NRS 629.061, NRS 630.0129, NRS 630.021, NRS 630.047, NRS 630.130, NRS 630.160, NRS 630.1605, NRS 630.1607, NRS 630.195, NRS 630.253, NRS 630.254, NRS 630.255, NRS 630.257, NRS 630.258, NRS 630.259, NRS 630.261, NRS 630.265, NRS 630.2677, NRS 630.268, NRS 630.26835, NRS 630.2684, NRS 630.26845, NRS 630.2691, NRS 630.2692, NRS 630.2696, NRS 630.2735, NRS 630.275, NRS 630.2751, NRS 630.2752, NRS 630.2755, NRS 630.277, NRS 630.301, NRS 630.306, NRS 630.3067, NRS 630.3068, NRS 630.3069, NRS 630.307, NRS 630.309, NRS 630.311, NRS 630.318, NRS 630.326, NRS 630.329, NRS 630.336, NRS 630.339, NRS 630.344, NRS 630.352, NRS 630.355, NRS 630.356, NRS 630.358, NRS 630.364 and NRS 630.373, PROPOSED REPEAL OF NRS 630.1606, NRS 630.2535, NRS 630.2693 and NRS 630.324, AND PROPOSED NEW PROVISIONS TO ADD A DEFINITION FOR “COLLABORATING PHYSICIAN” AND “PROGRESSIVE” FOR RESIDENCY PURPOSES

Dr. Spirtos said Mr. Cousineau, Ms. Bradley and the legal staff spent an enormous amount of time drafting these legislative initiatives and there will be any number of adjustments, amendments and changes to them. He encouraged all Board members to actively participate in the legislative session proceedings.

Ms. Bradley explained that most of the Board's Bill Draft is cleanup language; however, there are a couple of new items. The first is to potentially add advanced practice registered nurses, registered nurses and licensed practical nurses to the definition of who can delegate to a medical assistant. She said we are also doing our best to remove the requirement that practitioners of respiratory care have two licenses – one from the Board and one from the Division of Public and Behavioral Health. Additionally, we have added a definition of “progressive” for residency purposes. The law already requires that someone do a progressive program, but nowhere yet is it defined. There are also some increases in fees in NRS 630.268.

Ms. Bradley said she had spoken with Assemblyman Orentlicher, the bill's sponsor, on Monday. He is a medical doctor and an attorney. He likes the bill and wants to bring the bill. He wants to potentially add two things to the bill. First, he wants the Board to consider licensing what are called “associate physicians” in some states. These are people who do not complete residency. They would be supervised in a similar manner to physician assistants. The second is to add something regarding children's cardiac screening. Mr. Bradley said she did not have language for those two items yet.

Dr. Simon asked whether the Board had any information regarding how licensure of associate physicians has worked out in other states. He is concerned that the public may think they are full-fledged physicians.

Ms. Bradley said there are several states that have something like this. Her understanding is that they would have to wear a name badge that says what they are and, just like physician assistants, they would be required to tell patients who they are and by whom they are supervised. She said she does not know how many of these individuals the state would get, as she does not think there is currently a big demand of people wanting to be licensed in this category.

Ms. Arias-Petrel joined the meeting at 8:15 a.m.

Ms. Bradley explained this was brought up last session as well and the Board's Legislative Subcommittee's biggest concern was that the way it was drafted, associate physicians would get experience counted towards residency and would eventually become unrestricted physicians. She told Assemblyman Orentlicher this and he is fine with them being supervised forever. She thinks he is just hoping this will provide more patient care options for patients in Nevada.

Mr. Olivarez said he thinks this is problematic on many levels. It is problematic for physician assistants in the state because it is more confusion for patients, and someone who trains as a physician somewhere is probably still going to say they are a physician.

Dr. Ahsan joined the meeting at 8:17 a.m.

Dr. Spirtos said the Legislative Subcommittee will have a lot of opportunities to discuss these issues in detail when they meet. He said he appreciated Mr. Olivarez bringing this up so that the Subcommittee would make sure it is on the list of priorities to discuss.

Mr. Farnsworth said he wanted to touch bases on NRS 630.021, "Practice of Respiratory Care." The draft language is "Performance of waived or moderate testing." There is a third category we need to ensure is included, which is characterized as non-waived. Non-waived is a term for moderate and high-complexity laboratory tests that do not meet the criteria for waived testing.

Mr. Farnsworth moved that the Board approve the proposed legislative initiatives. Ms. Beal seconded the motion.

Dr. Simon said he was concerned that if the licensure of associate physicians goes through, it will appear that the Board approved it.

Mr. Cousineau explained there will be much discussion and a lot of iterations throughout the session. He said he does not think pushing forward with what is supported by the bill's sponsor means the Board is ratifying it, it is simply saying the sponsor is welcome to include it in the bill. However, if a Board member feels passionate about something that is included in the bill, he or she is welcome to attend the Legislative Subcommittee meetings and/or speak to his or her legislators about it. Mr. Cousineau said he is very confident that what may be proposed in the bill will be modified in some capacity. Not everything the Board has included the bill may get through either. He said there is a lot of give-and-take during the session.

Dr. Spirtos said he would just look at this as a starting point.

Ms. Bradley said she concurred. She said she did not have final language on the proposal yet and she will keep the Board informed as things go forward throughout the session.

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

Agenda Item 5

ADJUDICATION IN THE MATTER OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. STEPHEN BRENT HORSLEY, M.D., BME CASE NO. 24-32518-1

Dr. Horsley was present with his legal counsel, Randall Tindall, Esq.

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

Mr. Feeley confirmed that all adjudicating Board members had received and reviewed the materials regarding the matter and provided procedural instruction regarding the adjudication process.

Mr. Olivarez outlined the facts of the underlying case.

Discussion ensued regarding whether a surgeon is responsible to directly communicate to a patient the result of a pathology report as opposed to passing it on to someone else.

Dr. Simon said it seemed in this case there were multiple opportunities to communicate the results.

Mr. Farnsworth moved that the Board adopt the hearing officer's recommendations. Dr. Simon seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Mr. Shogren presented the Investigative Committee's recommendations regarding discipline in the matter. Pursuant to NRS 630.352 and NRS 622.400, Dr. Horsley shall pay a fine of \$3,000 for the count of malpractice and \$1,000 for the count of failure to maintain appropriate medical records, to be paid within 60 days of service of the Board's order; he shall perform a total of 6 hours of continuing medical education (CME), 4 hours relating to culture of safety and 2 hours relating to proper medical recordkeeping, to be completed within 6 months of service of the Board's order; he shall pay the Board's costs and fees of prosecuting the matter in the amount of \$14,132.98, to be paid within 60 days of the service of the Board's order; he shall receive a public reprimand; and the matter shall be reported to the appropriate authorities.

Randall Tindall, Esq., presented Dr. Horsley's recommendations with respect to discipline. He stated there is no standard of care for what occurred in this case so the standard of care could not have been breached. He said if everyone does it a different way, there is no standard.

Mr. Tindall said they objected to the Investigative Committee's Memorandum of Costs and Disbursements and Attorneys' Fees and explained why.

Mr. Tindall said Dr. Horsley submits that Count I of the Complaint should have been dismissed and Count II was acceptable, so discipline should be limited to a violation of Count II.

Mr. Cousineau stated the Board had already adopted the recommendations of the hearing officer, which included malpractice and a records violation, so that is not debatable.

Discussion ensued regarding the recommendations for discipline in the matter.

Dr. Spirtos moved that the Board impose the costs and fees and issue a public reprimand, remove the CME and remove the fine. Ms. Beal seconded the motion.

Dr. Ahsan said he thought some CME would still be appropriate.

Dr. Spirtos said Dr. Horsley had stated on the record he had already made a number of changes to his practice. Anything he would need to learn from the CME, he is already in the process of implementing.

Dr. Ahsan proposed an amendment to Dr. Spirtos' motion to include 2 hours of CME related to proper medical recordkeeping.

Mr. Cousineau clarified that the proposed amendment included a public reprimand, costs and fees, 2 hours of CME related to proper medical recordkeeping in addition to the regular CME requirements, and reports to all the appropriate authorities.

Dr. Spirtos accepted the amendment to the motion. Mr. Olivarez seconded the amendment, and it passed, with Dr. Ahsan, Dr. Simon, Mr. Olivarez and Mr. Farnsworth voting in favor of the amendment and Dr. Spirtos and Ms. Beal voting against the amendment.

A vote was taken on the motion as amended, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 6

CONSIDERATION OF REVOCABLE DELEGATION AND AUTHORIZATION BY THE BOARD TO THE GENERAL COUNSEL OF THE BOARD TO DEFEND THE BOARD'S FINDINGS, CONCLUSIONS, ORDERS AND ACTIONS IN THE MATTER OF *THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. STEPHEN BRENT HORSLEY, M.D.*, BME CASE NO. 24-32518-1, IN ANY CIVIL OR CRIMINAL PROCEEDING, STATE OR FEDERAL, THAT IMPLICATES THE BOARD'S ADJUDICATION OF THIS CASE, TO PARTICIPATE IN, DEFEND AGAINST, OR TO INITIATE ON ITS BEHALF ANY PETITION FOR JUDICIAL REVIEW OR APPEAL THEREFROM, TO FILE A NOTICE OF APPEAL OR STATEMENT OF INTENT TO PARTICIPATE ON ITS BEHALF, TO NEGOTIATE AND SETTLE CLAIMS ON ITS BEHALF, AND TO TAKE COMPARABLE ACTIONS AND MAKE COMPARABLE DECISIONS ON ITS BEHALF

Dr. Frey moved that the Board authorize the Board's counsel to defend the Board's findings, conclusions, orders and actions in this matter. Ms. Beal seconded the motion, and it passed unanimously.

Agenda Item 7

ADJUDICATION IN THE MATTER OF *THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. SASSAN KAVEH, M.D.*, BME CASE NO. 23-10414-1

Dr. Kaveh was present with his legal counsel, Melanie Thomas, Esq.

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

Mr. Feeley confirmed that all adjudicating Board members had received and reviewed the materials regarding the matter and provided procedural instruction regarding the adjudication process.

Dr. Spirtos stated that Dr. Kaveh had already undertaken continuing medical education (CME) related to this matter.

Dr. Spirtos moved that the Board adopt the hearing officer's recommendations in total, that "Respondent's discipline should be reflective of the discipline imposed by the Pharmacy Board absent imposition of a fine," which the hearing officer felt would be unnecessarily duplicative, "that being administration of a public reprimand; a requirement that Respondent pay all costs incurred by the Board relating to its disciplinary proceedings; and that Respondent be mandated to comply with all federal and state statutes and regulations regarding controlled substances and dangerous drugs." Dr. Williams seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Mr. Shogren presented the Investigative Committee's recommendations regarding discipline in the matter. Pursuant to NRS 630.352 and NRS 622.400, Dr. Kaveh shall pay a fine of \$500, to be paid within 60 days of service of the Board's order; he shall perform 5 hours of CME related to best practices in prescribing, to be completed within 6 months of service of the Board's order; he shall pay the Board's costs and fees of prosecuting the matter in the amount of \$9,649.81, to be paid within 60 days of the service of the Board's order; he shall receive a public reprimand; and the matter shall be reported to the appropriate authorities.

Ms. Thomas presented Dr. Kaveh's recommendations with respect to discipline. She stated Dr. Kaveh has been licensed in Nevada since 1997, and this is the first time a complaint had been filed against him by the Board. This was not a patient care complaint, there was no harm to a patient, there was no report of professional malpractice, and there was no violation of controlled substances laws.

This was simply brought because Dr. Kaveh entered into a stipulation with the Board of Pharmacy in relation to providing what he then believed in good faith was a sealed sample of a lifesaving medication. He has already been punished by the Board of Pharmacy and there has already been a report to the National Practitioner Data Bank (NPDB) on these exact facts and circumstances.

Ms. Thomas asked that the Board acknowledge that Dr. Kaveh had already been punished. The interests of the patient community are not served by the imposition of additional formal punishment to Dr. Kaveh's medical license by an additional report to the Data Bank. Any double or additional penalties are not warranted and do not further the legitimate interests of the Board to protect the community. At best, a non-punitive admonishment would have been appropriate under these circumstances. With regard to the recommendations proposed by Board counsel, the \$500 fine was not available under these circumstances because at a meeting a year ago, some training was provided to Board members that indicated a first-time offender was not to receive the imposition of a fine. She said this was another overreach by Board counsel and exceeded the recommendations of the hearing officer the Board had already adopted. With regard to the Memorandum of Costs, Disbursements and Attorneys' Fees, she said she would mirror some of the comments made by the attorney who appeared just before her.

Mr. Cousineau said imposition of a fine had already been precluded because the adopted hearing officer's recommendations included a recommendation not to impose a fine. With respect to costs, the Board computes actual and reasonable costs, and those are allowed under NRS 622.400 and NRS 630.268. He said the Board has a duty to report to all appropriate entities pursuant to federal law and if it does not, it is subject to sanctions.

Mr. Farnsworth said his impression, based on the hearing officer's recommendations, was there would not be a fine, there would not be CME, there would be recovery of costs spent, there would be a public reprimand, and it would be reportable.

Dr. Spirtos moved that the Board issue a public reprimand and recover its costs and fees and report to the appropriate entities. Mr. Olivarez seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Ms. Thomas asked that payment of the costs and fees be held in abeyance pending final resolution of the case.

Agenda Item 8

CONSIDERATION OF REVOCABLE DELEGATION AND AUTHORIZATION BY THE BOARD TO THE GENERAL COUNSEL OF THE BOARD TO DEFEND THE BOARD'S FINDINGS, CONCLUSIONS, ORDERS AND ACTIONS IN THE MATTER OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. SASSAN KAVEH, M.D., BME CASE NO. 23-10414-1, IN ANY CIVIL OR CRIMINAL PROCEEDING, STATE OR FEDERAL, THAT IMPLICATES THE BOARD'S ADJUDICATION OF THIS CASE, TO PARTICIPATE IN, DEFEND AGAINST, OR TO INITIATE ON ITS BEHALF ANY PETITION FOR JUDICIAL REVIEW OR APPEAL THEREFROM, TO FILE A NOTICE OF APPEAL OR STATEMENT OF INTENT TO PARTICIPATE ON ITS BEHALF, TO NEGOTIATE AND SETTLE CLAIMS ON ITS BEHALF, AND TO TAKE COMPARABLE ACTIONS AND MAKE COMPARABLE DECISIONS ON ITS BEHALF

Mr. Farnsworth moved that the Board authorize the Board's counsel to defend the Board's findings, conclusions, orders and actions in this matter. Dr. Williams seconded the motion, and it passed unanimously.

Agenda Item 9

CONSIDERATION OF APPOINTMENT OF KATHERINE WHITE, CCP, AS REPLACEMENT PERFUSIONIST ADVISORY COMMITTEE MEMBER

Mr. Cousineau stated there was a vacancy on the Perfusionist Advisory Committee and Ms. White was asking to be appointed to the Advisory Committee.

Dr. Frey moved that the Board appoint Ms. White to the Perfusionist Advisory Committee. Ms. Arias-Petrel seconded the motion, and it passed unanimously.

Agenda Item 10

REPORTS

(a) Investigative Committees

Dr. Frey reported that at its November 15, 2024 meeting, Investigative Committee A considered 61 cases. Of those, the Committee authorized the filing of a formal complaint in 1 case, sent 10 cases out for peer review, requested an appearance in no cases, issued 11 letters of concern, referred 2 cases back to investigative staff for further investigation or follow-up, reviewed no cases for compliance, and recommended closure of a total of 37 cases.

Dr. Spirtos reported that at its November 7, 2024 meeting, Investigative Committee C considered 21 cases. Of those, the Committee authorized the filing of a formal complaint in no cases, sent 2 cases out for peer review, requested an appearance in 1 case, referred 1 case back to investigative staff for further investigation or follow-up, reviewed no cases for compliance, issued 6 letters of concern and recommended closure of a total of 11 cases.

Dr. Ahsan reported that at its November 6, 2024 meeting, Investigative Committee B considered 46 cases. Of those, the Committee authorized the filing of a formal complaint in 2 cases, sent 4 cases out for peer review, requested an appearance in 2 cases, and recommended closure of a total of 33 cases.

Dr. Spirtos added that Investigative Committee B had also issued 4 letters of concern, referred 1 case back to investigative staff for further investigation or follow-up, and reviewed no cases for compliance.

(b) Nevada State Medical Association

Sarah Watkins, Executive Director of the Nevada State Medical Association (NSMA), reported that the NSMA Annual Meeting was held in September and its new President, Dr. Joseph Adashek was installed. It was also where its members submitted, reviewed and passed new policy to go into its policy compendium. NSMA is currently in its membership renewal season and is preparing for the upcoming legislative session. NSMA is holding work sessions with its members to help prepare and to hear any concerns or issues on certain topics. The NSMA Physicians' Day at the Legislature will be held on April 14, 2025. The NSMA 2025 Annual Meeting will be held September 5-7, 2025, in Reno. The NSMA office in Reno has moved to 6005 Plumas Street, Suite 103.

Dr. Spirtos asked whether there was a role for the Board's Legislative Subcommittee to participate in the NSMA's legislative efforts.

Ms. Watkins stated NSMA has a Government Affairs Commission that meets weekly during legislative sessions and its staff has weekly meetings with specialty societies.

Dr. Spirtos asked whether the Board could be notified of those meetings.

Ms. Watkins stated the Government Affairs Commission meetings were closed other than to members of the NSMA; however, if there is a certain issue the Government Affairs Commission wants to discuss and is aware of in advance, it could schedule that. As far as the specialty society meetings, the best thing to do would be to have the Board's lobbyist connect with NSMA to coordinate that.

(c) Clark County Medical Society

Amber Carter, Executive Director of the Clark County Medical Society (CCMS), was not present, but had submitted a written report prior to the meeting, which had been provided to all Board members.

(d) Washoe County Medical Society

No report was provided at the meeting.

(e) Nevada Academy of Physician Assistants

Brian S. Lauf, DMSc, MPAS, PA-C, DFAAPA, President of the Nevada Academy of Physician Assistants (NAPA), said NAPA deeply appreciated the Board's dedication to protecting the public by ensuring that only well-qualified, competent health care professionals, including PAs, are licensed to practice in Nevada, and also values the Board's openness to collaborate with stakeholders like NAPA. He said he wanted to specifically thank the Board's staff who diligently work with PA graduates from both of the PA programs in the State of Nevada, at Touro University and the University of Nevada, Reno School of Medicine, to ensure they can efficiently obtain licensure after completing their training. These efforts are critical in supporting these programs' missions to retain newly trained PAs within the state to address the health care needs of Nevadans. The Board's work directly contributes to strengthening the health care workforce and expanding access to care in communities across the state. He said while he understood that proposed regulation R117-24 was not on the agenda at the meeting that day, NAPA wanted to thank the staff for engaging with NAPA to better understand its concerns regarding regulations and policies, which include restrictions that prevent PAs from practicing to the full extent of their education and training or that hinder their ability to deliver care effectively and efficiently. He said NAPA looks forward to continuing this collaboration and supporting the final proposed regulation when it eventually comes before the Board. In the spirit of transparency and collaboration, and looking ahead to the upcoming legislative session, NAPA intends to continue pursuing modernization of the PA Practice Act statutes. Its goal is to allow for greater flexibility in how PAs and health care teams function while maintaining the collaborative patient-centered care that is a hallmark of the PA profession. These efforts align with successful reforms in neighboring states like Utah and Arizona, where they have empowered PAs to meet their communities' needs more effectively. This modernization will not only strengthen our health care workforce but also ensure that we continue to prioritize public safety and high-quality care for Nevadans.

Mr. Olivarez thanked Mr. Lauf for his input.

Dr. Frey said he really liked Mr. Lauf mentioning "teams" because it is important that with any modernization of the language, we focus on the team itself and whether or not the team is adequate.

Agenda Item 11

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. RENCHELL JOHN ACHAVAL ANDRES, M.D., BME CASE NO. 24-33670-1

Ms. Contine stated a formal Complaint had been filed against Dr. Andres alleging two violations of the Nevada Medical Practice Act and outlined the terms of the proposed Settlement Agreement.

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

Dr. Frey summarized the facts of the case and stated he believed the counts were substantiated based upon the evidence before the Board.

Mr. Farnsworth moved that the Board approve the proposed Settlement Agreement. Dr. Bassewitz 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. WILLIAM ALVEAR, M.D., BME CASE NO. 24-11277-1

Dr. Alvear's legal counsel, Donald James Green, Esq., was present on behalf of Dr. Alvear.

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

Ms. Contine stated a formal Complaint had been filed against Dr. Alvear alleging four violations of the Nevada Medical Practice Act and outlined the terms of the proposed Settlement Agreement.

Mr. Olivarez moved that the Board accept the proposed Settlement Agreement. Dr. Simon 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. MATTHEW ELLIOT APEL, M.D., BME CASE NO. 24-45123-1

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

Ms. Contine stated a formal Complaint had been filed against Dr. Apel alleging two violations of the Nevada Medical Practice Act and outlined the terms of the proposed Settlement Agreement.

Dr. Frey summarized the facts of the case and said he thought the proposed settlement was extremely reasonable, given the ultimate outcome of the patient.

Mr. Olivarez said he agreed with Dr. Frey and moved that the Board accept the proposed Settlement Agreement. Dr. Williams 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. THOMAS WALTER UMBACH, M.D., BME CASE NO. 24-33880-1

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

Ms. Contine stated a formal Complaint had been filed against Dr. Umbach alleging two violations of the Nevada Medical Practice Act and outlined the terms of the proposed Settlement Agreement.

Dr. Frey stated this case was similar to the previous case and that he believed the proposed settlement was quite reasonable.

Dr. Spirtos said he thought the proposed settlement was appropriate as well.

Mr. Olivarez said he agreed with Dr. Frey's statements and moved that the Board accept the proposed Settlement Agreement. Dr. Bassewitz 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. RICARDO J. VELAZQUEZ-HENRIQUEZ, M.D., BME CASE NO. 24-30140-1

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

Ms. Contine stated a formal Complaint had been filed against Dr. Velazquez-Henriquez alleging three violations of the Nevada Medical Practice Act and outlined the terms of the proposed Settlement Agreement.

Mr. Olivarez summarized the facts of the case and stated he thought the recommendations of the Investigative Committee were appropriate.

Dr. Spirtos stated he agreed. He said he thinks the Board is seeing more events where physicians are not performing complete exams.

Dr. Simon stated that all across the country, medical students are not being trained to perform physical examinations, and it is a crying shame.

Dr. Frey stated he agreed with Dr. Simon and stated that ultrasound is a unique tool that should be considered by every specialty to the degree that they can learn how to use it and learn how to diagnose with it in conjunction with a physical exam.

Mr. Farnsworth moved that the Board approve the proposed Settlement Agreement. Ms. Arias-Petrel 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. RALPH MARCUS VENNART, M.D., BME CASE NO. 24-8686-1

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

Ms. Contine stated a formal Complaint had been filed against Dr. Vennart alleging two violations of the Nevada Medical Practice Act and outlined the terms of the proposed Settlement Agreement.

Dr. Simon moved that the Board approve the proposed Settlement Agreement. Dr. Ahsan 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. KENNETH W. ADAMS, II, M.D., BME CASE NO. 24-42675-1

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

Ms. Contine stated a formal Complaint had been filed against Dr. Adams alleging five violations of the Nevada Medical Practice Act and outlined the terms of the proposed Settlement Agreement.

Discussion ensued regarding the inaccuracy of internet searches with regard to listings of physicians and their specialties.

Mr. Olivarez said he agreed and stated he thought the important thing in this case was scope of practice.

Dr. Bassewitz moved that the Board approve the proposed Settlement Agreement. Ms. Beal seconded the motion.

Dr. Williams stated if you cannot take care of the potential complications, you should not be performing the procedure. He said the Board sees this time and time again and needs to be more diligent in trying to stop these types of practices.

A vote was taken on 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. YEVGENIY ANATOLIY KHAVKIN, M.D., BME CASE NOS. 22-35041-2, 23-35041-1 AND 23-35041-2

Dr. Khavkin's legal counsel, Patricia Daehnke, Esq., was present.

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

Ms. Contine explained a proposed settlement of these cases had come before the Board at a previous meeting and was not approved. At that time, some adjudicating Board members suggested monitoring or some kind of immediate oversight of Dr. Khavkin. Therefore, the proposed settlement before the Board at this time included an additional term with regard to that and the original terms of the proposed settlement remained the same.

Ms. Contine stated three Complaints had been filed against Dr. Khavkin, the first alleging 21 violations of the Nevada Medical Practice Act, the second alleging 4 violations of the Nevada Medical Practice Act and the third alleging 4 violations of the Nevada Medical Practice Act. The complaints include a total of 7 counts of malpractice. She then outlined the terms of the proposed Settlement Agreement.

Mr. Farnsworth stated he still had concerns regarding the proposed settlement. Questionable surgery on people and surgery on people that do not need it is a nightmare scenario for the public and he thinks it is the Board's responsibility to protect the public from people who do these very types of actions. He does not know if he agrees with allowing someone to have a license in the state who has knowingly done this numerous times and not only that, has done it to the same person repeatedly.

Dr. Simon said he echoed Mr. Farnsworth's concerns. He said he thought allowing these cases to be settled for a payment of approximately \$120,000, give or take, seems wrong, and suggested the Board decline to accept the proposed Settlement Agreement.

Mr. Olivarez said he agreed with Mr. Farnsworth and Dr. Simon. He said it is the Board's job to determine if a physician is a risk to the community, and he thinks this is the case here.

Ms. Beal said she agreed that the Board should decline to accept the proposed Settlement Agreement.

Dr. Ahsan said he concurred as well.

Ms. Beal moved that the Board decline to accept the proposed Settlement Agreement.

Mr. Cousineau explained it was not necessary to make a motion to decline a proposed settlement agreement. If no motion is made to accept it, it is understood the Settlement Agreement is rejected.

Agenda Item 19

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS DANIEL GENE LIBKE, M.D., BME CASE NO. 24-48915-1

Dr. Libke's legal counsel, Patricia Daehnke, Esq., was present.

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

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

Dr. Frey summarized the facts of the case.

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

Agenda Item 20

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. MICHAEL ANTHONY MECCA, M.D., BME CASE NO. 24-42054-1

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

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

Discussion ensued regarding the use of artificial intelligence in medicine and in radiology in particular.

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

Agenda Item 21

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. JEFFREY YONG RYU, M.D., BME CASE NO. 24-30257-1

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

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

Mr. Farnsworth moved that the Board accept the proposed Settlement Agreement. Mr. Olivarez seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 22

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. ABDOLLAH ASSAD, M.D., BME CASE NO. 24-28982-1

Dr. Assad's legal counsel, Lyn E. Beggs, Esq., was present on behalf of Dr. Assad.

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

Mr. Cumings stated a formal Complaint had been filed against Dr. Assad alleging six violations of the Nevada Medical Practice Act and outlined the terms of the proposed Settlement Agreement.

Dr. Williams said he thought this was probably one of the most heinous acts a physician can do to a patient, taking advantage of a patient for personal gain. It is even further enhanced when you have a psychiatrist prescribing medications to a patient, offering to pick up the patient, and taking sexual advantage of the patient. He said he wondered if the terms of the proposed Settlement Agreement were enough and thought the Board should consider the severity of the violations and reevaluate what should be done with this particular individual.

Mr. Farnsworth said he echoed Dr. Williams' sentiments exactly. He said he believes the Board's role is to protect the public and this was egregious and, once again, an absolute nightmare scenario for the people in our communities.

Mr. Cousineau asked Dr. Williams what he thought would be appropriate sanctions in the matter.

Dr. Williams stated a fine, a more extended period of continuing medical education, and that the physician's license be restricted or taken away for a longer period of time than recommended. He said the Board needs to send a signal out to other physicians in the state that this is truly an intolerable act.

Dr. Bassewitz stated he echoed his colleagues' opinions and thoughts.

Mr. Cousineau stated that since there was no motion, the proposed Settlement Agreement was deemed rejected.

Agenda Item 23

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. ABDOLLAH ASSAD, M.D., BME CASE NO. 24-28982-2

Dr. Assad's legal counsel, Lyn E. Beggs, Esq., was present on behalf of Dr. Assad.

Mr. Cumings stated a formal Complaint had been filed against Dr. Assad alleging five violations of the Nevada Medical Practice Act and outlined the terms of the proposed Settlement Agreement.

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

Dr. Frey said he thought these were entirely appropriate recommendations for settlement. He then summarized the facts of the case.

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

Agenda Item 24

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. BEVERLY MOEMOE YEE, M.D., BME CASE NO. 24-28213-1

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

Mr. Cumings stated a formal Complaint had been filed against Dr. Yee alleging five violations of the Nevada Medical Practice Act and outlined the terms of the proposed Settlement Agreement.

Dr. Frey said he thought the proposed settlement was entirely appropriate under the facts of the case and moved that the Board approve the proposed Settlement Agreement. Dr. Ahsan seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 25

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. YARON ZEDEK, M.D., BME CASE NO. 24-10652-1

Dr. Zedek's legal counsel, Lyn E. Beggs, Esq., was present on behalf of Dr. Zedek.

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

Mr. Cumings stated a formal Complaint had been filed against Dr. Zedek alleging 11 violations of the Nevada Medical Practice Act and outlined the terms of the proposed Settlement Agreement.

Mr. Farnsworth moved that the Board approve the proposed Settlement Agreement. Ms. Beal seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 26

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. CHINYERE LAWRENTIA OKEKE, M.D., BME CASE NOS. 24-35350-1 AND 24-35350-2

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

Ms. Contine stated two formal Complaints had been filed against Dr. Okeke, both alleging three violations of the Nevada Medical Practice Act and outlined the terms of the proposed Settlement Agreement.

Mr. Olivarez stated this is another case of a provider not regularly checking the Prescription Monitoring Program and disregarding the findings of it, and inappropriately prescribing narcotics as a result. He then made a motion to accept the proposed Settlement Agreement. Ms. Arias-Petrel seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 27

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. ALI HUSSEIN AHMAD, M.D., BME CASE NO. 24-45880-1

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

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

Mr. Farnsworth moved that the Board approve the proposed Settlement Agreement. Dr. Ahsan seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 28

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. STEPHEN PAUL DUBIN, M.D., BME CASE NO. 23-11289-1

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

Mr. Shogren stated a formal Complaint had been filed against Dr. Dubin alleging six violations of the Nevada Medical Practice Act and outlined the terms of the proposed Settlement Agreement.

Dr. Frey moved that the Board accept the proposed Settlement Agreement. Dr. Bassewitz seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 29

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. CASIANO RAMIREZ FLAVIANO, M.D., BME CASE NO. 24-22367-1

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

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

Dr. Frey summarized the facts of the case and said it was a painful case to read about and certainly painful for the family to think about, and truly just a case of failure to recognize. He said although there was a physician component to this, there also was a system component to it. He said he agrees with the proposed settlement but there was also a system issue there.

Dr. Bassewitz said he agreed with Dr. Frey's analysis.

Dr. Simon moved that the Board accept the proposed Settlement Agreement. Dr. Bassewitz seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 30

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. SIDHARTH GAUTAM SHARMA, M.D., BME CASE NO. 24-37768-1

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

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

Mr. Farnsworth moved that the Board accept the proposed Settlement Agreement. Mr. Olivarez seconded the motion, and it passed, with all adjudicating Board members voting in favor of the motion.

Agenda Item 31

CONSIDERATION OF SETTLEMENT AGREEMENT IN THE MATTER OF THE NEVADA STATE BOARD OF MEDICAL EXAMINERS VS. WHITAKER MICHAEL SMITH, M.D., BME CASE NO. 24-51857-1

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

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

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

Agenda Item 32

EXECUTIVE STAFF/STAFF REPORTS

(a) Investigations Division Report

Mr. Diaz reported that from September 13, 2024, through December 11, 2024, the Investigations Division received a total of 285 complaints. Of those, 106 cases were opened as formal investigations, 75 were not within the Board's jurisdiction, 50 were referred to other agencies and regulatory bodies, 30 were resolved through proactive measures, and 11 were either still pending review or were duplicate complaints. There was a total of 24 peer reviews, 13 of which had been assigned and 11 of which were pending assignment to a peer reviewer. The total case count was 267, for an average of 33 cases per investigator and supervisor. Mr. Diaz said there were 25 licensees in compliance or diversion.

Dr. Spirtos thanked Mr. Diaz for all of his efforts on the Board's behalf.

(b) Quarterly Compliance Report

Ms. Jenkins reported that for the third quarter of 2024, there were two files in collection for a total of \$37,213 and no collections were written off during the quarter. The total costs outstanding were \$125,321 and the total fines outstanding were \$92,682. Total costs collected during the quarter were \$116,027. At the request of Dr. Frey, total fines collected during the quarter are now included in the report and they were \$78,222 for the quarter.

(c) Quarterly Update on Finances

Ms. Jenkins stated the Balance Sheet reflects the assets and liabilities of the Board. She then highlighted the various sections of the Balance Sheet for the quarter ending September 30, 2024. The total current assets totaled \$9,099,700 and the total assets were \$14,963,600. The total current liabilities totaled \$5,159,200, with total liabilities and net position of \$14,963,600. The year-to-date addition to net income or net position of the Board was rounded to \$1,088,500.

Ms. Jenkins then highlighted the various sections of the Profit and Loss Budget vs. Actual for the quarter. The total income for the quarter was 5.8% over budget. In the expense section, the personnel expense was right at 99% of budget. Total expenses were 93.7% of budget. The interest income for the quarter was \$79,651 and the addition to net position for the quarter was rounded to \$333,300. The reserves of the Board were at 6.9 months.

Ms. Beal commended staff on the increase in the Board's reserves.

Ms. Jenkins said the increase was attributable to an increase in license applications. The number of applications being received by the Board was higher than the Board has ever seen.

Dr. Spirtos asked about the goal with respect to the Board's reserves.

Ms. Jenkins explained there is a particular goal, which is part of the Board's Policies and Procedures Manual, that the Board will endeavor to have six months to a year in reserves. It has been a number of years since the Board has been over six months in reserves.

Dr. Spirtos thanked Ms. Jenkins and the staff for their incredibly hard work with regard to increasing the Board's reserves.

Dr. Frey asked about the formula used to calculate the reserves, and Ms. Jenkins explained it.

Ms. Beal stated most companies have about three to six months in reserves, and she thinks it is really good the Board has more than that and is endeavoring to increase it further.

(d) Legal Division Report

Ms. Contine reported that from September 7, 2024, to December 6, 2024, the Legal Division filed 18 complaints. The current case count in the Legal Division was 103 and they had already been working on half of them. With respect to annual statistics, the Legal Division filed 103 complaints and resolved 125 cases in 2024.

Dr. Spirtos asked if the numbers were up, down or average.

Ms. Contine stated the numbers were up. She said she believed the Legal Division had resolved 85 cases the previous year.

Agenda Item 33

LICENSURE RATIFICATION

- Ratification of Licenses Issued, Reinstatements of Licensure and Changes of Licensure Status Approved Since the September 13, 2024 Board Meeting

Dr. Frey moved that the Board ratify the licenses issued, reinstatements of licensure and changes of licensure status approved since the September 13, 2024 Board Meeting. Dr. Bassewitz seconded the motion, and it passed unanimously.

Agenda Item 34

APPEARANCES FOR CONSIDERATION OF ACCEPTANCE OF APPLICATIONS FOR LICENSURE

(a) Thomas Vladimir Chmelicek, M.D.

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

Dr. Simon described Dr. Chmelicek's medical education and training and stated Dr. Chmelicek has been board certified twice by the American Board of Family Medicine.

Dr. Simon questioned Dr. Chmelicek regarding the fact that he responded in the negative to Questions 5 and 6 on his application for licensure, relating to malpractice claims and cases, however, provided information to the Board as part of his application with respect to several malpractice cases that had been filed against him.

Dr. Chmelicek stated he takes full responsibility for his application. He hired a third-party company to assist him with the application and unfortunately, did not catch the error until later.

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

Dr. Simon asked what he planned to do if granted a license to practice medicine in the State of Nevada.

Dr. Chmelicek stated he had signed a contract with Renown Health to become their Division Chief to run their urgent care facilities. It is a 60% administrator position and 40% clinical practice in urgent care.

Dr. Simon stated Dr. Chmelicek had signed a statement indicating he will maintain his board certification because he only completed two years progressive postgraduate training rather than three. Dr. Chmelicek confirmed that he had.

Dr. Simon moved that the Board grant Dr. Chmelicek's application for licensure. Dr. Frey seconded the motion, and it passed unanimously.

(b) Thomas Owen McNamara, M.D.

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

Dr. McNamara described his medical practice history.

Mr. Olivarez stated that Dr. McNamara changed his license status from Active to Inactive in 2019, and Dr. McNamara explained why.

Mr. Olivarez explained that Dr. McNamara had not practiced clinical medicine since 2019 but now had an opportunity to practice interventional pain management in Incline Village, as well as work at a medical spa in Gardnerville. He asked Dr. McNamara what he would be doing at the medical spa, and Dr. McNamara stated he would be providing patient consultations there.

Mr. Olivarez stated Dr. McNamara had undergone a neurocognitive evaluation by Timothy Louie, M.D., on August 7, 2024, and no issues were noted by Dr. Louie.

Mr. Olivarez asked Dr. McNamara whether he would be practicing in an office setting or at a surgical center in Incline Village. Dr. McNamara said the practice was in an office, but he would be performing procedures at the hospital.

Dr. Williams asked Dr. McNamara whether he would be performing or overseeing any cosmetic procedures at the medical spa in Gardnerville, and Dr. McNamara said he would not.

Dr. Spirtos asked whether anyone had discussed the finding of bradykinesia and potential underlying causes with Dr. McNamara following his neurocognitive evaluation, and Dr. McNamara said they had not.

Dr. Spirtos said the Board needed to be sure that the evaluation was thorough.

Dr. Frey asked whether Dr. McNamara recalled the specific neurologic testing Dr. Louie had performed in the office, and Dr. McNamara said Dr. Louie was very thorough.

Dr. Bassewitz stated that under “Physical Exam,” the report states “None recorded.”

Discussion ensued regarding the findings of the neurocognitive evaluation.

Dr. Spirtos said he was not an expert in the field, but with the inclusion of this in the findings without explanation or context, he felt he was in a compromised position to make a decision on Dr. McNamara’s application. He said his general sense was to be very favorably inclined to grant Dr. McNamara a license; however, the findings have caused him some consternation and he would like further explanation.

Mr. Olivarez said his understanding was that with the mention of bradykinesia, the question was the ability to safely perform these procedures. He asked whether it would be possible to require some sort of proctorship that could settle these concerns.

Mr. Cousineau stated a proctorship should be required because of the protracted time Dr. McNamara had not practiced, and that working alongside a mentor or proctor for a short period of time would also assuage the Board’s concerns regarding his ability to perform certain procedures. Dr. McNamara would have to find someone who would be willing to proctor him, perhaps someone he will be working with, and come back to the Board with a plan. Based on the time Dr. McNamara has been away from practice, six months of some kind of oversight and reporting to the Board would be appropriate. The license would be conditional for the time being, with the condition being the preceptorship. A conditional license is not punitive; however, some states might construe that as a negative if Dr. McNamara is licensed in other jurisdictions.

Mr. Cousineau said if Dr. McNamara desired, the Board could keep his file open, and he could return to the Board in March with a preceptorship plan. Alternatively, the Board could vote on his application for a change of status that day; however, he would strongly encourage Dr. McNamara to return to the Board with some type of plan that would satiate the Board’s articulated concerns regarding his time out of practice and his ability to practice clinically. Once he has completed the preceptorship, Dr. McNamara could return to the Board to request that the condition be lifted, and he be given an unrestricted license.

Mr. Cousineau asked Dr. McNamara whether he wanted the Board to table his application and place him on the Board’s March agenda, and Dr. McNamara said he did.

Ms. Linn asked for clarification as to whether a preceptorship and a proctorship are the same, and Mr. Cousineau said they were.

A break was taken from 12:16 p.m. to 12:32 p.m., and Ms. Arias-Petrel and Dr. Ahsan left the meeting during this break.

(c) Deepthi Reddy Narala, M.D.

Aaron B. Fricke, Esq., was present with Dr. Narala as her legal counsel.

Dr. Spirtos asked Dr. Narala whether she wanted her application to be considered in closed session, with the public being excluded, and she said she did not.

Mr. Farnsworth stated Dr. Narala was applying for licensure by endorsement because she did not complete all three steps of the United States Medical Licensing Examination (USMLE) within seven years. She completed them in slightly under eight years and this was really the result of a worldwide

pandemic that impacted testing centers being shut down, a personal health situation, and pandemic-related hospital workload constraints. He then summarized Dr. Narala's medical education and training and stated she held two active licenses in Arizona and Michigan, with no derogatory information. She first applied for licensure by endorsement in November 2021. She was not eligible to take the Special Purpose Examination (SPEX) because she had recently completed the USMLE, so the only other option was to take the American Board of Internal Medicine (ABIM) board certification examination. At that point, she withdrew her application and applied to take that examination. She reapplied for licensure by endorsement in April 2024 and sat for the ABIM examination in August 2024, but unfortunately did not pass the examination.

Mr. Farnsworth said Dr. Narala had only seen patients in a clinical setting for approximately seven months during the nine-year period she had been a physician. He explained that licensure by endorsement is generally reserved for those who have a specialty there is a need for in the state or have a unique skillset.

Dr. Frey said he thinks there is a demonstrable need for primary care physicians in the state. Dr. Frey asked Dr. Narala whether her license in Michigan was unrestricted, and Dr. Narala said it was.

Ms. Beal asked Dr. Narala whether her license in Arizona was unrestricted, and Dr. Narala said it was.

Dr. Bassewitz asked Dr. Narala when she last practiced in a clinical setting, and Dr. Narala said it was in August 2022.

Dr. Frey asked Dr. Narala whether she would be willing to enter into a preceptorship.

Mr. Fricke stated that licensure by endorsement is usually reserved for special situations, one of which is to attract doctors to the state. In this case, we have a physician who is really eager to restart her career in earnest and do it in Las Vegas where she is supported by family members who are in the medical profession. In the last couple of weeks, she received an offer from the Veterans' Administration (VA) to work at one of their clinics and also an offer to go to Phoenix to work for ArchWell in integrative medicine, but he thinks this is one of those situations where we want to keep a physician in the state. He thinks in this very, very particular case, licensure by endorsement would be justified.

Dr. Frey asked Dr. Narala what continuing medical education she had taken in the last couple of years, and Dr. Narala described the courses she had taken.

Dr. Simon suggested that Dr. Narala could work for the VA for a period of time and return to the Board.

Mr. Fricke said Dr. Narala was contemplating that; however, if she has a Nevada license as well, she could be of even more benefit to the patients in Nevada.

Mr. Cousineau said he thought Dr. Frey's comments were probably the most compelling, although he agrees with Dr. Simon as well. He said if there is a need for primary care in the state, licensure by endorsement would be appropriate.

Dr. Frey moved that the Board grant Dr. Narala's application for licensure by endorsement given the substantial need in the state. Mr. Farnsworth seconded the motion, and it passed unanimously

(d) Michael Vivian Pokroy, M.D.

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

Dr. Frey thanked Dr. Pokroy for his esteemed career. He then summarized Dr. Pokroy's medical education and training and said he ultimately retired from practice approximately six years ago. Dr. Pokroy said he had not practiced patient care for the last six years. Dr. Pokroy's license was reinstated to Inactive status in April 2024, and he now wants to change his license status to Active.

Dr. Pokroy explained that he wants to change the status of his license in order to do some volunteer work in Africa and has no intention of practicing again in the United States. Many countries in Africa will provide temporary licensure to physicians with an active license in the state in which they live.

Dr. Frey said he believed Dr. Pokroy's efforts to be true in terms of intention and what he wants to do is very laudable. However, giving someone an Active-status license allows someone to apply for hospital privileges and see patients, not just overseas. The question is how the Board can receive reassurances that Dr. Pokroy will not be practicing in Nevada with a full medical license.

Mr. Cousineau said in cases such as this, where a physician has been out of practice for 24 months or more, the Board usually likes to see some type of test to confirm clinical competency and competency in general. In this case, he thinks a peer review would be appropriate, with the cost to be borne by Dr. Pokroy. If Dr. Pokroy agrees to that, the Board could make a motion to grant the change of status upon successful completion of the peer review. This would allow the Board to fulfill its duty to public protection and allow Dr. Pokroy to do his benevolent work.

Dr. Frey asked Dr. Pokroy if he would be amenable to a peer review.

Mr. Cousineau explained the peer review process.

Dr. Pokroy said he would be willing to undergo a peer review.

Dr. Frey moved that the Board grant Dr. Pokroy's application for a change of status to Active upon successful passage of a peer review, with the cost of the peer review to be borne by Dr. Pokroy.

Dr. Williams asked Dr. Pokroy if he could obtain a full license in Africa, and Dr. Pokroy said he didn't know if he would be able to because he has been distanced from there for such a long time.

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

(e) Terrence Joseph Olson, M.D.

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

Dr. Olson summarized his medical education and training as well as his practice history.

Dr. Spirtos asked Dr. Olson what he planned to do if granted a license to practice medicine in the State of Nevada.

Dr. Olson stated he planned to practice internal medicine, ambulatory, and primary care with an established medical group.

Dr. Spirtos asked Dr. Olson if he was currently licensed in any other states. Dr. Olson said he currently held licenses in California, Indiana, Ohio and Michigan.

Dr. Spirtos asked Dr. Olson why he did not want to take the Special Purpose Examination (SPEX). Dr. Olson said he is not familiar with the SPEX but planned to take the board certification examination sometime next year.

Dr. Spirtos asked Dr. Olson about his supervision of nurse practitioners in Indiana and Illinois. Dr. Olson explained that he supervised and trained them in primary care but is not currently supervising any nurse practitioners in either state.

Dr. Frey asked Dr. Olson why he let his board certification expire, and Dr. Olson explained the circumstances surrounding that.

Ms. Beal said in his future practice plans, Dr. Olson stated he planned to join an established medical group such as Intermountain Health, Center Well or Southwest Medical Associates, and asked him whether he had been in contact with those organizations yet. Dr. Olson stated he had not applied with any of them yet because if you look on their websites it says not to apply for a job until you have a license.

Dr. Bassewitz asked Dr. Olson what percentage of his practice prior to coming to Nevada was administrative and what percentage was clinical. Dr. Olson said about 30% to 40% of his practice was clinical.

Dr. Spirtos moved that the Board grant Dr. Olson's application for licensure by endorsement. Ms. Beal seconded the motion, and it passed unanimously.

(f) Andrea Anthony Kynard, M.D.

Dr. Spirtos asked Dr. Kynard whether she wanted her application to be considered in closed session, with the public being excluded, and she said she did not.

Dr. Bassewitz stated Dr. Kynard was applying for licensure by endorsement because she had not completed three years of progressive ACGME postgraduate training. He said Dr. Kynard was a nurse practitioner for many years prior to going to medical school and asked her to describe what she had done since graduating from medical school.

Dr. Kynard explained she had been a nurse practitioner for 35 years in internal medicine and methodology. She then had her own allied health care practice where she saw patients, as a nurse practitioner, who were homebound. She then decided to go to medical school, attended four years of medical school, followed by one year of a residency program in Puerto Rico.

Dr. Bassewitz asked Dr. Kynard why she did not attend another residency.

Dr. Kynard explained she had applied to several residency programs over a three-year period but did not receive an offer from any. She applied for residencies in general medicine, general practice, pathology, and internal medicine primarily. She also pursued after-match scrambles, and so on.

Dr. Williams asked Dr. Kynard whether she was willing to apply for a residency program again. Dr. Kynard said she did not want to do another residency but if she had a chance to, she would.

Dr. Bassewitz described a couple of alternative pathways available to potentially get into a residency program. Dr. Williams and Ms. Beal provided additional suggestions.

Mr. Olivarez asked how long Dr. Kynard practiced as a physician for the Centers for Disease Control, and Dr. Kynard said it was for a little over a year.

Mr. Olivarez asked Dr. Kynard what she planned to do if granted a license to practice medicine in the State of Nevada.

Dr. Kynard said she would like to practice general practice and functional medicine.

Dr. Bassewitz moved that the Board decline to grant Dr. Kynard's application for licensure by endorsement. Mr. Olivarez seconded the motion, and it passed unanimously.

(g) Devendra Kumar Ishwarbhai Patel, M.D.

Lyn E. Beggs, Esq., was present with Dr. Patel as his legal counsel.

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

Dr. Frey stated Dr. Patel was a cardiologist and asked Dr. Patel when he was last board certified.

Dr. Patel stated his last board certification was in 1998 and he was not currently board certified.

Dr. Frey stated Dr. Patel had not practiced medicine in several years.

Dr. Patel confirmed he had served 17 months in prison for distribution of schedule II narcotics and was then placed on probation.

Dr. Frey stated Dr. Patel had petitioned the Board for sponsorship to take the SPEX examination and had subsequently passed the examination.

Dr. Frey said he had reviewed Dr. Patel's proposed preceptorship agreement with Dr. Prothro. He explained the preceptorship was contemplated to be a nine-month preceptorship, which he felt was a little light for someone that had been out of practice for as long as Dr. Patel had. He asked Dr. Patel if he would be willing to undergo a bit longer preceptorship with a more aggressive chart review in the event the Board were to grant him a license and asked Dr. Patel if he would be employed by Dr. Prothro or would be independently practicing under Dr. Prothro during the preceptorship.

Ms. Beggs explained that Dr. Patel would be seeing patients in Dr. Prothro's office in Reno, but would not be employed per se. She said that due to the fact that Dr. Patel was currently on the OIG exclusion list as a result of his conviction, finding a preceptor was a little challenging, and since the preceptorship was just recently established, she didn't know whether Dr. Prothro and Dr. Patel had finalized whether it would be a 1099 situation or a W2 situation.

Dr. Frey stated what he was trying to determine was whether the preceptorship would be at a finite location and no other location, and Ms. Beggs said it would.

Dr. Frey said he thought the Board would be looking for a more aggressive chart review and a longer duration of time. He recommended, at a minimum, 100% of charts for the first four months, two-thirds of the charts for the next four months and one-third of the charts for the following four months, with regular reports to the Board, for a total of one year.

Ms. Beggs said if Dr. Prothro was agreeable with that, she was sure that Dr. Patel was.

Dr. Simon asked Dr. Patel if he was planning to eventually try to get back into interventional cardiology or was looking at strictly office-based medical cardiology, and Dr. Patel said he would only be practicing medical cardiology.

Dr. Spirtos said it was important for the Board to know the relationship between Dr. Patel and Dr. Prothro in order to evaluate the preceptor's comments, as there is a difference between someone generating income for a preceptor or a preceptor's entity and someone generating income for himself.

Ms. Beggs said she did not believe it had been decided by the physicians; however, if the Board had a preference, she anticipated they could make it work.

Dr. Frey stated the more financial distance there is between the preceptor and the precepted, the better.

Ms. Beggs said it would most likely be Dr. Prothro's preference for it to be a 1099 situation rather than to take Dr. Patel on as a W2 employee. They could certainly confirm that but in conversations she had with Dr. Patel, there had not been any indication he would become an employee of Dr. Prothro's office. She said she thought a 1099 situation would work for both parties.

Dr. Frey moved that the Board grant Dr. Patel's application for licensure with the provision that the preceptorship plan be modified to a 12-month period with 100% chart reviews by Dr. Prothro for the first four months, 67% chart reviews for the second four months and 33% for the final four months, with monthly reports to the Board. Dr. Spirtos seconded the motion, and it passed unanimously.

Ms. Linn asked for clarification as to whether the license would be a conditional license.

Mr. Cousineau stated it would be a conditional license and Dr. Patel would have to return to the Board to have the condition lifted.

(h) Marc Vincent Orlando, M.D.

This matter was not discussed at the meeting.

(I) Alireza Baradaran Rafii, M.D.

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

Dr. Williams asked Dr. Rafii to describe what he had done since graduating from medical school, and Dr. Rafii outlined his activities since then.

Dr. Williams stated that Dr. Rafii was applying for licensure by endorsement because he had not completed 36 months of progressive ACGME postgraduate training.

Dr. Williams asked Dr. Rafii what he planned to do if granted a license to practice medicine in the State of Nevada.

Dr. Rafii stated he had an offer from NVISION Eye Centers in Las Vegas.

Dr. Williams asked Dr. Rafii whether he was practicing any clinical medicine in his current position at the University of South Florida, and Dr. Rafii described his clinical practice.

Dr. Rafii explained he has to have five years of full licensure in order to be eligible to take the board certification examination. He has three years so he needs two more.

Mr. Cousineau asked Dr. Rafii to explain the circumstances surrounding his recent indictment in federal district court in Florida, and Dr. Rafii did so.

Dr. Williams moved that the Board grant Dr. Rafii's application for licensure by endorsement. Dr. Bassewitz seconded the motion, and it passed unanimously.

(i) Jeffrey Howard Kesten, M.D.

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

Dr. Kesten provided a summary of his medical education and training.

Dr. Spirtos stated that Dr. Kesten had not practiced clinically for the last four years, and Dr. Kesten explained why.

Dr. Spirtos asked Dr. Kesten to explain why he had been incarcerated.

Dr. Kesten stated he had pleaded guilty to receiving illegal kickbacks and bribes for his prescribing practices. He said he wanted to be sure the Board was aware the case was not for improper patient care, prescribing medications illegally, or anything like that, but he takes full responsibility for his actions.

Dr. Spirtos asked whether Dr. Kesten had a preceptorship plan in place in the event the Board were to grant him a license.

Dr. Kesten said he found out about the need for one on November 13. He said he had two possibilities he was enthusiastic about and was simply waiting to work through the logistics, hopefully in the next week or so.

Mr. Cousineau stated the Board could table Dr. Hesten's application and he could return to the Board with a preceptorship plan in March. He encouraged Dr. Hesten to work with the Board's licensing staff to get a basic idea of what will be expected to be included in the preceptorship plan, with respect to the timeframe and chart reviews, which will be 100% initially and will titrate down thereafter. However, the preceptorship plan will not address any other underlying concerns the Board may have and there is no guarantee the Board will grant him a license. He asked Dr. Hesten if he was willing to have

the Board table his application and return to the Board in March with a preceptorship plan, assuming he has one in place at that time.

Dr. Kesten stated he was.

Dr. Spirtos stated that returning to the Board with a preceptorship plan is an absolute need, but that does not mean the Board is committing to granting Dr. Kesten a license even with that plan, as there is still a thorough discussion to be had to proceed further.

(k) Kaley Jean Getchis, M.D.

Dr. Spirtos asked Dr. Getchis whether she wanted her application to be considered in closed session, with the public being excluded, and she said she did not.

Ms. Beal summarized Dr. Getchis' medical education and training. She stated Dr. Getchis had not practiced medicine since she completed her residency in 2021 and asked Dr. Getchis to describe what occurred after she completed her residency.

Dr. Getchis stated she was unable to practice because she was suffering some very severe side effects due to cancer treatment. She then described what she had been doing since then and stated that health-wise, she is much improved. She still has some lasting disabilities, including some paralysis in her left arm and hand. The only restriction she could think of would be typing, but since she can dictate and type with her right hand, she thinks she would be okay.

Ms. Beal asked whether Dr. Getchis had completed any CMEs in the last 12 to 15 months, and Dr. Getchis said she had not.

Ms. Beal asked Dr. Getchis to describe her proposed preceptorship plan, and Dr. Getchis did so.

Ms. Beal asked Dr. Getchis what she planned to do following her preceptorship if granted a license to practice medicine in the State of Nevada.

Dr. Getchis said she intended to practice full-spectrum outpatient family medicine, potentially with the residency program or with Renown in a group. She did not intend to practice on her own.

Discussion ensued regarding the proposed preceptorship plan.

Ms. Beal moved that the Board grant Dr. Getchis a conditional license with a 12-month preceptorship, with 100% chart reviews for the first quarter, 75% chart reviews for the second quarter, 50% chart reviews for the third quarter and 25% chart reviews for the fourth quarter, and monthly reports to the Board. Dr. Simon seconded the motion, and it passed unanimously.

(l) Stacey Lynne Schirmer, M.D.

Dr. Spirtos asked Dr. Schirmer whether she wanted her application to be considered in closed session, with the public being excluded, and she said she did not.

Dr. Schirmer summarized her medical education and training.

Dr. Spirtos asked Dr. Schirmer what she had done since completing her medical training, and she described her activities since then and described the circumstances surrounding the loss of her license in California.

Dr. Spirtos said the Board would need a preceptorship plan and a plan in terms of her sobriety, and he thinks if Dr. Schirmer brings these back to the Board, there is a chance the Board will consider licensing her. Without those, he does not think there is a chance the Board will consider licensing her.

Mr. Cousineau asked Dr. Schirmer if she would like the Board to table her application to allow her time to put together both a preceptorship plan and a monitoring plan and return to the Board once she has those in place.

Dr. Schirmer said she would like the Board to table her application.

Agenda Item 35

PRESENTATION FROM THE NEVADA SOCIETY OF DERMATOLOGY AND DERMATOLOGIC SURGERY REGARDING NEVADA STATE BOARD OF COSMETOLOGY INSPECTION AND LICENSURE OF PHYSICIAN OFFICES PURSUANT TO NRS CHAPTER 644A

Victoria G. Farley, M.D.,FAAD, current President of the Nevada Society for Dermatology and Dermatologic Surgery, said they wanted to make the Board aware that the Board of Cosmetology has started saying that anywhere that an aesthetician works has to be registered with the Board of Cosmetology. The places they are targeting so far are dermatology offices and plastic surgery offices. She imagines this is because those are commonly the main specialties that employ aestheticians. They want them to get registered with the Board of Cosmetology. The Board of Cosmetology has no physicians on its Board, and is trying to tell these physicians, who are obviously board certified and well-trained in the use of lasers and any aesthetic or cosmetic procedures, how they need to do them. Additionally, getting registered with the Board of Cosmetology not only includes monetary fees, but the Board of Cosmetology wants to be able to come in and see how the clinics are set up. Within that, they also want access to laser logs and patient logs.

Mr. Cousineau said that based upon a recent statute, the Board of Cosmetology does have that purview now. This is something the doctor is concerned about and would like to see some kind of legislative change because it seems very contrary.

Ms. Bradley said this was passed in 2021 and was something that was changed in the last three days of the session. It has been going on for a little while, and that was why Dr. Farley was bringing it to the Board's attention.

Dr. Simon said an analogy he could think of is that any physicians who have nurses that work in their offices are suddenly going to be subject to the Nursing Board coming in and inspecting them.

Dr. Williams said he thinks this is retaliation because we have been cracking down on medical spas and he thinks they are trying to do this in reverse. He has been receiving calls from some other dermatologists about the same thing.

Dr. Farley said that aestheticians that are working in physician offices that are not registered with the Board of Cosmetology are receiving pretty scary letters saying they either have large fines to pay or are also at risk of losing their licenses because they are practicing somewhere that is not registered with the Board of Cosmetology.

Dr. Frey asked Dr. Farley if she had specific language to offer for a legislative change, and Dr. Farley said she did not at that time.

Ms. Bradley said there is one phrase in NRS 644A, the Board of Cosmetology's chapter, which needs to be removed. That phrase says, "except for the provisions related to advanced aesthetics, the provisions of this chapter do not apply, and that includes physicians." Ms. Bradley explained that three days before the close of the session in 2021, they added that phrase and, therefore, the only exception is advanced aestheticians. Basically, what is happening is the physician's office has to be partially licensed as a cosmetology establishment so the advanced aestheticians can work in the office. For many, many years prior, advanced aestheticians worked in physician offices as medical assistants, not as aestheticians. This change occurred with the changes in licensing of advanced aestheticians. We thought it was going to be changed last session, but it was not. Apparently, the way it is currently was intentional, and because the change needs to be made to NRS 644A, she isn't sure how well it would fit into the Board's bill, but it is certainly something she understands wanting to pursue and that needs to be pursued. She said she was the attorney for the Board of Cosmetology for about 10 years before coming to this Board, so she is pretty familiar with its chapter, and this was a surprise for sure.

Mr. Cousineau said Ms. Farley had heard the comments from some of the Board members and certainly they will engage people they know. He does not think it is appropriate to attach it to the Board's bill but hopefully it will emanate in someone's bill.

Agenda Item 36

DISCUSSION AND POSSIBLE ACTION REGARDING PROPOSED UPDATED INTERNAL DISCIPLINARY GUIDELINES FOR FINES

Dr. Spirtos stated this item was last reviewed by the Board in March of 2023.

Ms. Bradley explained this is very similar to what the Board reviewed last time; the amounts had just been increased.

Mr. Farnsworth moved that the Board adopt the new guidelines as written. Dr. Frey seconded the motion.

Dr. Simon asked, for example, if the Board increased serious malpractice/intentional acts to \$10,000 per alleged event, if someone has four, the Board can go four times \$10,000, and Ms. Bradley stated that was correct.

Dr. Frey said we looked at fine schedules for other states and the average is higher than this per occurrence.

Ms. Bradley said the intent for staff was to put something in writing so when Board attorneys work on settlement agreements, they have something to utilize as a guide, as well as to aid the Investigative Committees when they are approving settlement agreements or making recommendations in an adjudication. When the Board was audited by the Legislature several years back, this was something they wanted the Board to do – they wanted the Board to put in writing its thought process regarding fines – and that is what the Board did.

Mr. Cousineau explained we are updating it now because the maximum fine went up from \$5,000 to \$10,000.

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

Agenda Item 37

PERSONNEL

- Annual Performance Evaluation of Executive Director

Dr. Spirtos said he had discussed Mr. Cousineau's performance with other Board members on a number of occasions and overall, the evaluation was superb. He said it has been a pleasure working together. "Together" has been the operative word, and in very recent conversations with other Board members, they feel the same. He then thanked Mr. Cousineau for doing a great job.

Dr. Bassewitz said he echoed Dr. Spirtos' comments.

Mr. Olivarez said he agreed. He said he felt like a "fish out of water" coming in and the staff, led by Mr. Cousineau, really helped him get involved and learn the ropes.

Mr. Farnsworth concurred. He said he felt honored and blessed to be part of the organization.

Dr. Williams said it had been a wonderful experience and thanked Mr. Cousineau for all he does because he makes the Board members' lives a lot easier.

Ms. Beal said when she has a question, Mr. Cousineau answers immediately, and the same is true with the rest of the staff. She thanked Mr. Cousineau for the structure, the organization and the professionalism. She said she feels we are no longer hearing the number of negative comments in the community we had in the past.

Dr. Bassewitz moved that the Board accept the annual performance evaluation of the Executive Director. Dr. Williams seconded the motion, and it passed unanimously.

Mr. Cousineau said he appreciated all of the Board members, and they make his job so much easier. He said that is also true for the staff, and the senior staff in particular.

Agenda Item 38

CONSIDERATION AND ADOPTION OF BUDGET FOR CALENDAR YEAR 2025, TO INCLUDE ANY POTENTIAL STAFF SALARY INCREASES

Ms. Jenkins outlined the proposed budget for calendar year 2025. She said the budgeted income is based on the actual numbers from the last licensing renewal year and a projected 6% growth. The growth percentage is based on a 10-year lookback period. The total projected income is \$7,222,660.

Ms. Jenkins explained the personnel expenses are based on current staff, a possible 5% raise on July 1, 2025, the remaining retention bonuses prescribed by the State, and a 3.25% increase in PERS. Those are all scheduled. Staff is not recommending that the Board approve an increase in salaries and wages at this time. Instead, we will propose an increase after it is clear what the State approves for a cost-of-living adjustment and other possible benefits. We will propose those at either the June or September meeting. She said the remaining expenses are all based on the last renewal year in 2023, except for the following: 546 – Outreach increased to cover the expenses of a PR firm, 548 – Depreciation, which includes a complete rebuild of our IT networking, and 531 – Investigations (Peer Reviews) which was reduced and was based on our current-year use. The total projected expenses are \$7,324,300.

Ms. Jenkins stated the CDs in the Board's investment account are performing well. Therefore, the interest income projection is \$134,400, which was the actual in 2023. The total addition to net position budgeted is \$32,760.

Mr. Cousineau said with respect to potential staff salary increases, as was the case last year, we will not know until potentially after the June meeting. The raises the last two years were based on the pay bill that came out of the 2023 Legislative Session and the 5% we have included in the budget is a guesstimate. If there is indeed a raise for State employees, we will come before the Board in September and ask for that adjustment retroactive to July 1, as we have done previously.

Dr. Frey moved that the Board adopt the proposed budget for 2025. Dr. Bassewitz seconded the motion, and it passed unanimously.

Agenda Item 39

NEW BUSINESS

Dr. Simon said he would put together some notes for the letter regarding medical school expectations that was previously discussed and needed to determine who it should go to.

Mr. Cousineau said Board staff does not mind taking the lead on it but would like to receive some preliminary language from Dr. Simon and then Ms. Contine will then engage with him to compose it.

Mr. Farnsworth said he was interested in exploring what we are doing on a state level in terms of physician wellness. He understands there is a physician wellness coalition that was started several years ago, and he believes the staff has been working with them. He would be interested in receiving information about that and what the Board is doing proactively to promote physician wellness.

Mr. Cousineau said the Board sends out a Listserv with wellness offerings monthly. Ms. Munson confirmed it was currently being sent only to physician licensees.

Mr. Cousineau said if Mr. Farnsworth had some specifics he would like to get out to the Board's respiratory therapist licensees or resources we could access to do that as well, we would be glad to do that. We could do that for all of the Board's licensure categories.

Mr. Farnsworth said this was a very hot topic at the Federation of State Medical Boards Annual Meeting in April that was being spoken to on a national level. He said if we are going to speak of this on a national level, he would be interested to hear about it on a state level and what we are doing locally to make impacts for our professionals that are really, in some instances, struggling with various issues.

Dr. Bassewitz stated physician burnout is a huge issue.

Dr. Frey suggested the Board invite the Executive Director of the Nevada Physician Wellness Coalition to present at a meeting.

Dr. Williams said the Board should have more of a say in dealing with insurance companies as far as reimbursements for physicians and hospitals and how they continue to cut back on everything we do and deny everything we ask for. We go through a tremendous amount of expense trying to get authorizations for various things.

Dr. Spirtos said the Governor has a taskforce that he and Dr. Bassewitz are on. Some of the issues with preauthorization are very high level. He said there are a number of things that are going to come before the Legislature to hopefully address some of these issues.

Dr. Bassewitz said the taskforce he and Dr. Spirtos are on is looking at ways to increase the physician workforce on the supply side. He said the irony is when you have a prior authorization reform bill like Texas did four years ago, the issue is implementation and enforcement.

Dr. Spirtos said he thinks this is the first time the Governor is really looking at this issue.

Agenda Item 40

STAFF COMMENTS/UPDATES

Mr. Cousineau said the legislative session will begin the first week of February. The members of the Legislative Subcommittee will start receiving materials as staff sees them. There will be a lot of homework and Sarah will be working with the Subcommittee members.

Mr. Cousineau said the Federation of State Medical Boards' annual meeting will be held in Seattle the third week of April and all Board members are welcome to attend.

Agenda Item 41

PUBLIC COMMENT

Dr. Spirtos asked whether there was anyone in attendance who would like to present public comment.

R. J. Ford asked what criteria the Board uses to determine whether there is malpractice in a case.

Mr. Cousineau said cases go before various medical reviewers who are doctors. In Mr. Ford's case, he believed several doctors reviewed it as well as several public members. He said although he cannot satisfy Mr. Ford's concerns, his case had been properly vetted. The evidence showing malpractice does not exist in the records that were provided. He said he understands that Mr. Ford has been left with a debilitating condition that he attributes to the conduct of the licensee or licensees who treated him, but the Board has to have the evidence before it can go after one of its licensees and that evidence does not exist in what the Board has been provided. He said as he told Mr. Ford when they spoke earlier, he will provide him with a more detailed explanation as to the rationale of the various practitioners who reviewed the case.

Mr. Ford said all of his problems took place within 24 to 32 hours after he received the injection.

Dr. Spirtos said the Board is not a court of law and asked Mr. Ford how else he thought the Board could help.

Mr. Ford said the Board makes a decision as to whether it is a medical malpractice case.

Dr. Spirtos explained that the Board looks at a case and evaluates it in terms of that physician's conduct, but in terms of adjudicating medical malpractice, that is done in civil court.

Ms. Beal asked Mr. Ford whether he felt he understood the Board's process from the time he filed the complaint with the Board through the time he received the letter. She asked if he felt the process had been explained to him.

Mr. Ford said the investigator, who is no longer with the Board, did not present all of the evidence he gave to the Board, which he thinks had a lot to do with everything.

Dr. Williams asked Mr. Ford if he had consulted an attorney to start the process.

Mr. Ford said it is difficult when you do not have any money.

Dr. Williams explained there are attorneys who will take malpractice cases on a contingency. If you start with an attorney, the attorney will file a malpractice case, and after that is filed, it will come to the Board.

Ms. Beal asked if it would help if an investigator went over the process with him.

Dr. Frey said the Board empathizes with his situation and is trying to direct him to the appropriate person. As was stated previously, the information presented to the Board did not establish malpractice in terms of causation. Dr. Frey suggested finding an attorney who will take the case on contingency and move forward from there.

Dr. Bassewitz asked Mr. Ford how many attorneys he had consulted in the last six months.

Mr. Ford said he had not tried consulting any because he already knew the results.

Mr. Cousineau said Mr. Ford had indicated he has insurance, and he encouraged Mr. Ford to also seek remedies through his insurer with respect to his medical issues.

Mr. Ford said he found the attorney who had sued the same physician who damaged him a year before for the same treatment that damaged someone else and they took the case and signed him up, but two days later someone from the staff called and said they wouldn't be able take the case.

Dr. Spirtos said the Board had given Mr. Ford more than the usual time allotted for public comment and was listening and trying to be responsive, and he thinks everyone on the Board has empathy and has tried to give him some direction on how to pursue this, but the Board now needed to adjourn the meeting. He said he would speak with Mr. Ford after the meeting.

Agenda Item 42

ADJOURNMENT

Dr. Spirtos moved that the Board adjourn. Dr. Simon seconded the motion, and it passed unanimously. The meeting was adjourned at 3:07 p.m.

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