

BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation Against:

Kim Jeffery Horowitz, M.D.

Physician's & Surgeon's
Certificate No. A 42396

Respondent.

Case No. 800-2017-036369

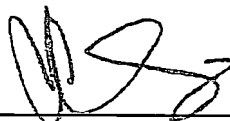
DECISION

The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on December 29, 2022.

IT IS SO ORDERED: November 29, 2022.

MEDICAL BOARD OF CALIFORNIA



Laurie Rose Lubiano, J.D., Chair
Panel A

1 ROB BONTA
Attorney General of California
2 EDWARD KIM
Supervising Deputy Attorney General
3 CHRISTINA SEIN GOOT
Deputy Attorney General
4 State Bar No. 229094
Department of Justice
5 300 So. Spring Street, Suite 1702
Los Angeles, CA 90013
6 Telephone: (213) 269-6481
Facsimile: (916) 731-2117
7 *Attorneys for Complainant*

8 **BEFORE THE**
MEDICAL BOARD OF CALIFORNIA
9 **DEPARTMENT OF CONSUMER AFFAIRS**
10 **STATE OF CALIFORNIA**

11 In the Matter of the Accusation Against:

12 **KIM JEFFERY HOROWITZ, M.D.**
13 **P.O. Box 1898**
Tehachapi, CA 93581

14 **Physician's and Surgeon's Certificate**
15 **No. A 42396,**

16 Respondent.

Case No. 800-2017-036369

OAH No. 2021080772

STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER

17
18 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-
19 entitled proceedings that the following matters are true:

20 **PARTIES**

21 1. William Prasifka (Complainant) is the Executive Director of the Medical Board of
22 California (Board). He brought this action solely in his official capacity and is represented in this
23 matter by Rob Bonta, Attorney General of the State of California, by Christina Sein Goot, Deputy
24 Attorney General.

25 2. Respondent Kim Jeffery Horowitz, M.D. (Respondent) is represented in this
26 proceeding by attorney Dennis R. Thelen, whose address is: 5001 E. Commerce Center Dr. Ste
27 300, Bakersfield, CA 93309-1687.

28 ///

1 charges and allegations.

2 10. Respondent does not contest that, at an administrative hearing, Complainant could
3 establish a *prima facie* case with respect to the charges and allegations contained in Accusation
4 No. 800-2017-036369 and that he has thereby subjected his license to disciplinary action.

5 11. Respondent agrees that his Physician's and Surgeon's Certificate is subject to
6 discipline and he agrees to be bound by the Board's terms as set forth in the Disciplinary Order
7 below.

8 **CONTINGENCY**

9 12. This stipulation shall be subject to approval by the Medical Board of California.
10 Respondent understands and agrees that counsel for Complainant and the staff of the Medical
11 Board of California may communicate directly with the Board regarding this stipulation and
12 settlement, without notice to or participation by Respondent or his counsel. By signing the
13 stipulation, Respondent understands and agrees that he may not withdraw his agreement or seek
14 to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails
15 to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary
16 Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal
17 action between the parties, and the Board shall not be disqualified from further action by having
18 considered this matter.

19 13. Respondent agrees that, if an accusation is subsequently filed against him before the
20 Board, all of the charges and allegations contained in Accusation No. 800-2017-036369 shall be
21 deemed true, correct and fully admitted by Respondent for purposes of any such proceeding or
22 any other licensing proceeding involving Respondent in the State of California.

23 14. This Stipulated Settlement and Disciplinary Order is intended by the parties herein to
24 be an integrated writing representing the complete, final and exclusive embodiment of the
25 agreement of the parties in this above entitled matter.

26 15. The parties understand and agree that Portable Document Format (PDF) and facsimile
27 copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile
28 signatures thereto, shall have the same force and effect as the originals.

1 been approved by the Board or its designee had the course been taken after the effective date of
2 this Decision.

3 Respondent shall submit a certification of successful completion to the Board or its
4 designee not later than 15 calendar days after successfully completing the course, or not later than
5 15 calendar days after the effective date of the Decision, whichever is later.

6 **C. MEDICAL RECORD KEEPING COURSE**

7 Within 60 calendar days of the effective date of this Decision, Respondent shall enroll in a
8 course in medical record keeping approved in advance by the Board or its designee. Respondent
9 shall provide the approved course provider with any information and documents that the approved
10 course provider may deem pertinent. Respondent shall participate in and successfully complete
11 the classroom component of the course not later than six (6) months after Respondent's initial
12 enrollment. Respondent shall successfully complete any other component of the course within
13 one (1) year of enrollment. The medical record keeping course shall be at Respondent's expense
14 and shall be in addition to the Continuing Medical Education (CME) requirements for renewal of
15 licensure.

16 A medical record keeping course taken after the acts that gave rise to the charges in the
17 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
18 or its designee, be accepted towards the fulfillment of this condition if the course would have
19 been approved by the Board or its designee had the course been taken after the effective date of
20 this Decision.

21 Respondent shall submit a certification of successful completion to the Board or its
22 designee not later than 15 calendar days after successfully completing the course, or not later than
23 15 calendar days after the effective date of the Decision, whichever is later.

24 **D. INVESTIGATION/ENFORCEMENT COST RECOVERY.**

25 Respondent is hereby ordered to reimburse the Board its costs of investigation and
26 enforcement in the year of 2022, including, but not limited to, expert review, amended
27 accusations, legal reviews, joint investigations, and subpoena enforcement, as applicable, in the
28 amount of \$5,300.00 (five thousand three hundred dollars and zero cents). Costs shall be payable

1 to the Medical Board of California. Costs shall be payable to the Medical Board of California
2 within one (1) year from the effective date of this Decision.

3 Any and all requests for a payment plan shall be submitted in writing by Respondent to the
4 Board.

5 The filing of bankruptcy by Respondent shall not relieve Respondent of the responsibility
6 to repay investigation and enforcement costs.

7 **E. FAILURE TO COMPLY**

8 Failure to comply with any of the terms of this Disciplinary Order shall constitute general
9 unprofessional conduct and may serve as grounds for further disciplinary action.

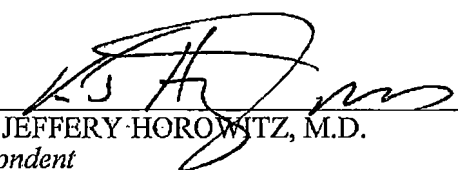
10 **F. FUTURE ADMISSIONS CLAUSE.**

11 If Respondent should ever apply or reapply for a new license or certification, or petition for
12 reinstatement of a license, by any other health care licensing action agency in the State of
13 California, all of the charges and allegations contained in Accusation No. 800-2017-036369 shall
14 be deemed to be true, correct, and admitted by Respondent for the purpose of any Statement of
15 Issues or any other proceeding seeking to deny or restrict license.

16
17 **ACCEPTANCE**

18 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
19 discussed it with my attorney, Dennis R. Thelen, Esq. I understand the stipulation and the effect
20 it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement
21 and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the
22 Decision and Order of the Medical Board of California.

23
24 DATED: 6/4/2022


25 _____
26 KIM JEFFERY HOROWITZ, M.D.
27 Respondent

28 [Signatures continued on following page]

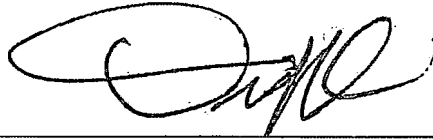
I have read and fully discussed with Respondent Kim Jeffery Horowitz, M.D. the terms and

1 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.

2 I approve its form and content.

3
4 DATED: _____

5-25-22



5 DENNIS R. THELEN, ESQ.
6 *Attorney for Respondent*

7
8 **ENDORSEMENT**

9 The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully
10 submitted for consideration by the Medical Board of California.

11 DATED: _____

12 Respectfully submitted,

13 ROB BONTA
14 Attorney General of California
15 EDWARD KIM
16 Supervising Deputy Attorney General

17 CHRISTINA SEIN GOOT
18 Deputy Attorney General
19 *Attorneys for Complainant*

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1 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.

2 I approve its form and content.

3

4 DATED: _____

DENNIS R. THELEN, ESQ.
Attorney for Respondent

6

7

ENDORSEMENT

9 The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully
10 submitted for consideration by the Medical Board of California.

11

12 DATED: 7/8/22

Respectfully submitted,
ROB BONTA
Attorney General of California
EDWARD KIM
Supervising Deputy Attorney General

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CHRISTINA SEIN GOOT
Deputy Attorney General
Attorneys for Complainant

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Exhibit A

Accusation No. 800-2017-036369

1 XAVIER BECERRA
Attorney General of California
2 ROBERT MCKIM BELL
Supervising Deputy Attorney General
3 CHRISTINA SEIN GOOT
Deputy Attorney General
4 State Bar No. 229094
California Department of Justice
5 300 South Spring Street, Suite 1702
Los Angeles, CA 90013
6 Telephone: (213) 269-6481
Facsimile: (916) 731-2117
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9 **BEFORE THE**
MEDICAL BOARD OF CALIFORNIA
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12 In the Matter of the Accusation Against:

Case No. 800-2017-036369

13 Kim Jeffery Horowitz, M.D.
14 P.O. Box 1898
Tehachapi, CA 93581

ACCUSATION

15 Physician's and Surgeon's Certificate A 42396,
16 Respondent.

17
18
19 **PARTIES**

20 1. William Prasifka (Complainant) brings this Accusation solely in his official capacity
21 as the Executive Director of the Medical Board of California, Department of Consumer Affairs
22 (Board).

23 2. On December 30, 1985, the Board issued Physician's and Surgeon's Certificate
24 Number A 42396 to Kim Jeffery Horowitz, M.D. (Respondent). That license was in full force
25 and effect at all times relevant to the charges brought herein and will expire on June 30, 2021,
26 unless renewed.

27 **JURISDICTION**

28 3. This Accusation is brought before the Board under the authority of the following

1 laws. All section references are to the Business and Professions Code (Code) unless otherwise
2 indicated.

3 4. Section 2227 of the Code provides that a licensee who is found guilty under the
4 Medical Practice Act may have his or her license revoked, suspended for a period not to exceed
5 one year, placed on probation and required to pay the costs of probation monitoring, or such other
6 action taken in relation to discipline as the Board deems proper.

7 5. Section 2234 of the Code states:

8 The board shall take action against any licensee who is charged with
9 unprofessional conduct. In addition to other provisions of this article, unprofessional
conduct includes, but is not limited to, the following:

10 (a) Violating or attempting to violate, directly or indirectly, assisting in or
11 abetting the violation of, or conspiring to violate any provision of this chapter.

12 (b) Gross negligence.

13 (c) Repeated negligent acts. To be repeated, there must be two or more
14 negligent acts or omissions. An initial negligent act or omission followed by a
separate and distinct departure from the applicable standard of care shall constitute
repeated negligent acts.

15 (1) An initial negligent diagnosis followed by an act or omission medically
16 appropriate for that negligent diagnosis of the patient shall constitute a single
negligent act.

17 (2) When the standard of care requires a change in the diagnosis, act, or
18 omission that constitutes the negligent act described in paragraph (1), including, but
19 not limited to, a reevaluation of the diagnosis or a change in treatment, and the
licensee's conduct departs from the applicable standard of care, each departure
constitutes a separate and distinct breach of the standard of care.

20 (d) Incompetence.

21 (e) The commission of any act involving dishonesty or corruption that is
22 substantially related to the qualifications, functions, or duties of a physician and
surgeon.

23 (f) Any action or conduct that would have warranted the denial of a certificate.

24 (g) The failure by a certificate holder, in the absence of good cause, to attend
25 and participate in an interview by the board. This subdivision shall only apply to a
certificate holder who is the subject of an investigation by the board.

26 6. Section 2266 of the Code states: "The failure of a physician and surgeon to maintain
27 adequate and accurate records relating to the provision of services to their patients constitutes
28 unprofessional conduct."

1 FACTS

2 7. At all times relevant to the allegations herein, Respondent was a licensed physician
3 practicing family medicine.

4 8. Respondent treated Patient 1,¹ a 60-year-old female, from June 27, 2016 through
5 March 31, 2017. On June 27, 2016, Patient 1 was seen for lab results and medication refills.
6 Prior to this visit, Respondent received three statements from CVS pharmacy detailing concerns
7 about Patient 1's medication combinations and long-term use of Lunesta. Patient 1's listed
8 medications were Soma 350 mg - every four to six hours as needed (prn); Percocet 10/325 mg (10
9 mg of oxycodone and 325 mg of acetaminophen) - every four to six hours prn; Mylan brand
10 Fentanyl Transdermal patch 100 mcg/hr (100 micrograms delivered hourly) - one patch daily;
11 Lunesta 3 mg - one to two at night; Lorazepam 1 mg - twice per day (BID) prn; Prempro;
12 simvastatin; fiber; and stool softeners. The assessment was chronic low back pain, post-
13 laminectomy syndrome, peripheral neuropathy, spinal stenosis, scoliosis, hyperlipidemia,
14 menopause, and chronic insomnia. The plan documented was labs with drug screen, refills of
15 medications, and Respondent noted that he had an "extended discussion" with Patient 1, who
16 indicated she was fearful of weaning medications, but agreed to try to lower her Soma and
17 Percocet by ½ tablet a day and to make the Fentanyl patch last longer. All the prescriptions were
18 refilled for three months.

19 9. Respondent next saw Patient 1 on October 31, 2016. The exam was normal except
20 for tachycardia. He prescribed Valium 10 mg #90 - three times per day (TID) and stopped
21 Lorazepam and Soma. He stopped Lunesta, but instead of melatonin medications, he prescribed
22 zolpidem (Ambien) 12.5 mg CR (extended release) #30, one nightly. On the follow-up exam on
23 November 28, 2016, Respondent's note stated that Valium helps the pain, but not the panic
24 attacks, and that zolpidem was ineffective for sleep. Patient 1 was also unable to wean the
25 Percocet to TID. The exam was normal (no further tachycardia). Refills were given for zolpidem
26 12.5 mg CR, Fentanyl, Percocet (#180 per month), and Valium 10 mg, all for three months, and
27 melatonin 3 mg and chamomile tea nightly was recommended.

28 ¹ The patient is referred to by number to protect her privacy.

1 10. Patient 1 was again seen on January 30, 2017, and Respondent noted that severe low
2 back pain, right leg pain, and thoracic spine pain continued, but that zolpidem was helping with
3 sleep, and Valium was helping with anxiety and muscle spasms. The exam was normal and
4 Respondent mentioned having Patient 1 bring in her medicine bottles for a pill count at the next
5 visit. Valium and zolpidem were refilled, both with five extra refills. Multiple labs and a January
6 23, 2017 drug screen were reviewed, with the drug screen results showing the presence of the two
7 opiates.

8 11. Patient 1's last visit with Respondent was on March 31, 2017. Patient 1 had a non-
9 productive cough and wheezing for months, and was having increased panic attacks and nausea
10 and vomiting episodes (possibly from the panic attacks). The exam was normal except for a
11 congested nose, for which Flonase was prescribed. There was no evidence of a pill count being
12 performed. For the increased anxiety, Respondent referred Patient 1 to a psychiatrist. Fentanyl
13 and Percocet each were refilled for three months.

14 12. For the aforementioned nine months of care, the medical records are lacking. The
15 history is perfunctory with mention only of the presence of chronic pain, without further
16 characterizing the pain and without mention of the "4 A's" of pain management – analgesia,
17 activities of daily living, adverse side effects, and aberrant drug-taking behaviors – that should be
18 addressed at each visit when opiates are prescribed. Exams are even less notable with just lines
19 or check marks, and mention is only made of the presence of a brace or "the same" peripheral
20 neuropathy. Throughout this period of care, only one pain score is noted on June 27, 2016,
21 tachycardia is not addressed on two visits, and no other medical issues (hyperlipidemia, physicals,
22 anemia on lab work from January 23, 2017, nausea and vomiting, or cough and wheezing) seem
23 to be discussed or fully evaluated. Additionally, there is no documented discussion of sleep
24 hygiene for the insomnia.

25 **FIRST CAUSE FOR DISCIPLINE**

26 (Gross Negligence)

27 13. Respondent's license is subject to disciplinary action under section 2234, subdivision
28 (b), of the Code in that he committed gross negligence in the care and treatment of Patient 1. The

1 circumstances are as follows:

2 14. Complainant refers to and, by this reference, incorporates Paragraphs 7 through 12,
3 above, as though set forth fully herein.

4 15. When prescribing controlled medications, the standard of care is to perform a careful
5 history and physical at each visit, have a treatment plan and clear objectives, have informed
6 consent (such as a pain contract), conduct periodic review of the effectiveness of treatment or of
7 the abuse of treatment (and modifying opiates as needed, such as lowering dosages when pain
8 goals are met), obtain consultations as needed, and maintain complete records.

9 16. Respondent's care and treatment of Patient 1, as set forth above, includes the
10 following act and/or omission, which constitutes an extreme departure from the standard of care:
11 Respondent's failure to maintain adequate records.

12 **SECOND CAUSE FOR DISCIPLINE**

13 (Repeated Negligent Acts)

14 17. Respondent's license is subject to disciplinary action under section 2234, subdivision
15 (c), of the Code in that he committed repeated negligent acts in the care and treatment of Patient

16 1. The circumstances are as follows:

17 18. Complainant refers to and, by this reference, incorporates Paragraphs 7 through 12,
18 above, as though set forth fully herein.

19 19. The allegations of the First Cause for Discipline are incorporated by reference as if
20 fully set forth herein.

21 20. When prescribing opiates for pain management, the standard of care is to use the
22 lowest dose possible and to watch consistently for adverse effects and signs of abuse and
23 diversion. When pain goals are met, gradual tapering is recommended in order to attempt to
24 discontinue opiates. When pain goals are not met, or abuse or diversion is detected, referral to a
25 specialist for continued pain management is essential.

26 21. The standard of care is to avoid combining opiates with benzodiazepines and other
27 sedatives in order to avoid the higher risk of overdose inherent in these combinations.

28 22. Respondent's care and treatment of Patient 1, as set forth above, includes the

1 following acts and/or omissions, which constitute simple departures from the standard of care:

- 2 a. Respondent's failure to maintain adequate records.
- 3 b. Respondent's failure to taper the dose of opiates prescribed.
- 4 c. Respondent's treatment of Patient 1 with benzodiazepines and other sedatives
- 5 combined with opiates, thereby increasing the risk of overdose and other reactions.

6 **THIRD CAUSE FOR DISCIPLINE**

7 (Failure to Maintain Adequate Records)

8 23. Respondent's license is subject to disciplinary action under section 2266 of the Code
9 in that he failed to maintain adequate records concerning the care and treatment of Patient 1. The
10 circumstances are as follows:

11 24. Complainant refers to and, by this reference, incorporates Paragraphs 7 through 12,
12 above, as though set forth fully herein.

13 25. The allegations of the First Cause for Discipline are incorporated by reference as if
14 fully set forth herein.

15 **PRAYER**

16 **WHEREFORE**, Complainant requests that a hearing be held on the matters herein alleged,
17 and that following the hearing, the Medical Board of California issue a decision:

18 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 42396,
19 issued to Kim Jeffery Horowitz, M.D.;

20 2. Revoking, suspending or denying approval of Kim Jeffery Horowitz, M.D.'s
21 authority to supervise physician assistants and advanced practice nurses;

22 3. Ordering Kim Jeffery Horowitz, M.D., if placed on probation, to pay the Board the
23 costs of probation monitoring; and

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4. Taking such other and further action as deemed necessary and proper.

DATED: AUG 26 2020



WILLIAM PRASIFKA
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California

Complainant

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