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

In the Matter of the Petition for Reinstatement of: Elisabeth Ann Bossingham, M.D. Physician's and Surgeon's Certificate No. G 69388 Respondent.	Case No. 800-2023-101560

DECISION

The attached Proposed Decision 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 February 21, 2025.

IT IS SO ORDERED January 27, 2025.

MEDICAL BOARD OF CALIFORNIA

Michelle A. Bholat, MD
Michelle Anne Bholat, M.D., Chair
Panel A

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

In the Matter of the Petition for Reinstatement of:

Elisabeth Ann Bossingham,

Petitioner.

Agency Case No. 800-2023-101560

OAH No. 2024060976

CORRECTED PROPOSED DECISION

Julie Cabos Owen, Administrative Law Judge (ALJ), Office of Administrative Hearings (OAH), State of California, heard this matter by videoconference on October 15, 2024. Elisabeth Bossingham (Petitioner) appeared and was represented by John Sarsfield, Attorney at Law with the Law Offices of Melo and Sarsfield, LLP. Pursuant to the provisions of Government Code Section 11522, Melissa M. Marquez, Deputy Attorney General, represented the Attorney General of the State of California.

Testimony and documentary evidence was received. The record closed, and the matter was submitted for decision on October 15, 2024.

The ALJ issued a Proposed Decision on October 30, 2024. On November 6, 2024, a representative of the Medical Board of California (Board) filed with OAH an application for changes to the Proposed Decision (application), pursuant to Government Code Section 11517, subdivision (c)(2)(C), and California Code of Regulations, title 1 (CCR), section 1048. The application requested two changes due to clerical error as follows: (1) in paragraph 4, the effective date of the Stipulated Surrender of the license should be December 9, 2013 (instead of December 2, 2013); and (2) in paragraph 8, the date listed should be July 17, 2018 (instead of July 17, 2019). The application was not served on the Attorney General's counsel or Petitioner's counsel as required by CCR section 1048, subdivision (a)(1). Nevertheless, the ALJ confirmed the clerical changes were necessary to comport with the evidence (except the date change requested for paragraph 8 was in paragraph 7). Pursuant to CCR section 1048, subdivision (c), the clerical changes set forth above are incorporated in this Corrected Proposed Decision.

FACTUAL FINDINGS

Disciplinary History

1. Petitioner was previously the holder of Physician and Surgeon's Certificate (license) Number G 69388, issued by the Board on August 2, 1990.

2. On November 30, 2012, the Board issued an order automatically suspending Petitioner's license due to her incarceration following felony convictions. (Bus. & Prof. Code, § 2236.1.)

3. On June 25, 2013, the Executive Director of the Board filed an accusation in Case Number 08-2012-223183 (Accusation) alleging that discipline should be imposed on Petitioner's certificate on the following grounds: conviction of a crime substantially related to the qualifications, functions, or duties of a physician;

commission of acts of dishonesty or corruption; unprofessional conduct; and violation of Medical Practice Act.

4. Effective December 9, 2013, the Board issued a Decision adopting Petitioner's Stipulated Surrender of License (2013 Decision). Pursuant to the 2013 Decision, Petitioner admitted the truth of each allegation and charge of the Accusation.

5. The Accusation and 2013 Decision arose from Petitioner's 2012 federal criminal convictions after a jury found Petitioner guilty of one count of conspiracy (18 U.S.C. § 371) and three counts of tax evasion and aiding and abetting (26 U.S.C. § 7201; 18 U.S.C. § 2), all class D felonies. On April 30, 2012, Petitioner was sentenced to federal prison for 51 months, followed by 36 months of supervised release. She was ordered to pay $212,314 in criminal monetary penalties, representing $150,649 in restitution to the Internal Revenue Service (IRS) and $61,665 in restitution to the California Franchise Tax Board (FTB). Petitioner's then husband was assigned joint and several liability for the criminal penalties.

6. The facts and circumstances of Petitioner's crimes are that from January 2000 through April 2010, Petitioner and her husband conspired to defraud the United States by: using offshore bank accounts, "warehouse" banking, tax avoidance schemes, and trust organizations to shield their income from the IRS; filing fake liabilities and deeds of trust against their properties to appear as having no liability in the properties; filing false and fraudulent tax returns with the IRS by grossly underestimating taxable income and falsely claiming no tax was owed or that refunds were owed, in order to evade paying income tax.

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Prior Petition

7. On July 17, 2018, Petitioner filed a Petition for Penalty Relief seeking reinstatement of her license (Prior Petition).

8. After a hearing on August 7, 2019, an ALJ issued an August 28, 2019 Proposed Decision. The Board non-adopted the ALJ's Proposed Decision and, after a January 30, 2020 hearing, issued its Decision After Non-Adoption (2020 Decision) denying the Prior Petition.

9. The 2020 Decision commended Petitioner's rehabilitative efforts following her 2018 release from the oversight of the criminal justice system. However, in denying the Prior Petition, the 2020 Decision noted, "[I]n light of the seriousness of [Petitioner's] misconduct and the dishonesty associated with it, a longer period of exemplary conduct is required in order to fully assess rehabilitation." (Exhibit 4, p. A71.)

Current Petition

10. On July 22, 2023, Petitioner signed and subsequently filed her current Petition for Penalty Relief seeking reinstatement of her license (Petition). Thereafter, this matter was set for hearing.

Petitioner's Evidence at Hearing

11. Petitioner testified at the administrative hearing. She presented as a respectful witness. However, her testimony was rambling and vague, and she failed to clarify the circumstances of her crimes or to articulate her full acceptance of responsibility.

12. Petitioner attended medical school and completed a pediatric residency at Loma Linda University. In 1992, she married and subsequently had children while working as a fulltime physician. Petitioner was her family's main income earner, and she focused her attention on practicing medicine. Petitioner's then husband managed the family's finances.

13. From 1992 to 2005, Petitioner worked as a pediatrician with the Visalia Medical Group. During that time, the tax issues leading to Petitioner's criminal convictions arose. Petitioner had relinquished control of the family's finances to her husband, and Petitioner recalled he tried "different strategies to take care of [tax] issues, but just prolonged the problem." (Petitioner's testimony.)

14. Petitioner recalled that, in 2000, her husband "declared that he was no longer going to be paying taxes." (Petitioner's testimony.) When asked on cross examination if she agreed with his plan, Petitioner answered vaguely, "He was the one in charge of financial matters, and he was making a declaration......... I honestly don't remember if it was one or both of us. That is the best I can say." When asked if there were years between 2000 and 2010 that she did not file personal income taxes, Petitioner responded obliquely, "That is what the conclusion was." When asked to clarify if her answer was "yes," she responded vaguely, "If that is what the evidence showed, that would be 'yes.'"

15. Petitioner discontinued working at Visalia Medical Clinic in about 2005. Petitioner vaguely recalls, "there was going to be wage garnishing at Visalia Medical Clinic" and "the reason [she] left [employment there] was because [her husband] could not figure out how to deal with the tax issues." (*Ibid.*)

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16. In 2005, Petitioner started her own practice, Visalia Pediatrics & Associates (VPA). Petitioner's husband served as business manager for VPA while continuing to manage the family's finances. Petitioner continued focusing her attention on practicing medicine rather than running the business aspect of VPA.

17. In about 2007, after years of not filing income taxes, Petitioner and her husband filed false tax returns. When asked at hearing whether she admitted submitting fraudulent tax returns, Petitioner answered vaguely, "It sounds as if that is what happened. When I insisted that they be filed, and they were filed incorrectly."

18. Petitioner continued to point to her former husband as the sole party responsible for her crimes, noting she had entrusted him with filing taxes and "figur[ing] out how to rectify" tax issues. When asked at hearing if she was aware, at the time, that income taxes were not filed on her behalf, she responded, "Yes, but I was not the one directly involved."

19. Petitioner made some acknowledgements of responsibility for her crimes. For example, when asked if she blamed her husband for not paying taxes for 10 years, Petitioner responded ambiguously, "I am the predominant wage earner [so I] accept 100 percent of the scenario [where] taxes [were] unpaid." Petitioner admits she "should have put her foot down," or "should have completely walked away or terminated the relationship, but that is not what happened." She feared losing her husband as the office manager of her medical practice, and she did not believe she could handle a divorce. Petitioner stated, "At some point you give in to get along, and you join in." She now regrets failing to take action to sever their relationship.

20. Following her criminal convictions, Petitioner was remanded to prison on April 30, 2012. With good time credit, Petitioner served only 39 months of her 51-

month sentence and was released on August 10, 2015. The court subsequently granted her early termination of her three-year supervised release. Supervision ended on February 5, 2018.

21. Petitioner began divorce proceedings while in prison. She no longer has contact with her former husband. She has occasional contact with her children.

22. After her release from prison, Petitioner obtained a certification as a phlebotomist but was unable to find employment in that field.

23. Since December 2016, Petitioner has been employed by Key Medical Group as a Health Coach serving Medicare Advantage and Medicare/Medi-Cal members. (Key Medical Group is an independent medial association managed by the Foundation for Medical Care of Tulare & King Counties.) As a Health Coach, Petitioner coordinates care services, facilitates access to services, and acts as a patient liaison and advocate to ensure services are provided.

24. Petitioner earns $54,000 per year as a Health Coach, and she has been unable to secure higher paying employment. She is faced with the dilemma of "how to move forward" to pay off her remaining restitution debt.

25. Petitioner previously entered into agreements with the IRS and the FTB to make installment payments on her outstanding restitution obligations.

26. Since August 2017, Petitioner has been obligated to make monthly payments of $100 to the FTB. As of October 2023, Petitioner owed the FTB $299,182.22.

27. As noted in 2020 Decision, "As of July 2018, Petitioner owed the IRS $451,984.37 in taxes. Petitioner has been making monthly payments of $268 on this

debt since August of 2012[.]" (Exhibit 4, p. A57.) However, on January 10, 2022, Petitioner received a notice that the IRC closed her case after determining she did not have the ability to pay the amount owed. Nevertheless, the notice also informed her:

> Consider making voluntary payments toward the amount(s) you owe, when possible, to minimize additional interest and applicable penalties. [¶] Although we temporarily closed your case for collections, you still owe the IRS an amount(s). We may re-open your case in the future if your financial situation improves. Because you still owe the IRS an amount(s), we'll continue to add applicable penalties and interest to your account and we can make other adjustments and offsets, such as applying future federal tax refunds to the amount(s) you owe.

(Exhibit 20, p. A218.)

28. Petitioner has continued to make voluntary payments to the IRS. However, the amounts and frequency of those voluntary payments, as well as the outstanding amount owed, were not established by the evidence.

29. Since 2015, Petitioner has been working with certified public accountant Gamaliel Aguilar to address her tax-related and financial issues. Mr. Aguilar testified credibly at the hearing, and he confirmed Petitioner is currently in compliance with her tax filing obligations. In his testimony and in a June 8, 2023 letter, Mr. Aguilar noted Petitioner has "diligently filed all required Income Taxes from 2015 to present." (Ex. 12, p. A189.)

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30. In 2017, Petitioner voluntarily began therapy with Licensed Marriage and Family Therapist Barry Sommer. She attends in-person one-hour sessions once per month. Petitioner met Mr. Sommer through her prior employment at Visalia Medical Clinic when she referred pediatric patients to him for treatment. Petitioner has gained benefits from her therapy. She is beginning to understand her co-dependency, and she testified she has taken steps to "become a strong and independent individual with boundaries."

31. Mr. Sommer testified at the hearing and confirmed Petitioner's attendance at therapy sessions. He noted the general purpose of their therapy sessions is Petitioner's separation from the negative influences of her marriage and reintegration into her family and community. He believes the therapy has been beneficial for Petitioner.

32. Petitioner has intermittently engaged in volunteer activities through her employment and through her church. Petitioner remains an active member of her church. However, she does not currently volunteer in her community.

33. Petitioner has sustained no other criminal convictions since 2012.

34. Petitioner has not practiced medicine since 2012. She has attempted to maintain her medical knowledge and skills through continuing medical education courses and by updating her Basic Life Support and Pediatric Advance Life Support certifications.

35. Petitioner explained in her written statement that her "resolve and determination to pay all outstanding tax debts is the prevailing reason for this second petition to gain a higher income." (Ex. 10, p. A180.) Petitioner stated, "If given the

opportunity, I am confident that I can be more productive and make a higher wage through the practice of medicine and will resolve past debts." (*Ibid.*)

36. Petitioner has the support of friends and colleagues who submitted letters endorsing her re-licensure. Former and current colleagues, Christine A. Nelson, M.D.; Michael S. Barnett, M.D.; James W. Foxe, M.D.; and Brandi Guinn, Administrator of Managed Care for the Foundation for Medical Care of Tulare & Kings Counties, collectively described Petitioner as professional, dedicated, reliable, and caring. Petitioner's current supervisor, Stephanie Jackson, Clinical Support Supervisor at Key Medical Group, noted Petitioner's excellent work skills.

37. Most of the above-listed writers provided letters for Petitioner's Prior Petition that mirrored their current letters. Dr. Fox's letter appears identical, except for the date. Additionally, the letter from Petitioner's current supervisor, Ms. Jackson, is virtually identical to the letter from Petitioner's prior supervisor, Ann Colman, R.N., B.S.N. However, the letter writers' use of prior templates did not discredit their current submissions.

38. Petitioner's friend, Hon. Marianne Gilbert, submitted a letter and testified on Petitioner's behalf. She described Petitioner's character as exemplary.

LEGAL CONCLUSIONS

1. Petitioner bears the burden of proving both her rehabilitation and her fitness to practice medicine. (*Housman v. Board of Medical Examiners* (1948) 84 Cal.App.2d 308.) The standard of proof is clear and convincing evidence. (*Hippard v. State Bar* (1989) 49 Cal.3d 1084, 1092; *Feinstein v. State Bar* (1952) 39 Cal.2d 541, 546-547.) Petitioner's burden also requires a showing that she is no longer deserving of the

adverse character judgment associated with the discipline imposed against her certificate. (*Tardiff v. State Bar* (1980) 27 Cal.3d 395, 403.) Petitioner has met her burden of proof.

2. Business and Professions Code section 2307, subdivision (e), states in pertinent part:

> The panel of the division or the administrative law judge hearing the petition may consider all activities of the petitioner since the disciplinary action was taken, the offense for which the petitioner was disciplined, the petitioner's activities during the time the certificate was in good standing, and the petitioner's rehabilitative efforts, general reputation for truth, and professional ability. . . .

3. Petitioner's crimes were serious and involved years of dishonest actions. Petitioner acknowledged some, but not all, responsibility for the criminal convictions leading to her license surrender. Petitioner expressed regret only for failing to "put her foot down" or to leave her marriage while her husband was engaging in criminal activity. While Petitioner pointed to her husband as the person who steered them to felonious activity, she sidestepped admitting her silent endorsement of his illegal activity for many years. Remorse for one's conduct and the acceptance of responsibility are the cornerstones of rehabilitation. (*In the Matter of Brown* (1993) 2 Cal. State Bar Ct. Rptr. 309, 317.) Fully acknowledging the wrongfulness of past actions is an essential step towards rehabilitation. (*Seide v. Committee of Bar Examiners* (1989) 49 Cal.3d 933, 940; *In the Matter of Brown, supra*.) Petitioner's limited expressions of remorse and responsibility are troublesome but are apparently entangled with the co-dependency issues Petitioner continues to address in therapy.

4. Moreover, remorse alone does not demonstrate rehabilitation. A truer indication of rehabilitation is sustained conduct over an extended period of time. (*In re Menna* (1995) 11 Cal.4th 975, 991.) Petitioner's actions in the six years since her release from parole have demonstrated her dedication to compliance with the law. She has sustained no further criminal convictions, and she has regularly attended therapy to address the issues that induced her criminal conduct. She has diligently filed all required income taxes from 2015 to the present. Since 2017, Petitioner has made monthly payments to the FTB. Although the IRS closed Petitioner's case file due to her inability to pay, Petitioner has continued to make voluntary payments to the IRS. Petitioner has been steadily employed since December 2016. She has the support of her supervisors, colleagues, and friends who confirm her professionalism and reliability in the work setting and support her re-licensure. The totality of the evidence indicates a significantly reduced chance of recidivism should Petitioner be granted reinstatement of her license under probationary terms.

5. Petitioner has not practiced medicine for over 12 years. Consequently, as a condition of probation (and condition precedent to resuming the practice of medicine), Petitioner should complete a clinical competence program to evaluate and update her medical knowledge and skills.

6. Petitioner has sustained her burden of proving by clear and convincing evidence that she is rehabilitated and entitled to reinstatement of her license on a probationary basis with appropriate terms and conditions.

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ORDER

The petition of Elisabeth Ann Bossingham for reinstatement of her physician and surgeon's certificate is granted. Petitioner's physician and surgeon's certificate, Number G 69388, shall be reinstated. However, her physician and surgeon's certificate shall be immediately revoked, the revocation shall be stayed, and Petitioner shall be placed on probation for five years under the following terms and conditions:

1. NOTIFICATION

Within seven days of the effective date of this Decision, Petitioner shall provide a true copy of this Decision and Accusation to the Chief of Staff or the Chief Executive Officer at every hospital where privileges or membership are extended to Petitioner, at any other facility where Petitioner engages in the practice of medicine, including all physician and locum tenens registries or other similar agencies, and to the Chief Executive Officer at every insurance carrier which extends malpractice insurance coverage to Petitioner. Petitioner shall submit proof of compliance to the Board or its designee within 15 calendar days.

This condition shall apply to any change(s) in hospitals, other facilities, or insurance carrier.

2. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADANCED PRACTICE NURSES

During probation, Petitioner is prohibited from supervising physician assistants and advanced practice nurses.

3. OBEY ALL LAWS

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Petitioner shall obey all federal, state and local laws, all rules governing the practice of medicine in California and remain in full compliance with any court ordered criminal probation, payments, and other orders.

4. QUARTERLY DECLARATIONS

Petitioner shall submit quarterly declarations under penalty of perjury on forms provided by the Board, stating whether there has been compliance with all the conditions of probation.

Petitioner shall submit quarterly declarations not later than 10 calendar days after the end of the preceding quarter.

5. GENERAL PROBATION REQUIREMENTS

Compliance with Probation Unit

Petitioner shall comply with the Board's probation unit.

Address Changes

Petitioner shall, at all times, keep the Board informed of Petitioner's business and residence addresses, email address (if available), and telephone number. Changes of such addresses shall be immediately communicated in writing to the Board or its designee. Under no circumstances shall a post office box serve as an address of record, except as allowed by Business and Professions Code section 2021, subdivision (b).

Place of Practice

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Petitioner shall not engage in the practice of medicine in Petitioner's or patient's place of residence, unless the patient resides in a skilled nursing facility or other similar licensed facility.

License Renewal

Petitioner shall maintain a current and renewed California physician's and surgeon's license.

Travel or Residence Outside California

Petitioner shall immediately inform the Board or its designee, in writing, of travel to any areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty calendar days.

In the event Petitioner should leave the State of California to reside or to practice Petitioner shall notify the Board or its designee in writing 30 calendar days prior to the dates of departure and return.

6. INTERVIEW WITH THE BOARD OR ITS DESIGNEE

Petitioner shall be available in person upon request for interviews either at Petitioner's place of business or at the probation unit office, with or without prior notice throughout the term of probation.

7. NON-PRACTICE WHILE ON PROBATION

Petitioner shall notify the Board or its designee in writing within 15 calendar days of any periods of non-practice lasting more than 30 calendar days and within 15 calendar days of Petitioner's return to practice. Non-practice is defined as any period of time Petitioner is not practicing medicine as defined in Business and Professions

Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct patient care, clinical activity or teaching, or other activity as approved by the Board. If Petitioner resides in California and is considered to be in non-practice, Petitioner shall comply with all terms and conditions of probation. All time spent in an intensive training program which has been approved by the Board or its designee shall not be considered non-practice and does not relieve Petitioner from complying with all the terms and conditions of probation. Practicing medicine in another state of the United States or Federal jurisdiction while on probation with the medical licensing authority of that state or jurisdiction shall not be considered non-practice. A Board-ordered suspension of practice shall not be considered as a period of non-practice.

In the event Petitioner's period of non-practice while on probation exceeds 18 calendar months, Petitioner shall successfully complete the Federation of State Medical Board's Special Purpose Examination, or, at the Board's discretion, a clinical competence assessment program that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

Petitioner's period of non-practice while on probation shall not exceed two years.

Periods of non-practice will not apply to the reduction of the probationary term.

Periods of non-practice for a Petitioner residing outside of California, will relieve Petitioner of the responsibility to comply with the probationary terms and conditions with the exception of this condition and the following terms and conditions of probation: Obey All Laws; General Probation Requirements; Quarterly Declarations.

8. SOLO PRACTICE PROHIBITION

Petitioner is prohibited from engaging in the solo practice of medicine. Prohibited solo practice includes, but is not limited to, a practice where: 1) Petitioner merely shares office space with another physician but is not affiliated for purposes of providing patient care, or 2) Petitioner is the sole physician practitioner at that location.

If Petitioner fails to establish a practice with another physician or secure employment in an appropriate practice setting within 60 calendar days of the effective date of this Decision, Petitioner shall receive a notification from the Board or its designee to cease the practice of medicine within three calendar days after being so notified. The Petitioner shall not resume practice until an appropriate practice setting is established.

If, during the course of the probation, the Petitioner's practice setting changes and the Petitioner is no longer practicing in a setting in compliance with this Decision, the Petitioner shall notify the Board or its designee within five calendar days of the practice setting change. If Petitioner fails to establish a practice with another physician or secure employment in an appropriate practice setting within 60 calendar days of the practice setting change, Petitioner shall receive a notification from the Board or its designee to cease the practice of medicine within three calendar days after being so notified. Petitioner shall not resume practice until an appropriate practice setting is established.

9. VIOLATION OF PROBATION

Failure to fully comply with any term or condition of probation is a violation of probation. If Petitioner violates probation in any respect, the Board, after giving Petitioner notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed against Petitioner during probation, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.

10. LICENSE SURRENDER

Following the effective date of this Decision, if Petitioner ceases practicing due to retirement or health reasons or is otherwise unable to satisfy the terms and conditions of probation, Petitioner may request to surrender her license. The Board reserves the right to evaluate Petitioner's request and to exercise its discretion in determining whether or not to grant the request, or to take any other action deemed appropriate and reasonable under the circumstances. Upon formal acceptance of the surrender, Petitioner shall within 15 calendar days deliver Petitioner's wallet and wall certificate to the Board or its designee and Petitioner shall no longer practice medicine. Petitioner will no longer be subject to the terms and conditions of probation. If Petitioner re-applies for a medical license, the application shall be treated as a petition for reinstatement of a revoked certificate.

11. PROBATION MONITORING COSTS

Petitioner shall pay the costs associated with probation monitoring each and every year of probation, as designated by the Board, which may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of California and delivered to the Board or its designee no later than January 31 of each calendar year.

12. CLINICAL COMPETENCE ASSESSMENT PROGRAM

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Within 60 calendar days of the effective date of this Decision, Petitioner shall enroll in a clinical competence assessment program approved in advance by the Board or its designee. Petitioner shall successfully complete the program not later than six months after Petitioner's initial enrollment unless the Board or its designee agrees in writing to an extension of that time.

The program shall consist of a comprehensive assessment of Petitioner's physical and mental health and the six general domains of clinical competence as defined by the Accreditation Council on Graduate Medical Education and American Board of Medical Specialties pertaining to Petitioner's current or intended area of practice. The program shall take into account data obtained from the pre-assessment, self-report forms and interview, and the Decision(s), Accusation(s), and any other information that the Board or its designee deems relevant. The program shall require Petitioner's on-site participation for a minimum of three and no more than five days as determined by the program for the assessment and clinical education evaluation. Petitioner shall pay all expenses associated with the clinical competence assessment program.

At the end of the evaluation, the program will submit a report to the Board or its designee which unequivocally states whether the Petitioner has demonstrated the ability to practice safely and independently. Based on Petitioner's performance on the clinical competence assessment, the program will advise the Board or its designee of its recommendation(s) for the scope and length of any additional educational or clinical training, evaluation or treatment for any medical condition or psychological condition, or anything else affecting Petitioner's practice of medicine. Petitioner shall comply with the program's recommendations.

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Determination as to whether Petitioner successfully completed the clinical competence assessment program is solely within the program's jurisdiction.

Petitioner shall not practice medicine until Petitioner has successfully completed the program and has been so notified by the Board or its designee in writing.

13. NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION

Within seven days of the effective date of this Decision, Petitioner shall provide to the Board the names, physical addresses, mailing addresses, and telephone numbers of any and all employers and supervisors. Petitioner shall also provide specific, written consent for the Board, Petitioner's worksite monitor, and Petitioner's employers and supervisors to communicate regarding Petitioner's work status, performance, and monitoring.

For purposes of this section, "supervisors" shall include the Chief of Staff and Health or Well Being Committee Chair, or equivalent, if applicable, when the Petitioner has medical staff privileges.

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14. COMPLETION OF PROBATION

Petitioner shall comply with all financial obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the completion of probation. Upon successful completion of probation, Petitioner's certificate shall be fully restored.

DATE: 11/13/2024

Julie Cabos-Owen

JULIE CABOS OWEN

Administrative Law Judge

Office of Administrative Hearings