

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

In the Matter of the Accusation Against:

Anika Tene Moore, M.D.

Physician's & Surgeon's  
Certificate No. A 98138

Respondent.

Case No. 800-2022-087363

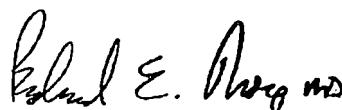
**DECISION**

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 August 6, 2025.

IT IS SO ORDERED: July 7, 2025.

MEDICAL BOARD OF CALIFORNIA

  
\_\_\_\_\_  
Richard E. Thorp, M.D., Chair  
Panel B

1 ROB BONTA  
2 Attorney General of California  
3 MACHAELA M. MINGARDI  
Supervising Deputy Attorney General  
4 THOMAS OSTLY  
Deputy Attorney General  
State Bar No. 209234  
5 455 Golden Gate Avenue, Suite 11000  
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*Attorneys for Complainant*

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

11 In the Matter of the Accusation Against:

Case No. 800-2022-087363

12  
13 **ANIIKA TENE MOORE, M.D.  
7664 Legacy Ridge Dr.  
West Chester, OH 45069-5930**

OAH No. 2024070507

14  
15 **Physician's and Surgeon's Certificate No. A  
98138**

**STIPULATED SETTLEMENT AND  
DISCIPLINARY ORDER**

16  
17 Respondent.

18  
19 In the interest of a prompt and speedy settlement of this matter, consistent with the public  
20 interest and the responsibility of the Medical Board of California of the Department of Consumer  
21 Affairs, the parties hereby agree to the following Stipulated Settlement and Disciplinary Order  
22 which will be submitted to the Board for approval and adoption as the final disposition of the  
23 Accusation.

24 **PARTIES**

25 1. Reji Varghese (Complainant) is the Executive Director of the Medical Board of  
26 California (Board). He brought this action solely in his official capacity and is represented in this  
27 matter by Rob Bonta, Attorney General of the State of California, by Thomas Ostly, Deputy  
28 Attorney General.

1       2. Respondent Anika Tene Moore, M.D. (Respondent) is represented in this proceeding  
2 by attorney Marglyn E. Paseka, Esq., whose address is: 50 California Street, 34th Floor  
3 San Francisco, CA 94111-4799.

4       3. On or about November 22, 2006, the Board issued Physician's and Surgeon's  
5 Certificate No. A 98138 to Anika Tene Moore, M.D. (Respondent). The Physician's and  
6 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in  
7 Accusation No. 800-2022-087363, and will expire on August 31, 2026, unless renewed.

## **JURISDICTION**

9       4.     Accusation No. 800-2022-087363 was filed before the Board, and is currently  
10    pending against Respondent. The Accusation and all other statutorily required documents were  
11    properly served on Respondent on July 13, 2023. Respondent timely filed her Notice of Defense  
12    contesting the Accusation.

13       5. A copy of Accusation No. 800-2022-087363 is attached as exhibit A and incorporated  
14      herein by reference.

## **ADVISEMENT AND WAIVERS**

16       6.    Respondent has carefully read, fully discussed with counsel, and understands the  
17 charges and allegations in Accusation No. 800-2022-087363. Respondent has also carefully read,  
18 fully discussed with her counsel, and understands the effects of this Stipulated Settlement and  
19 Disciplinary Order.

20       7. Respondent is fully aware of her legal rights in this matter, including the right to a  
21 hearing on the charges and allegations in the Accusation; the right to confront and cross-examine  
22 the witnesses against her; the right to present evidence and to testify on her own behalf; the right  
23 to the issuance of subpoenas to compel the attendance of witnesses and the production of  
24 documents; the right to reconsideration and court review of an adverse decision; and all other  
25 rights accorded by the California Administrative Procedure Act and other applicable laws.

26       8.    Respondent voluntarily, knowingly, and intelligently waives and gives up each and  
27    every right set forth above.

## CULPABILITY

9. Respondent understands and agrees that the charges and allegations in Accusation No. 800-2022-087363, if proven at a hearing, constitute cause for imposing discipline upon her Physician's and Surgeon's Certificate.

10. Respondent agrees that, at a hearing, Complainant could establish a factual basis for the charges in the Accusation, and that Respondent hereby gives up her right to contest those charges.

11. Respondent does not contest that, at an administrative hearing, Complainant could establish a *prima facie* case with respect to the charges and allegations in Accusation No. 800-2022-087363, a true and correct copy of which is attached hereto as Exhibit A, and that she has thereby subjected her Physician's and Surgeon's Certificate, No. A 98138 to disciplinary action.

12. Respondent agrees that her Physician's and Surgeon's Certificate is subject to discipline and agrees to be bound by the Board's imposition of discipline as set forth in the Disciplinary Order below.

## **CONTINGENCY**

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

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

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

16. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or opportunity to be heard by the Respondent, issue and enter the following Disciplinary Order:

## DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Respondent ANIKA TENE MOORE, M.D. holder of Physician's and Surgeon's Certificate No. A 98138, shall be and hereby is Publicly Reprimanded pursuant to Business and Professions Code section 2227. This Public Reprimand, which is issued in connection with the allegation as set forth in Accusation No. 800-2022-087363, is as follows:

An investigation by the Medical Board of California revealed that your supervision of a nurse practitioner deviated from the standard of care; adequate steps were not taken to ensure the nurse practitioner was at all times acting within the standard of care.

1. INVESTIGATION/ENFORCEMENT COST RECOVERY. Respondent is hereby ordered to reimburse the Board its costs of investigation and enforcement, including, but not limited to, expert review, legal reviews, and investigation(s), as applicable, in the amount of \$18,683.00 (eighteen thousand six hundred eighty-three dollars). Costs shall be payable to the Medical Board of California. Failure to pay such costs shall constitute unprofessional conduct and grounds for further disciplinary action.

2. Payment must be made in full within 30 calendar days of the effective date of the Order, or by a payment plan approved by the Medical Board of California. Any and all requests for a payment plan shall be submitted in writing by respondent to the Board. Failure to comply with the payment plan shall constitute unprofessional conduct and grounds for further disciplinary action.

3. The filing of bankruptcy by Respondent shall not relieve Respondent of the responsibility to repay investigation and enforcement costs, including expert review costs.

responsibility to repay investigation and enforcement costs, including expert review costs|

4. **FUTURE ADMISSIONS CLAUSE.** If Respondent should ever apply or reapply for a new license or certification, or petition for reinstatement of a license, by any other health care licensing action agency in the State of California, all of the charges and allegations contained in Accusation No. 800-2022-087363 shall be deemed to be true, correct, and admitted by Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or restrict license.

5. **FAILURE TO COMPLY.** Any failure by Respondent to comply with terms and conditions of the Stipulated Settlement and Disciplinary Order set forth above shall constitute unprofessional conduct and grounds for further disciplinary action.

#### **ACCEPTANCE**

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

DATED: 01 / 24 / 2025

  
ANIKA TENE MOORE, M.D.  
*Respondent*

I have read and fully discussed with Respondent Anika Tene Moore, M.D. the terms and conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order. I approve its form and content.

DATED: 01 / 24 / 2025

  
MARGLYN E. PASEKA, ESQ.  
*Attorney for Respondent*

## **ENDORSEMENT**

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

DATED: 1/25/2025

Respectfully submitted,

ROB BONTA  
Attorney General of California  
MACHAELA M. MINGARDI  
Supervising Deputy Attorney General

/s/ Thomas Ostly

THOMAS OSTLY  
Deputy Attorney General  
*Attorneys for Complainant*

SF2023600148

**Exhibit A**

**Accusation No. 800-2022-087363**

1 ROB BONTA  
2 Attorney General of California  
3 GREG W. CHAMBERS  
4 Supervising Deputy Attorney General  
5 THOMAS OSTLY  
6 Deputy Attorney General  
State Bar No. 209234  
455 Golden Gate Avenue, Suite 11000  
San Francisco, CA 94102-7004  
Telephone: (415) 510-3871  
Facsimile: (415) 703-5480

*Attorneys for Complainant*

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

12	In the Matter of the Accusation Against:	Case No. 800-2022-087363
13	<b>ANIKO TENE MOORE, M.D.</b>	<b>ACCUSATION</b>
14	7664 Legacy Ridge Dr. West Chester, OH 45069	
15	Physician's and Surgeon's Certificate No. A 98138,	

19 Complainant alleges:

## PARTIES

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

24       2. On or about November 22, 2006, the Medical Board issued Physician's and  
25 Surgeon's Certificate No. A 98138 to Anika Tene Moore, M.D. (Respondent). The Physician's  
26 and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought  
27 herein and will expire on August 31, 2024, unless renewed.

28 //

## **JURISDICTION**

3. This Accusation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code (Code) unless otherwise indicated.

4. Section 2227 of the Code states, in pertinent part:

(a) A licensee whose matter has been heard by an administrative law judge of the Medical Quality Hearing Panel as designated in Section 11371 of the Government Code, or whose default has been entered, and who is found guilty, or who has entered into a stipulation for disciplinary action with the board, may, in accordance with the provisions of this chapter:

(1) Have his or her license revoked upon order of the board.

(2) Have his or her right to practice suspended for a period not to exceed one year upon order of the board.

(3) Be placed on probation and be required to pay the costs of probation monitoring upon order of the board.

(4) Be publicly reprimanded by the board. The public reprimand may include a requirement that the licensee complete relevant educational courses approved by the board.

(5) Have any other action taken in relation to discipline as part of an order of probation, as the board or an administrative law judge may deem proper.

5. Section 2234 of the Code states, in pertinent part:

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

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

(b) Gross negligence.

(c) Repeated negligent acts. To be repeated, there must be two or more 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.

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

(2) When the standard of care requires a change in the diagnosis, act, or omission that constitutes the negligent act described in paragraph (1), including, but

1 not limited to, a reevaluation of the diagnosis or a change in treatment, and the  
2 licensee's conduct departs from the applicable standard of care, each departure  
3 constitutes a separate and distinct breach of the standard of care.

4 ...  
5 (e) The commission of any act involving dishonesty or corruption that is  
6 substantially related to the qualifications, functions, or duties of a physician and  
7 surgeon.

8 6. Section 2052 of the Code states:

9 (a) Notwithstanding Section 146, any person who practices or attempts to  
10 practice, or who advertises or holds himself or herself out as practicing, any system or  
11 mode of treating the sick or afflicted in this state, or who diagnoses, treats, operates  
12 for, or prescribes for any ailment, blemish, deformity, disease, disfigurement,  
13 disorder, injury, or other physical or mental condition of any person, without having  
14 at the time of so doing a valid, unrevoked, or unsuspended certificate as provided in  
15 this chapter [Chapter 5, the Medical Practice Act], or without being authorized to  
16 perform the act pursuant to a certificate obtained in accordance with some other  
17 provision of law, is guilty of a public offense...

18 (b) Any person who conspires with or aids or abets another to commit any act  
19 described in subdivision (a) is guilty of a public offense...

20 (c) The remedy provided in this section shall not preclude any other remedy  
21 provided by law.

22 7. Section 2264 of the Code states:

23 The employing, directly or indirectly, the aiding, or the abetting of any  
24 unlicensed person or any suspended, revoked, or unlicensed practitioner to engage in  
25 the practice of medicine or any other mode of treating the sick or afflicted which  
26 requires a license to practice constitutes unprofessional conduct.

27 8. Section 2725 of the Code states, in pertinent part:

28 (a) In amending this section at the 1973-74 session, the Legislature recognizes  
29 that nursing is a dynamic field, the practice of which is continually evolving to  
30 include more sophisticated patient care activities. It is the intent of the Legislature in  
31 amending this section at the 1973-74 session to provide clear legal authority for  
32 functions and procedures that have common acceptance and usage. It is the  
33 legislative intent also to recognize the existence of overlapping functions between  
34 physicians and registered nurses and to permit additional sharing of functions within  
35 organized health care systems that provide for collaboration between physicians and  
36 registered nurses. These organized health care systems include, but are not limited to,  
37 health facilities licensed pursuant to Chapter 2 (commencing with Section 1250) of  
38 Division 2 of the Health and Safety Code, clinics, home health agencies, physicians'  
39 offices, and public or community health services.

(b) The practice of nursing within the meaning of this chapter means those functions, including basic health care, that help people cope with difficulties in daily living that are associated with their actual or potential health or illness problems or the treatment thereof, and that require a substantial amount of scientific knowledge or technical skill, including all of the following:

(1) Direct and indirect patient care services that ensure the safety, comfort, personal hygiene, and protection of patients; and the performance of disease prevention and restorative measures.

(2) Direct and indirect patient care services, including, but not limited to, the administration of medications and therapeutic agents, necessary to implement a treatment, disease prevention, or rehabilitative regimen ordered by and within the scope of licensure of a physician, dentist, podiatrist, or clinical psychologist, as defined by Section 1316.5 of the Health and Safety Code.

(3) The performance of skin tests, immunization techniques, and the withdrawal of human blood from veins and arteries.

(4) Observation of signs and symptoms of illness, reactions to treatment, general behavior, or general physical condition, and (A) determination of whether the signs, symptoms, reactions, behavior, or general appearance exhibit abnormal characteristics, and (B) implementation, based on observed abnormalities, of appropriate reporting, or referral, or standardized procedures, or changes in treatment regimen in accordance with standardized procedures, or the initiation of emergency procedures.

(c) "Standardized procedures," as used in this section, means either of the following:

(1) Policies and protocols developed by a health facility licensed pursuant to Chapter 2 (commencing with Section 1250) of Division 2 of the Health and Safety Code through collaboration among administrators and health professionals including physicians and nurses.

(2) Policies and protocols developed through collaboration among administrators and health professionals, including physicians and nurses, by an organized health care system which is not a health facility licensed pursuant to Chapter 2 (commencing with Section 1250) of Division 2 of the Health and Safety Code.

The policies and protocols shall be subject to any guidelines for standardized procedures that the Division of Licensing of the Medical Board of California and the Board of Registered Nursing may jointly promulgate. If promulgated, the guidelines shall be administered by the Board of Registered Nursing.

10

9. Section 2836.1 of the Code states, in pertinent part:

Neither this chapter nor any other provision of law shall be construed to prohibit a nurse practitioner from furnishing or ordering drugs or devices when all of the following apply:

28 | //

(a) The drugs or devices are furnished or ordered by a nurse practitioner in accordance with standardized procedures or protocols developed by the nurse practitioner and the supervising physician and surgeon when the drugs or devices furnished or ordered are consistent with the practitioner's educational preparation or for which clinical competency has been established and maintained.

(b) The nurse practitioner is functioning pursuant to standardized procedure, as defined by Section 2725, or protocol. The standardized procedure or protocol shall be developed and approved by the supervising physician and surgeon, the nurse practitioner, and the facility administrator or the designee.

(c)(1) The standardized procedure or protocol covering the furnishing of drugs or devices shall specify which nurse practitioners may furnish or order drugs or devices, which drugs or devices may be furnished or ordered, under what circumstances, the extent of physician and surgeon supervision, the method of periodic review of the nurse practitioner's competence, including peer review, and review of the provisions of the standardized procedure.

(d) The furnishing or ordering of drugs or devices by a nurse practitioner occurs under physician and surgeon supervision. Physician and surgeon supervision shall not be construed to require the physical presence of the physician, but does include (1) collaboration on the development of the standardized procedure, (2) approval of the standardized procedure, and (3) availability by telephonic contact at the time of patient examination by the nurse practitioner.

10. California Code of Regulations, title 16, section 1379, states:

A physician and surgeon or a podiatrist who collaborates in the development of standardized procedures for registered nurses shall comply with Title 16 California Administrative Code Sections 1470 through 1474 governing development and use of standardized procedures.

11. California Code of Regulations, title 16, section 1471, states:

For purposes of this article:

(a) "Standardized procedure functions" means those functions specified in Business and Professions Code Section 2725(c) and (d) which are to be performed according to "standardized procedures";

(b) "Organized health care system" means a health facility which is not licensed pursuant to Chapter 2 (commencing with Section 1250), Division 2 of the Health and Safety Code and includes, but is not limited to, clinics, home health agencies, physicians' offices and public or community health services;

(c) "Standardized procedures" means policies and protocols formulated by organized health care systems for the performance of standardized procedure functions.

12. California Code of Regulations, title 16, section 1472, states:

1 An organized health care system must develop standardized procedures before  
2 permitting registered nurses to perform standardized procedure functions. A  
3 registered nurse may perform standardized procedure functions only under the  
4 conditions specified in a health care system's standardized procedures; and must  
5 provide the system with satisfactory evidence that the nurse meets its experience,  
6 training, and/or education requirements to perform such functions.

13. California Code of Regulations, title 16, section 1474, states:

1 Following are the standardized procedure guidelines jointly promulgated by the  
2 Medical Board of California and by the Board of Registered Nursing:

3 (a) Standardized procedures shall include a written description of the method  
4 used in developing and approving them and any revision thereof.

5 (b) Each standardized procedure shall:

6 (1) Be in writing, dated and signed by the organized health care system  
7 personnel authorized to approve it.

8 (2) Specify which standardized procedure functions registered nurses may  
9 perform and under what circumstances.

10 (3) State any specific requirements which are to be followed by registered  
11 nurses in performing particular standardized procedure functions.

12 (4) Specify any experience, training, and/or education requirements for  
13 performance of standardized procedure functions.

14 (5) Establish a method for initial and continuing evaluation of the competence  
15 of those registered nurses authorized to perform standardized procedure functions.

16 (6) Provide for a method of maintaining a written record of those persons  
17 authorized to perform standardized procedure functions.

18 (7) Specify the scope of supervision required for performance of standardized  
19 procedure functions, for example, immediate supervision by a physician.

20 (8) Set forth any specialized circumstances under which the registered nurse is  
21 to immediately communicate with a patient's physician concerning the patient's  
22 condition.

23 (9) State the limitations on settings, if any, in which standardized procedure  
24 functions may be performed.

25 (10) Specify patient record keeping requirements.

26 (11) Provide for a method of periodic review of the standardized procedures.

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## COST RECOVERY

2 14. Business and Professions Code section 125.3 states that:

3 (a) Except as otherwise provided by law, in any order issued in resolution of a  
4 disciplinary proceeding before any board within the department or before the  
5 Osteopathic Medical Board upon request of the entity bringing the proceeding, the  
6 administrative law judge may direct a licensee found to have committed a violation or  
7 violations of the licensing act to pay a sum not to exceed the reasonable costs of the  
8 investigation and enforcement of the case.

9 (b) In the case of a disciplined licentiate that is a corporation or a partnership,  
10 the order may be made against the licensed corporate entity or licensed partnership.

11 (c) A certified copy of the actual costs, or a good faith estimate of costs where  
12 actual costs are not available, signed by the entity bringing the proceeding or its  
13 designated representative shall be *prima facie* evidence of reasonable costs of  
14 investigation and prosecution of the case. The costs shall include the amount of  
15 investigative and enforcement costs up to the date of the hearing, including, but not  
16 limited to, charges imposed by the Attorney General.

17 (d) The administrative law judge shall make a proposed finding of the amount  
18 of reasonable costs of investigation and prosecution of the case when requested  
19 pursuant to subdivision (a). The finding of the administrative law judge with regard  
20 to costs shall not be reviewable by the board to increase the cost award. The board  
21 may reduce or eliminate the cost award, or remand to the administrative law judge if  
22 the proposed decision fails to make a finding on costs requested pursuant to  
23 subdivision (a).

24 (e) If an order for recovery of costs is made and timely payment is not made as  
25 directed in the board's decision, the board may enforce the order for repayment in any  
1 appropriate court. This right of enforcement shall be in addition to any other rights  
2 the board may have as to any licensee to pay costs.

3 (f) In any action for recovery of costs, proof of the board's decision shall be  
4 conclusive proof of the validity of the order of payment and the terms for payment.

5 (g)(1) Except as provided in paragraph (2), the board shall not renew or  
6 reinstate the license of any licensee who has failed to pay all of the costs ordered  
7 under this section.

8 (2) Notwithstanding paragraph (1), the board may, in its discretion,  
9 conditionally renew or reinstate for a maximum of one year the license of any  
10 licensee who demonstrates financial hardship and who enters into a formal agreement  
11 with the board to reimburse the board within that one-year period for the unpaid  
12 costs.

13 (h) All costs recovered under this section shall be considered a reimbursement  
14 for costs incurred and shall be deposited in the fund of the board recovering the costs  
15 to be available upon appropriation by the Legislature.

16 (i) Nothing in this section shall preclude a board from including the recovery of  
17 the costs of investigation and enforcement of a case in any stipulated settlement.

18 //

(j) This section does not apply to any board if a specific statutory provision in that board's licensing act provides for recovery of costs in an administrative disciplinary proceeding.

## **FIRST CAUSE FOR DISCIPLINE**

## **(Aiding and Abetting the Unlicensed Practice of Medicine)**

15. Respondent has subjected her Physician's and Surgeon's Certificate No. A 98138 to disciplinary action under sections 2227 and 2234, as defined by sections 2052, subdivision (b), 2264, 2234, subdivision (a), 2725, and 2836.1, of the Code, and California Code of Regulations, title 16, sections 1379, 1471, and 1472, in that she aided and abetted the unlicensed practice of medicine, as more particularly alleged hereinafter:

10        16. Respondent is a board certified obstetrician gynecologist (OBGYN). She is not  
11 experienced in treating or prescribing to male patients.

12        17. Between in or around 2009, and in or around 2016, Respondent worked as an  
13        OBGYN at Community Health Centers (CHC) in California. While working at CHC,  
14        Respondent worked with nurse practitioner, S.E. (NP).

18. In or around 2016, Respondent moved from California to Massachusetts.

16        19. Between in or around January 2017, and in or around January 2019, Respondent  
17        returned to California to work for CHC approximately one weekend each month.

18        20. In or around 2018, NP formed a medical clinic as a sole proprietorship entitled,  
19        "Holistic Women's Healing," in Arroyo Grande, California. The Holistic Women's Healing  
20        clinic website referred to NP as "Dr. Sarah." Respondent did not at that time, or anytime  
21        thereafter, have an ownership interest in Holistic Women's Healing clinic.

22 21. In or around October 2018, NP asked Respondent to be her "collaborating physician."

23        22. On or about October 24, 2018, Respondent and NP entered into a "Collaborative  
24        Agreement," for the provision of health care services to clients at Holistic Women's Healing in  
25        Arroyo Grande, California. The "Collaborative Agreement" included standardized procedures  
26        and protocols, which referred to Respondent as NP's supervising physician, outlined  
27        Respondent's supervision requirements as NP's supervising physician, and included authority for  
28        NP to order and furnish Schedule III controlled substances.

1       23. Between on or about October 24, 2018, and on or about March 19, 2021, Respondent  
2 served as NP's supervising physician at Holistic Women's Healing clinic in California.  
3 Throughout that time, Respondent resided in Massachusetts, was never physically present at  
4 Holistic Women's Healing clinic, did not review any patient charts, did not maintain a ledger of  
5 patients she consulted about with NP, did not maintain any documentation of her supervision with  
6 NP, did not perform an annual review of their standardized procedures, and did not oversee or  
7 monitor any of NP's prescribing of controlled substances.

8       24. Between on or about October 24, 2018, and on or about March 19, 2021, NP provided  
9 care and treatment to both male and female patients, which included frequent prescriptions for  
10 testosterone.<sup>1</sup>

11       25. On or about August 30, 2019, the Board received a complaint that NP was referring  
12 to herself as a doctor and writing prescriptions for testosterone.

13       26. In or around July 2020, an investigator for the Board corresponded with NP by email.  
14 NP's signature line on her emails referred to herself as "Dr. Sarah."

15       27. On or about March 19, 2021, Respondent was interviewed by an investigator for the  
16 Board. During that interview, Respondent claimed to have supervised NP while she worked at  
17 CHC. After she moved to Massachusetts, Respondent informed the investigator that she  
18 continued to supervise NP and that they had standardized protocols in place. Respondent further  
19 informed the investigator that she would return to California approximately once per month and  
20 would review approximately twenty of NP's randomly selected charts. Respondent further stated  
21 that if she was unable to return to California, that NP would send Respondent the charts for  
22 review. Respondent denied any ownership over NP's clinic or being paid for her supervision.

23       28. On or about March 19, 2021, after her interview with an investigator for the Board,  
24 Respondent contacted NP and informed her that she would no longer serve as her supervising  
25 physician.

26       ///

27       29       <sup>1</sup> Testosterone is a Schedule III controlled substance pursuant to Health and Safety Code  
28 section 11056, subdivision (f), and a dangerous drug pursuant to section 4022 of the Code.

1           29. On or about October 4, 2022, Respondent was interviewed by a different investigator  
2 for the Board. During that interview, Respondent admitted signing the "Collaborative  
3 Agreement" with NP, but denied understanding she was agreeing to actual supervision of NP,  
4 denied knowing where NP worked while she supervised her, denied physically reviewing any of  
5 NP's charts, and denied knowing NP provided any treatment to male patients.

6           **SECOND CAUSE FOR DISCIPLINE**

7           **(Gross Negligence)**

8           30. Respondent has further subjected her Physician's and Surgeon's Certificate No.  
9 A 98138 to disciplinary action under sections 2227 and 2234, as defined by section 2234,  
10 subdivision (b), of the Code, in that she committed gross negligence, as more particularly alleged  
11 hereinafter:

- 12           A. Paragraphs 15 through 29, above, are hereby incorporated by reference and  
13           realleged as if fully set forth herein;
- 14           B. Respondent failed to formally review any of NP's patient charts throughout the  
15           period of supervision; and
- 16           C. Respondent failed to provide adequate supervision of NP throughout the period  
17           of supervision.

18           **THIRD CAUSE FOR DISCIPLINE**

19           **(Repeated Negligent Acts)**

20           31. Respondent has further subjected her Physician's and Surgeon's Certificate No.  
21 A 98138 to disciplinary action under sections 2227 and 2234, as defined by section 2234,  
22 subdivision (c), of the Code, in that she committed repeated negligent acts, as more particularly  
23 alleged hereinafter:

- 24           A. Paragraphs 15 through 29, above, are hereby incorporated by reference and  
25           realleged as if fully set forth herein; and
- 26           B. Respondent failed to perform a periodic review of her standardized procedures  
27           and protocols with NP.

28           ///

## **FOURTH CAUSE FOR DISCIPLINE**

### **(Dishonesty or Corruption)**

3       32. Respondent has further subjected her Physician's and Surgeon's Certificate No.  
4       A 98138 to disciplinary action under sections 2227 and 2234, as defined by section 2234,  
5       subdivision (e), of the Code, in that she has committed an act or acts of dishonesty or corruption,  
6       as more particularly alleged in paragraphs 15 through 29, above, which are hereby incorporated  
7       by reference and realleged as if fully set forth herein.

## PRAYER

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

11       1. Revoking or suspending Physician's and Surgeon's Certificate No. A 98138, issued  
12 to Respondent, Anika Tene Moore, M.D.;

13        2. Revoking, suspending, or denying approval of Respondent, Anika Tene Moore,  
14 M.D.'s authority to supervise physician assistants and advanced practice nurses;

15       3. Ordering Respondent, Anika Tene Moore, M.D., to pay the Board the costs of the  
16 investigation and enforcement of this case, and if placed on probation, the costs of probation  
17 monitoring; and

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

20 DATED: JUL 13 2023

REJI VARGHESE  
Executive Director  
Medical Board of California  
Department of Consumer Affairs  
State of California  
*Complainant*

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