

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

In the Matter of the Accusation Against:

Stacy Joseph Bax, M.D.

**Physician's and Surgeons
Certificate No. A 99111**

Case No. 800-2017-037352

Respondent.

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 14, 2020.

IT IS SO ORDERED: July 17, 2020.

MEDICAL BOARD OF CALIFORNIA



**Ronald H. Lewis, M.D., Chair
Panel A**

1 XAVIER BECERRA
Attorney General of California
2 ALEXANDRA M. ALVAREZ
Supervising Deputy Attorney General
3 VERONICA VO
Deputy Attorney General
4 State Bar No. 230698
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8 *Attorneys for Complainant*

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

13 In the Matter of the Accusation Against:

Case No. 800-2017-037352

14 **STACY JOSEPH BAX, M.D.**
15 **168 Brookvine Circle**
Chico, CA 95973

OAH No. 2019110216

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER**

16 **Physician's and Surgeon's Certificate**
17 **No. A 99111**

18 Respondent.

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

22 **PARTIES**

23 1. Christine J. Lally¹ (Complainant) is the Interim Executive Director of the Medical
24 Board of California (Board). She brought this action solely in her official capacity and is
25 represented in this matter by Xavier Becerra, Attorney General of the State of California, by
26 Veronica Vo, Deputy Attorney General.

27
28 ¹ Kimberly Kirchmeyer became the Director of the Department of Consumer Affairs on October
28, 2019. On that date, Ms. Lally became the Interim Executive Director of the Medical Board.

1 CULPABILITY

2 9. Respondent admits that, at an administrative hearing, Complainant could establish a
3 *prima facie* case with respect to the charges and allegations contained in Accusation No. 800-
4 2017-037352, and agrees that he has thereby subjected his Physician's and Surgeon's Certificate
5 No. A 99111 to disciplinary action.

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

9 CONTINGENCY

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

20 12. Respondent agrees that if he ever petitions for early termination or modification of
21 probation, or if an accusation and/or petition to revoke probation is filed against him before the
22 Board, all of the charges and allegations contained in Accusation No. 800-2017-037352 shall be
23 deemed true, correct and fully admitted by respondent for purposes of any such proceeding or any
24 other licensing proceeding involving Respondent in the State of California.

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

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1 Respondent's knowledge of the course. Respondent shall provide proof of attendance for 65
2 hours of CME of which 40 hours were in satisfaction of this condition.

3 4. PROFESSIONALISM PROGRAM (ETHICS COURSE). Within 60 calendar days of
4 the effective date of this Decision, Respondent shall enroll in a professionalism program, that
5 meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.1.
6 Respondent shall participate in and successfully complete that program. Respondent shall
7 provide any information and documents that the program may deem pertinent. Respondent shall
8 successfully complete the classroom component of the program not later than six (6) months after
9 Respondent's initial enrollment, and the longitudinal component of the program not later than the
10 time specified by the program, but no later than one (1) year after attending the classroom
11 component. The professionalism program shall be at Respondent's expense and shall be in
12 addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

13 A professionalism program taken after the acts that gave rise to the charges in the
14 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
15 or its designee, be accepted towards the fulfillment of this condition if the program would have
16 been approved by the Board or its designee had the program been taken after the effective date of
17 this Decision.

18 Respondent shall submit a certification of successful completion to the Board or its
19 designee not later than 15 calendar days after successfully completing the program or not later
20 than 15 calendar days after the effective date of the Decision, whichever is later.

21 5. NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION. Within seven (7)
22 days of the effective date of this Decision, Respondent shall provide to the Board the names,
23 physical addresses, mailing addresses, and telephone numbers of any and all employers and
24 supervisors. Respondent shall also provide specific, written consent for the Board, Respondent's
25 worksite monitor, and Respondent's employers and supervisors to communicate regarding
26 Respondent's work status, performance, and monitoring.

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

1 privileges.

2 6. BIOLOGICAL FLUID TESTING. Respondent shall immediately submit to
3 biological fluid testing, at Respondent's expense, upon request of the Board or its designee.
4 "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair
5 follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall
6 make daily contact with the Board or its designee to determine whether biological fluid testing is
7 required. Respondent shall be tested on the date of the notification as directed by the Board or its
8 designee. The Board may order a Respondent to undergo a biological fluid test on any day, at
9 any time, including weekends and holidays. Except when testing on a specific date as ordered by
10 the Board or its designee, the scheduling of biological fluid testing shall be done on a random
11 basis. The cost of biological fluid testing shall be borne by the Respondent.

12 During the first year of probation, Respondent shall be subject to 52 to 104 random tests.
13 During the second year of probation and for the duration of the probationary term, up to five (5)
14 years, Respondent shall be subject to 36 to 104 random tests per year. Only if there has been no
15 positive biological fluid tests in the previous five (5) consecutive years of probation, may testing
16 be reduced to one (1) time per month. Nothing precludes the Board from increasing the number
17 of random tests to the first-year level of frequency for any reason.

18 Prior to practicing medicine, Respondent shall contract with a laboratory or service,
19 approved in advance by the Board or its designee, that will conduct random, unannounced,
20 observed, biological fluid testing and meets all of the following standards:

21 (a) Its specimen collectors are either certified by the Drug and Alcohol Testing Industry
22 Association or have completed the training required to serve as a collector for the United
23 States Department of Transportation.

24 (b) Its specimen collectors conform to the current United States Department of
25 Transportation Specimen Collection Guidelines.

26 (c) Its testing locations comply with the Urine Specimen Collection Guidelines published
27 by the United States Department of Transportation without regard to the type of test
28 administered.

1 (d) Its specimen collectors observe the collection of testing specimens.

2 (e) Its laboratories are certified and accredited by the United States Department of Health
3 and Human Services.

4 (f) Its testing locations shall submit a specimen to a laboratory within one (1) business day
5 of receipt and all specimens collected shall be handled pursuant to chain of custody
6 procedures. The laboratory shall process and analyze the specimens and provide legally
7 defensible test results to the Board within seven (7) business days of receipt of the
8 specimen. The Board will be notified of non-negative results within one (1) business day
9 and will be notified of negative test results within seven (7) business days.

10 (g) Its testing locations possess all the materials, equipment, and technical expertise
11 necessary in order to test Respondent on any day of the week.

12 (h) Its testing locations are able to scientifically test for urine, blood, and hair specimens
13 for the detection of alcohol and illegal and controlled substances.

14 (i) It maintains testing sites located throughout California.

15 (j) It maintains an automated 24-hour toll-free telephone system and/or a secure on-line
16 computer database that allows the Respondent to check in daily for testing.

17 (k) It maintains a secure, HIPAA-compliant website or computer system that allows staff
18 access to drug test results and compliance reporting information that is available 24 hours a
19 day.

20 (l) It employs or contracts with toxicologists that are licensed physicians and have
21 knowledge of substance abuse disorders and the appropriate medical training to interpret
22 and evaluate laboratory biological fluid test results, medical histories, and any other
23 information relevant to biomedical information.

24 (m) It will not consider a toxicology screen to be negative if a positive result is obtained
25 while practicing, even if the Respondent holds a valid prescription for the substance.

26 Prior to changing testing locations for any reason, including during vacation or other travel,
27 alternative testing locations must be approved by the Board and meet the requirements above.

28 The contract shall require that the laboratory directly notify the Board or its designee of

1 non-negative results within one (1) business day and negative test results within seven (7)
2 business days of the results becoming available. Respondent shall maintain this laboratory or
3 service contract during the period of probation.

4 A certified copy of any laboratory test result may be received in evidence in any
5 proceedings between the Board and Respondent.

6 If a biological fluid test result indicates Respondent has used, consumed, ingested, or
7 administered to himself or herself a prohibited substance, the Board shall order Respondent to
8 cease practice and instruct Respondent to leave any place of work where Respondent is practicing
9 medicine or providing medical services. The Board shall immediately notify all of Respondent's
10 employers, supervisors and work monitors, if any, that Respondent may not practice medicine or
11 provide medical services while the cease-practice order is in effect.

12 A biological fluid test will not be considered negative if a positive result is obtained while
13 practicing, even if the practitioner holds a valid prescription for the substance. If no prohibited
14 substance use exists, the Board shall lift the cease-practice order within one (1) business day.

15 After the issuance of a cease-practice order, the Board shall determine whether the positive
16 biological fluid test is in fact evidence of prohibited substance use by consulting with the
17 specimen collector and the laboratory, communicating with the licensee, his or her treating
18 physician(s), other health care provider, or group facilitator, as applicable.

19 For purposes of this condition, the terms "biological fluid testing" and "testing" mean the
20 acquisition and chemical analysis of a Respondent's urine, blood, breath, or hair.

21 For purposes of this condition, the term "prohibited substance" means an illegal drug, a
22 lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by
23 Respondent and approved by the Board, alcohol, or any other substance the Respondent has been
24 instructed by the Board not to use, consume, ingest, or administer to himself or herself.

25 If the Board confirms that a positive biological fluid test is evidence of use of a prohibited
26 substance, Respondent has committed a major violation, as defined in section 1361.52(a), and the
27 Board shall impose any or all of the consequences set forth in section 1361.52(b), in addition to
28 any other terms or conditions the Board determines are necessary for public protection or to

1 enhance Respondent's rehabilitation.

2 7. SUBSTANCE ABUSE SUPPORT GROUP MEETINGS. Within thirty (30) days of
3 the effective date of this Decision, Respondent shall submit to the Board or its designee, for its
4 prior approval, the name of a substance abuse support group which he or she shall attend for the
5 duration of probation. Respondent shall attend substance abuse support group meetings at least
6 once per week, or as ordered by the Board or its designee. Respondent shall pay all substance
7 abuse support group meeting costs.

8 The facilitator of the substance abuse support group meeting shall have a minimum of three
9 (3) years experience in the treatment and rehabilitation of substance abuse, and shall be licensed
10 or certified by the state or nationally certified organizations. The facilitator shall not have a
11 current or former financial, personal, or business relationship with Respondent within the last five
12 (5) years. Respondent's previous participation in a substance abuse group support meeting led by
13 the same facilitator does not constitute a prohibited current or former financial, personal, or
14 business relationship.

15 The facilitator shall provide a signed document to the Board or its designee showing
16 Respondent's name, the group name, the date and location of the meeting, Respondent's
17 attendance, and Respondent's level of participation and progress. The facilitator shall report any
18 unexcused absence by Respondent from any substance abuse support group meeting to the Board,
19 or its designee, within twenty-four (24) hours of the unexcused absence.

20 8. WORKSITE MONITOR FOR SUBSTANCE-ABUSING LICENSEE. Within thirty
21 (30) calendar days of the effective date of this Decision, Respondent shall submit to the Board or
22 its designee for prior approval as a worksite monitor, the name and qualifications of one or more
23 licensed physician and surgeon, other licensed health care professional if no physician and
24 surgeon is available, or, as approved by the Board or its designee, a person in a position of
25 authority who is capable of monitoring the Respondent at work.

26 The worksite monitor shall not have a current or former financial, personal, or familial
27 relationship with Respondent, or any other relationship that could reasonably be expected to
28 compromise the ability of the monitor to render impartial and unbiased reports to the Board or its

1 designee. If it is impractical for anyone but Respondent's employer to serve as the worksite
2 monitor, this requirement may be waived by the Board or its designee, however, under no
3 circumstances shall Respondent's worksite monitor be an employee or supervisee of the licensee.

4 The worksite monitor shall have an active unrestricted license with no disciplinary action
5 within the last five (5) years; and shall sign an affirmation that he or she has reviewed the terms
6 and conditions of Respondent's disciplinary order and agrees to monitor Respondent as set forth
7 by the Board or its designee.

8 Respondent shall pay all worksite monitoring costs.

9 The worksite monitor shall have face-to-face contact with Respondent in the work
10 environment on as frequent a basis as determined by the Board or its designee, but not less than
11 once per week; interview other staff in the office regarding Respondent's behavior, if requested
12 by the Board or its designee; and review Respondent's work attendance.

13 The worksite monitor shall verbally report any suspected substance abuse to the Board and
14 Respondent's employer or supervisor within one (1) business day of occurrence. If the suspected
15 substance abuse does not occur during the Board's normal business hours, the verbal report shall
16 be made to the Board or its designee within one (1) hour of the next business day. A written
17 report that includes the date, time, and location of the suspected abuse; Respondent's actions; and
18 any other information deemed important by the worksite monitor shall be submitted to the Board
19 or its designee within 48 hours of the occurrence.

20 The worksite monitor shall complete and submit a written report monthly or as directed by
21 the Board or its designee which shall include the following: (1) Respondent's name and
22 Physician's and Surgeon's Certificate number; (2) the worksite monitor's name and signature; (3)
23 the worksite monitor's license number, if applicable; (4) the location or location(s) of the
24 worksite; (5) the dates Respondent had face-to-face contact with the worksite monitor; (6) the
25 names of worksite staff interviewed, if applicable; (7) a report of Respondent's work attendance;
26 (8) any change in Respondent's behavior and/or personal habits; and (9) any indicators that can
27 lead to suspected substance abuse by Respondent. Respondent shall complete any required
28 consent forms and execute agreements with the approved worksite monitor and the Board, or its

1 designee, authorizing the Board, or its designee, and worksite monitor to exchange information.

2 If the worksite monitor resigns or is no longer available, Respondent shall, within five (5)
3 calendar days of such resignation or unavailability, submit to the Board or its designee, for prior
4 approval, the name and qualifications of a replacement monitor who will be assuming that
5 responsibility within fifteen (15) calendar days. If Respondent fails to obtain approval of a
6 replacement monitor within sixty (60) calendar days of the resignation or unavailability of the
7 monitor, Respondent shall receive a notification from the Board or its designee to cease the
8 practice of medicine within three (3) calendar days after being so notified. Respondent shall
9 cease the practice of medicine until a replacement monitor is approved and assumes monitoring
10 responsibility.

11 9. VIOLATION OF PROBATION CONDITION FOR SUBSTANCE ABUSING
12 LICENSEES. Failure to fully comply with any term or condition of probation is a violation of
13 probation.

14 A. If Respondent commits a major violation of probation as defined by section
15 1361.52, subdivision (a), of Title 16 of the California Code of Regulations, the Board shall take
16 one or more of the following actions:

17 (1) Issue an immediate cease-practice order and order Respondent to undergo a clinical
18 diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1), of
19 Title 16 of the California Code of Regulations, at Respondent's expense. The cease-practice
20 order issued by the Board or its designee shall state that Respondent must test negative for at least
21 a month of continuous biological fluid testing before being allowed to resume practice. For
22 purposes of determining the length of time a Respondent must test negative while undergoing
23 continuous biological fluid testing following issuance of a cease-practice order, a month is
24 defined as thirty calendar (30) days. Respondent may not resume the practice of medicine until
25 notified in writing by the Board or its designee that he or she may do so.

26 (2) Increase the frequency of biological fluid testing.

27 (3) Refer Respondent for further disciplinary action, such as suspension, revocation, or
28 other action as determined by the Board or its designee.

1 B. If Respondent commits a minor violation of probation as defined by section
2 1361.52, subdivision (c), of Title 16 of the California Code of Regulations, the Board shall take
3 one or more of the following actions:

- 4 (1) Issue a cease-practice order;
- 5 (2) Order practice limitations;
- 6 (3) Order or increase supervision of Respondent;
- 7 (4) Order increased documentation;
- 8 (5) Issue a citation and fine, or a warning letter;
- 9 (6) Order Respondent to undergo a clinical diagnostic evaluation to be conducted in
10 accordance with section 1361.5, subdivision (c)(1), of Title 16 of the California Code of
11 Regulations, at Respondent's expense;
- 12 (7) Take any other action as determined by the Board or its designee.

13 C. Nothing in this Decision shall be considered a limitation on the Board's authority
14 to revoke Respondent's probation if he or she has violated any term or condition of probation. If
15 Respondent violates probation in any respect, the Board, after giving Respondent notice and the
16 opportunity to be heard, may revoke probation and carry out the disciplinary order that was
17 stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed
18 against Respondent during probation, the Board shall have continuing jurisdiction until the matter
19 is final, and the period of probation shall be extended until the matter is final.

20 10. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the
21 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the
22 Chief Executive Officer at every hospital where privileges or membership are extended to
23 Respondent, at any other facility where Respondent engages in the practice of medicine,
24 including all physician and locum tenens registries or other similar agencies, and to the Chief
25 Executive Officer at every insurance carrier which extends malpractice insurance coverage to
26 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15
27 calendar days.

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

1 11. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE
2 NURSES. During probation, Respondent is prohibited from supervising physician assistants and
3 advanced practice nurses.

4 12. OBEY ALL LAWS. Respondent shall obey all federal, state and local laws, all rules
5 governing the practice of medicine in California and remain in full compliance with any court
6 ordered criminal probation, payments, and other orders.

7 13. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations
8 under penalty of perjury on forms provided by the Board, stating whether there has been
9 compliance with all the conditions of probation.

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

12 14. GENERAL PROBATION REQUIREMENTS.

13 Compliance with Probation Unit

14 Respondent shall comply with the Board's probation unit.

15 Address Changes

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

21 Place of Practice

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

25 License Renewal

26 Respondent shall maintain a current and renewed California physician's and surgeon's
27 license.

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1 Travel or Residence Outside California

2 Respondent shall immediately inform the Board or its designee, in writing, of travel to any
3 areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty
4 (30) calendar days.

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

8 15. INTERVIEW WITH THE BOARD OR ITS DESIGNEE. Respondent shall be
9 available in person upon request for interviews either at Respondent's place of business or at the
10 probation unit office, with or without prior notice throughout the term of probation.

11 16. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or
12 its designee in writing within 15 calendar days of any periods of non-practice lasting more than
13 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is
14 defined as any period of time Respondent is not practicing medicine as defined in Business and
15 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct
16 patient care, clinical activity or teaching, or other activity as approved by the Board. If
17 Respondent resides in California and is considered to be in non-practice, Respondent shall
18 comply with all terms and conditions of probation. All time spent in an intensive training
19 program which has been approved by the Board or its designee shall not be considered non-
20 practice and does not relieve Respondent from complying with all the terms and conditions of
21 probation. Practicing medicine in another state of the United States or Federal jurisdiction while
22 on probation with the medical licensing authority of that state or jurisdiction shall not be
23 considered non-practice. A Board-ordered suspension of practice shall not be considered as a
24 period of non-practice.

25 In the event Respondent's period of non-practice while on probation exceeds 18 calendar
26 months, Respondent shall successfully complete the Federation of State Medical Boards's Special
27 Purpose Examination, or, at the Board's discretion, a clinical competence assessment program
28 that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model

1 Disciplinary Orders and Disciplinary Guidelines” prior to resuming the practice of medicine.

2 Respondent’s period of non-practice while on probation shall not exceed two (2) years.

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

4 Periods of non-practice for a Respondent residing outside of California will relieve
5 Respondent of the responsibility to comply with the probationary terms and conditions with the
6 exception of this condition and the following terms and conditions of probation: Obey All Laws;
7 General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or
8 Controlled Substances; and Biological Fluid Testing..

9 17. COMPLETION OF PROBATION. Respondent shall comply with all financial
10 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the
11 completion of probation. Upon successful completion of probation, Respondent’s certificate shall
12 be fully restored.

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

20 19. LICENSE SURRENDER. Following the effective date of this Decision, if
21 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
22 the terms and conditions of probation, Respondent may request to surrender his or her license.
23 The Board reserves the right to evaluate Respondent’s request and to exercise its discretion in
24 determining whether or not to grant the request, or to take any other action deemed appropriate
25 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent
26 shall within 15 calendar days deliver Respondent’s wallet and wall certificate to the Board or its
27 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject
28 to the terms and conditions of probation. If Respondent re-applies for a medical license, the

1 application shall be treated as a petition for reinstatement of a revoked certificate.

2 20. PROBATION MONITORING COSTS. Respondent shall pay the costs associated
3 with probation monitoring each and every year of probation, as designated by the Board, which
4 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of
5 California and delivered to the Board or its designee no later than January 31 of each calendar
6 year.

7 21. FUTURE ADMISSIONS CLAUSE. If Respondent should ever apply or reapply for
8 a new license or certification, or petition for reinstatement of a license, by any other health care
9 licensing action agency in the State of California, all of the charges and allegations contained in
10 Accusation No. 800-2017-037352 shall be deemed to be true, correct, and admitted by
11 Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or
12 restrict license.

13
14 ACCEPTANCE

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

20
21 DATED: 5-13-2020 

22 STACY JOSEPH BAX, M.D.
Respondent

23 I have read and fully discussed with Respondent Stacy Joseph Bax, M.D., the terms and
24 conditions and other matters contained in the above Stipulated Settlement and Disciplinary Order.
25 I approve its form and content.

26 DATED: 5/14/20 

27 ROBERT B. ZARO, ESQ.
Attorney for Respondent

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ENDORSEMENT

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

DATED: 5/14/2020

Respectfully submitted,

XAVIER BECERRA
Attorney General of California
ALEXANDRA M. ALVAREZ
Supervising Deputy Attorney General



VERONICA VO
Deputy Attorney General
Attorneys for Complainant

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Exhibit A

Accusation No. 800-2017-037352

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8 *Attorneys for Complainant*

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

13 In the Matter of the Accusation Against:
14 **Stacy Joseph Bax, M.D.**
15 **168 Brookvine Circle**
Chico, CA 95973
16 **Physician's and Surgeon's Certificate**
17 **No. A 99111,**
18 Respondent.

Case No. 800-2017-037352

ACCUSATION

19 Complainant alleges:

20 **PARTIES**

- 21 1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official
22 capacity as the Executive Director of the Medical Board of California, Department of Consumer
23 Affairs (Board).
24 2. On or about March 2, 2007, the Medical Board issued Physician's and Surgeon's
25 Certificate No. A 99111 to Stacy Joseph Bax, M.D. (Respondent). The Physician's and
26 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought
27 herein and will expire on March 31, 2021, unless renewed.
28 ///

1 **JURISDICTION**

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

5 4. Section 2227 of the Code states:

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

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

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

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

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

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

21 (b) Any matter heard pursuant to subdivision (a), except for warning letters,
22 medical review or advisory conferences, professional competency examinations,
23 continuing education activities, and cost reimbursement associated therewith that are
24 agreed to with the board and successfully completed by the licensee, or other matters
25 made confidential or privileged by existing law, is deemed public, and shall be made
26 available to the public by the board pursuant to Section 803.1.

27 5. Section 2234 of the Code, states:

28 The board shall take action against any licensee who is charged with
unprofessional conduct¹. 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.

¹ Unprofessional conduct under California Business and Professions Code section 2234 is
conduct which breaches the rules of ethical code of the medical profession, or conduct which is
unbecoming to a member in good standing of the medical profession, and which demonstrates an
unfitness to practice medicine. (Shea v. Board of Medical Examiners (1978) 81 Cal.App.3d 564,
575.)

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

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

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

13 (d) Incompetence.

14 (e) The commission of any act involving dishonesty or corruption which is
15 substantially related to the qualifications, functions, or duties of a physician and
16 surgeon.

17 (f) Any action or conduct which would have warranted the denial of a
18 certificate.

19 (g) The practice of medicine from this state into another state or country
20 without meeting the legal requirements of that state or country for the practice of
21 medicine. Section 2314 shall not apply to this subdivision. This subdivision shall
22 become operative upon the implementation of the proposed registration program
23 described in Section 2052.5.

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

27 6. Section 2236 of the Code states:

28 (a) The conviction of any offense substantially related to the qualifications,
functions, or duties of a physician and surgeon constitutes unprofessional conduct
within the meaning of this chapter [Chapter 5, the Medical Practice Act]. The record
of conviction shall be conclusive evidence only of the fact that the conviction
occurred.

(b) The district attorney, city attorney, or other prosecuting agency shall notify
the Medical Board of the pendency of an action against a licensee charging a felony
or misdemeanor immediately upon obtaining information that the defendant is a
licensee. The notice shall identify the licensee and describe the crimes charged and
the facts alleged. The prosecuting agency shall also notify the clerk of the court in
which the action is pending that the defendant is a licensee, and the clerk shall record
prominently in the file that the defendant holds a license as a physician and surgeon.

(c) The clerk of the court in which a licensee is convicted of a crime shall,
within 48 hours after the conviction, transmit a certified copy of the record of
conviction to the board. The division may inquire into the circumstances surrounding
the commission of a crime in order to fix the degree of discipline or to determine if

1 the conviction is of an offense substantially related to the qualifications, functions, or
2 duties of a physician and surgeon.

3 (d) A plea or verdict of guilty or a conviction after a plea of nolo contendere is
4 deemed to be a conviction within the meaning of this section and Section 2236.1.
The record of conviction shall be conclusive evidence of the fact that the conviction
occurred.

5 7. Section 2239 of the Code states:

6 (a) The use or prescribing for or administering to himself or herself, of any
7 controlled substance; or the use of any of the dangerous drugs specified in Section
8 4022, or of alcoholic beverages, to the extent, or in such a manner as to be dangerous
9 or injurious to the licensee, or to any other person or to the public, or to the extent that
10 such use impairs the ability of the licensee to practice medicine safely or more than
one misdemeanor or any felony involving the use, consumption, or
self-administration of any of the substances referred to in this section, or any
combination thereof, constitutes unprofessional conduct. The record of the
conviction is conclusive evidence of such unprofessional conduct.

11 (b) A plea or verdict of guilty or a conviction following a plea of nolo
12 contendere is deemed to be a conviction within the meaning of this section. The
13 Division of Medical Quality² may order discipline of the licensee in accordance with
14 Section 2227 or the Division of Licensing may order the denial of the license when
15 the time for appeal has elapsed or the judgment of conviction has been affirmed on
16 appeal or when an order granting probation is made suspending imposition of
sentence, irrespective of a subsequent order under the provisions of Section 1203.4 of
the Penal Code allowing such person to withdraw his or her plea of guilty and to enter
a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation,
complaint, information, or indictment.”³

17 **FIRST CAUSE FOR DISCIPLINE**

18 **(Conviction of a Crime)**

19 8. Respondent has subjected his Physician’s and Surgeon’s Certificate No. A 99111 to
20 disciplinary action under Business and Professions Code (Code) sections 2227 and 2234, as
21 defined by section 2236, of the Code, in that Respondent was convicted of a crime substantially
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24 ² California Business and Professions Code section 2002, as amended and effective January 1,
25 2008, provides that, unless otherwise expressly provided, the term “board” as used in the State Medical
26 Practice Act (Bus. & Prof. Code, §§ 2000, *et seq.*) means the “Medical Board of California,” and
references to the “Division of Medical Quality” and “Division of Licensing” in the Act or any other
provision of law shall be deemed to refer to the Board.

27 ³ There is a nexus between a physician’s use of alcoholic beverages and his or her fitness to
28 practice medicine, established by the Legislature in section 2239, “in all cases where a licensed physician
used alcoholic beverages to the extent or in such a manner as to pose a danger to himself or others.”
(*Watson v. Superior Court (Medical Board)* (2009) 176 Cal.App.4th 1407, 1411.)

1 related to the qualifications, functions, or duties of a physician and surgeon. The circumstances
2 are as follows:

3 9. On or about August 23, 2017, Respondent was the subject of a traffic enforcement
4 stop conducted by Idaho State Police Sergeant J.C. (Sergeant J.C.). The basis for the stop was
5 excessive speeding and passing through an intersection, across double yellow lines. During the
6 course of that stop, Sergeant J.C. observed an open container of alcohol sitting on the front,
7 passenger side floorboard. When questioned about the open alcohol bottles, Respondent admitted
8 he had consumed wine the day before. Due to the Sergeant's independent observations of the
9 Respondent's slurred, rapid speech, and odor of alcohol on his breath, Sergeant J.C. detained the
10 Respondent.

11 10. With the Respondent detained, additional police units arrived to conduct a search of
12 Respondent's vehicle. During the course of that search, officers located the following: an open
13 bottle of wine, an open half-gallon bottle of vodka, an open half-gallon bottle of whiskey, and
14 multiple pill bottles with numerous pills. Some of those pill bottles were unlabeled. The biggest
15 bottle contained 110 pills, identified as Oxycodone⁴ (80mg). In a different location within the
16 vehicle, there were another 15 pills, identified as Oxycodone (30mg). Officers also located a
17 bottle labeled with Respondent's name and the word "Zolpidem."⁵ Within this bottle, officers
18 found six (6) pieces of Acetaminophen/Hydrocodone⁶ (325 mg) wrapped up in a piece of plastic.
19 Additional pills located within Respondent's property included the following ten (10) pills:

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22 ⁴ Commonly known by its trade name OxyContin. It is a Schedule II controlled substance
23 pursuant to Health and Safety Code section 11055, subdivision (b), and a dangerous drug pursuant to
Business and Professions Code section 4022.

24 ⁵ Commonly known as Ambien. It is a Schedule IV controlled substance pursuant to Health and
25 Safety Code section 11057, subdivision (d), and a dangerous drug pursuant to Business and Professions
Code section 4022

26 ⁶ Commonly known by its trade name Vicodin or Norco. It is a Schedule III controlled
27 substance pursuant to Health and Safety Code section 11056, subdivision (e), and a dangerous drug
pursuant to Business and Professions Code section 4022.

28

1 Amphetamine/Dextroamphetamine⁷ (10mg), Cialis, Acetaminophen/Bitartrate,⁸ Alprazolam,⁹ and
2 Naproxen. In total, there were approximately 240 pills found in Respondent's property. Officers
3 also located \$7,694 under the driver's floor mat, under the passenger's floor mat, and in
4 Respondent's bags.

5 11. Subsequent to the vehicle search, Respondent was arrested. Officers ultimately
6 obtained a search warrant to draw blood from the Respondent. This blood was collected and
7 submitted for analysis. Lab results show the Respondent tested positive for oxycodone.

8 12. On or about August 23, 2017, Respondent was charged in case CR-2017-0002344, in
9 Elmore County, State of Idaho, with four (4) felony counts of violating Idaho Code section 37-
10 2732(c)(1), [Possession of a Controlled Substance]; one misdemeanor count of violating Idaho
11 section 54-1732(3)(c), [Possession or Use of a Legend Drug without a prescription]; one
12 misdemeanor count of violating Idaho section 37-2734A, [Possession of Drug Paraphernalia]; and
13 one misdemeanor count of violating Idaho Code section 18-8004(1)(a), [Operating a Motor
14 Vehicle while Under the Influence of Drugs and/or an Intoxicating Substance].

15 13. On or about August 24, 2017, a Supervening Complaint was filed alleging an
16 additional misdemeanor count of violating Idaho Code section 23-505(2), [Liquor Open
17 Container (Driver)].

18 14. On or about August 6, 2018, Respondent plead guilty to one felony count for
19 Possession of a Controlled Substance, Amphetamine/Dextroamphetamine, and to one
20 misdemeanor count for Possession of a Legend Drug without a Prescription, Cialis.

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23 ⁷ Commonly known by its trade name Adderall. It is a Schedule II controlled substance
24 pursuant to Health and Safety Code section 11055, subdivision (d), and a dangerous drug pursuant to
Business and Professions Code section 4022.

25 ⁸ Acetaminophen/Bitartrate is a Schedule II controlled substance pursuant to Health and Safety
26 Code section 11055, subdivision (b), and a dangerous drug pursuant to Business and Professions Code
section 4022.

27 ⁹ Commonly known as Xanax. It is a Schedule IV controlled substance pursuant to Health and
28 Safety Code section 11057, subdivision (d), and a dangerous drug pursuant to Business and Professions
Code section 4022.

1 15. On or about November 26, 2018, Respondent was sentenced to three (3) years
2 probation; 180 days in the jail, with credit for three days served, one-hundred seventy-seven days
3 suspended; obey all laws; and generally obey all orders given by his probation officer.

4 16. On or about April 22, 2019, Respondent was interviewed by a Special Investigator
5 with the Complaint Investigation Office of the Medical Board (CIO Investigator). During the
6 subject interview, Respondent admitted he pled guilty to one felony count for possession of
7 Adderall and one misdemeanor count for possession of Cialis. Respondent explained he
8 previously had a prescription for Adderall, but at the time of the offense, the Adderall was in an
9 unlabeled bottle. Respondent explained he had "extra" pills leftover from his prior prescription
10 and placed those "extra" pills in the unlabeled bottle. Respondent did not explain why he
11 possessed all of the other pills found within his property.

12 17. The CIO Investigator reviewed the Controlled Substance Utilization Review and
13 Evaluation database ("CURES")¹⁰ for the period of January 1, 2016 through October 12, 2017.
14 The CURES database showed that Respondent did receive three (3) prescriptions for Adderall.
15 The first prescription noted was on or about May 12, 2017. On this day, Respondent received
16 sixty (60) Adderall (10mg) pills. The second prescription noted was on or about June 27, 2017.
17 On this day, Respondent received thirty (30) Adderall (10mg) pills. The third prescription noted
18 was on or about June 28, 2017. On this day, Respondent received thirty (30) Adderall (10mg)
19 pills. The CURES database did not show prescriptions for any of the other Schedule II or IV
20 drugs Respondent had in his possession on or about August 23, 2017.

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26 ¹⁰ CURES (Controlled substance Utilization Review and Evaluation System) is a database
27 of Schedule II, III, And IV controlled substance prescriptions dispensed in California serving the
28 public health, regulatory oversight agencies, and law enforcement. CURES is committed to the
reduction of prescription drug abuse and diversion without affecting legitimate medical practice
or patient care.

1 **SECOND CAUSE FOR DISCIPLINE**

2 **(Self-Use of a Controlled Substance and Dangerous Drug)**

3 18. Respondent has further subjected his Physician's and Surgeon's Certificate No.
4 A 99111 to disciplinary action under sections 2227 and 2234, as defined by section 2239,
5 subdivision (a), of the Code, in that he used and/or administered to himself a controlled substance
6 and/or dangerous drug, as more particularly alleged in paragraphs 9 through 17 above, which is
7 hereby incorporated by reference and realleged as if fully set forth herein.

8 **THIRD CAUSE FOR DISCIPLINE**

9 **(General Unprofessional Conduct)**

10 19. Respondent has further subjected his Physician's and Surgeon's Certificate No.
11 A 99111 to disciplinary action under sections 2227 and 2234 of the Code, in that he has engaged
12 in conduct which breaches the rules or ethical code of the medical profession, or conduct which is
13 unbecoming to a member in good standing of the medical profession, and which demonstrates an
14 unfitness to practice medicine, as more particularly alleged in paragraphs 9 through 17 above,
15 which is hereby incorporated by reference and realleged as if fully set forth herein.

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PRAYER

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

1. Revoking or suspending Physician's and Surgeon's Certificate No. A 99111, issued to Stacy Joseph Bax, M.D.;
2. Revoking, suspending or denying approval of Stacy Joseph Bax, M.D.'s authority to supervise physician assistants and advanced practice nurses;
3. Ordering Stacy Joseph Bax, M.D., if placed on probation, to pay the Board the costs of probation monitoring; and
4. Taking such other and further action as deemed necessary and proper.

DATED: August 30, 2019


KIMBERLY KIRCHMEYER
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

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