



**Regular Meeting**

**April 26, 2024**

**Call to Order:**

Catherine Houle, MD, chair, called the regular meeting to order at 8:00 a.m. In attendance:

Catherine Houle, MD – Chair  
Michael Quast, MD – Vice Chair  
Misty Anderson, DO  
Barbara Andrist  
Lacey Armstrong, MD (via Zoom)  
Bree Dewing, MD (via Zoom)  
Zena Homan, MD  
Justin Horner, MD  
Mandi Johnson, MD  
Robert Kemp, MD  
Grant Lannoye, PA  
Jay Metzger, PA  
Troy Pierce, MD (via Zoom)  
Lezlie Scott, ND  
Stephanie Sievert (via Zoom)

Also present: Sandra DePountis, Executive Director; Lynette McDonald, Deputy Executive Director; Stacy Moldenhauer, Litigation Counsel; and Austin Lafferty, General Counsel.

NDPHP representatives present: Brittany Hanson, Executive Director; Dr. Missy Henke, Medical Director.

Courtney Koebele, NDMA.

The following were present for their respective interviews/cases: Rajat Chand, MD, (via Zoom); Peter Felbeck, MD; Nalan Narine, MD (via Zoom); Philip Grasso, ND, (via Zoom).

### **IPA – Investigatory Case 3.5**

Investigatory Panel A moved into Executive Session to discuss complaint 3.5 and investigatory panel records pursuant to North Dakota Century Code section 43-17.1-08. The Executive Session was called to order at 8:01 a.m.

In attendance in the Executive Session: Lacey Armstrong, MD, Vice-Chair; Misty Anderson, DO; Barbara Andrist; Bree Dewing, MD; Grant Lannoye, PA; Troy Pierce, MD. Sandra DePountis, Executive Director; Lynette McDonald, Deputy Executive Director; Stacy Moldenhauer, Litigation Counsel, and Austin Lafferty, General Counsel.

The Executive Session concluded at 8:06 a.m.

Dr. Anderson made a motion to join a Joint Investigation pursuant to N.D.C.C. chapter 43-17.4 – Article IX – for case #3.5, seconded by Ms. Andrist, motion passed unanimously by roll call vote of the IPA members (Dr. Quast not present for the vote).

### **Minutes**

Dr. Kemp moved to approve the January 26, 2024, regular meeting minutes, seconded by PA Metzger, motion passed unanimously.

### **Physician Approval of Licenses**

Ms. Andrist moved to approve the one hundred and twenty-four (124) licenses and waiver of interviews for physician applicants as presented, seconded by Dr. Homan, motion passed unanimously by roll call vote.

### **Physician Assistant Approval of Licenses**

PA Metzger moved to approve the ten (10) licenses and waiver of interviews for physician assistants, as presented, seconded by Dr. Horner, motion passed unanimously by roll call vote.

## **Genetic Counselor Approval of Licenses**

PA Lannoye moved to approve the five (5) licenses and waiver of interviews for genetic counselors, as presented, seconded by Dr. Scott, motion passed unanimously by roll call vote.

## **Naturopathic Doctors**

Dr. Scott moved to approve the one (1) license and waiver of interview for naturopathic doctors, as presented, seconded by Dr. Kemp, motion passed unanimously by roll call vote.

PA Metzger moved to approve the two (2) endorsement to administer Intravenous Therapy and one (1) endorsement for limited prescribing under the collaboration and supervision of a licensed physician, as presented, seconded by Ms. Andrist, motion passed unanimously by roll call vote (Lezlie Scott, ND, recusal of approving her own endorsement pursuant to N.D.C.C. § 43-17-07.2 providing that a board member “may not participate in the making of any decision or the taking of any action affecting that member’s personal, professional, or pecuniary interest, or that of a known relative or business or professional associate.”).

## **IMLC License Granted**

Thirteen (13) Letters of Qualification for State of Principal Licensure and two hundred and twenty-one (221) non-principal licenses were issued under the Compact. Deputy Director McDonald provided updated statistics on licenses issued via the compact since its adoption in 2017 which included a total of one-hundred and seventy-eight (178) Letters of Qualification issued, and two thousand four hundred and eleven (2,411) non-state of principal licenses issued. There are now 42 states/territories that have joined the IMLC.

## **Interview for Licensure – Rajat Chand, MD**

Dr. Chand was required to interview due failure to initially disclose all information and materials for his application including providing the PIP plan from his 2020 fellowship and 2022 Letter of Warning obtained during his residency at Cook County Health. Dr. Chand also failed to report a previous DUI arrest which was pled down to reckless driving. Dr. Misty Anderson led the interview of this applicant.

Dr. Chand answered questions regarding his education, training, and proposed practice in North Dakota, along with addressing his previous arrests and circumstances at issue during his residency training.

Dr. Anderson made a motion to grant the license, seconded by Dr. Dewing, motion passed unanimously by roll call vote.

#### **Interview for Licensure – Nalan Narine, MD**

Dr. Narine disclosed on his application for licensure a 2015 arrest and conviction for CA Code 647(b) – solicitation. Dr. Narine also failed Part I of the NBME twice before passing on his third attempt, and Part II of the NBME once before passing. Finally, Dr. Narine was placed on probation in his second year of anesthesia residency program for failing to pass his exam – requiring monitoring and lesson plans - but graduated from his residency program on time. Dr. Kemp led the interview for this applicant.

Dr. Narine answered questions on the derogatory information noted in the file.

Dr. Pierce made a motion to grant the license, seconded by PA Metzger, motion passed unanimously by roll call vote.

#### **Interview for Licensure – Peter Felbeck, MD**

Dr. Felbeck was required to interview before the Board because he has not practiced clinically since 2011. Dr. Felbeck holds an active, lifetime certification with the American Board of Anesthesiology but is not participating in MOC. He has, however, obtained over 150 CMEs in the past year. Dr. Felbeck brought before the Board a re-entry to practice plan in which he proposes to enroll in the retraining program with the Department of Anesthesiology at the University of Arizona, Tucson. He has been credentialed at the facility where he would be working. Arizona requires Dr. Felbeck to hold an active, unrestricted license in another state in order to grant him an AZ license to enter the program. Dr. Quast led the interview for this applicant.

Dr. Felbeck answered questions regarding the reentry program and plans to practice.

Dr. Quast made a motion to issue the license, seconded by Dr. Pierce, motion passed by roll call vote with Ms. Andrist and Drs. Homan and Houle voting no and all other Board members voting yes.

### **Interview for Licensure – Philip Grasso, ND**

Dr. Grasso is interviewing before the Board for a naturopathic doctor license after not practicing clinically for over four years. He comes forward with a re-entry to practice plan in which he is proposing to work under the direct supervision of Lezlie Scott, ND, at Core Health Strategies – which will include weekly meetings and quarterly chart reviews of 10 patient charts – for 1600 hours. Dr. Grasso was also disciplined by the Oregon Board of Naturopathic Medicine in 2015 regarding prescribing practices. Dr. Grasso successfully completed the terms of his discipline and probation in 2020. PA Metzger led the interview for this applicant.

The Board questioned Dr. Grasso regarding his prescribing practices – with concerns on continuing to prescribe to patients who had notable red flags and issues, along with lack of utilization and required compliance with pain management contracts. Dr. Grasso answered questions about what he has learned since the disciplinary action and changes made to his practice.

Dr. Grasso then answered questions regarding his planned practice in North Dakota and proposed re-entry into practice plan. The Board expressed concerns that the reentry plan was for him to provide supervised care in a telemedicine format.

Dr. Kemp made a motion to grant a restricted license to Dr. Grasso, with the conditions of direct supervision by Lezlie Scott, ND, which will include quarterly chart reviews and weekly meetings to review patient care. Dr. Grasso would be required to complete a minimum of 800 hours in person, on site, and then may move to obtain the additional 800 hours via telemedicine if determined appropriate by his supervisor. This shall be completed by January 1, 2026. Dr. Grasso must come back to the Board to petition for lifting restrictions on the license upon recommendation of his supervisor. The motion was seconded by PA Metzger, motion passed by roll call vote with Drs. Quast and Armstrong voting no and all other Board members voting yes. (Lezlie Scott, ND, recusing under N.D.C.C. § 43-17-07.2 providing that a board

member “may not participate in the making of any decision or the taking of any action affecting that member’s personal, professional, or pecuniary interest, or that of a known relative or business or professional associate.”).

The Board also considered Dr. Grasso’s application for waiver of limited endorsement for prescribing in North Dakota. In review of the law, legal counsel opined that the laws and requirements in Oregon and Arizona in which Dr. Grasso was previously licensed and prescribing under, are not substantially similar to North Dakota laws and requirements – specifically, they did not require supervision by a licensed physician who would attest to the safe prescribing practices before being able to prescribe independently. The other jurisdictions also did not require the passage of the NPLEX pharmacology examination. Dr. Anderson, therefore made a motion to deny the waiver for limited endorsement under N.D.C.C. § 43-58-08.1(4) and N.D.A.C. § 50-06-02-06(3), seconded by Ms. Andrist, motion passed unanimously by roll call vote (Lezlie Scott, ND, recusing under N.D.C.C. § 43-17-07.2 providing that a board member “may not participate in the making of any decision or the taking of any action affecting that member’s personal, professional, or pecuniary interest, or that of a known relative or business or professional associate.”).

### **Petitions for Eligibility, Modification, and Completion**

#### **- IPA v. Laura Purdy, MD – Order of Completion**

Dr. Purdy completed all requirements of her Order issued 10/27/2024 – specifically, implementing appropriate telehealth standard operating procedures, completing the PROBE course offered by CPEP, and payment of board fees.

Dr. Anderson made a motion to issue an Order of Completion, seconded by Ms. Seivert, motion passed unanimously by roll call vote.

#### **- Elizabeth Mathews, MD**

Dr. Mathews is petitioning the Board to grant an exception to the three-attempt exam limit rule under North Dakota Administrative Code 50-02-11-03.1(2) as it took her five attempts to

pass Step 3 of the USMLE. Dr. Mathews is currently licensed in over a dozen states without any discipline, has practiced for over five years, and is ABMS Board Certified in Internal Medicine.

Dr. Pierce made a motion to approve granting an exception to the three-attempt limit rule, seconded by Ms. Andrist, the motion passed unanimously by roll call vote (PA Metzger was not present for the vote).

- **Alex Funicello, MD**

Dr. Funicello is petitioning the Board to grant an exception to the three-attempt exam limit rule under North Dakota Administrative Code 50-02-11-03.1(2) as it took him five attempts to pass Step 3 of the USMLE. Dr. Funicello is currently licensed in four other states without any discipline, has practiced for over five years, and is ABMS Board Certified in General Surgery.

Dr. Anderson made a motion to approve granting an exception to the three-attempt limit rule, seconded by Dr. Dewing, motion passed unanimously by roll call vote (PA Metzger was not present for the vote).

**IPB v. Miguel Antonatos, MD**

Disciplinary action was sought against Dr. Antonatos for inappropriate prescribing practices via telemedicine. Dr. Antonatos was first disciplined in Washington, which required him to amend his telemedicine practices to require either in-person or real time video consultations, and complete examinations and obtain the patient's history before prescribing. Dr. Antonatos was required to complete a medical record-keeping course and was also required to appear before the Washington Medical Board on a regular basis. IPB voted to initiate formal disciplinary action against Dr. Antonatos' license, pursuant to N.D.C.C. § 43-17-31(1)(y) (reciprocal discipline for another state/jurisdiction), requiring him to complete all terms of the Washington Order. A Stipulation was reached agreeing to the terms.

Dr. Quast made a motion to approve the Order adopting the Washington recommendations, as presented, seconded by Dr. Dewing, motion passed unanimously by roll call vote of IPA members.

### **Investigative Panel A report**

Dr. Quast, Chair, reported that Investigative Panel A reviewed a total of fifteen (15) cases, four (4) summary matter cases, and seven (7) malpractice cases: five (5) cases were tabled for further review and two (2) Letters of Concern were issued; all other cases dismissed, or no action taken.

### **Investigative Panel B report**

PA Metzger, Chair, reported that Investigative Panel B reviewed a total of ten (10) cases, seven (7) summary matter cases, and seven (7) malpractice cases: the Panel approved one (1) stipulation and tabled three (3) cases for further review, all other cases dismissed, or no action taken.

### **NDPHP Presentation and Report**

NDPHP Executive Director Brittany Hanson reported thirty-six (36) active participants in the NDPHP – six (6) are Board ordered with the PHP and twenty-seven (27) are voluntary – three (3) are from other professions. Director Hanson also answered questions on the most recent financial statements of the NDPHP – specifically as to how the budget has been updated to reflect updated expenses. The NDPHP Board of Directors are meeting in the next week to review the budget and other financial statements.

NDPHP Board of Director's ex-officio member Ms. Sievert provided an overview of the NDPHP's April 16, 2024, meeting.

Dr. Dewing was called away at this point in the meeting and therefore did not participate in any further discussions or votes.

### **T.D., et al., v. Wrigley, et al., - Case #08-2023-CV-02189**

The Board discussed a subpoena served on the NDBOM by the plaintiffs in this case on April 3, 2024, requesting a deposition on April 8, 2024. A Motion to Quash the Subpoena, due to various reasons, was filed April 5, 2024. An agreement was reached with the plaintiff's counsel to allow a written deposition on topics approved by legal counsel.

## **COMMITTEE REPORTS**

### **Genetic Counselor Advisory Committee** (Board members Dr. Anderson and Dr. Horner)

At the last meeting, the Board approved the creation of a Genetic Counselor Advisory Committee as required by North Dakota Century Code section 43-60-09. Three North Dakota residents and licensed genetic counselors showed interest in the committee and thus Genetic Counselors Lucy Mazaheri, Meghann Reardon, and Linda Wolf were presented to the Board for approval to serve on the Committee. A retired physician, Lyle Best, MD, also showed interest in serving on the Committee. Dr. Quast made a motion to approve the individuals to the Board with the following, staggered, initial terms: Dr. Best and GC Wolf – 3 years; Dr. Horner and GC Mazaheri – 4 years; and Dr. Anderson and GC Reardon – 5 years, seconded by Dr. Kemp, motion passed unanimously by roll call vote.

Dr. Anderson provided an update of the initial meeting of the Genetic Counselor Advisory Committee. The Committee met on April 2, 2022, and discussed potential law changes to 43-60-02(2) to allow genetic counselors to order their own testing. Additional language updates were also discussed to implement updated verbiage and requirements from the American Board of Genetic Counseling.

### **IT Committee** (Dr. Johnson [chair], Drs. Dewing and Quast)

Dr. Johnson made a motion to approve the February 29, 2024, committee meeting minutes, seconded by Dr. Quast, motion passed unanimously by committee members.

Dr. Johnson provided information on a proposed new assessment for the Board's updated website and database by our previous vendor CyberNet. This appeared necessary after new platforms were implemented. CyberNet also proposed additional services in which they will perform continuing monitoring in collaboration with the Board's IT service provider – Fireside – and provide educational resources to the Board Staff. An Alternative Procurement was approved by the State's Office of Management and Budget and IT for the proposed contract.

Ms. Seivert made a motion to approve the 2024 CyberNet contract, as presented, seconded by Dr. Kemp, motion passed unanimously by roll call vote.

**LRL Committee** (Dr. Anderson [chair], Drs. Horner, Scott, and Quast; PA Metzger; and Ms. Andrist)

Dr. Anderson made a motion to approve the LRL Committee's March 1, 2024, and March 22, 2024, meeting minutes, seconded by PA Metzger, motion passed unanimously by committee members.

Dr. Anderson provided an update on the two meetings of the LRL Committee.

The LRL Committee met on March 1, 2024, and considered numerous topics for potential legislation in 2025. The Committee recommends moving forward with legislation requiring criminal history background checks of naturopathic doctors and genetic counselors, to be consistent with all licensees, and to adopt codes of ethics for MD/DO and PAs. The Committee asked for more information or to be kept apprised of other topics considered as other state's move through their legislative sessions at this time.

The LRL Committee met again on March 22, 2024, with the North Dakota Labor Commissioner, Nathan Svihovec. Commissioner Svihovec is performing a study of board licensure processes and CE requirements required by Senate Bill 2249. Commissioner Svihovec asked general questions regarding the licensure process under the Board of Medicine – compared to other states. In review, the Board's pro-active approach of continuing to utilize updates to technology and other resources to streamline the application process, shows the Board's process is quick and efficient while also having necessary steps to ensure competent and qualified individuals are receiving licenses. Information was also relayed of recent legislative changes in which the Board recognized CMEs from national certifying entities for its licensees, thereby eliminating the redundant requirements of submitting individual CE directly to North Dakota.

## **Policies and Procedures Review**

2 Factor Authentication. Board member Andrist requested information on the availability of additional security measures for board login to access meeting materials. The Board's website and database vendor verified they would be able to implement a 2-factor authentication for login – but would need to utilize third party software which would require approximately 10 support hours to implement. Dr. Anderson motioned to approve moving forward with the 2-factor authentication for board login, seconded by Dr. Horner, motion passed unanimously by roll call vote.

Legal Name on License. The Board reviewed information and legal guidance on what name can be utilized for licensure, specifically, whether an individual can practice under their maiden name if it is not their legal name. General Counsel recommended implementing a policy to address this issue. The Board discussed a policy in which a licensee must practice under the name on their license, which must be their legal name or maiden name. If an individual wants to practice under their maiden name, they must submit information to the board – verifying the legal name and maiden name, past and future intended uses of the name, and an explanation/reasoning for use of the maiden name. The office will keep track of the legal and maiden names in the database. Dr. Anderson made a motion to implement this policy, seconded by Ms. Andrist, motion passed unanimously by roll call vote.

National Board of Physicians and Surgeons. A request was received to recognize NBPAS as an acceptable board certification – in addition to the ABMS, AOA, and RCPSC. The Board compared the requirements of NBPAS to the ABMS, AOA, and RCPSC – along with other states policy/laws – none of which report recognizing NBPAS at this time. The Board discussed how this is more of an issue for the health care facilities for credentialing and insurance – which the Board does not weigh in on. Dr. Anderson made a motion to communicate to the individual requesting that because national certification is not a requirement for licensure or renewal, this is not something the Board will weigh in on, seconded by Dr. Pierce, motion passed unanimously by roll call vote.

Naturopath Discussion. The Board reviewed its laws and rules regarding the endorsement for prescribing practices of naturopathic doctors and issued the following guidance for processing the endorsements:

- Waiver of Limited Endorsement: to be deemed “substantially equivalent” – the other state’s laws must require a period of supervision by a physician of the naturopath’s prescribing practices and the naturopath must have passed the NPLEX pharmacology examination. Waivers must come to the full board for approval.
- Issues to Consider for Endorsement to Independently Prescribe: the Board chair and Executive Director can provisionally approve this endorsement in-between Board meetings, and bring to the full Board at the next available meeting to ratify the approval.

Dr. Quast made a motion to approve the above policy for naturopathic endorsements, seconded by Dr. Pierce, motion passed unanimously by roll call vote.

### **Office Matters**

Election of Officers. Board law requires the annual election of officers. Dr. Quast made a motion to elect Dr. Houle – chair, Dr. Armstrong – vice-chair, Ms. Sievert – treasurer; seconded by Dr. Kemp, motion passed unanimously by roll call vote.

FSMB Annual Meeting. FSMB held its annual meeting on April 18-20, 2024, in Nashville, TN. PA Lannoye served as the Board’s voting member. ND Scott, Director DePountis, and Deputy Director McDonald also attended. The attendees relayed information on topics addressed and considered at the FSMB meeting to the full board. Of specific discussion was a new approach in going through the disciplinary process – taking into account how stressful licensees report the process to be. It was discussed how many of the concerns and issues raised during the conference are not at issue in North Dakota. For example, letters are sent out with a detailed explanation of the process – which is also relatively quick in North Dakota (versus other states that take years to process). PA Lannoye and Ms. Andrist offered to review the letters issued to provide feedback to Director DePountis on any suggested changes.

The Board also received information on alternative pathway licensure models that are being implemented in various jurisdictions – with the pros and cons of these models. The FSMB is convening a working group to review this area and to come up with proposed model legislation to address the various concerns. The International Association of Medical Regulatory Authorities (IAMRA) is also a resource that connects medical regulators around the world – aiding in collaboration and education to develop best practices among medical regulatory agencies to address current and future needs. They are working with the World Federation of Medical Education to implement a database of primary source verifications of different medical education, along with expanding to review international medical training. Dr. Scott made a motion to join IAMRA, seconded by Ms. Andrist, motion passed unanimously by roll call vote.

Finally, information was provided on the Provider Bridge program which is a free database that various entities can access to address healthcare shortages during emergencies and natural disasters. PA Lannoye made a motion to provide information on the Board’s website regarding the Provider Bridge Program, seconded by Dr. Homan, motion passed unanimously by roll call vote.

NDBOM Administrative Rules. The updated administrative rules went into effect on April 1, 2024. Information on the updates was posted on the Board website, updated into renewal and licensure forms, and will be included in the Board’s April News Blast.

The meeting was adjourned at 11:44 a.m.

*Sandra DePountis*

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Sandra DePountis  
Executive Director