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

12 In the Matter of the Accusation Against:

Case No. 800-2021-076636

13 **Liliane Laurence Lebas, M.D.**
14 **13245 Riverside Dr. Suite 507**
15 **Sherman Oaks, CA 91423-2172**

A C C U S A T I O N

16 **Physician's and Surgeon's Certificate**
17 **No. A 45302,**

Respondent.

18 **PARTIES**

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

21 2. On or about September 12, 1988, the Board issued Physician's and Surgeon's
22 Certificate Number A 45302 to Liliane Laurence Lebas, M.D. (Respondent). The Physician's and
23 Surgeon's Certificate was in full force and effect at all times relevant to the charges brought
24 herein and will expire on February 29, 2024, unless renewed.

25 **JURISDICTION**

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

1 **STATUTORY PROVISIONS**

2 4. Section 2001.1 of the Code states:

3 Protection of the public shall be the highest priority for the Medical Board of
4 California in exercising its licensing, regulatory, and disciplinary functions.
5 Whenever the protection of the public is inconsistent with other interests sought to be
6 promoted, the protection of the public shall be paramount.

7 5. Section 2004 of the Code states:

8 The board shall have the responsibility for the following:

9 (a) The enforcement of the disciplinary and criminal provisions of the Medical
10 Practice Act.

11 (b) The administration and hearing of disciplinary actions.

12 (c) Carrying out disciplinary actions appropriate to findings made by a panel or
13 an administrative law judge.

14 (d) Suspending, revoking, or otherwise limiting certificates after the conclusion
15 of disciplinary actions.

16 (e) Reviewing the quality of medical practice carried out by physician and
17 surgeon certificate holders under the jurisdiction of the board.

18 (f) Approving undergraduate and graduate medical education programs.

19 (g) Approving clinical clerkship and special programs and hospitals for the
20 programs in subdivision (f).

21 (h) Issuing licenses and certificates under the board's jurisdiction.

22 (i) Administering the board's continuing medical education program.

23 6. Section 2227 of the Code states:

24 A. A licensee whose matter has been heard by an administrative law judge of
25 the Medical Quality Hearing Panel as designated in Section 11371 of the
26 Government Code, or whose default has been entered, and who is found guilty, or
27 who has entered into a stipulation for disciplinary action with the board, may, in
28 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

1 requirement that the licensee complete relevant educational courses approved by the
2 board.

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

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

11 7. Section 2234 of the Code, states:

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

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

17 (b) Gross negligence.

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

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

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

(d) Incompetence.

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

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

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

8. Section 2242 of the Code states:

(a) Prescribing, dispensing, or furnishing dangerous drugs as defined in Section
4022 without an appropriate prior examination and a medical indication, constitutes
unprofessional conduct. An appropriate prior examination does not require a

1 synchronous interaction between the patient and the licensee and can be achieved
2 through the use of telehealth, including, but not limited to, a self-screening tool or a
3 questionnaire, provided that the licensee complies with the appropriate standard of
4 care.

5 ...

6 9. Section 2266 of the Code states:

7 The failure of a physician and surgeon to maintain adequate and accurate
8 records relating to the provision of services to their patients constitutes unprofessional
9 conduct.

10 COST RECOVERY

11 10. Section 125.3 of the Code provides, in pertinent part, that the Board may request the
12 administrative law judge to direct a licensee found to have committed a violation or violations of
13 the licensing act to pay a sum not to exceed the reasonable costs of the investigation and
14 enforcement of the case, with failure of the licensee to comply subjecting the license to not being
15 renewed or reinstated. If a case settles, recovery of investigation and enforcement costs may be
16 included in a stipulated settlement.

17 DEFINITIONS

18 As used herein, the terms below will have the following meanings:

19 “Atorvastatin” is a medication used to treat high cholesterol and triglyceride
20 levels, which may reduce the risk of angina, stroke, heart attack, and heart and blood
21 vessel problems. It is sold under the brand name “Lipitor®.” It is a dangerous drug
22 pursuant to Code section 4022.

23 “Azithromycin” is an antibiotic medication used to treat various types of
24 infections, including pink eye (bacterial conjunctivitis). It is sold under the brand
25 names Zithromax®, Z-Pak®, Zmax®, AzaSite®, and Zithromax TRI-PAK®. It is a
26 dangerous drug as defined in Code section 4022.

27 “Benzodiazepines” are a class of drugs that produce central nervous system
28 (CNS) depression. They are used therapeutically to produce sedation, induce sleep,
relieve anxiety and muscle spasms, and to prevent seizures. In general,
benzodiazepines act as hypnotics in high doses, anxiolytics in moderate doses, and
sedatives in low doses, and are used for a limited time period. Benzodiazepines are
commonly misused and taken in combination with other drugs of abuse. Commonly
prescribed benzodiazepines include alprazolam (Xanax®), lorazepam (Ativan®),
clonazepam (Klonopin®), diazepam (Valium®), and temazepam (Restoril®). Risks
associated with use of benzodiazepines include: 1) tolerance and dependence, 2)
potential interactions with alcohol and pain medications, and 3) possible impairment
of driving. Benzodiazepines can cause dangerous deep unconsciousness. When
combined with other CNS depressants such as alcoholic drinks and opioids, the
potential for toxicity and fatal overdose increases. Before initiating a course of
treatment, patients should be explicitly advised about the following: the goal and
duration of benzodiazepine use; its risks and side effects, including risk of

1 dependence and respiratory depression; and alternative treatment options.

2 “CURES” means the Department of Justice, Bureau of Narcotics
3 Enforcement’s California Utilization, Review and Evaluation System (CURES) for
4 the electronic monitoring of the prescribing and dispensing of Schedule II, III, IV
5 and V controlled substances dispensed to patients in California pursuant to Health
6 and Safety Code section 11165. The CURES database captures data from
7 controlled substance prescriptions filled as submitted by pharmacies, hospitals, and
8 dispensing physicians. Law enforcement and regulatory agencies use the data to
9 assist in their efforts to control the diversion and resultant abuse of controlled
10 substances. Prescribers and pharmacists may request a patient’s history of
11 controlled substances dispensed in accordance with guidelines developed by the
12 Department of Justice.

13 “Fenofibrate” is a medication used to lower high cholesterol and high
14 triglyceride (fatty acid) levels in the blood. It works by increasing the breaking
15 down and removal of triglycerides from the blood. It belongs to a class of
16 medications called “antilipemic agents.” It works by speeding the natural processes
17 that remove cholesterol from the body. It is a dangerous drug pursuant to Code
18 section 4022.

19 “Lorazepam” is a benzodiazepine medication. It is used to treat anxiety
20 disorders, trouble sleeping, active seizures including status epilepticus, alcohol
21 withdrawal, and chemotherapy induced nausea and vomiting, as well as for surgery
22 to interfere with memory formation and to sedate those who are being mechanically
23 ventilated. It is sold under the brand name Ativan® among others. It is a Schedule
24 IV controlled substance pursuant to Health and Safety Code section 11057,
25 subdivision (d)(16), and a dangerous drug pursuant to Code section 4022.

26 “Metoprolol” is a medication used to treat high blood pressure, chest pain
27 (angina), and heart failure. It belongs to a class of drugs known as beta-blockers. It
28 is sold under the brand names Toprol XL® and Lopressor®. It is a dangerous drug
pursuant to Code section 4022.

“Modafinil” is a medication used to treat narcolepsy, sleep apnea, and shift
work sleep disorder (sleepiness during scheduled waking hours and difficulty falling
asleep or staying asleep during scheduled sleeping hours in people who work at
night or on rotating shifts). It is sold under the brand name Provigil® It is a
Schedule IV controlled substance pursuant to Health and Safety Code section
11057, subdivision (f)(3), and a dangerous drug pursuant to Code section 4022.

“Naproxen” is a medication used to relieve symptoms of arthritis
(osteoarthritis, rheumatoid arthritis, or juvenile arthritis) such as inflammation,
swelling, stiffness, and joint pain. It is a nonsteroidal anti-inflammatory drug
(NSAID). It is sold under various brand names, including Aleve® and Naprosyn®.
It is a dangerous drug as defined in Code section 4022.

“Quetiapine” is an atypical antipsychotic drug used for the treatment of
schizophrenia, bipolar disorder, and major depressive disorder. It is sold under the
brand name Seroquel®. It is a dangerous drug pursuant to Code section 4022.

“Tramadol” is a synthetic pain medication used to treat moderate to
moderately severe pain. The extended-release or long-acting tablets are used for
chronic ongoing pain. It is a centrally-acting opioid agonist and SNRI
(serotonin/norepinephrine reuptake inhibitor). Tramadol is sold under various brand
names, including Ultram® and ConZip®. It is a Schedule IV controlled substance

1 pursuant to federal Controlled Substances Act, and a dangerous drug pursuant to
2 Code section 4022.

3 "Zolpidem" is a sedative drug primarily used to treat insomnia. It has a
4 short half-life. Its hypnotic effects are similar to those of the benzodiazepine class
5 of drugs. It is sold under the brand name Ambien® and Intermezzo®. It is a
6 schedule IV controlled substance and narcotic as defined by Health and Safety Code
7 section 11057, subdivision (d)(32) and a dangerous drug pursuant to Code section
8 4022.

9 **FACTUAL ALLEGATIONS**

10 11. The Board's Central Complaint Unit received an online complaint from Patient 1¹, a
11 32-year-old female who is also a relative of Respondent. Patient 1's complaint was regarding
12 Respondent's prescribing of the psychotropic medication, modafinil to her. During the
13 investigation of the complaint, Board investigators discovered that between April 14, 2018 and
14 April 14, 2021, (hereinafter "Treatment Period")² Respondent treated and/or prescribed
15 medications, including controlled substances, to two additional adult relatives, Patients 2 and 3,
16 without proper examination and without maintaining proper medical records. Patient 2 is a 36-
17 year-old female and Patient 3 is a 32-year-old male.

18 **Board Investigation.**

19 12. According to a CURES report dated April 14, 2021, during the Treatment Period,
20 Respondent prescribed the following drugs to the following patients:

- 21 a. As to Patient 1, Respondent wrote four prescriptions for modafinil and one
22 prescription for lorazepam.
- 23 b. As to Patient 2, Respondent wrote three prescriptions for zolpidem tartrate, nine
24 prescriptions for modafinil, and one prescription for tramadol. In addition to the
25 controlled substances documented in the CURES report, Respondent also prescribed
26 naproxen, atorvastatin, fenofibrate, metoprolol and quetiapine fumarate.
- 27 c. As to Patient 3, Respondent wrote 16 prescriptions for lorazepam, two
28 prescriptions for modafinil, and one for zolpidem tartrate.

29 ¹ Patients herein are identified by numbers to protect their privacy.

30 ² These are approximate dates based upon the records available for review. Patients 1, 2,
31 and 3 may have treated with Respondent before or after these dates.

1 13. On or about June 15, 2021, Board investigators spoke to Respondent via telephone.
2 Respondent stated that she never treated Patients 1, 2, or 3. However, later during the call,
3 Respondent stated that she has treated Patients 1, 2, and 3 with antibiotics.

4 14. On or about August 21, 2021, Board investigators interviewed Respondent, who
5 stated:

6 a. Respondent is a psychiatrist who treats patients at an emergency psychiatry
7 clinic.

8 b. Patients 1, 2, and 3 are Respondent's adult relatives, and that she had prescribed
9 medications to them over the course of several years. However, Respondent could
10 not specifically remember prescribing medications to Patient 3.

11 c. Respondent has prescribed modafinil, as an off-label use, to Patient 2 and 3 to
12 treat attention deficit hyperactivity disorder (ADHD).

13 d. Prescriptions filled for Patients 2 and 3 were often delivered to Respondent's
14 residence, as Patients 2 and 3 intermittently resided with her.

15 e. Respondent did not create and/or maintain medical records to document her
16 treatment of the Patients.

17 f. Respondent completed an "informal examination" of Patient 3 prior to
18 prescribing controlled substances. However, Respondent did not do the same for
19 Patients 1 or 2.

20 g. Respondent admitted that prescribing medications without proper examinations
21 is "not appropriate." As a result of the investigation, Respondent changed her
22 prescribing and charting practices with respect to her care and treatment of Patients 1,
23 2 and 3.

24 h. Respondent admitted that her prescribing and charting practices with respect to
25 her care and treatment of the Patients 1, 2 and 3 was neither "justified," nor
26 "appropriate."

27 15. On or about October 4, 2021, Board investigators spoke with Patient 2, who stated
28 that Respondent has prescribed medications for her, but Patient 2 could not recall any specific

1 information. Patient 2 could not articulate why she sought treatment from Respondent rather than
2 a physician who was not a family member.

3 16. On or about October 4, 2021, Board investigators spoke with Patient 3, who stated
4 that Respondent has prescribed medications to him for approximately four years. Patient 3 also
5 stated that Respondent is his treating psychiatrist out of convenience.

6 17. On or about October 5, 2021, Board investigators spoke with Patient 1, who stated
7 that she filed the complaint because she was concerned about Respondent's prescribing
8 medications in her and Patient 2's name. Additionally, Patient 1 stated that she has not taken
9 modafinil as she would experience negative side effects as the medication acts as a stimulant.
10 However, she was aware that Respondent took modafinil to "control [Respondent's] [ADHD]."

11 **FIRST CAUSE FOR DISCIPLINE**

12 **(Failure to Maintain Adequate Medical Records)**

13 18. Respondent Liliane Laurence Lebas, M.D. is subject to disciplinary action under
14 Code section 2266, in that Respondent failed to maintain adequate and accurate records relating
15 to the provision of services to Patients 1, 2 and 3. The circumstances are as follows:

16 19. The facts set forth in paragraphs 11 through 17, above, are incorporated by reference
17 as if set forth in full herein.

18 **SECOND CAUSE FOR DISCIPLINE**

19 **(Prescribing Medications without Medical Indication)**

20 20. Respondent Liliane Laurence Lebas, M.D. is subject to disciplinary action under Code
21 section 2242, subdivision (a), in that she prescribed controlled substances and dangerous drugs to
22 Patients 1, 2 and 3, without performing an appropriate prior examination and a medical
23 indication. The circumstances are as follows:

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

26 **THIRD CAUSE FOR DISCIPLINE**

27 **(Repeated Negligent Acts)**

28 22. Respondent Liliane Laurence Lebas, M.D. is subject to disciplinary action under

1 Code section 2234, subdivision (c), in that Respondent committed multiple negligent acts in the
2 course of treating the Patients. The circumstances are as follows:

3 23. The allegations of the First and Second Causes for Discipline, inclusive, are
4 incorporated herein by reference as if fully set forth. Respondent's acts and/or omissions as set
5 forth in the First and Second Causes for Discipline, whether proven individually, jointly, or in any
6 combination thereof, constitute repeated negligent acts.

7 **PRAYER**

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

10 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 45302,
11 issued to Liliane Laurence Lebas, M.D.;

12 2. Revoking, suspending or denying approval of Liliane Laurence Lebas, M.D.'s
13 authority to supervise physician assistants and advanced practice nurses;

14 3. Ordering Liliane Laurence Lebas, M.D., to pay the Board the costs of the
15 investigation and enforcement of this case, and if placed on probation, the costs of probation
16 monitoring; and

17 5. Taking such other and further action as deemed necessary and proper.

18
19 DATED: AUG 31 2022



20 WILLIAM PRASIFKA
21 Executive Director
22 Medical Board of California
23 Department of Consumer Affairs
24 State of California
25 Complainant

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