

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF PROFESSIONAL LICENSING
BOARD OF MEDICINE
DISCIPLINARY SUBCOMMITTEE

In the Matter of

MOHAN VISWA KAZA, M.D.
License No. 4301075190
Respondent

File No. 43-26-000311

CONSENT ORDER

On March 24, 2026, the Department of Licensing and Regulatory Affairs (Department) executed an Administrative Complaint (Complaint) charging Respondent with violating the Public Health Code, MCL 333.1101 et seq.

The parties have stipulated that the Michigan Board of Medicine's Disciplinary Subcommittee (DSC) may enter this Consent Order (Order). The DSC has reviewed the Stipulation and agrees that the public interest is best served by resolution of the outstanding Complaint. Therefore, the DSC finds that the allegations of fact contained in the Complaint are true and that Respondent has violated MCL 333.16221(a), (b)(ii), (b)(iii), and (h).

Accordingly, for the cited violations, the following IS ORDERED:

Respondent is FINED \$1,000.00 to be paid to the State of Michigan prior to petitioning for reinstatement. Respondent is not eligible to petition for reinstatement until the fine is paid in full.

The fine **shall be paid electronically** through Respondent's [MiPLUS account](#) OR by mail with a check or money order directly to: Department of Licensing and Regulatory Affairs, Enforcement Division, Compliance Section, P.O. Box 30189, Lansing, MI 48909.

If the fine is paid by mail, the check or money order shall be made payable to the State of Michigan and shall clearly display File Number 43-26-000311.

Respondent shall direct all questions and other communications concerning this Order to BPL-Monitoring@michigan.gov.

Respondent shall be solely responsible for payment of all costs incurred in complying with the terms of this Order.

If Respondent violates any provision of this Order, or fails to complete any term of the Order, the DSC may take disciplinary action pursuant to Mich Admin Code, R 338.1632 and MCL 333.16221(h).

This Order shall be effective on the date signed by the DSC's Chairperson or authorized representative, as set forth below.

MICHIGAN BOARD OF MEDICINE

By: Robert Payne for
Chairperson, Disciplinary Subcommittee

Dated: July 15, 2026

STIPULATION

The following stipulations were agreed to by the parties:

1. Respondent admits that the allegations of fact and law in the Complaint are true and constitute a violation of the Public Health Code.

2. Respondent understands and intends that by signing this Stipulation Respondent is waiving the right, pursuant to the Public Health Code, the rules promulgated thereunder, and the Administrative Procedures Act, MCL 24.201 *et seq.*, to require the Department to prove the charges set forth in the Complaint by presentation of evidence and legal authority, and Respondent is waiving the right to appear with an attorney and such witnesses as Respondent may desire to present a defense to the charges.

3. This matter is a public record required to be published and made available to the public pursuant to the Michigan Freedom of Information Act, MCL 15.231 *et seq.*, and this action will be reported to the National Practitioner Data Bank and any other entity as required by state or federal law.

4. The following factors were taken into consideration in the formulation of this Order:

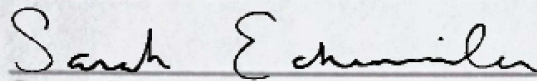
- A. On January 29, 2026, at Respondent's request, the Department referred Respondent back to the Health Professional Recovery Program (HPRP). Respondent subsequently entered into recommended residential treatment and is currently compliant with the HPRP intake process.
- B. Respondent's license remains suspended and Respondent must pay the fine required by this Order and apply for and be granted reinstatement prior to returning to professional practice.

5. The Department's representative is free to discuss this matter with the DSC and recommend acceptance of the resolution set forth in this Order.

6. This Order is approved as to form and substance by Respondent and the Department and may be entered as the final order of the DSC in this matter.

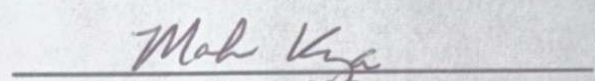
7. This proposal is conditioned upon acceptance by the DSC. Respondent and the Department expressly reserve the right to further proceedings without prejudice should this Order be rejected.

AGREED TO BY:



Sarah Eckenwiler, Analyst
Enforcement Division
Bureau of Professional Licensing

AGREED TO BY:



Mohan Viswa Kaza, M.D.
Respondent

Dated: 6/26/2026

Dated: 6/25/26

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STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
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In the Matter of

MOHAN VISWA KAZA, M.D.
License No. 4301075190,
Respondent.

File No. 43-26-000311

ADMINISTRATIVE COMPLAINT

The Michigan Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing, complains against Respondent as follows:

1. The Michigan Board of Medicine is an administrative agency established by the Public Health Code, MCL 333.1101 *et seq.* Pursuant to MCL 333.16226, the Board's Disciplinary Subcommittee is empowered to discipline persons for violations of the Public Health Code.

2. Respondent's disciplinary limited licensed to practice as a medical doctor in the state of Michigan was suspended on October 17, 2025, and remains suspended. Pursuant to MCL 333.7311(6), Respondent's controlled substance license was automatically voided on the date Respondent's license to practice as a medical doctor was suspended. Pursuant to MCL 333.16201(5), the expiration or surrender of a license or registration does not terminate a board's authority to impose sanctions.

3. MCL 333.16106a(c) defines substance abuse as a “substance use disorder as defined in section 100d of the mental health code, 1974 PA 258, MCL 330.1100d.”

4. MCL 330.1100d(12) defines substance use disorder as a “chronic disorder in which repeated use of alcohol, drugs, or both, results in significant and adverse consequences. Substance use disorder includes substance abuse.”

5. MCL 330.1100d(11) defines substance abuse as:

. . . the taking of alcohol or other drugs at dosages that place an individual's social, economic, psychological, and physical welfare in potential hazard or to the extent that an individual loses the power of self-control as a result of the use of alcohol or drugs, or while habitually under the influence of alcohol or drugs, endangers public health, morals, safety, or welfare, or a combination thereof.

6. As historical information, the following actions occurred:

a. On April 10, 2015, an Order of Summary Suspension and Administrative Complaint were executed against Respondent, in file 43-15-136357, based on Respondent's 2013 misdemeanor alcohol-related driving conviction, Respondent's 2014 felony alcohol-related driving conviction, and Respondent's failure to timely notify the Department of the convictions. In resolution, on September 8, 2015, a Final Order was executed that, in part, dissolved the summary suspension and suspended Respondent's license for a minimum of one day with automatic reinstatement if within six months the Department received evidence from the Health Professional Recovery Program (HPRP) that Respondent entered into a monitoring agreement and was deemed safe to practice, at which time Respondent was placed on probation and required to comply fully with the terms of the monitoring agreement.

- b. On October 18, 2016, an Order of Summary Suspension and Administrative Complaint were executed against Respondent, in file 43-16-142136, based in part on Respondent's diagnosed substance use disorder and violation of a prior order by failing to comply with the terms of a monitoring agreement with HPRP. In resolution, on January 18, 2017, a Consent Order and Stipulation was executed that, in part, dissolved the summary suspension and suspended Respondent's license for a minimum of three months with automatic reinstatement if within six months the Department received evidence from HPRP that Respondent entered into a monitoring agreement and was deemed safe to practice, at which time Respondent was placed on probation and required to comply fully with the terms of the monitoring agreement.
- c. On August 25, 2017, an Order of Summary Suspension and Administrative Complaint were executed against Respondent, in file 43-17-147815, based in part on Respondent's diagnosed substance use disorder and condition that may impair Respondent's ability to safely practice, and violation of a prior order by failing to comply with the terms of a monitoring agreement with HPRP. In resolution, on August 1, 2018, a Final Order was executed that, in part, dissolved the summary suspension, fined Respondent \$5,000.00, and suspended Respondent's license for a minimum of one day with automatic reinstatement if within six months Respondent completed specified continuing education and the Department received evidence from HPRP that Respondent entered into a monitoring agreement and was deemed safe to practice, at which time Respondent was placed on probation and required to comply fully with the terms of the monitoring agreement.
- d. On June 12, 2024, a First Superseding Administrative Complaint was executed against Respondent, in file 43-21-003127, based in part on Respondent's substandard evaluation of, treatment of, and controlled substance prescribing and management for several patients. In resolution, on January 15, 2025, a Consent Order and Stipulation was executed that, in part, fined Respondent \$2,725.00, limited Respondent's license to practice only under general supervision for a minimum of one year, and placed Respondent on probation that required Respondent to ensure the submission of supervisor reports or submit reports of non-employment, as applicable, complete specified continuing education, and comply with the terms of a monitoring agreement with HPRP. The disciplinary limitation and probation remain in effect to date.

- e. On May 15, 2025, an Administrative Complaint was executed against Respondent, in file 43-25-001404, based in part on Respondent's diagnosed substance use disorder and violation of a prior order by failing to comply with the terms of a monitoring agreement with HPRP. The resolution of the matter is detailed below in paragraph 19.

7. On April 21, 2025, at Respondent's request, the Department referred Respondent to HPRP. Subsequently, Respondent completed an HPRP intake interview, was deemed a high risk, and was directed to undergo an evaluation.

8. On May 9, 2025, Respondent submitted to HPRP a required release of information allowing for communication between HPRP and Respondent's chosen evaluator regarding Respondent's evaluation.

9. On May 6, and June 20, 2025, Respondent underwent an evaluation and was diagnosed in part with "Alcohol use disorder, severe, dependence" and "Stimulant use disorder." The evaluator recommended, in part, that Respondent enter residential treatment specific for healthcare professions with medical management and a neuropsychological evaluation.

10. On June 22, 2025, Respondent rescinded the release of information for the evaluator. As a result, HPRP and the evaluator were prohibited from communicating about Respondent's evaluation. The evaluator had not yet submitted the evaluation report to HPRP for review.

11. On June 24, 2025, based on Respondent's failure to sign a new release of information allowing for communication between the evaluator and HPRP, Respondent's case with HPRP was closed as noncompliant.

12. On July 16, 2025, at Respondent's request, the Department referred Respondent back to HPRP. Additionally, HPRP received a copy of Respondent's May 6, and June 20, 2025 evaluation.

13. On July 21, 2025, Respondent completed an HPRP intake interview and was deemed a high risk.

14. On July 28, 2025, Respondent underwent a psychosocial assessment for intake to inpatient treatment at a facility that was not specifically designated for healthcare professionals. Respondent was diagnosed in part with "Alcohol Dependence." The assessor recommended detoxification as the appropriate level of care for Respondent.

15. On August 5, 2025, Respondent submitted to HPRP a required release of information allowing for communication between HPRP and Respondent's detox/inpatient therapist regarding Respondent's treatment.

16. On or about August 7, 2025, Respondent rescinded the release of information for the detox/inpatient therapist. As a result, HPRP and the therapist were prohibited from communicating about Respondent's treatment.

17. On August 11, 2025, Respondent completed and was discharged from detoxification treatment. Respondent's discharge diagnoses included "Alcohol dependence with withdrawal, uncomplicated," and "Other stimulant use, unspecified, uncomplicated."

18. Between August 12 and August 26, 2025, Respondent completed a partial hospitalization/day treatment program.

19. On September 17, 2025, in resolution of file 43-25-001404 noted above in paragraph 6.e., a Consent Order and Stipulation (Order) was executed that fined Respondent \$750.00 and suspended Respondent's license for a minimum of one day with automatic reinstatement if within six months the Department received evidence from HPRP that Respondent entered into a monitoring agreement and was deemed safe to practice, or otherwise did not require monitoring. If HPRP determined that Respondent needed monitoring, the Order required Respondent to enter into and comply with all terms of a monitoring agreement with HPRP. A copy of the Order, marked Exhibit A, is attached and incorporated.

20. On October 1, 2025, Respondent entered into a three-year co-occurring monitoring agreement with HPRP. The terms of the monitoring agreement required, in part, that Respondent submit to drug screens by checking in to the HPRP designated laboratory and submitting a specimen in the manner requested when instructed; abstain from any mood-altering substances, including alcohol and controlled substances; and undergo treatment as deemed necessary by treatment providers.

21. On October 28, 2025, Respondent met with Respondent's HPRP-approved addiction medicine provider for an initial evaluation for outpatient treatment and a determination of Respondent's safety to practice. Respondent was diagnosed in part with "Primary Substance Use Disorder – Alcohol, namely vodka, Severe;" "Secondary Substance – Stimulant, namely [prescribed] amphetamine and methylphenidate, Moderate;" and "Third substance – Sedative, Hypnotic, or anxiolytic, namely Lithium, Mild." The addiction medicine provider recommended, in part, a residential program specifically for medical professionals. Further, the addiction medicine provider did not deem Respondent safe to practice.

22. On November 26, 2025, HPRP provided Respondent with a deadline of December 3, 2025, to schedule an intake appointment for recommended long-term physician focused residential treatment and submit to HPRP a release of information allowing for communication between HPRP and the chosen treatment facility regarding Respondent's treatment. Respondent failed to comply by the December 3, 2025 deadline. As a result, HPRP initiated the noncompliant closure of Respondent's case.

23. Beginning on December 8, 2025, Respondent ceased checking in to the designated laboratory and ceased submitting to all required drug screens, in violation of the monitoring agreement.

24. On January 23, 2026, Respondent's case with HPRP was closed as noncompliant and the matter was forwarded to the Department.

25. Contrary to the terms of the September 17, 2025 Order in file 43-25-001404, Respondent failed to comply with all terms of a monitoring agreement with HPRP.

COUNT I

Respondent's conduct, as set forth above, evidences a violation of general duty, consisting of negligence or failure to exercise due care, including negligent delegation to or supervision of employees or other individuals, whether or not injury results, or any conduct, practice, or condition which impairs, or may impair, the ability to safely and skillfully engage in the practice of the health profession, in violation of MCL 333.16221(a).

COUNT II

Respondent's conduct, as set forth above, evidences a substance use disorder, in violation of MCL 333.16221(b)(ii).

COUNT III

Respondent's conduct, as set forth above, evidences a mental or physical inability reasonably related to and adversely affecting Respondent's ability to practice in a safe and competent manner, in violation of MCL 333.16221(b)(iii).

COUNT IV

Respondent's conduct, as set forth above, constitutes a violation of a final order issued by a disciplinary subcommittee, board, or task force, contrary to Mich Admin Code, R 338.1632, in violation of MCL 333.16221(h).

RESPONDENT IS NOTIFIED that, pursuant to MCL 333.16231(8), Respondent has 30 days from the date of receipt of this Complaint to submit a written response to the allegations contained in it. Pursuant to MCL 333.16192(2), Respondent is deemed to be in receipt of the Complaint three (3) days after the date of mailing listed in the attached proof of service. The written response shall be submitted by email to the Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing to LARA-BPL-RegulationSection@michigan.gov. If unable to submit a response by email, Respondent may submit by regular mail to the Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing, P.O. Box 30670, Lansing, MI 48909.

Respondent's failure to submit an answer within 30 days is an admission of the allegations in this Complaint. If Respondent fails to answer, the Department shall transmit this Complaint directly to the Board's Disciplinary Subcommittee to impose a sanction, pursuant to MCL 333.16231(9).

Dated: 3/24/2026

Attachment

SGE/rjr


Sarah Eckenwiler, Analyst
Regulation Section I
Enforcement Division