



NEVADA STATE BOARD OF OSTEOPATHIC MEDICINE

*****PUBLIC NOTICE*****

BOARD MEETING

February 13, 2024 @ 5:30 PM

AT THE FOLLOWING LOCATION:

***Nevada State Board of Osteopathic Medicine ~ Conference Room
2275 Corporate Circle, Suite 210
Henderson, NV 89074***

To join by Video/Teleconference on your computer, mobile app or room device:

https://teams.microsoft.com/l/meetup-join/19%3ameeting_MjBjYWY0ZDctNGRkZS00MTBhLTlmYmYtYzQyODQwZmU3ZGM0%40thread.v2/0?context=%7b%22Tid%22%3a%22e4a340e6-b89e-4e68-8eaa-1544d2703980%22%2c%22Oid%22%3a%2205628d65-31b9-47d5-9114-70d3f53bf58d%22%7d

To join by Meeting ID through Microsoft Teams:

Meeting ID: 248 565 260 340

Passcode: k9uHLo

Or to join by telephone (audio only):

Audio Conference Number: +1 775-321-6111

Phone Conference ID: 780 353 548 #

Please Note: The Board may take action on any agenda item delineated for action (discussion /for possible action); likewise, no action may take place on non-agenda items, including public proposals.

A (+) plus sign preceding an agenda item signifies that if the matter is an action item, in certain situations, the option exists to declare the meeting on that agenda item to be a Closed (Executive) Session per NRS 241.030.

All information or documents supplementing agenda items that are not otherwise confidential will be available in limited quantity at the board meeting office.

***** AGENDA *****

I. CALL TO ORDER (Discussion/ For Possible Action) Carla Perlotto, President

Roll call to determine presence of a quorum. The following were present:

Swadeep Nigam, MSc, MBA, Public Member

Paul Janda, D.O.

Jaldeep Daulat, D.O.

Carla Perlotto, PhD

Nasim McDermott, D.O.

Andrea Weed, D.O.

Board Staff present:

Frank DiMaggio, Executive Director
Carolyn Klein, Administrative Assistant
Richard Dreitzer, Esq., Board Counsel

Public:

Susan Fisher, McDonald Carano
Lindsay Knox, McDonald Carano
Cassidy Wilson, McDonald Carano
Henry Lok, Nevada Osteopathic Medical Association
Amber Carter, Clark County Medical Society
Robert Hubley, D.O.

II. PUBLIC COMMENT

NOTE: *Prior to the commencement and conclusion of a contested case or a quasi-judicial proceeding that may affect the due process rights of an individual, the board may refuse to consider public comment. See NRS 233B.126.*

No public comments were received.

III. APPROVAL OF MINUTES (Discussion/For Possible Action) Carla Perlotto, President

a. *Board Minutes from January 9, 2024-Dr. McDermott made a motion to approve the Board meeting minutes from January 9, 2024; seconded by Dr. Perlotto. There being no further discussion, the Board meeting minutes from January 9, 2024, were approved by the Board.*

IV. CONSENT AGENDA TO GRANT LICENSURE FOR OSTEOPATHIC PHYSICIANS AND PHYSICIAN ASSISTANTS (Discussion/ For Possible Action) Carla Perlotto, President

Under this item the Board may consider the recommendations of the Executive Director and/or President/Vice President to grant licensure to the below listed applicants. The Board may remove any applicant's name from the consent motion but may not discuss the contents of the application for licensure without the applicant present following proper notice pursuant to the open meeting law.

<i>Osteopathic Physician Name</i>	<i>Specialty</i>
<i>Melissa Blaker, D.O.</i>	<i>Pediatrics and Thoracic Surgery</i>
<i>Nichole Delaplante, D.O.</i>	<i>Family Medicine</i>
<i>Clinton Hoang, D.O.</i>	<i>Emergency Medicine</i>
<i>Daniyal Iqbal, D.O.</i>	<i>Psychiatry</i>
<i>Alicia King, D.O.</i>	<i>Pediatrics</i>
<i>Margaux Lazarin, D.O.</i>	<i>Family Medicine</i>
<i>Monica Makar, D.O.</i>	<i>Internal Medicine</i>
<i>Ashwini Mathai, D.O.</i>	<i>Family Medicine</i>
<i>Grant Myres, D.O.</i>	<i>Anesthesiology</i>
<i>Desmyn Pedersen, D.O.</i>	<i>Anesthesiology</i>
<i>Bryan Peterson, D.O.</i>	<i>Radiology, Diagnostic</i>
<i>Justin Sandhu, D.O.</i>	<i>Internal Medicine</i>
<i>Stephen Sinclair, III, D.O.</i>	<i>Internal Medicine</i>
<i>Tamara Taber, D.O.</i>	<i>Family Medicine</i>
<i>Kristi Taylor, D.O.</i>	<i>Internal Medicine</i>
<i>Peter Voong, D.O.</i>	<i>Internal Medicine</i>

Physician Assistant Name
Margaret Campbell, PA-C
Beretta Craft-Coffman, PA-C
Daniel Densley, PA-C
Alyssa Gits, PA-C
Dallas Gunny, PA-C
Kaitlyn Higgins, PA-C
Meagan Huggins, PA-C
Greta Jones, PA-C
Taylor Jones, PA-C
Alicia Lee, PA-C
China Leiggi, PA-C
Alissa Maree Nakamura, PA-C
Roberto Soto-Gutierrez, PA-C
Alexander Vera, PA-C
Andrew Woodbury, PA-C

Supervising Physician
Active-Not Working
Active-Not Working
Active-Not Working
Active-Not Working
Robert Yang, D.O.
James Preddy, D.O.
Active-Not Working
Active-Not Working
Active-Not Working
Active-Not Working
Stefan Franciosa, D.O.
Dennis Nguyen, D.O.
Active-Not Working
Active-Not Working
Active-Not Working

Dr. Perlotto stated that there was a question about Peter Voong's D.O. license application. The issue is that Dr. Voong completed COMLEX levels one and two but did not take COMLEX level three. Instead, he took all three steps of USMLE and passed all three steps. The question is whether doing so is adequate and appropriate for licensure under our Board's statutes and regulations. The relevant statute is NRS section 633.311, which sets forth the qualifications of applicants for licensure to practice osteopathic medicine and the relevant portion of that statute has four sections. One section deals with passing all parts of the licensing examination of the NBOME, which would be COMLEX. Another section deals with passing all parts of the FSMB licensing examination, which would be the USMLE. The next section deals with passing all parts of the licensing examination of the board, the state, territory or possession of the United States, or the District of Columbia and is certified by a specialty board of the American Osteopathic Association or by the American Board of Medical Specialties. The last relevant section deals with passing a combination of the parts of the licensing examinations specified in sections one, two, or three.

Dr. McDermott wanted to know why COMLEX level three was not taken.

Executive Director Frank DiMaggio stated that he did not reach out to Dr. Voong for an explanation as to why he did not take COMLEX level three. In researching the issue, Mr. DiMaggio stated that the applicable statute provides that passing all parts of the USMLE or a combination of COMLEX and USMLE is acceptable if approved by the Board. Executive Director Frank DiMaggio stated that he did find out that some residency programs give preference to applicants who took the USMLE exams as opposed to COMLEX.

Dr. Janda stated that he is on the NBOME Board, and he helps write COMLEX questions for levels one, two, and three and he does not have any objections to someone taking and passing the USMLE step three as opposed to the COMLEX level three, because the material is nearly identical.

Dr. Perlotto asked if there are any objections by Board members to accepting Dr. Voong's passing USMLE step three instead of COMLEX level three pursuant to NRS section 633.311.

Dr. Weed stated that it sounds like Dr. Voong may have been accepted into an allopathic residency program and he completed the USMLE requirement as allowed by our statute.

Dr. McDermott made a motion to accept Dr. Voong's application under NRS section 633.311, section four which allows for licensure by passing a combination of the parts of the licensing examination specified in paragraphs one, two, and three of the statute; seconded by Dr. Weed. There being no further discussion, the Board approved acceptance of Dr. Voong's examination results as permitted under NRS section 633.311, section four which allows for licensure by passing a combination of the parts of the licensing examination specified in paragraphs one, two, and three of the statute.

Dr. McDermott made a motion to approve the licenses for the applicants as written above; seconded by Dr. Daulat. There being no further discussion, the Board unanimously approved licensure for the applicants as written above.

V. +CONSIDERATION/APPROVAL OF APPLICATION FOR LICENSURE FOR ROBERT HUBLEY, D.O., (Discussion/For Possible Action) Board may go into closed session pursuant to NRS 241.030 to move to a closed session because the discussion will have to do with this applicant's character, alleged misconduct, professional competence, or similar items) Carla Perlotto, President

Dr. Hubley appeared in person. Dr. Perlotto asked Dr. Hubley if he would prefer an open or closed session. Executive Frank DiMaggio stated that some of the questions could be rather personal and specific, in which case all of this would be a matter of public record if this were conducted in open session and any member of the public can ask for transcripts and minutes. Dr. Hubley chose to go into closed session.

Mr. Nigam made a motion to go into closed session; seconded by Dr. McDermott. There being no other discussion, the Board approved going into closed session for this matter, at which time the Board took up this matter in closed session.

Upon returning to open session, Dr. McDermott made a motion to grant licensure to Robert Hubley D.O.; seconded by Dr. Janda. There being no further discussion, the Board unanimously approved granting Nevada D.O. licensure to Robert Hubley D.O.

VI. DISCUSSION/CONSIDERATION/POSSIBLE ACTION REGARDING A LETTER OF SUPPORT/COALITION SUPPORT LETTER FROM THE BOARD FOR THE FEDERAL FAIR ("Fair Access In Residency") ACT- H.R. 751 (Discussion/For Possible Action) Carla Perlotto, President

Dr. Perlotto stated that the stated purpose of the Fair Act is to help level the playing field between M.D.s and D.O.s with regard to their licensing exams and their access to Medicare funded residency programs. There is a perceived bias towards USMLE and M.D. students as opposed to D.O. students. The requirement of the Fair Act would require Medicare-funded GME programs to report annually the number of osteopathic and allopathic residency applicants and accepted residents and affirm that D.O. applications and the COMLEX-USA are accepted for consideration. Dr. Perlotto stated that the request from us as the Board is to ask if the Board would support the Fair Act and if the Board would be willing to write a letter, and or join their coalition.

Dr. Lok stated that the Fair Act was brought to his attention by Dr. Wolfgang Gilliar, Dean at Touro Nevada. AACOM, which represents the osteopathic colleges, are looking state to state and trying to garner support from the Boards for the Fair Act. Dr. Lok mentioned that he has heard of discrimination based on his students' experiences who take USMLE because certain residency programs would not accept COMLEX. Dr. Lok stated he called AACOM on behalf of NOMA to see how this bill would further their agenda. Dr. Lok stated the only difference between USMLE and COMLEX is the OMT osteopathic treatment section. NOMA will be sending a letter of support to AACOM to join the coalition.

Dr. Perlotto stated that the question she would pose to the Board is where our lane ends, and the professional organization picks up. Dr. Perlotto does not disagree that discrimination in residency programs regarding exams may be occurring, and she would like to see it rectified. But is that under the purview of this Board or is that what professional organizations are for.

Dr. Weed stated that she does not disagree with Dr. Perlotto, and she does have some concerns. If we have training programs that are allopathic in nature, then potentially good D.O. candidates are being excluded from them because of the COMPLEX versus USMLE discrimination. Dr. Weed knows that AOA has been looking at trying to get more of a unified sort of licensure pathway and that there is difficulty recruiting and retaining physicians in general. Dr. Weed has heard that some medical schools may be telling students to take USMLE so the students can have better options. Dr. Weed' said her vote would be to support the Fair Act and see where it goes and revisit it later if need be.

Dr. Perlotto stated that the Board does have a few options. One option would be for the Board to not support the Fair Act; option two would be for the Board to support the Fair Act, but not join the coalition; and option three would be for the Board to approve a letter of support and join the coalition.

Dr. Weed wanted to know what Executive Director DiMaggio recommended for the Board.

Executive Director DiMaggio stated that the last paragraph before the signatories on the December 2023 coalition letter states that "The undersigned organizations stand ready to work with you to advance the Fair Act" and that this seems to imply a more active role by the Board; that is, not only lending the Board's name to this coalition letter but also advancing the cause of the Fair Act. Executive Director DiMaggio stated that he does not see a problem with the Board doing that, but he thought it was interesting that none of the organizations listed on the December 2023 coalition letter are Boards, rather they are national organizations or state organizations. Executive Director DiMaggio said that he had had a phone conversation with David Bergman, who is with AACOM, and Mr. Bergman is seeking the Board's support of the Fair Act. Mr. Bergman provided Mr. DiMaggio with copies of the one-page summary of the Fair Act as well as a copy of the legislation for HR751. Executive Director DiMaggio expressed his concern that there are no other Boards supporting the coalition. Otherwise, he would support the joining as a signatory to the coalition letter and joining the coalition. Executive Director DiMaggio asked Dr. Lok if he knew why there are no other Boards listed on the coalition letter.

Dr. Lok stated that he is quite surprised that there are not any Boards listed, and he thinks that's why AACOM is probably reaching out to all the states to garner support for HR751.

Mr. Dreitzer stated that the purpose of this Board is to protect the public health and safety of the citizens in Nevada and to enforce the laws and regulations as to licensees under our authority. Mr. Dreitzer stated that while HR751's goals are laudable, and he doesn't disagree with it, he thinks lending the Board's name to the coalition is outside of our lane as a state agency.

Executive Director DiMaggio stated that if the Board voted to support the Fair Act but at this time the Board is unable to sign the coalition letter, he could send a letter on the Board's letterhead to Mr. Bergman at AACOM.

Mr. Dreitzer agreed with Executive Director DiMaggio.

Dr. Perlotto made a motion for the Board to support the Fair Act HR751, but at this time the Board is unable to sign the coalition letter; seconded by Dr. McDermott. There being no further discussion, the Board unanimously approved to support the Fair Act HR751, but at this time the Board is unable to sign the coalition letter.

VII. DISCUSSION/CONSIDERATION/POSSIBLE ACTION REGARDING APPROVAL OF REVISED BOARD EMPLOYEE HANDBOOK, PTO POLICY, AND RELATED FORMS (Discussion/For Possible Action) Carla Perlotto, President

Executive Director Frank DiMaggio stated that since he has been with the Board there has not been a revision to the Board's Employee Handbook. The most recent edition was approved by the Board almost four and a half years ago in July of 2019. Executive Director DiMaggio has reviewed the Employee Handbook and has made some proposed revisions to it, updating and correcting some of the information in it, making some of the language consistent, and has added some provisions. The major additions to the proposed Employee Handbook are in red.

The first major revision concerns the alternative work schedule, which is under the section of the Employee Handbook entitled "Office Hours". This came about because the Board employees were interested in doing remote work from home. When Executive Director DiMaggio was approached with a remote work possibility, he informed the employees that he would need at least a six-to-eight-month period where they remained working in the Board office during that time so he could get his feet on the ground. During that time, Governor Lombardo issued a memo about state workers returning to the workplace and then ultimately issued an Executive Order requiring all state workers to return to work, absent exceptional justification. To Executive Director DiMaggio's knowledge, none of the staff members have any exceptional justification so he did some research and came up with a proposal for a compressed work week schedule. This would entail employees who chose such a schedule working ten-hour days for four days per week. Executive Director DiMaggio said he shared that proposal along with the other revisions to the Employee Handbook with all the employees. All three staff members expressed an interest in adopting the alternative work schedule. Executive Director DiMaggio stated the employees would have to fill out a form entitled "Request for Alternative Work Schedule", and he would have to approve it. The proposed language states that approval of an alternative work schedule is at the sole discretion of the Executive Director. This is because there are a lot of factors that go into the workforce necessary to be a productive work environment and to accomplish all the work the Board needs to accomplish. When Executive Director DiMaggio was speaking with the employees, he stated that he told them if the Board should approve the alternative work schedules, he would need an employee to be in the Board office to answer the phones from eight a.m. to five p.m. and that no more than two staff members could be off on a certain workday. If the Board approved this alternative work schedule language, certain employees would be working Monday through Thursday from seven a.m. to six p.m. and the other employee would be working Tuesday through Friday from seven a.m. to six p.m. Executive Director DiMaggio did research and found several articles that did a study with alternative work schedules with fifty-six different companies. The results of the study indicated that an alternative work schedule improved employee morale and employee retention. Executive Director DiMaggio stated that the current Board employees are hardworking and dedicated, and he does not believe there would be a work production issue. As far as Executive Director DiMaggio's work schedule, he stated he was willing to leave it up to the Board's discretion on what type of work schedule they would want him to work. The rest of the provisions of the proposed alternative work schedule policy deal with practical matters. For instance, there are provisions for if a holiday falls on the day an employee is scheduled off or if an employee takes a PTO day. There is also a possibility of doing a trial period for the alternative work schedule and when Executive Director DiMaggio discussed this with staff, it was with the

understanding that he, as Executive Director, would be the one who approves requests for alternative work schedules, and that he, as Executive Director, would be the one who can also disapprove or discontinue an alternative work schedule which would require the employee to return to the eight a.m. to five p.m. Monday through Friday work schedule.

Executive Director DiMaggio stated that he also added some substantive provisions to the drug policy in the Employee Handbook.

Executive Director DiMaggio also stated that the other major revisions to the Employee Handbook were to the overtime and the PTO policy. The Board, unlike the State of Nevada, has PTO which encompasses both annual leave and sick leave. The State on the other hand has both sick leave and annual leave and there is quite a significant difference between the two policies. The State allows employees one hundred and twenty hours of annual leave and one hundred and twenty hours of sick leave per year. The Board gives a total of one hundred and twenty hours to be split between annual leave and sick leave for an employee who has been with the Board for three years or less. Executive Director DiMaggio did not change the amount of PTO accrued, but only changed the amount of accrued PTO time that could be carried over year to year. Mr. DiMaggio stated that he had not reviewed the State employee handbook at the time he was making the revisions to our Employee Handbook and that is when he noticed there is quite a substantial difference between our policy and the state policy.

Dr. Perlotto stated the main concern is how we potentially would be changing our business model with the compressed schedule. Dr. Perlotto has looked at some of the data as well and it is supportive of a compressed work week schedule. Dr. Perlotto is not opposed to the idea of adding this as an option for Board employees, assuming it does not interfere with the business of the Board and there is somebody to answer the phone and the door during normal business hours of eight a.m. to five p.m. Monday through Friday. Dr. Perlotto wanted to know if the Board would consider doing a trial period with the compressed work week schedule to test it out or whether the Executive Director would be able to manage that task since the Executive Director would have the ability to grant, modify, or terminate this compressed work week privilege.

Executive Director DiMaggio stated in his opinion the latter works well because the Executive Director has the authority to modify or terminate a compressed work week schedule if it is not working out. Executive Director DiMaggio stated he explained to the employees that the Board would like to see a trial period and they are agreeable to it.

Dr. Perlotto made a motion to accept the compressed work week schedule with the condition that the Board institute a trial period to see whether this meets the Boards needs; seconded by Dr. McDermott. There being no further discussion, the Board unanimously approved to accept the alternative work week provisions in the Employee Handbook with the condition that there be a trial period instituted.

Dr. Perlotto stated that to her understanding the other State employees are getting more than total leave than the Board employees are getting. Dr. Perlotto wanted to know if it would make sense to move to the same system as the State with both annual leave and sick leave instead of PTO or if the Board wanted to stay with the same system.

Executive Director DiMaggio stated that if the Board adopted the State leave schedule, this would require the Board to figure out how to convert the existing PTO hours into annual leave hours and sick leave hours. The Board will also need to consider payout provisions. The State will only pay out sick leave to an employee after ten years of continuous service

and then only in excess of thirty hours. Right now, the Board pays your PTO out if you voluntarily resign.

Dr. Perlotto stated that the Board should look at the actual costs which would be involved in switching over to the annual leave and sick leave system used by the State. Transitioning from the old system to the new system may not be that difficult.

Dr. Perlotto made a motion to table the PTO policy pending further investigation and to approve the other revisions to the Employee Handbook; seconded by Dr. McDermott. There being no further discussion, the Board unanimously approved tabling the PTO policy pending further investigation and approving the other revisions to the Employee Handbook.

VIII. EXECUTIVE DIRECTOR'S REPORT by Frank DiMaggio

Executive Director Frank DiMaggio stated we have received many late license renewals and have had some issues dealing with the late fees. Licensing statistics show that licensing numbers are going up on a steady basis. As for the new proposed regulations pertaining to anesthesiologist assistants, those have been sent to the LCB for review as well as the proposed ten regulation deletions. As of this meeting, Executive Director DiMaggio does not know the status of either of those two regulatory items at the LCB, but it typically takes LCB some time to review such regulations and respond back to the Board.

Mr. DiMaggio said that we are still having some issues with Thentia, but they seem to be committed to working the issues out. Both Nikki from licensing and Clayton from discipline are glad to see the changes Thentia has made so far. Executive Director DiMaggio stated that the Board has gotten some complaints from licensees about Thentia's licensing system, but he suspects it has to do with the fact that we are no longer using paper license renewals and that licenses are not required to upload CME certificates.

Executive Director DiMaggio stated that the Board's financial reports are in the Board materials and if anyone has any questions, he will answer them.

Dr. Perlotto stated that historically sometimes Board members may struggle to get through their case assignments and reviewing cases and she wanted to check to see how the Board is doing as a group.

Executive Director DiMaggio stated that the Board is doing an excellent job of reviewing their cases. Typically, Executive Director DiMaggio will send an email asking for status updates approximately thirty to forty-five days after assigning a case to a Board member so that the Board member has sufficient time to review the case and to decide. There are a couple cases now that Executive Director DiMaggio has been working on and he has reached out to another State Board where the licensee primarily practices to see what that State Board did regarding the case and then he will supply that information to the investigating Board member.

IX. LEGAL REPORT (Discussion/For Possible Action) by Richard Dreitzer (Fennemore Craig, LLC) Board Counsel

Board Counsel Dreitzer stated that he just received an email from LCB with some questions regarding the anesthesiologist assistant regulations and will be reaching out to the Executive Director DiMaggio to answer those questions and to move that process forward. Mr. Dreitzer stated he had a good experience at the Federation of State Medical Board's Attorney Workshop, where he got to meet with the Board Counsel from all over the country. The issues our Board deals with and the types of cases that we are seeing are very typical of what's being seen in other Boards across the country. Regarding caseload, there is quite a bit

of drafting that he is doing right now, and one of the lengthier cases Mr. Dreitzer has handled is just about finished and he will be moving forward with that case. Mr. Dreitzer stated that he has met with Executive Director DiMaggio to talk about the other cases, and he has good direction on those.

Dr. Perlotto wanted to know how many cases the Board has at this point.

Mr. Dreitzer stated he believes there are about ten and he is halfway through that stack, so he suspects within sixty days the Board will see a whole flurry of them coming out.

X. *LEGISLATIVE UPDATE (Discussion/For Possible Action) by Susan Fisher, Board Government Affairs/Lobbyist*

Ms. Fisher of McDonald Carano stated that also on the phone for this meeting are Lindsay Knox, who is the senior vice president of government affairs and advocacy, and Cassidy Wilson, who is with government affairs at McDonald Carano. With regards to the anesthesiologist assistant regulations, the Nevada Medical Board of Examiners had submitted their regulation to LCB, and they have come back for final approval. The Nevada Medical Board of Examiners has decided to begin licensing anesthesiologist assistants even though their regulations are still in the regulatory process. The Nevada Medical Board of Examiners now has licensed two anesthesiologist assistants who will be with an anesthesiology group in Southern Nevada. Ms. Fisher asked Cassidy Wilson to go over the Southern Nevada Forum which is where all the Southern Nevada legislators joined together and are divided into groups to look at different legislative issues.

Ms. Wilson stated that the Southern Nevada Forum is a group of legislators who meet during the interim and are bipartisan. The group consists of different Chairs and Co-chairs of legislative committees in Carson City, and they work alongside the Las Vegas Chamber of Commerce. The Southern Nevada Forum has different committees that include healthcare, economic development, good governance, education, and transportation. Ms. Wilson stated that the last session there was a workplace violence bill for behavioral health technicians that was worked on through the forum. However, this meeting was a brainstorming session and that many different items were discussed, such as access to healthcare, behavioral health funding, Medicaid reimbursements, nurse licensure compacts, GME funding, and addiction treatment services. The Southern Nevada Forum will start to meet in March and will meet monthly until September or October.

Ms. Knox stated one other group is good governance and that mostly focused on local government. There was a broad discussion regarding getting rid of the silos that exist in state government. Ms. Knox stated that another discussion came up regarding AI and it is something that will be focused on a lot during this interim with the Southern Nevada Forum. The Governor's office is looking into AI as well.

XI. *ITEMS FOR FUTURE DISCUSSION/ACTION/UPCOMING AGENDA*

Dr. Perlotto requested placing an agenda item on the next Board meeting agenda for a proposed change to the Board meeting dates/times.

XII. *PRESIDENT'S REPORT on Board Business, Carla Perlotto, President*

- a. *Next Board Meeting date-* Dr. Perlotto stated she is requesting that the next Board meeting date be switched from March 12, 2024, to March 19, 2024, which is the third Tuesday of the month instead of the second Tuesday. The Board members agreed to move the Board meeting to March 19, 2024, at 5:30 p.m.

XIII. PUBLIC COMMENT

No public comments were received.

XIV. ADJOURNMENT (For Possible Action) Carla Perlotto, President

Dr. McDermott made a motion to adjourn the meeting; Seconded by Dr. Perlotto. There being no further discussion, the board approved adjourning the meeting.

Minutes approved by the Board at the March 19, 2024 Board Meeting.