

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
BOARD OF MEDICINE**

IN RE:

NEIL CHATTERJEE, MD

License No.: MD037882

Respondent

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AMENDED CONSENT ORDER

This matter comes before the District of Columbia Board of Medicine (the “Board” or “D.C. Board”) pursuant to the Health Occupations Revision Act (HORA). D.C. Official Code § 3-1201.01, *et seq.* (2016 Repl.). The HORA authorizes the Board to regulate the practice of medicine in the District of Columbia. The Board has broad jurisdiction to impose a variety of disciplinary sanctions upon a finding of a violation of the HORA. D.C. Official Code, § 3-1201.03; *Mannan v. District of Columbia Board of Medicine*, 558 A.2d 329, 333 (D.C. 1989). The Council of the District of Columbia, in amending the HORA, “intended to strengthen enforcement of its licensing laws.” *Davidson v. District of Columbia Board of Medicine*, 562 A.2d 109, 113 (D.C. 1989). The HORA “was designed to ‘address modern advances and community needs with the paramount consideration of protecting the public interest.’” *Joseph v. District of Columbia Board of Medicine*, 587 A.2d 1085, 1088 (D.C.1991) (*quoting* Report of the D.C. Council on Consumer and Regulatory Affairs on Bill 6-317, at 7 (November 26, 1985)) (emphasis added by court).

Background

The Respondent is licensed to practice medicine in New York, Virginia, and Washington, DC. Respondent was originally licensed in D.C on March 23, 2009, but allowed his license to lapse as he was not practicing in the District at that time. Respondent submitted an application for a new license on July 17, 2014, and received his license in to practice in November 2014 after entering into a Negotiated Settlement Agreement (NSA) with the Board.

The NSA required, *inter alia*, that Respondent refrain from the use of alcohol and other non-prescription drugs, enter into a contract with the Medical Society of the District of Columbia Physician's Health Program (MSDC-PHP), and comply with all treatment recommendations of the MSDC-PHP. The NSA requirements were based on Respondent's conviction for driving while under the influence of alcohol. In September 2019, Respondent was terminated from the MSDC-PHP for refusal to comply with a recommendation for inpatient treatment. Since that time, Respondent has continued with testing and therapy. Respondent has not practiced medicine clinically since August 2019, but has instead pursued another business opportunity based upon his medical training, experience and active license.

As a result of Respondent's failure to comply with the terms of the NSA, he was served with a Notice of Intent to take Disciplinary Action (NOI) in November 2020. Respondent and the Board entered into a Consent Order, effective August 5, 2021 that resolved the NOI. Among other conditions, Respondent was placed on probation. One of the requirements of his probation was:

Prior to the resumption of any clinical practice, Respondent shall submit to the Board for its approval a Re-entry Plan in accordance with the Board's Re-entry Policy. Respondent shall not begin any clinical practice without the approval of the Board.
(Consent Order, p. 6, ¶5).

Respondent has been working outside of the clinical arena but is now ready to return to clinical practice as the Medical Director of the Program of All-Inclusive Care ("PACE") in Washington

D.C. In accordance with the terms of probation, Respondent provided the Board with the name of his monitor, specifically his supervisor, Dr. Alan Abrams, and re-entry plans submitted by both Dr. Abrams and Respondent, in addition to information about Dr. Abrams' ongoing clinical practice. The Board approved the plans and the identification of Dr. Abrams as a monitor at its meeting on April 24, 2024. As a result, Respondent and the Board now agree to enter into this Amended Consent Order, which incorporates by reference the Conclusions of Law of the Consent Order of August 5, 2021. In accordance with the Re-entry Plan submitted by Respondent and his supervisor, Respondent shall ensure the following:

1. Dr. Abrams will review visits and notes in the Electronic Medical Records (EMR) of PACE participants seen Monday through Friday for a minimum of two weeks at which time he will re-evaluate Respondent's capacity to operate clinically independently. This will continue on a weekly basis until such time as Respondent demonstrates adequate fluency with clinical issues and documentation of those medical issues pertinent to PACE participants.
2. After Dr. Abrams has determined Respondent has demonstrated adequate fluency, he will audit the medical records of selected patient visits completed by Respondent on a weekly basis, and provide Respondent with a written assessment of clinical care and documentation. This will continue for a minimum of one month, and will continue as needed based on the assessment of Respondent's demonstration of clinical skills.
3. Dr. Abrams will be on-site a minimum of every other week for two days for at least one month to observe Respondent in practice at the PACE site and home visits.
4. Dr. Abrams will be available to Respondent at all times by phone for e-consults on any clinical questions which may arise, which will continue in Dr. Abrams' role as Chief Medical Officer (CMO), in an ongoing fashion.

5. PACE will support Respondent's completion of an online course in internal medicine and/or geriatric medicine to supplement the clinical oversight provided by Dr. Abrams. This course will be completed within six (6) months of the start of employment, and proof of completion will be provided to the Board.

Re-entry Plan to the Board and discussed his plans to go into practice focusing on substance use disorder treatments at its meeting on Feb. 22, 2022. As a result, Respondent and the Board now agree to enter into this Amended Consent Order, which incorporates by reference the Conclusions of Law of the Consent Order of August 5, 2021.

ORDER

ACCORDINGLY, based on the foregoing, it is by the District of Columbia Board of Medicine hereby,

ORDERED that Respondent's **PROBATION** shall continue for a period of not less than two (2) years from the date of execution of this Amended Consent Order (that is when both Respondent and the Board Chair have signed). The terms of the Probation are as follows:

1) In accordance with the Re-entry Plan submitted by Respondent and his supervisor,

Respondent shall ensure the following:

A. Dr. Abrams will review visits and notes in the Electronic Medical Records (EMR) of PACE participants seen Monday through Friday for a minimum of two weeks at which time he will re-evaluate Respondent's capacity to operate clinically independently. This will continue on a weekly basis until such time as Respondent demonstrates adequate fluency with clinical issues and documentation of those medical issues pertinent to PACE participants.

- B. After Dr. Abrams has determined Respondent has demonstrated adequate fluency, he will audit the medical records of selected patient visits completed by Respondent on a weekly basis, and provide Respondent with a written assessment of clinical care and documentation. This will continue for a minimum of one month and will continue as needed based on the assessment of Respondent's demonstration of clinical skills.
 - C. Dr. Abrams will be on-site a minimum of every other week for two days for at least one month to observe Respondent in practice at the PACE site and home visits.
 - D. Dr. Abrams will be available to Respondent at all times by phone for e-consults on any clinical questions which may arise, which will continue in Dr. Abrams' role as Chief Medical Officer (CMO), in an ongoing fashion.
 - E. PACE will support Respondent's completion of an online course in internal medicine and/or geriatric medicine to supplement the clinical oversight provided by Dr. Abrams. This course will be completed within six (6) months of the start of employment, and proof of completion will be provided to the Board.
 - F. Dr. Abrams shall submit a report to the Board on a quarterly basis detailing Respondent's performance and results of his record reviews and audits (described above), noting any issues in Respondent's practice and steps taken for improvement. After two satisfactory reports have been submitted, Respondent may petition the Board for the requirement for reporting from the monitor to be terminated.
- 2) Respondent shall notify the Board of any change in his employment status or monitor within ten calendar days of the change.
 - 3) Respondent shall be available to appear before the Board for a check-in interview at the Board's request. It is further

ORDERED that Respondent will refrain from the consumption of any alcohol or non-prescription drugs to include those contained in over-the-counter medications, herbal or health preparations, or drugs not prescribed by a treating physician for a legitimate medical need. Respondent may not self-prescribe himself any medications or recommend marijuana; and it is further

ORDERED that Respondent shall bear all costs affiliated with this Order; and it is further

ORDERED that Respondent may request termination of probation after two years;

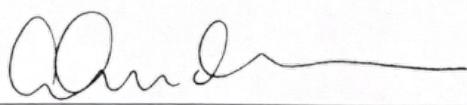
ORDERED, that Respondent shall comply with all laws, rules, and regulations of the District of Columbia; and it is further

ORDERED, that if Respondent fails to satisfactorily fulfill the terms of this Consent Order the D.C. Board may issue a notice of intent to take additional formal disciplinary action against Respondent's license; and it is further

ORDERED, that this is a public document.

DISTRICT OF COLUMBIA BOARD OF MEDICINE

6.11.2024
Date



By: Andrea Anderson, MD, FAAFP, MED
Chairperson

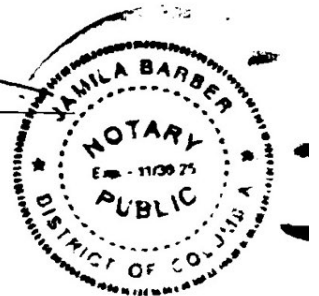
AGREEMENT OF RESPONDENT

By signing this public amended consent order, I agree to accept and abide by its terms. I acknowledge its validity and acknowledge that I have agreed to the terms set forth in this agreement. I fully acknowledge that by signing this consent order, I am waiving my right to confront witnesses, to give testimony, to call witnesses on my behalf, and to all other substantive and procedural protections provided by law. I also recognize that I am waiving my right to appeal any adverse ruling by the Board that might have followed any such hearing. By signing this amended consent order, I waive all such rights.

I have had the opportunity to review this document and to seek the advice of my own legal counsel. I choose to sign this amended consent order willingly and without reservation and am fully aware of its meaning and effect.

May 9, 2024
Date


Neil Chatterjee, MD
License No.: MD037882



Sworn to and subscribed before me this 9th day of MAY, 2024.


Notary Public

This Consent Order shall be deemed a public document and shall be distributed as appropriate.