

**STATE OF TENNESSEE
DEPARTMENT OF HEALTH**

IN THE MATTER OF:)	BEFORE THE TENNESSEE BOARD
)	OF MEDICAL EXAMINERS
CHRISTINE KASSER, M.D.,)	
RESPONDENT)	CASE NOS: 2021015341
)	2024021471
MEMPHIS, TENNESSEE)	
MEDICAL LICENSE NO. 19142)	

CONSENT ORDER

The Division of Health Related Boards of the Tennessee Department of Health (“Department”), by and through the Office of General Counsel, and Respondent Christine Kasser, M.D. (“Respondent”), respectfully move the Tennessee Board of Medical Examiners (“Board”) for approval of this Consent Order affecting Respondent’s medical license in the State of Tennessee.

The Board is responsible for the regulation and supervision of medical professionals licensed to practice in the State of Tennessee. *See Tennessee Medical Practice Act, Tennessee Code Annotated sections (“Tenn. Code Ann. §§”) 63-6-101, et seq.* It is the policy of the Board to require strict compliance with the laws of this State, and to apply the laws so as to preserve the quality of medical care provided in Tennessee. It is the duty and responsibility of the Board to enforce the Tennessee Medical Practice Act in such a manner as to promote and protect the public health, safety and welfare in every practicable way, including disciplining individuals who violate the provisions of Tenn. Code Ann. § 63-6-101, *et seq.* or the Rules and Regulations promulgated by the Board and recorded in the *Official Compilation Rules and Regulations of the State of Tennessee* (“Tenn. Comp. R. & Regs.”).

Respondent, by her signature to this Consent Order, waives the right to a contested case

hearing and any and all rights to judicial review in this matter. Respondent agrees that presentation to and consideration of this Consent Order by the Board for ratification and all matters divulged during that process shall not constitute unfair disclosure such that the Board or any of its members shall be prejudiced to the extent that requires their disqualification from hearing this matter should this Consent Order not be ratified. Likewise, all matters, admissions and statements disclosed or exchanged during the attempted ratification process shall not be used against Respondent in any subsequent proceeding unless independently entered into evidence or introduced as admissions.

Respondent expressly waives all further procedural steps and expressly waives all rights to seek judicial review of or to challenge or contest the validity of this Consent Order. Respondent understands that by signing this Consent Order, Respondent is allowing the Board to issue its order without further process. Respondent acknowledges that this is a formal disciplinary action and that the Department will comply with all of the public reporting obligations of the Health-Care Consumer Right to Know Act of 1998 (Tenn. Code Ann. §§ 63-51-101, *et seq.*). In the event that the Board rejects this Consent Order for any reason, it will be of no force or effect for either party.

I. STIPULATIONS OF FACT

1. Respondent has been at all times pertinent hereto licensed by the Board as a medical doctor in Tennessee, having been granted medical license number 19142 by the Board on August 18, 1988. Said license is currently scheduled to expire on February 28, 2025.
2. From at least January 2005 to the present, Respondent has practiced medicine and provided treatment to multiple patients at her medical practice, Chris Kasser, MD, in Memphis, Tennessee.

3. As ratified by the Board on July 19, 2017, Respondent entered into an Agreed Order in which she admitted to violations relating to her treatment of patients for chronic pain management and violations relating to her prescribing of controlled substances (the “2017 Agreed Order”).
4. In the 2017 Agreed Order, Respondent agreed to the following disciplinary terms:
 - a. A reprimand of her medical license;
 - b. A restriction against working in a pain management clinic or providing chronic pain management treatment;
 - c. Limits, including an overall decrease, on her opioid prescribing;
 - d. Continuing education coursework to be completed within calendar year 2017, including the three-day medical course entitled “Prescribing Controlled Drugs: Critical Issues and Common Pitfalls” offered at Vanderbilt University” and the three-day medical course entitled “Intensive Course in Medical Record Keeping” offered at Case Western Reserve University;
 - e. Payment of civil penalties totaling \$6,000.00 within 12 months of the issuance of an Assessment of Costs; and
 - f. Payment of the costs of investigating and prosecuting the disciplinary case up to a maximum of \$15,000.00 within 12 months of the issuance of an Assessment of Costs, and with payments to be made in equal monthly installments by the fifth day of each month until paid in full, with payments to commence the fifth day of the month immediately following the issuance of the Assessment of Costs.
5. As ratified by the Board on November 2, 2022, Respondent entered into an Agreed Order in which she admitted to violations relating to her failure to respond to a Department letter, sent pursuant to Tenn. Code Ann. § 68-1-128, notifying Respondent that she was listed in the top 20 prescribers of buprenorphine products for calendar year 2020 (the “2022 Agreed Order”).
6. In the 2022 Agreed Order, Respondent agreed to the following disciplinary terms:
 - a. A reprimand of her medical license;

- b. Payment of civil penalties totaling \$545.00 within 12 months of the issuance of an Assessment of Costs; and
 - c. Payment of the costs of investigating and prosecuting the disciplinary case up to a maximum of \$4,000.00 within 12 months of the issuance of an Assessment of Costs.
- 7. In the 2022 Agreed Order, Respondent also agreed that a violation of the 2022 Agreed Order shall constitute a separate violation, pursuant to Tenn. Code Ann. § 63-6-214(b)(2) and is grounds for further disciplinary action by the Board, including revocation of her license.
- 8. While Respondent has made partial payment, to date she has failed to pay the civil penalties and costs assessed under the 2017 Agreed Order and 2022 Agreed Order in full.
- 9. To date, Respondent has not completed the 30-day and 60-day follow up needed to complete the “Intensive Course in Medical Record Keeping” offered at Case Western Reserve University.
- 10. Respondent violated the terms of her 2017 Agreed Order and her 2022 Agreed Order.
- 11. The Department conducted an investigation of Respondent’s practice, which included the review of fifteen (15) of Respondent’s patient records.
- 12. The treatment Respondent provided included prescribing large doses of buprenorphine products, including Subutex and Suboxone, opioids, benzodiazepines, amphetamines, and other medications and controlled substances in amounts and/or for durations not medically necessary, advisable, or justified for a diagnosed condition.
- 13. Respondent inappropriately prescribed buprenorphine products, including Subutex and Suboxone, to patients for opioid dependence
- 14. Respondent prescribed Subutex (buprenorphine mono product), without the use of naloxone, to patients without sufficiently documenting a history of an adverse reaction or

hypersensitivity to naloxone. For example, Respondent designated her patients as being allergic to Suboxone yet provided no actual documentation or history of adverse reactions.

15. Respondent prescribed patients more than sixteen milligrams (16 mg) per day of buprenorphine or its therapeutic equivalent for more than thirty (30) consecutive days for treatment of opioid dependence, but Respondent failed to clearly document in each patient's medical record why the patient needed the higher dosage amounts of buprenorphine.
16. Respondent failed to document adequate support for diagnoses sufficient to justify the treatment rendered.
17. Respondent failed to sufficiently develop, document, and monitor treatment plans for patients.
18. Respondent prescribed controlled substances without an office visit. Many notes in the patients' records show that Respondent prescribed patients controlled substances, including narcotics and buprenorphine products, based solely on a patient's email or a phone visit.
19. Respondent failed to provide alternative modalities of treatment other than the prescription of buprenorphine products, narcotics, benzodiazepines, and other controlled substances and medication.
20. Respondent failed to document regular urine drug screens in her patients' charts, and Respondent failed to adequately counsel patients regarding anomalous urine drug screens.

II. GROUNDS FOR DISCIPLINE

The Stipulations of Fact stated above constitute violations of the following provisions of the Medical Practice Act, and the Rules promulgated therewith, such that grounds exist for discipline of Respondent's medical license, number 19142, pursuant to Tenn. Code Ann. § 63-6-214:

21. The facts stipulated in paragraphs 1 through 20, above, collectively constitute grounds for discipline pursuant to Tenn. Code Ann. § 63-6-214(b)(1), which establishes that the Board may discipline a medical doctor for:

Unprofessional, dishonorable or unethical conduct.

22. The facts stipulated in paragraphs 1 through 20, above, collectively constitute grounds for discipline pursuant to Tenn. Code Ann. § 63-6-214(b)(2), which establishes that the Board may discipline a medical doctor for:

Violation or attempted violation, directly or indirectly, or assisting in or abetting the violation of, or conspiring to violate any provision of this chapter or, any lawful order of the board issued pursuant thereto or any criminal statute of this state.

23. The facts stipulated in paragraphs 1 through 20, above, collectively constitute grounds for discipline pursuant to Tenn. Code Ann. § 63-6-214(b)(12), which establishes that the Board may discipline a medical doctor for:

Dispensing, prescribing or otherwise distributing any controlled substance or any other drug not in the course of professional practice, or not in good faith to relieve pain and suffering, or not to cure an ailment, physical infirmity or disease, or in amounts and/or for durations not medically necessary, advisable or justified for a diagnosed condition.

24. The facts stipulated in paragraphs 1 through 20, above, collectively constitute grounds for discipline pursuant to Tenn. Code Ann. § 63-6-214(b)(13), which establishes that the Board may discipline a medical doctor for:

Dispensing, prescribing or otherwise distributing to any person a controlled substance or other drug if such person is addicted to the habit of using controlled substances without making a bona fide effort to cure the habit of such patient.

25. The facts stipulated in paragraphs 1 through 20, above, collectively constitute grounds for disciplinary action pursuant to Tenn. Code Ann. § 33-2-403(h) and (l):

(h) By January 1, 2019, the commissioner of mental health and substance abuse services shall revise rules for nonresidential office-based opiate treatment facilities to be consistent with state and federal law and to establish:

(1) Standards for determining what constitutes a high dose of the opioid employed in treatment at a nonresidential office-based opiate treatment facility;

(2) Protocols for initiating or switching a patient at a nonresidential office-based treatment facility to a high dose of the opioids employed in treatment; and

(3) Protocols for initiating periodic prescriber-initiated-and-led discussions with patients regarding patient readiness to taper down or taper off the opioids employed in treatment.

.....

(l) A violation of a rule described in subsection (h) and (j) is grounds for disciplinary action against a practitioner licensed under title 63 by the board that licensed that practitioner.

26. The facts stipulated in paragraphs 1 through 20, above, collectively constitute grounds for disciplinary action pursuant to Tenn. Comp. R. & Regs. Rule 0880-2-.14 (6)(e), which authorizes disciplinary action against a Respondent who prescribes, orders, administers, or dispenses dangerous drugs or controlled substances without observing Board guidelines.

27. The facts stipulated in paragraphs 1 through 20, above, collectively constitute violations of Tenn. Code Ann. § 53-10-310(e):

(1) When prescribing a controlled substance, all healthcare practitioners, unless otherwise exempted under this part, shall check the controlled substance database prior to prescribing one (1) of the controlled substances identified in subdivision (e)(4) to a human patient at the beginning of a new episode of treatment, prior to the issuance of each new prescription for the controlled substance for the first ninety (90) days of a new episode of treatment, and shall check the controlled substance database for that human patient at least every six (6) months when that prescribed controlled substance remains part of the treatment. An authorized healthcare practitioner's delegate may check the controlled substance database on behalf of the healthcare practitioner. A 'new episode of treatment' means a prescription for a controlled substance that has not been prescribed by that healthcare practitioner within the previous six (6) months. . . .

(4) The controlled substances that trigger a check of the controlled substance database pursuant to subdivisions (e)(1) and (2) include, but are not limited to, all opioids and benzodiazepines. By rule, the commissioner, pursuant to § 53-10-311, may require a check of the database for additional Schedule II-V controlled substances that are identified by the committee or commissioner as demonstrating a potential for abuse.

28. The facts stipulated in paragraphs 1 through 20, above, collectively constitute violations of Tenn. Comp. R. & Regs. Rule 0880-2-.14 (7)(a):

Except as provided in subparagraph (b), it shall be a prima facie violation of T.C.A. § 63-6-214 (b) (1), (4), and (12) for a physician to prescribe or dispense any drug to any individual, whether in person or by electronic means or over the Internet or over telephone lines, unless the physician, or his/her licensed supervisee pursuant to appropriate protocols or medical orders, has first done and appropriately documented, for the person to whom a prescription is to be issued or drugs dispensed, all of the following:

1. Performed an appropriate history and physical examination; and
2. Made a diagnosis based upon the examinations and all diagnostic and laboratory tests consistent with good medical care; and
3. Formulated a therapeutic plan, and discussed it, along with the basis for it and the risks and benefits of various treatments options, a part of which might be the prescription or dispensed drug, with the patient; and
4. Insured availability of the physician or coverage for the patient for appropriate follow-up care.

29. The facts stipulated in paragraphs 1 through 20, above, collectively constitute violations of Tenn. Code Ann. § 53-11-311(b)(1):

(b)(1) Any prescription for buprenorphine mono or for buprenorphine without use of naloxone for the treatment of substance use disorder shall only be permitted to a patient who is:

(A) Pregnant;

(B) A nursing mother;

(C) Has a documented history of an adverse reaction or hypersensitivity to naloxone; or

(D) Directly administered the buprenorphine mono or buprenorphine without use of naloxone by a healthcare provider, acting within the healthcare provider's scope of practice, for the treatment of substance use disorder pursuant to a medical order or prescription order from a physician licensed under title 63, chapter 6 or 9; provided, however, that this subdivision (b)(1)(D) does not permit buprenorphine mono or buprenorphine without use of naloxone to be dispensed to a patient in a manner that would permit it to be administered away from the premises on which it is dispensed.

30. The facts stipulated in paragraphs 1 through 20, above, collectively constitute violations of Tenn. Code Ann. § 53-11-311(d):

(1) A prescriber who treats a patient with more than sixteen milligrams (16 mg) per day of buprenorphine or its therapeutic equivalent for more than thirty (30) consecutive days for treatment of opioid dependence shall clearly document in the patient's medical record why the patient needs the higher dosage amounts of buprenorphine. A prescriber who does not meet the requirements established in the manner described in subdivision (d)(2) and treats a patient with more than twenty milligrams (20 mg) per day of buprenorphine or its therapeutic equivalent for more than thirty (30) consecutive days for treatment of opioid dependence shall, to the extent possible, either consult with an addiction specialist meeting the requirements established in the manner described in subdivision (d)(2) or refer the patient to the addiction specialist for management of the patient's treatment plan. If a prescribing physician cannot make the required consultation or referral as outlined in this subsection (d), the reasons shall be set out in the medical record.

31. The facts stipulated in paragraphs 1 through 20, above, collectively constitute violations of Tenn. Comp. R. & Reg. Rule 0940-05-35-.09, which states the requirements for patients'

individualized treatment plans and best practices at a nonresidential office-based opiate treatment facilities.

32. The facts stipulated in paragraphs 1 through 20, above, collectively constitute violations of Tenn. Comp. R. & Reg. Rule 0940-05-35-.13, which states the requirements for patients' medication management at nonresidential office-based opiate treatment facilities.

III. POLICY STATEMENT

The Tennessee Board of Medical Examiners takes this action in order to protect the health, safety, and welfare of people in the State of Tennessee.

IV. ORDER

NOW THEREFORE, Respondent, for the purpose of avoiding further administrative action with respect to this cause, agrees to the following:

33. Respondent's Tennessee medical license, number 19142, shall be **VOLUNTARILY SURRENDERED** effective December 31, 2024. This action shall have the same effect as revocation of Respondent's license. Respondent shall not practice medicine in the State of Tennessee after December 31, 2024. Respondent further agrees not to apply for reinstatement of her Tennessee medical license after it has been surrendered.
34. During the period between ratification of this Consent Order and December 31, 2024, Respondent shall make efforts to find treatment accommodations for her existing patients. These efforts shall include referrals to other providers, weaning patients off prescribed medications where medically appropriate, and/or directly notifying patients of other

available treatment services in their geographic area, as well as any other reasonable efforts. Respondent shall provide the Department written status updates on her efforts to find accommodations for her patients by the 15th of each month until December 31, 2024. Respondent shall provide these status updates by email to disciplinary.coordinator@tn.gov.

35. During the period between ratification of this Consent Order and December 31, 2024, Respondent shall make payments of at least **Five Hundred Dollars (\$500.00)** per month toward the outstanding civil penalties and costs assessed under her previous Consent Orders. Said payments shall be due by the 15th of each month and shall be paid by submitting a **certified check, cashier's check, or money order** payable to the State of Tennessee by mail. All disciplinary terms submitted, including civil penalties and cost payments, must include Respondent's name and Case Nos. 2021015341 and 2024021471, on the instrument. All payments shall be mailed or delivered to:

**Disciplinary Coordinator
Tennessee Department of Health
665 Mainstream Drive, Second Floor
Nashville, TN 37243**

36. Respondent agrees that her failure to comply with the terms of paragraphs 34 and/or 35, above, shall constitute a violation of this Consent Order and shall subject her Tennessee medical license, number 19142, to automatic and immediate suspension without further process. If Respondent's license is so suspended, it shall remain suspended until the surrender and revocation is effected on December 31, 2024.
37. Respondent must pay the actual and reasonable costs of investigation and enforcement in this matter. These costs will be established by an Assessment of Costs prepared by counsel for the Department. The assessed costs shall not exceed **One Thousand Dollars**

(\$1,000.00) and shall be paid in full by December 31, 2024. Such costs shall include, but not be limited to, the following:

- (a) All costs absorbed by or assessed against the Board by the Department's Office of Investigations in connection with the prosecution of the matter including all investigator time, travel and lodging incurred during the prosecution;
- (b) All costs absorbed by or assessed against the Board by the Division of Health Related Boards for the use of the division facilities and personnel for prosecution of the matter;
- (c) All costs assessed against the Board for the appearance fees, transcripts, time, travel and lodging of administrative law judges and court reporters and witnesses required in the prosecution of the matter; and
- (d) All costs attributed to and assessed against the Board by the Department's Office of General Counsel in connection with the prosecution of the matter, including all attorney and paralegal time, travel and lodging incurred during the prosecution of the matter.

- 38. Respondent understands that this is a formal disciplinary action and will be reported to the National Practitioner Data Bank (N.P.D.B.) and/or similar agencies.
- 39. Each condition of discipline herein is a separate and distinct condition. If any condition of this Consent Order, or any application thereof, is declared unenforceable in whole, in part, or to any extent, the remainder of this Consent Order, and all other applications thereof, shall not be affected. Each condition of this Consent Order shall separately be valid and enforceable to the fullest extent permitted by law.

IV. NOTICE

40. Any and all civil penalties and costs shall be paid in full in accordance with time limitations set forth in paragraphs 35 and 37, above. Civil penalties and costs shall be paid by submitting a **certified check, cashier's check, or money order** payable to the State of Tennessee by mail. All disciplinary terms submitted, including civil penalties and cost payments, must include Respondent's name and Case Nos. 2021015341 and 2024021471, on the instrument. All payments can be mailed or delivered to:

**Disciplinary Coordinator
Tennessee Department of Health
665 Mainstream Drive, Second Floor
Nashville, TN 37243**

This **CONSENT ORDER** was approved by the Tennessee Board of Medical Examiners at a public meeting of the Board and signed this 31st day of July, 2024.



President
Tennessee Board of Medical Examiners

APPROVED FOR ENTRY:

Christine Kasser

Christine Kasser, M.D.
Tennessee Medical License No. 19142
Respondent

7/29/24

DATE

Gerard Dolan

Gerard Dolan
Senior Associate General Counsel
Office of General Counsel
Tennessee Department of Health
665 Mainstream Drive, 2nd Floor
Nashville, TN 37243
(615) 253-2525
Attorney for the Department

7/29/24

DATE

CERTIFICATE OF SERVICE

The undersigned hereby certifies that a true and correct copy of the foregoing has been served upon Respondent Christine Kasser, M.D., 5200 Park Avenue, Suite 102, Memphis, TN 38119, by certified mail number 9589 0710 5270 0707 9340 18, return receipt requested, by regular mail, with sufficient postage thereon to reach its destination, and by email to clkdoc@gmail.com.

This 31st day of July, 2024.



Gerard Dolan
Senior Associate General Counsel
Tennessee Department of Health