

FILED

SEP 15 2025

KS State Board of Healing Arts

BEFORE THE BOARD OF HEALING ARTS
OF THE STATE OF KANSAS

In the Matter of)	
Danielle B. Ciccarelli, M.D.)	Docket No.:25-HA00052
)	
Application for Reinstatement)	

ORDER OF REMAND

On August 8, 2025, the Kansas State Board of Healing Arts (“Board”) with due and proper notice, heard the matter of the application for reinstatement of license to practice medicine and surgery (“Application”) of Danielle B. Ciccarelli, M.D. (“Applicant”). Applicant appears in person and by counsel Samantha M. Fisher and Diane L. Bellquist. Matthew P. Gaus, Litigation Counsel for the Board, appears on behalf of the Board’s Disciplinary Panel # 40 (“DP#40”). Sherri Wattenbarger, President of the Board, appears with a lawfully convened Board. DP#40 members, Dr. Bradbury, Dr. DeGrado, Dr. Kuhlmann, and Dr. Sweet were recused.

After reviewing the agency record, hearing the statements and arguments of the parties, receiving evidence and considering all other matters in due course, the Board FINDS AND ORDERS the following: findings,

1. On or around March 31, 2025, Applicant submitted to the Board a reinstatement application requesting a reentry active license to practice medicine

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and surgery in Kansas. The application was deemed complete and filed with the Board on June 24, 2025. Respondent's Exhibit I.

2. The Board previously licensed Applicant to practice medicine and surgery in Kansas but cancelled her license for failure to renew on June 30, 2011.

3. Applicant has not practiced medicine since December 2005. Respondent's Exhibit I, at pp. 6-7)

4. Applicant was board certified by the American Board of Obstetrics and Gynecology ("ABOG"), which is a member board of the American Board of Medical Specialties ("ABMS"). This board certification lapsed in 2009. Respondent's Exhibit I, at pp. 30-31. Applicant testified that she is not board certified at this time.

Applicant is no longer is interested in practicing obstetrics.

5. From February 2022 through January 2025, Applicant engaged in education to prepare for board certification in Cardiometabolic and Integrative Medicine through the American Academy of Anti-Aging Medicine (A4M), however, Applicant advises the Board that in order to be certified, she must have an active license to practice medicine and surgery prior to completing the board certification process. Respondent's Exhibit I, at p. 7.

6. As part of Applicant's board certification preparation with A4M, Applicant testified that she completed a written exam **CONFIDENTIAL** an oral examination **CONFIDENTIAL**, and attended several conferences that included mock patient presentations. Applicant testified that she devoted over 1900 hours of her time to the

Integrative Medicine program, completed an additional GI continuing education module and 250 CME credits in the last two years.

7. Applicant acknowledged during her testimony that she has not provided to the Board any evaluation from A4M related to patient evaluations nor has the Board received any evaluation of Applicant's clinical competency from A4M in general.

8. Applicant submitted documentation of successful completion of the following continuing education hours: 18.50 AMA PRA Category 1 Credit on December 13, 2024 related to longevity medicine from The George Washington University School of Medicine; 20.50 AMA PRA Category 1 Credit related to Module II: Peptide Therapy Certification on February 13, 2025 from The George Washington University School of Medicine; 20.50 AMA PRA Category 1 Credit on February 13, 2025 related to Peptides Module I from The George Washington University School of Medicine; and 4.00 AMA PRA Category 1 Credits on April 2, 2025 related to Practical Approaches to Comprehensive Treatment of Pain from Pri-Med Institute. Respondent's Exhibit I.

9. With her Application, Applicant submitted a Proposed Re-Entry Plan as required by K.A.R. 100-6-6 for physician applicants who have not practiced the healing arts for the two-year period immediately preceding the filing of their application. Respondent's Exhibit I, at pp. 11-13, 56-58.

10. Applicant's Re-Entry Plan proposes Applicant she work under the supervision, monitoring, and education of Kansas licensed physician CONFIDENTIAL for a

period of three (3) months and two (2) weeks, confining her practice to the areas of Anti-Aging and Regenerative Medicine. *Id.*

11. DP#40 is opposed to Applicant's Proposed Re-entry Plan due to the significant time that has elapsed since Applicant's previous practice without a full clinical skills evaluation from the Center for Personalized Education for Professionals (CPEP), or other substantially similar evaluation that would provide additional information related to Applicant's strengths and weaknesses.

12. Except for a two-day clinical shadowing experience with Applicant's proposed supervising physician, **CONFIDENTIAL** the noted A4M board certification prefatory review, and the noted continuing education hours, Applicant presented no evidence of accredited postgraduate training, clinical fellowship training, or a clinical competency or skills evaluation or assessment since she stopped practicing in 2005.

13. **CONFIDENTIAL** did not appear before the Board.

14. Insufficient evidence exists at this time to evaluate the appropriateness of Applicant's Proposed Re-entry Plan.

15. No evidence is submitted about the Applicant's current strengths and weaknesses as required by K.A.R. 100-6-6(b)(2)

16. No evidence was offered that is sufficient to comply with the requirements of 100-6-6(b)(3)

17. Pursuant to K.A.R. 100-6-6(c), Applicant's time out of practice, her previous and intended areas of practice, and the number of years since Applicant has

completed graduate medical education require that any reentry plan length be in effect longer than the approximate three (3) month time frame proposed by Applicant.

The Board remands the matter for the parties to consider the following:

- a. A supervisory component of a proposed re-entry plan that is longer than Applicant's proposed approximate three (3) month time frame.
- b. An evaluation of basic medical skillsets by CPEP or another substantially similar program.
- c. Additional admissible information provided by the Applicant's proposed supervising physician related to the supervising physician's role and responsibilities and that confirms in detail the supervising physician's involvement and participation under any re-entry plan.

Pursuant to K.S.A. 77-527, the Board orders a remand of present case back to DP#40 for further proceedings consistent with the considerations and recommendations included within this order.

18. A remand provides the parties a full opportunity to submit further evidence consistent with the considerations and recommendations included within this order as well as an opportunity to file pleadings, objections, and motions consistent with K.S.A. 77-523(c) and K.S.A. 77-519.

A remand also is in accordance with K.S.A. 77-506(a), in the public's interest and will not substantially prejudice the rights of any party. **IT IS SO ORDERED.**

FOR THE KANSAS STATE BOARD OF HEALING ARTS

Susan Gile

Susan Gile
Executive Director

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CERTIFICATE OF SERVICE

I certify that a true copy of the foregoing was served this 15th of September 2025 by depositing the same in the United States Mail, first-class postage prepaid, and via email addressed as follows:

Danielle B. Ciccarelli, M.D.

CONFIDENTIAL

Applicant

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A copy was hand delivered to:

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And the original was filed with the office of the Executive Director:



Staff Signature