

**NEVADA STATE BOARD OF MASSAGE THERAPY**

**AGENDA ACTION SHEET**

**TITLE:** Application Review (Education and Administrative)

**MEETING DATE:** August 10, 2022

**APPLICANT:** Lei Wang

**REVIEW UNDER:** NRS 640C.700

**BACKGROUND INFORMATION:**

Ms. Wang's massage application is before you today for review that could not be approved administratively. Ms. Wang was previously scheduled on June 8, 2022, for an application review and was continued to August. Ms. Wang was before the Board for a background review on June 16, 2021, in which the background was preliminary denied based on NRS.640C.700(4)(6) and (9). Ms. Wang was arrested on October 17, 2017, for solicitation/engage in prostitution by Las Vegas Metropolitan Police Department while working at Beijing Massage. The case was dismissed after the diversion requirements were met or completed. On November 19, 2021, Ms. Wang was cited by Utah Division of Occupational and Professional Licensing (DOPL) for offering to perform massage on an undercover investigator for DOPL without having a Utah massage license while working at Sooth Massage in Sandy, Utah. Ms. Wang was fined \$500.00 which is currently unpaid at this time with a referral to a collection agency. Ms. Wang failed to disclose the unpaid citation issued by DOPL. Ms. Wang is requesting to be granted a license under NRS 640C.580 and is before you today for review under NRS 640C.700.

**ACTION:**

- Approved
- Denied – NRS 640C.700(1)(4)(9) and/or (11) and NAC 640C.410 (1)(a)(q)
- Probation – NRS 640C.700(1)(4)(9) and/or (11) and NAC 640C.410 (1)(a)(q)
- Tabled

**PROBATION CONDITIONS: Per NRS 640C.710 Options for Respondent:**

<input type="checkbox"/> A. Report all contact with law enforcement personnel within 48 hours after such contact occurs.	<input type="checkbox"/> B. Refrain from providing outcall services.
<input type="checkbox"/> C. Submit employment offers to the staff of the Board for review and approval.	<input type="checkbox"/> D. Submit to a random drug test at respondent's expense.
<input type="checkbox"/> E. Complete an ethics course of _____ CEU hours within 90 calendar days of licensure.	<input type="checkbox"/> F. Submit to the Board a complete set of Fingerprints bi-annually/annually at licensee's expense.
<input type="checkbox"/> G. Take any other action that the Board deems appropriate -	

**Required for Respondent:**

Cooperate fully with Board staff to administrate term of probation.	Responsible for all administrative fees incurred by the Board as a result of their probation compliance
Attend Probation Orientation	Comply with all laws governing massage therapy

Notify any change in address, phone number, establishment or employment to the Board office within 10 calendar days per NAC.640C.085(3)

Take any combination of the actions set forth in paragraphs (a) through (g), inclusive.

Board Meeting Application review:

Summary of Lei Wang arrests/charges:

2/2/2022 – Utah Division of Occupational and Professional Licensing (DOPL) posted on the National Practitioner Data Bank, that Ms. Wang had been given a cease and desist. During an investigation on November 19, 2021, Ms. Wei was cited for offering to give a full body massage on DOPL investigator. When asked to show her Utah massage license, did not have one. Ms. Wang was cited and given a citation. The citation 101486 for \$500.00 is currently unpaid and have been forwarded to a collection agency. Documents included.

1/6/2022 – Submitted application for a massage license while having retained Kirk Kennedy as legal counsel. According to a letter from Kirk Kennedy, he indicates the record from LVMPD has been sealed. Background received on January 24, 2022, reflects the solicitation arrest.

11/19/2021 – Offered to perform massage at 9351 S. 1300 E. Sandy, UT 84094 located at Sooth Massage. Cited by investigator for not having a Utah massage license.

6/16/2021 – Went before the NSBMT Board for a background review prior to application. It was motioned to preliminary deny the application based on NRS.640C.700(4)(6) and (9).

7/30/2019 - Application was denied administratively by NSBMT for NRS.640C.700(8) – failure to respond to requests. Application was incomplete with the following missing items: photo, completed application, official transcripts, diploma and background had expired on April 30, 2019.

9/7/2018 – Submitted application for a massage license with NSBMT.

10/17/2017 – Ms. Wang was arrested by LVMPD for one count of Solicitation/engage in prostitution. According to documents received by LVMPD, XX and Ms. Wang were working at Beijing Massage in Las Vegas. Undercover officers asked XX for a half hour massage for \$50.00. U/C officer provided XX with a \$100.00 dollar bill in which time, she directed him to a room and told him to get undressed and that she would bring back his change. Few minutes later XX went back to the room and began a massage on his neck, back, buttocks and legs. When completed with my back, XX told him to lay on back. Once on U/C back XX touched his penis and in plain English asked if she could masturbate U/C penis, if U/C wanted her to suck his dick (Fellatio). U/C asked if she could suck his dick in which time XX states in English that it would cost him \$100.00. U/C agreed, and XX told me that she wants money up front. U/C then gave her \$100.00 for her to suck his dick. U/C then asked for another girl, in which time XX told me that XX would get one for me. A few minutes later XX introduced U/C to Lei Wang. Once in the room U/C then asked how much for a blow job from each girl. Ms. Wang stated in English that it would be \$100.00 for a blow job (fellatio). XX and Ms. Wang were arrested for solicitation/engage in prostitution. Ms. Wang accepted a plea deal or diversion, and charges were later dismissed after the completion of diversion.

**NRS 640C.700 Grounds for refusal to issue license or for disciplinary action.** The Board may refuse to issue a license to an applicant, or may initiate disciplinary action against a holder of a license, if the applicant or holder of the license:

1. Has submitted false, fraudulent or misleading information to the Board or any agency of this State, any other state, a territory or possession of the United States, the District of Columbia or the Federal Government;
3. Has been convicted of a crime involving violence, prostitution or any other sexual offense, a crime involving any type of larceny, a crime relating to a controlled substance, a crime involving any federal or state law or regulation relating to massage therapy, reflexology or structural integration or a substantially similar business, or a crime involving moral turpitude;
4. Has engaged in or solicited sexual activity during the course of practicing massage, reflexology or structural integration on a person, with or without the consent of the person, including, without limitation, if the applicant or holder of the license:
  - (a) Made sexual advances toward the person;
  - (b) Requested sexual favors from the person; or
  - (c) Massaged, touched or applied any instrument to the breasts of the person, unless the person has signed a written consent form provided by the Board;
9. Has, in the judgment of the Board, engaged in unethical or unprofessional conduct;

11. Has been disciplined in another state, a territory or possession of the United States or the District of Columbia for conduct that would be a violation of the provisions of this chapter or any regulations adopted pursuant thereto if the conduct were committed in this State;

(Added to NRS by [2005, 1130](#); A [2009, 899, 2579](#); [2015, 2187](#); [2017, 1462](#))

Prepared by Tereza Van Horn, Executive Assistant



**Nevada State Board of Massage Therapy**

1755 E. Plumb Lane Suite 252  
Reno, NV 89502  
Phone (775) 687-9955  
Fax (775) 786-4264

Email: [nvmessagebd@lmt.nv.gov](mailto:nvmessagebd@lmt.nv.gov)  
Website: <http://massagetherapy.nv.gov>

**Massage Therapy Application**

Structural Integration Practitioner  **Massage Therapist**  Reflexologist

Type or print legibly all portions of this application. Incomplete applications will not be processed.

**Section 1: Personal Information**

Applicant Name: Last Wang First Lei Middle Initial

List all other names previously or currently being used by you:

Residence address (do not list post office boxes or mailbox drop addresses):  
Street

Previous address (if less than 1 year):  
Street City State Zip

Mailing address (if different than the residence address):  
Street or PO Box same City State Zip

Social Security Number: Date of Birth: Place of Birth China

Home Phone: N/A Cell Phone: Business Phone: N/A Gender: Male  Female

Business Name: N/A

Business Address:  
Street City State Zip

Email Address:

Indicate the appropriate selection, which address you would prefer to be public knowledge. Home  Mailing  Business

Do you want to be excluded from the public mailing list? (Select one - You will still receive Board notifications) Yes  No

**Section 2: Child Support Information**

Mark the appropriate response (failure to mark one of the three will result in denial of your application):

- I am NOT SUBJECT to a court order for the support of a child.
- I am SUBJECT to a court order for the support of one or more children and am in compliance with the order or am in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount pursuant to the order.
- I am SUBJECT to a court order for the support of one or more children and am NOT in compliance with the order or am NOT in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount pursuant to the order.

Paid \$ QB For Office Use Only: Date Sent Tracking

**Section 3: Licensure Information**

List ALL jurisdictions/states in which you have ever been licensed as a Massage Therapist, Reflexologist and/or Structural Integrationist. Please attach another sheet of paper if you need more room.

\* A Certified Statement from State Licensing Authority must be completed for each state where you have held a license.

Check here if you have never been licensed in any state jurisdiction.

Check here if you are actively licensed in any state or jurisdiction.

Jurisdiction/ State	License Number	Year Issued (YYYY)	Expiration Date (MM/DD/YY)

**Section 4: Massage Training and Education -- All massage, reflexology or structural education must be listed below. (Failure to disclose all education could result in an application denial)**

Request official transcripts from the registrar of your school(s) and have them mailed directly to the Nevada State Board of Massage Therapy.

A certificate of completion (diploma) will need to be submitted for each massage, reflexology or structural integration program you completed.

Name of School	City and State	Years From and To (YYYY-YYYY)	Hours Completed
Fuzuba School of Massage	Las Vegas, NV	2020	550

**Section 5: National Exam Information -- All massage, reflexology or structural exams must be listed below. (Failure to disclose all exams taken could result in an application denial)**

MBLEX  NCETM  NCETMB  CESI  ITEC  ARCB  IIR  NCBTMB-R

Official Score Report must be sent to our office directly from the Federation of State Massage Therapy Boards, NCBTMB, CESI, ITEC, ARCB, IIR or NCBTMB-R.

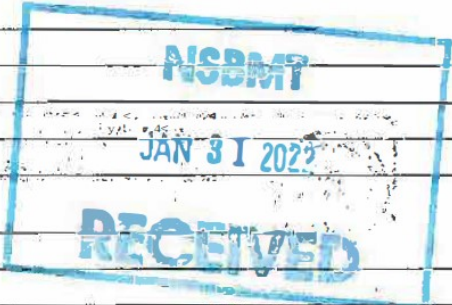
The Score Report given to you when the test was taken will not be accepted.

Where Taken (City/State)	Date Taken (MM/DD/YY)	Expiration Date (MM/DD/YY) If applicable
Las Vegas, NV	7/22/2020	N/A



You must answer all of these questions by checking the appropriate "Yes" or "No" box.  
 If a conviction and/or criminal offense has been pardoned, dismissed, expunged or your record has been sealed you must answer yes.

<b>Section 6: Application Screening Questions (use additional sheets of paper if needed)</b>	
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	1. Have you ever had any disciplinary proceedings instituted against you relating to your license to practice massage, reflexology or structural integration? If yes, please provide the following information for each occurrence: (*required)  *Date of revocation/suspension/surrender/ or any other disciplinary action (MM/DD/YYYY): _____ *Licensing agency/jurisdiction that took action: _____ *Name and address of employer/supervisor: _____ _____ *Reason for action: _____  *Date of revocation/suspension/surrender/ or any other disciplinary action (MM/DD/YYYY): _____ *Licensing agency/jurisdiction that took action: _____ *Name and address of employer/supervisor: _____ _____ *Reason for action: _____
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	2. Are you currently a party to any pending litigation related to the practice of massage therapy, reflexology or structural integration? If yes, please indicate whether you are a plaintiff <input type="checkbox"/> or defendant <input type="checkbox"/> and describe the nature of the litigation. (Attach a separate sheet of paper)
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	3. Are you currently or have you ever been required to register as a Sex Offender? (Tier I, II or III) If so, please explain (Use additional paper if necessary) _____ _____
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	4. Have you been accused of, arrested for, engaged in or solicited sexual activity during the course of practicing massage, reflexology, or structural integration on a person, with or without the consent of the person, including, without limitation, if you were an applicant or holder of a license: (a) Made sexual advances toward the person; (b) Requested sexual favors from the person; or (c) Massaged, touched or applied any instrument to the breasts of the person, unless the person had signed a written consent form provided by the Board;  If yes, fill in the following with complete and accurate information for each accusation or arrest: (required)  *Date of charge/offense (MM/DD/YYYY): _____ *Name and address of law enforcement agency: _____ _____ *Charge: _____ *Disposition: _____  *Date of charge/offense (MM/DD/YYYY): _____ *Name and address of law enforcement agency: _____ _____ *Charge: _____ *Disposition: _____



If you have answered "Yes" to any of the questions above, you **MUST** include:

1. A written narrative describing the incident(s), the circumstances that led up to the incident(s) and the outcome of the incident(s) for each accusation or arrest.
2. Receipts for all fines or penalties showing that they have been paid for each accusation or arrest. You need to contact the court or the licensing agency.
3. Dispositions from the court(s) you appeared before regarding the arrest dates.

# Affidavit of Applicant / Authorization of Release

I certify that I am the person described and identified in this application.

I have answered all the questions truthfully and completely, and any documents that I have provided in support of my application are, to the best of my knowledge, accurate.

I certify that I have not had any undisclosed disciplinary proceedings instituted against me relating to my license to practice massage, reflexology or structural integration and I have disclosed or have not been arrested or convicted, for any crime involving violence, prostitution or any other sexual offense.

I authorize all institutions or organizations, including educational institutions and organizations, employers (past and present), business and professional associations (past and present) and all governmental agencies and municipalities (local, state, federal and foreign) to release to the Nevada State Board of Massage Therapy any information, files or records required by the Nevada State Board of Massage Therapy in connection with processing this application.

I understand that furnishing false or misleading information or failing to furnish required information on this application may be cause for the denial, suspension or revocation of my license to practice massage therapy, structural integration or reflexology in the State of Nevada.

Signature of Applicant: Lei Wang Date: 1/24/22

State of Nevada County of Clark

Signed and sworn to before me this 24 day of January 2022

Lei Wang who personally appeared before me.

[Signature] Notary Public Signature 4/27/23 Notary commission expiration date

(Official Stamp)







**Nevada State Board of Massage Therapy**

1755 E. Plumb Lane Suite 252

Reno, NV 89502

Phone (775) 687-9955

Fax (775) 786-4264

Email: [nvmassagebd@lmt.nv.gov](mailto:nvmassagebd@lmt.nv.gov)

Website: <http://massagetherapy.nv.gov>

The Nevada State Board of Massage Therapy is required by State Law to report veteran information annually. If this section applies to you, please complete the following information.

Structural Integration Practitioner     Massage Therapist     Reflexologist

**Nevada Veteran Data**

Are you currently active or a spouse of an active service member?  Yes  No

Are you currently licensed in any state or jurisdiction?  Yes  No

Have you ever served in the military?  Yes  No

If Yes, check all that apply:

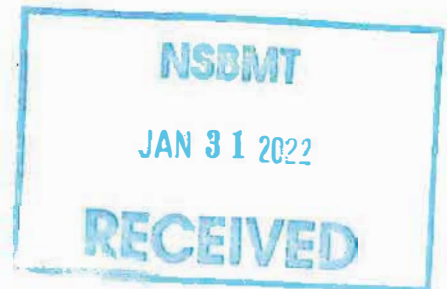
**Branch(es) of Service:**

<input type="checkbox"/> Army/Army Reserve	<input type="checkbox"/> Marine Corps/Marine Corps Reserve
<input type="checkbox"/> Navy/Navy Reserve	<input type="checkbox"/> Air Force/Air Force Reserve
<input type="checkbox"/> National Guard	<input type="checkbox"/> Coast Guard/Coast Guard Reserve

**Military Occupation Specialty/Specialties:** \_\_\_\_\_

**Date(s) of Service:** From \_\_\_\_\_ (DD/MM/YYYY) To \_\_\_\_\_ (DD/MM/YYYY)

If you are a veteran and have been licensed by another jurisdiction you may qualify for license by endorsement. Please read NRS 640C.426.





Nevada Department of  
**Public Safety**  
 Fingerprint Background Waiver



As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing. These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulations (CFR), 50.12, among other authorities.

1. You must be notified by Nevada State Board of Massage Therapy *(name of requesting agency)* that your fingerprints will be used to check the criminal history records of the FBI and the State of Nevada.
2. Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.
3. Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI and/or the Central Repository for Nevada Records of Criminal History may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.
4. Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI and/or Central Repository for Nevada Records of Criminal History, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.
5. If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the FBI criminal history record. The procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at, 28 CFR 16.34 provides for the proper procedure to do so.

Applicant:	
_____	_____
<i>Initial</i>	<i>Date</i>

JAN 31 2022

RECEIVED

- 6. If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <https://www.fbi.gov/services/cjis/identity-history-summary-checks> and <https://www.edo.cjis.gov>.
- 7. If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI by submitting a request via <https://www.edo.cjis.gov>. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)
- 8. You have the right to expect that officials receiving the results of the fingerprint-based criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal or state statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.
- 9. I hereby authorize Nevada State Board of Massage Therapy (name of requesting agency), to submit a set of my fingerprints to the Nevada Department Public Safety, Records Bureau for the purpose of accessing and reviewing State of Nevada and FBI criminal history records that may pertain to me.
- 10. I hereby release from liability and promise to hold harmless under any and all causes of legal action, the State of Nevada, its officer(s), agent(s) and/or employee(s) who conducted my criminal history records search and provided information to the submitting agency for any statement(s), omission(s), or infringement(s) upon my current legal rights. I further release and promise to hold harmless and covenant not to sue any persons, firms, institutions or agencies providing such information to the State of Nevada on the basis of their disclosures. I have signed this release voluntarily and of my own free will.

A reproduction of this authorization for release of information by photocopy, facsimile or similar process, shall for all purposes be as valid as the original.

In consideration for processing my application I, the undersigned, whose name and signature voluntarily appears below; do hereby and irrevocably agree to the above.

Applicant's Name: Wang Lei  
 PLEASE PRINT Last Name First Name Middle

Applicant's Signature: Lei Wang  
 Date: 1/29/22

Agency Account #: \_\_\_\_\_  
Agency Representative: Buckingham Kimberly  
 PLEASE PRINT Last Name First Name Middle

Agency Representative Signature: Kimberly Buckingham  
 Date: 3/2/22



**Transcript**  
 3884 Schilff Dr.  
 Las Vegas, NV 89103

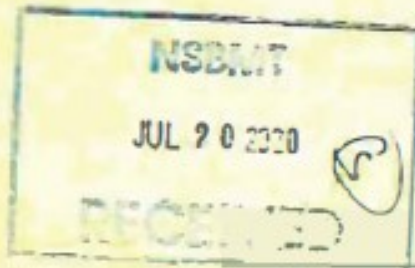
Student: Lei Wang SSN: Gender: Female Birth Date: Start Date: 12/06/2019 Graduation Date: 07/06/2020	Grade: 3.08 Total Earned Hours: 550
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FUZUBA 12/2019 Class		NV Massage Training Program 550-Hr		GPA: 3.08	
Course	Marks	Grade	Credits	Earned	
1219 Unit A: Anatomy, Physiology, & Kinesiology	86	B	125	125	
1219 Unit B: Theory and Practice of Massage	88	B+	220	220	
1219 Unit C: Other Modalities of Massage Therapy		B-	125	125	
1219 Unit D: Pathology for Massage Therapists	82	B-	40	40	
1219 Unit E: Standards of Professional Practice	92	A-	40	40	
ITEC Massage 17863		I	0		
<b>Total Credits:</b>				<b>550</b>	

Grading Scale				
97-100 = A+	93-96 = A	90-92 = A-	87-89 = B+	83-86 = B
80-82 = B-	77-79 = C+	73-76 = C	70-72 = C-	66-69 = F



	<b>Notes</b> -Grade points are for comparison purposes only -ITEC scores are reported separately	<b>Signature of the Registrar</b>  
	Not official without school seal IN ACCORDANCE WITH THE FAMILY EDUCATIONAL ACT OF 1974, THIS RECORD CANNOT BE RELEASED TO A THIRD PARTY WITHOUT THE CONSENT OF THE STUDENT	



## **Certificate of Graduation**

I certify that that Ms. Lei Wang, having successfully completed the 550 hour Professional Practice of Therapeutic Massage training program, is hereby awarded the Certificate of Graduation this sixth day of July, 2020 with all the rights and responsibilities thereto pertaining .



*Nathan O'Hara*  
Nathan O'Hara, Ph.D.  
Director

119349/2132/119317/120169 Lei Wang - E119349

Level 3 Diploma in Holistic Massage (603/4097/6) - 2132

Pass

10/08/2020 Fu Zu Ba School of Massage and Reflexology (XS00377)





**KIRK T. KENNEDY**

**ATTORNEY AT LAW**

*Licensed in Nevada since 1993*

815 S. Casino Center Blvd.,  
Las Vegas, NV 89101

Phone: (702) 385-5534  
Facsimile: (702) 385-1869  
Email: [ktkennedylaw@gmail.com](mailto:ktkennedylaw@gmail.com)

January 27, 2022



Nevada State Board of Massage Therapy  
1755 E. Plumb Lane, Ste. 252  
Reno, NV 89502

Re: Application of Lei Wang

Dear Board:

Please be advised that I am Counsel for Ms. Lei Wang and I am assisting with her application. Regarding the application, please note that Ms. Wang received an Order Sealing Records from the Las Vegas Justice Court which effectively sealed her 2017 arrest for soliciting prostitution in Las Vegas Justice Court case number 17M26102X. That prior criminal case resulted in a dismissal by the Court. The record sealing order was filed in the Las Vegas Justice Court on November 3, 2021, in case number 21S-0462.

Based on the foregoing, she has answered in the negative regarding the question in Section 6 as to prior arrests for this type of activity. Under Nevada law, Ms. Wang's sealed record, though disclosed now by this letter, should not be used or considered as a factor in her application process. Thank you.

Yours truly,

  
Kirk T. Kennedy, Esq.



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Website: <http://massagetherapy.nv.gov>

May 4, 2022

Lei Wang

Re: Notice of meeting of the Nevada State Board of Massage Therapy to consider your character, alleged misconduct, competence, or physical or mental health.

Dear Ms. Wang:

In connection with your Application Review, the Nevada State Board of Massage Therapy (Board) may consider your character, alleged misconduct, competence or physical or mental health at its meeting on June 8, 2022. There will be no physical location for this meeting. Participants can join the meeting via Zoom. The meeting will begin at 9:00 a.m:

Zoom sign-in available at 8:30 a.m.

Register in advance:

<https://us06web.zoom.us/j/86823524551?pwd=ZkJEWhDRWsOQWNYSWZvRm5tY0w5dz09>

Meeting ID: 868 2352 4551

Password: 854386

The meeting is a public meeting. You are not required to attend; however, attendance is recommended. Pursuant to NAC 640C.070 your completed investigation results may be discussed. You may choose to have an attorney or other representative of your choosing present during the meeting, present written evidence, provide testimony, present witnesses relating to your character, alleged misconduct, professional competence, or physical or mental health. Please be aware you are one of many agenda items, and the Board may take items out of order. The meeting may last until 4:30 p.m.

If the Board determines it necessary, after considering your character, alleged misconduct, professional competence, or physical or mental health whether in a closed meeting or open meeting, it may take administrative action against you at this meeting. This informational statement is in lieu of any notice that may be required pursuant to NRS 241.034. This notice is provided to you under NRS 241.033.

In the event you need an interpreter, please provide one at your own expense.

If you have any questions, please feel free to contact the office at (775) 687-9955.

Sincerely,

A handwritten signature in blue ink, appearing to read "Sandra J. Anderson, for".

Sandra J. Anderson  
Executive Director

**COPY**

9489 0090 0027 6421 4192 67



[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

9. Background Review Request per NRS 622.085 Lei Wang. (For Discussion and Possible Action)

Lei Wang was present and represented by legal counsel Kirk Kennedy. Interpretation services were provided by Wai Mei Borgel.

Legal counsel addressed the Board noting that Ms. Wang's prior history did not automatically disqualify her for licensure.

Tereza VanHorn provided the written Background Review Request to the Board for Lei Wang. Ms. Wang is requesting a background review based on NRS 622.085. Ms. Wang was arrested for solicitation/engage in prostitution on October 17, 2017, by Las Vegas Metropolitan Police Department.

Motioned by Elisabeth Barnard to preliminarily deny based on NRS 640C.700 (4)(6) and (9) based on the information that we have before us today June 16, 2021, seconded by Karen Kramberg. Motioned carried unanimously.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Lei Wang

November 5, 2020

Nevada State Board of Massage Therapy  
1755 E Plumb Lane Suite 252  
Reno, NV 89502



Dear Ms. Van Horn,

This letter is made in response to your October 8, 2020 letter re: Disposition of Record. In the letter, the Nevada State Board of Massage Therapy asked me to provide the following documents in support of my application: 1) a written narrative of the circumstances leading up to and the outcome of the incident on October 17, 2017; 2) receipts of all fines or penalties showing that they have been paid; and 3) disposition from the court I appeared at regarding the October 17, 2017 incident. The Board also asked me to comply with Board Staff for all requested documents, this topic will be address separately.

With respect to my narrative of the circumstances leading up to and the outcome of the incident on October 17, 2017, here is what had occurred. On October 17, 2017 I was working at a massage parlor known as Beijing Massage. This massage parlor is located at the intersection of Spring Mountain Road and South Jones Boulevard, and it currently closed. On the night in question, I was asked by my boss/supervisor to go into another room. When I arrived in the room, I saw my boss/supervisor talking to another individual, a client. The two had a lengthy conversation in English; I did not understand any of it because my English was not very good. Nevertheless, I stood in the room, waiting until I was needed. After the two had finished their conversation, my boss/supervisor hurried out of the room, I did not know why she had left. Before I had time to react, numerous individual in police uniform rushed in and arrested me. Fast forward to a couple of month, I appeared in front of the court regarding my arrest. While I do not understand the entire procedure that had occurred up until that point, I know that my case was dismissed after paying some fees.

With respect to the Board's request to submit receipts for all fines or penalties showing that fines have paid, please see the court minute and Disposition Notice and Judgment that are attached to this letter as exhibits. Based on those records, I did not pay any fines for this incident; the only thing I paid for was bond for my bail, which was subsequently ordered to be forfeited. Please see the court minutes and LVMPD record attached to this letter for further information.

With respect to the ultimately disposition of the case, the case was dismissed. Please see both the court minutes and LVMPD record attached to this letter for verification of this disposition.

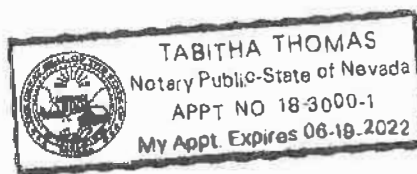

Hopefully my letter and the explanations contained herein helps the Board better understand the circumstances surrounding the incident on October 17, 2017. Please contact me if there are any further confusion regarding this or any other matter. I eagerly await a positive disposition for my application to the Nevada State Board of Massage Therapy.

Sincerely,

Lei Wang  
Lei Wang



State of Nevada  
County of Clark  
This instrument was acknowledged  
before me by Lei Wang  
on November 6, 2020





State of Utah  
 Department of Commerce  
 Division of Occupational and Professional Licensing  
 ATTN: Citation Coordinator  
 160 East 300 South  
 P.O. Box 146741  
 Salt Lake City, Utah 84114-6741

Referred for Collection

Date 2/4/2022

Amount \$ 500

Telephone: (801) 530-6528

Fax: (801) 530-6511

Website: www.dopl.utah.gov

101486

# CITATION

ISSUED TO: <u>Lei Wang</u>		CASE#: <u>131210</u>	
PROFESSION: <u>Massage Unlicensed</u>	LICENSE#: <u>NONE</u>		
DOB:	DL#:	SSN/EIN#:	
BUSINESS ADDRESS: <u>9351 S 1300 E</u>	CITY: <u>Sandy</u>	STATE: <u>Utah</u>	ZIP: <u>84094</u>
BUSINESS PHONE:	BUSINESS EMAIL:		
HOME ADDRESS:	CITY:	STATE:	ZIP:
HOME PHONE:	HOME EMAIL:		
LOCATION OF OFFENSE: <u>9351 S 1300 E, Sandy Utah 84094</u>			
OFFENSE CODE	DATE OF OFFENSE: <u>11 / 19 / 2021</u>	DATE ISSUED: <u>11 / 29 / 2021</u>	
	DESCRIPTION		
<u>58-1-501(1)(a)</u>	<u>Practicing or engaging in, representing oneself to be practicing or engaging in or attempting to practice any occupation or profession requiring relicensure under this title.</u>		
REMARKS: <u>On November 19, 2021, Baca responded to 9351 S 1300 E, Sandy Utah 84094 to perform license checks. Baca was greeted at the frontdoor by an Asian Female, later identified as Lei Wang, Wang asked Baca if he was there for a massage. Baca replied "yes and will you be performing the massage?" Wang responded, "Yes, I give good massage." Baca pointed to a reflexology sign near the front, and Wang asked, "You want foot or Full Body Massage?" Baca said "Full Body massage, and your are going to do it, right?" Wang said "Yes, follow me." Baca identified himself as a DOPL Investigator, and asked Weng to produce a valid State of Utah, Massage License. Ms. Wang suddenly said she could only understand Chinese. Baca confirmed Ms. Wang does not posses a State of Utah Massage License.</u>			
PERSON SERVED: <u>United States Postal Service</u>		SERVED BY: <u>Mark D. Baca</u>	
<input checked="" type="checkbox"/> FINE \$ <u>500.00</u>	<input checked="" type="checkbox"/> CEASE AND DESIST ORDER		
I ACKNOWLEDGE RECEIPT OF THIS CITATION AND CERTIFY THAT I HAVE READ AND UNDERSTAND THE RIGHTS ADVISEMENT CONTAINED BELOW AND HAVE BEEN PROVIDED A NOTICE OF RESPONSE.		I CERTIFY THAT THE INFORMATION IN THIS CITATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.	
<u>USPS Michael</u> RECIPIENT'S SIGNATURE		<u>11 / 29 / 2021</u> DATE	<u>Mark D. Baca</u> INVESTIGATOR'S SIGNATURE

READ CAREFULLY:

1. If you wish to contest this citation at a hearing, you must notify the Division in writing within 20 calendar days of receipt. The hearing will be conducted according to Title 63 C, Chapter 4.
2. If you do not contest the citation within 20 calendar days of receipt, the citation will become a final order of the Division and is not subject to further agency review.
3. Failure to comply with a final order of the Division is a Class A misdemeanor. The Division may refuse to issue or renew or may suspend, revoke, or place on probation a license you hold or apply for.

DIVISION COPY

9339 S 1300 E



S 1300 E

All

Street View & 360°

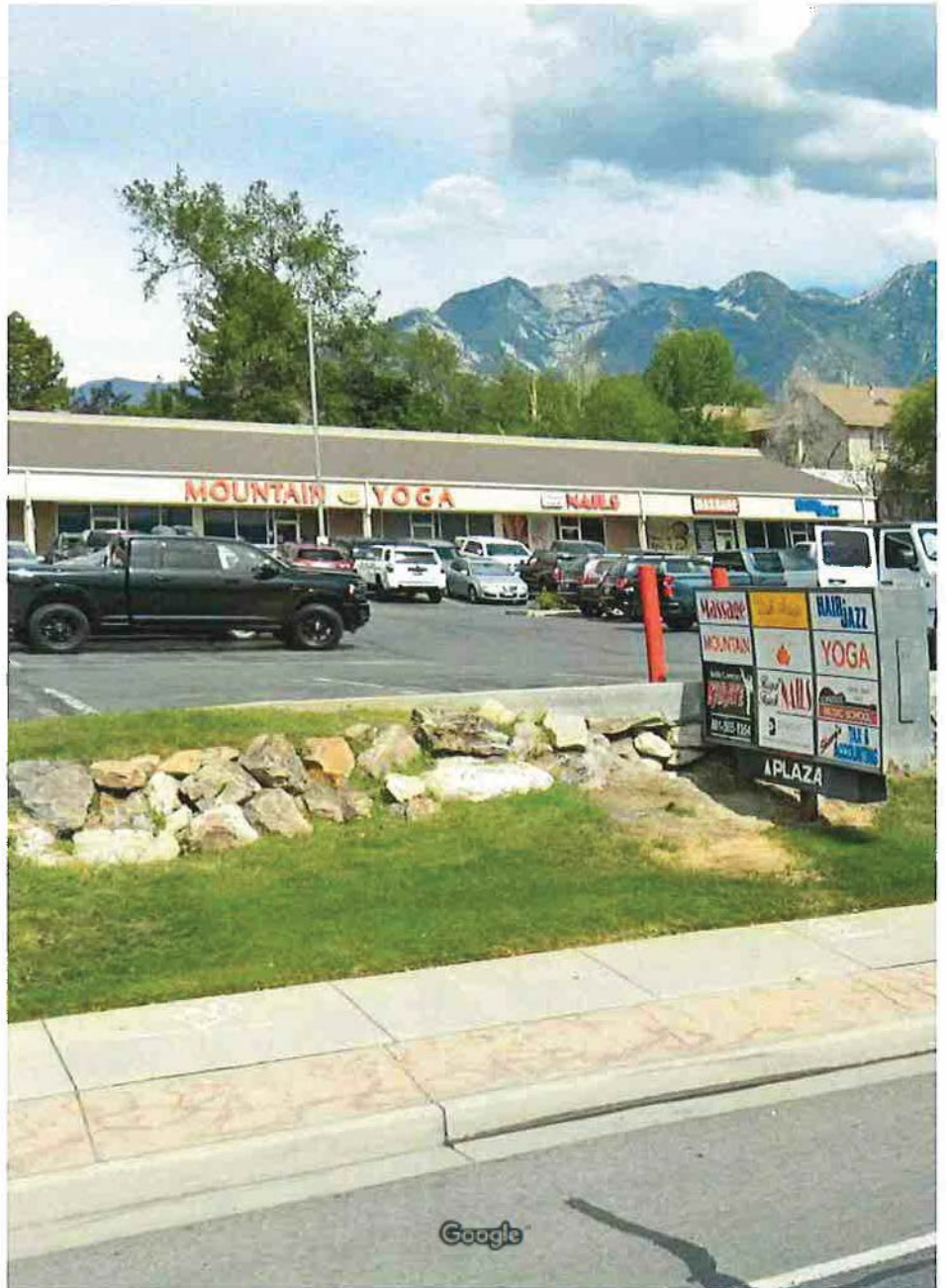


Image capture: Jun 2021 ©2022 Google

Sandy, Utah

Google

Street View - Jun 2021

Google Maps Soothing message

Rating Hours All filters

Soothing message  
3.8 (12)  
Massage therapist · 9351 S 1300 E  
Open · Closes 10PM · (801) 888-1906

"I don't recall being here, but it must have been that soothing I guess."

4.4 (14)

No reviews

5.0 (3)

5.0 (17)

4.2 (51)

#1159

3.2 (46)



Directions

Directions

Directions

Website

Directions

Website

Directions

Website

Directions

Website

Directions

Soothing message

3.8 ★★★★★ 12 reviews

Message therapist

Directions Save Nearby Send to phone Share

9351 S 1300 E, Sandy, UT 84094

Open · Closes 10PM

Menu  
soothing.grouppayless.com

(801) 888-1906

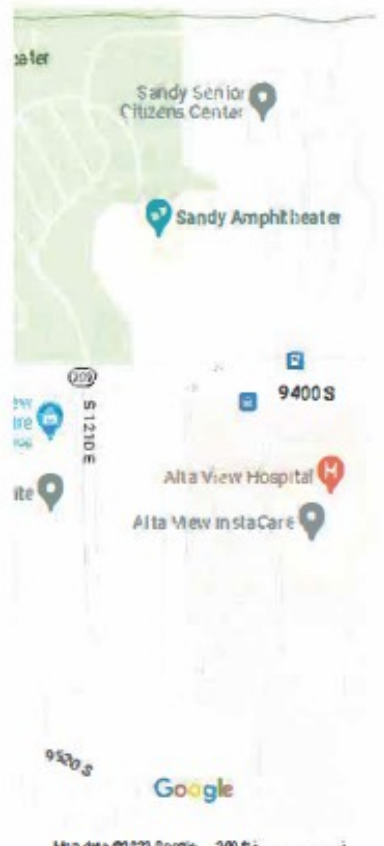
H4 JX+G4 Sandy, Utah

Claim this business

Suggest an edit

Add missing information

Popular times Fridays





[HOME](#) / ACTIONS

# Agency & Disciplinary Actions

\$ PAY FINE

leiwang

SEARCH

## LEI WANG

▼ — 0

### ACTIONS

NO DISCIPLINARY ACTIONS, OR NO DISCIPLINARY ACTIONS WITHIN THE TIME FRAME ESTABLISHED IN UTAH CODE 63G-4-106 & 107\*\*

### CITATIONS

NO CITATIONS, OR NO CITATIONS WITHIN THE TIME FRAME ESTABLISHED IN UTAH CODE 63G-4-106 & 107\*\*

### ▼ UNLICENSED

#### ACTIONS

NO DISCIPLINARY ACTIONS, OR NO DISCIPLINARY ACTIONS WITHIN THE TIME FRAME ESTABLISHED IN UTAH CODE 63G-4-106 & 107\*\*

#### CITATIONS

▼ Citation 101486

Violation: Unauthorized Practice

Issue: 11/29/2021

Status: Fine Assessed - Collections

Amount: \$500

Paid: NO



National Practitioner Data Bank  
 Health Resources and Services Administration  
 U.S. Department of Health and Human Services  
 P.O. Box 10832  
 Chantilly, VA 20153-0832  
<https://www.npdb.hrsa.gov>

DCN: 5500000189894413  
 Process Date: 05/03/2022  
 Page: 1 of 1  
 WANG, LEI  
 For authorized use by:  
 NEVADA STATE BOARD OF MASSAGE  
 THERAPY

## WANG, LEI - ONE-TIME QUERY RESPONSE

### A. SUBJECT IDENTIFICATION INFORMATION (Recipients should verify that subject identified is, in fact, the subject of interest.)

Practitioner Name: WANG, LEI  
 Date of Birth: Gender: FEMALE  
 Home Address:  
 Social Security Number:  
 License: MESSAGE THERAPIST, NO LICENSE  
 Professional School(s):

### B. QUERY INFORMATION

Statutes Queried: Title IV; Section 1921; Section 1128E  
 Query Type: This is a One-Time query response. Your organization will only receive future reports on this practitioner if another query is submitted.  
 Entity Name: NEVADA STATE BOARD OF MASSAGE THERAPY (DBID ending in ...94)  
 Authorized Submitter: TEREZA VANHORN, EXECUTIVE ASSISTANT, (775) 687-9953

### C. SUMMARY OF REPORTS ON FILE WITH THE DATA BANKS OF 05/03/2022

The following report types have been searched:

Medical Malpractice Payment Report	No Reports	Health Plan Action(s):	No Reports
State Licensure or Certification Action	Yes, See Below	Professional Society Action(s):	No Reports
Exclusion or Debarment Action(s):	No Reports	DEA/Federal Licensure Action(s):	No Reports
Government Administrative Action(s):	No Reports	Judgment or Conviction Report(s):	No Reports
Clinical Privileges Action(s):	No Reports	Peer Review Organization Action(s):	No Reports

### UTAH DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENCING

STATE LICENSURE OR CERTIFICATION

Basis for Action: - PRACTICING WITHOUT A LICENSE

Initial Action: - CEASE AND DESIST Date of Action: 02/02/2022  
 - PUBLICLY AVAILABLE FINE/MONETARY PENALTY  
 DCN: 5500000185670325

### NEVADA STATE BOARD OF MASSAGE THERAPY

STATE LICENSURE OR CERTIFICATION

Basis for Action: - VIOLATION OF FEDERAL OR STATE STATUTES, REGULATIONS OR RULES - CONDUCT EVIDENCING ETHICAL UNFITNESS - SEXUAL MISCONDUCT

Initial Action: - DENIAL OF INITIAL LICENSE Date of Action: 01/20/2021  
 DCN: 5500000171326817

----- Unabridged Report(s) Follow -----





National Practitioner Data Bank  
 Health Resources and Services Administration  
 U.S. Department of Health and Human Services  
 P.O. Box 10832  
 Chantilly, VA 20153-0832  
<https://www.npdb.hrsa.gov>

DCN: 5500000185670325  
 Process Date: 02/02/2022  
 Page: 1 of 3  
 WANG, LEI  
 For authorized use by:  
 NEVADA STATE BOARD OF MASSAGE  
 THERAPY

**WANG, LEI**

**UTAH DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENCING**

**STATE LICENSURE OR CERTIFICATION ACTION      Date of Action: 02/02/2022**

**Initial Action**

**Basis for Initial Action**

-CEASE AND DESIST  
 -PUBLICLY AVAILABLE FINE/MONETARY PENALTY

- PRACTICING WITHOUT A LICENSE

**A. REPORTING ENTITY**

Entity Name: UTAH DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENCING  
 Address: 160 E BROADWAY FL 4  
 City, State, Zip: SALT LAKE CITY, UT 84111-2305  
 Country:  
 Name or Office: DAVE TAYLOR  
 Title or Department: COMPLIANCE UNIT  
 Telephone: (801) 530-6214  
 Entity Internal Report Reference: 101486  
 Type of Report: INITIAL

**B. SUBJECT IDENTIFICATION INFORMATION (INDIVIDUAL)**

Subject Name: WANG, LEI  
 Other Name(s) Used:  
 Gender: FEMALE  
 Date of Birth:  
 Organization Name:  
 Work Address:  
 City, State, ZIP:  
 Organization Type:  
 Home Address:  
 City, State, ZIP:  
 Deceased: NO  
 Federal Employer Identification Numbers (FEIN):  
 Social Security Numbers (SSN):  
 Individual Taxpayer Identification Numbers (ITIN):  
 National Provider Identifiers (NPI):  
 Professional School(s) & Year(s) of Graduation: UNKNOWN (2022)  
 Occupation/Field of Licensure: MESSAGE THERAPIST  
 State License Number, State of Licensure: NO LICENSE, UT  
 Drug Enforcement Administration (DEA) Numbers:  
 Unique Physician Identification Numbers (UPIN):  
 Name(s) of Health Care Entity (Entities) With Which Subject is Affiliated or Associated (Inclusion Does Not Imply Complicity in the Reported Action):  
 Business Address of Affiliate:  
 City, State, ZIP:  
 Nature of Relationship(s):



National Practitioner Data Bank  
 Health Resources and Services Administration  
 U.S. Department of Health and Human Services  
 P.O. Box 10832  
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DCN: 5500000185670325  
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 Page: 2 of 3  
 WANG, LEI  
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 NEVADA STATE BOARD OF MASSAGE  
 THERAPY

**C. INFORMATION REPORTED**

Type of Adverse Action: STATE LICENSURE OR CERTIFICATION  
 Basis for Action: PRACTICING WITHOUT A LICENSE (25)  
 Name of Agency or Program That Took the Adverse Action Specified in This Report: UTAH DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENCING  
 Adverse Action Classification Code(s): CEASE AND DESIST (1151)  
 PUBLICLY AVAILABLE FINE/MONETARY PENALTY (1173)  
 Date Action Was Taken: 02/02/2022  
 Date Action Became Effective: 02/02/2022  
 Length of Action: INDEFINITE

Total Amount of Monetary Penalty, Assessment and/or Restitution: \$ 500.00

Is the subject automatically reinstated after the adverse action period is completed?:

Description of Subject's Act(s) or Omission(s) or Other Reasons for Action(s) Taken and Description of Action(s) Taken by Reporting Entity:

On November 19, 2021, Baca responded to 9351 S 1300 E, Sandy Utah 84094 to perform license checks. Baca was greeted at the front door by an Asian Female, later identified as Lei Wang, Wang asked Baca if he was there for a massage. Baca replied "yes and will you be performing the massage?" Wang responded, "Yes, I give good massage." Baca pointed to a reflexology sign near the front, and Wang asked, "You want foot or Full Body Massage?" Baca said "Full Body massage, and your are going to do it, right?" Wang said "Yes, follow me." Baca identified himself as a DOPL Investigator, and asked Wang to produce a valid State of Utah, Massage License. Ms. Wang suddenly said she could only understand Chinese. Baca confirmed Ms. Wang does not posses a State of Utah Massage License.

Subject identified in Section B has appealed the reported adverse action.

**D. SUBJECT STATEMENT**

If the subject identified in Section B of this report has submitted a statement, it appears in this section.

**E. REPORT STATUS**

Unless a box below is checked, the subject of this report identified in Section B has not contested this report.

- This report has been disputed by the subject identified in Section B.
- At the request of the subject identified in Section B, this report is being reviewed by the Secretary of the U.S. Department of Health and Human Services to determine its accuracy and/or whether it complies with reporting requirements. No decision has been reached.
- At the request of the subject identified in Section B, this report was reviewed by the Secretary of the U.S. Department of Health and Human Services and a decision was reached. The subject has requested that the Secretary reconsider the original decision.



National Practitioner Data Bank  
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P.O. Box 10832  
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**DCN:** 5500000185670325  
**Process Date:** 02/02/2022  
**Page:** 3 of 3  
WANG, LEI  
**For authorized use by:**  
NEVADA STATE BOARD OF MASSAGE  
THERAPY

At the request of the subject identified in Section B, this report was reviewed by the Secretary of the U.S. Department of Health and Human Services. The Secretary's decision is shown below:

Date of Original Submission: 02/02/2022  
Date of Most Recent Change: 02/02/2022

**This report is maintained under the provisions of:** Section 1921

The information contained in this report is maintained by the National Practitioner Data Bank for restricted use under the provisions of Section 1921 of the Social Security Act, and 45 CFR Part 60. All information is confidential and may be used only for the purpose for which it was disclosed. Disclosure or use of confidential information for other purposes is a violation of federal law. For additional information or clarification, contact the reporting entity identified in Section A.

**END OF REPORT**



**Nevada State Board of Massage Therapy**

1755 E. Plumb Lane Suite 252

Reno, NV 89502

Phone (775) 687-9955

Fax (775) 786-4264

Email: [nvmassagebd@lmt.nv.gov](mailto:nvmassagebd@lmt.nv.gov)

Website: <http://massagetherapy.nv.gov>

July 5, 2022

Lei Wang  
C/O Kirk T. Kennedy  
815 S. Casino Center Blvd.  
Las Vegas, NV 89101

Re: Notice of meeting of the Nevada State Board of Massage Therapy to consider your character, alleged misconduct, competence, or physical or mental health.

Dear Ms. Wang:

In connection with your Application Review, the Nevada State Board of Massage Therapy (Board) may consider your character, alleged misconduct, competence or physical or mental health at its meeting on August 10, 2022. There will be no physical location for this meeting. Participants can join the meeting via Zoom. The meeting will begin at 9:00 a.m:

Zoom sign-in available at 8:30 a.m.

Register in advance:

<https://us06web.zoom.us/j/82173853899?pwd=K3dVNDh1Y09jYnBJZ3oxQkFTSkdtUT09>

Meeting ID: 821 7385 3899

Password: 788395

Dial by your location

+1 253 215 8782 US (Tacoma)

+1 346 248 7799 US (Houston)

+1 669 900 6833 US (San Jose)

+1 301 715 8592 US (Washington DC)

+1 312 626 6799 US (Chicago)

+1 929 205 6099 US (New York)

Meeting ID: 821 7385 3899

Passcode: 788395

The meeting is a public meeting. You are not required to attend; however, attendance is recommended. Pursuant to NAC 640C.070 your completed investigation results may be discussed. You may choose to have an attorney or other representative of your choosing present during the meeting, present written evidence, provide testimony, present witnesses relating to your character, alleged misconduct, professional competence, or physical or mental health. Please be aware you are one of many agenda items, and the Board may take items out of order. The meeting may last until 4:30 p.m.

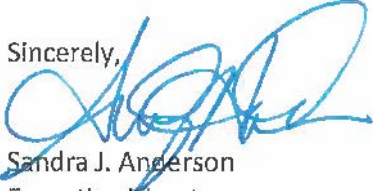
If the Board determines it necessary, after considering your character, alleged misconduct, professional competence, or physical or mental health whether in a closed meeting or open meeting, it may take administrative action against you at this meeting. This informational statement is in lieu of any notice that may be required pursuant to NRS 241.034. This notice is provided to you under NRS 241.033.

**COPY**

In the event you need an interpreter, please provide one at your own expense.

If you have any questions, please feel free to contact the office at (775) 687-9955.

Sincerely,



Sandra J. Anderson  
Executive Director

9489 0090 0027 6447 6114 47

COPY