



**Department
of Health**

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D., J.D.
Commissioner

LISA J. PINO, M.A., J.D.
Executive Deputy Commissioner

May 4, 2021

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Christopher Alleva, P.A.

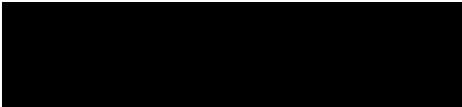

Re: License No. 020425

Dear Mr. Alleva:

Enclosed is a copy of the New York State Board for Professional Medical Conduct (BPMC) Order No. 21-089. This order and any penalty provided therein goes into effect May 11, 2021.

Please direct any questions to: Board for Professional Medical Conduct, Riverview Center, 150 Broadway, Suite 355, Albany, New York 12204, telephone # 518-402-0846.

Sincerely,


Michael S. Jakubowski, M.D.
Interim Executive Secretary
Board for Professional Medical Conduct

Enclosure

cc: Amy Kulb, Esq.
Jacobson, Goldberg & Kulb, LLP.
585 Stewart Avenue
Garden City, New York 11530

NEW YORK STATE DEPARTMENT OF HEALTH
STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT

BPMC No. 21-089

**IN THE MATTER
OF
CHRISTOPHER ALLEVA, P.A.**

**CONSENT
ORDER**

Upon the application of (Respondent) Christopher Alleva, P.A. in the attached Consent Agreement and Order, which is made a part of this Consent Order, it is

ORDERED, that the Consent Agreement, and its terms, are adopted and

it is further

ORDERED, that this Consent Order shall be effective upon issuance by the Board,

either

by mailing of a copy of this Consent Order, either by first class mail to Respondent at the address in the attached Consent Agreement or by certified mail to Respondent's attorney, OR

upon facsimile transmission to Respondent or Respondent's attorney,

whichever is first.

SO ORDERED.

DATE: 5/03/2021


THOMAS T. LEE, M.D.
Interim Chair
State Board for Professional Medical Conduct

NEW YORK STATE DEPARTMENT OF HEALTH
STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT

IN THE MATTER
OF
CHRISTOPHER ALLEVA, P.A

CONSENT
AGREEMENT

Christopher Alleva, P.A., represents that all of the following statements are true:

That on or about November 15, 2016, I was licensed to practice as a physician assistant in the State of New York and issued License No. 020425 by the New York State Education Department.

My current address is



and I will advise the Director of the Office of Professional Medical Conduct of any change of address.

I understand that the New York State Board for Professional Medical Conduct (Board) has charged me with one or more specifications of professional misconduct, as set forth in a Statement of Charges, marked as Exhibit "A", attached to and part of this Consent Agreement.

I assert that I cannot successfully defend against at least one act of misconduct alleged, in full satisfaction of the charges against me, and agree to the following penalty:

Pursuant to N.Y. Pub. Health Law § 230-a(1), I shall be subject to a Censure and Reprimand.

I further agree that the Consent Order shall impose the following conditions:

That Respondent shall comply with each and every penalty imposed by this Order pursuant to N.Y. Pub. Health Law § 230-a.

That Respondent shall only practice as a physician assistant in a setting approved by the Director of the Office of Professional Medical Conduct. This condition shall remain in effect as long as Respondent remains licensed as a physician assistant in New York.

That for a period of three years from the Order's effective date, subject to the tolling provisions set forth below, Licensee shall be subject to additional conditions set forth as "Practice Conditions" enumerated in Exhibit "B", which is attached to and a part of this agreement.

That Respondent shall remain in continuous compliance with all requirements of N.Y. Educ Law § 6502 including but not limited to the requirements that a licensee shall register and continue to be registered with the New York State Education Department (except during periods of actual suspension) and that a licensee shall pay all registration fees. Respondent shall not exercise the option provided in N.Y. Educ. Law § 6502(4) to avoid registration and payment of fees. This condition shall take effect 120 days

after the Consent Order's effective date and will continue so long as Respondent remains a licensee in New York State; and

That Respondent shall provide the Director, Office of Professional Medical Conduct (OPMC), Riverview Center, 150 Broadway, Suite 355, Albany, New York 12204-2719, with the following information, in writing, and ensure that this information is kept current: a full description of Respondent's employment and practice; all professional and residential addresses and telephone numbers within and outside New York State; and all investigations, arrests, charges, convictions or disciplinary actions by any local, state or federal agency, institution or facility. Respondent shall notify OPMC, in writing, within 30 days of any additions to or changes in the required information. This condition shall take effect 30 days after the Order's effective date and shall continue at all times until Respondent receives written notification from the Office of Professional Medical Conduct, Physician Monitoring Program, that OPMC has determined that Respondent has fully complied with and satisfied the requirements of the Order, regardless of tolling; and

That Respondent shall cooperate fully with the Office of Professional Medical Conduct (OPMC) in its administration and enforcement of this Consent Order and in its investigations of matters concerning Respondent. Respondent shall respond in a timely manner to all OPMC requests for written periodic

verification of Respondent's compliance with this Consent Order.

Respondent shall meet with a person designated by the Director of OPMC, as directed. Respondent shall respond promptly and provide all documents and information within Respondent's control, as directed. This condition shall take effect upon the Board's issuance of the Consent Order and will continue so long as Respondent remains licensed in New York State.

I stipulate that my failure to comply with any conditions of this Consent Order shall constitute misconduct as defined by N.Y. Educ. Law § 6530(29).

I agree that, if I am charged with professional misconduct in future, this Consent Agreement and Order shall be admitted into evidence in that proceeding.

I ask the Board to adopt this Consent Agreement.

I understand that if the Board does not adopt this Consent Agreement, none of its terms shall bind me or constitute an admission of any of the acts of alleged misconduct; this Consent Agreement shall not be used against me in any way and shall be kept in strict confidence; and the Board's denial shall be without prejudice to the pending disciplinary proceeding and the Board's final determination pursuant to the N.Y. Pub. Health Law.

I agree that, if the Board adopts this Consent Agreement, the Chair of the Board shall issue a Consent Order in accordance with its terms. I agree that this Consent Order shall take effect upon its issuance by the Board, either by mailing of a copy of the Consent

Order by first class mail to me at the address in this Consent Agreement, or to my attorney by certified mail, OR upon facsimile transmission to me or my attorney, whichever is first. The Consent Order, this agreement, and all attached Exhibits shall be public documents, with only patient identities or other confidential information, if any, redacted. As public documents, they may be posted on the Department's website. OPMC shall report this action to the National Practitioner Data Bank and the Federation of State Medical Boards, and any other entities that the Director of OPMC shall deem appropriate.

I stipulate that the proposed sanction and Consent Order are authorized by N.Y. Pub. Health Law §§ 230 and 230-a, and that the Board and OPMC have the requisite powers to carry out all included terms. I ask the Board to adopt this Consent Agreement of my own free will and not under duress, compulsion or restraint. In consideration of the value to me of the Board's adoption of this Consent Agreement, allowing me to resolve this matter without the various risks and burdens of a hearing on the merits, I knowingly waive my right to contest the Consent Order for which I apply, whether administratively or judicially, I agree to be bound by the Consent Order, and I ask that the Board adopt this Consent Agreement.

I understand and agree that the attorney for the Department, the Director of OPMC and the Chair of the Board each retain complete discretion either to enter into the proposed agreement and Consent Order, based upon my application, or to decline to do so. I further understand and agree that no prior or separate written or oral communication can limit that discretion.

DATE 4/26/21



CHRISTOPHER ALLEVA, P.A.
RESPONDENT

The undersigned agree to Respondent's attached Consent Agreement and to its proposed penalty, terms and conditions.

DATE: 4/26/21


AMY KULB, ESQ.
Attorney for Respondent

DATE: 4/27/21


COURTNEY BERRY
Associate Counsel
Bureau of Professional Medical Conduct

DATE: 5/3/2021


FOR: PAULA M. BREEN
Director
Office of Professional Medical Conduct

NEW YORK STATE DEPARTMENT OF HEALTH
STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT

IN THE MATTER
OF
CHRISTOPHER ALLEVA, P.A.

STATEMENT
OF
CHARGES

Christopher Alleva, P.A., the Respondent, was authorized to practice as a physician assistant in New York State on or about November 15, 2016, by the issuance of license number 020425 by the New York State Education Department.

FACTUAL ALLEGATIONS

A. On or about May 2, 2018, Respondent failed to render and/or note appropriate care and treatment to Patient A.

SPECIFICATION OF CHARGES

FIRST SPECIFICATION

GROSS NEGLIGENCE

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(4) by practicing the profession of medicine with gross negligence on a particular occasion as alleged in the facts of the following:

1. Paragraph A.

SECOND SPECIFICATION

FAILURE TO MAINTAIN RECORDS

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(32) by failing to maintain a record for each patient which accurately reflects the evaluation and treatment of the patient, as alleged in the facts of:

2. Paragraph A.

DATE: April 27, 2021
New York, New York


HENRY WEINTRAUB
Chief Counsel
Bureau of Professional Medical Conduct

EXHIBIT "B"

Practice Conditions

- 1) Respondent's conduct shall conform to moral and professional standards of conduct and governing law. Any act of professional misconduct by Respondent as defined by N.Y. Educ. Law §§ 6530 or 6531 shall constitute a violation this Order and may subject Licensee to an action pursuant to N.Y. Pub. Health Law § 230.
- 2) Respondent shall cooperate fully with, and respond in a timely manner to, OPMC requests to provide written periodic verification of Respondent's compliance with the terms of this Consent Order. Upon the Director of OPMC's request, Respondent shall meet in person with the Director's designee.
- 3) Respondent's failure to pay any monetary penalty by the prescribed date shall subject Respondent to all provisions of law relating to debt collection by New York State, including but not limited to: the imposition of interest, late payment charges and collection fees; referral to the New York State Department of Taxation and Finance for collection; and non-renewal of permits or licenses [Tax Law § 171(27); State Finance Law § 18; CPLR § 5001; Executive Law § 32].
- 4) The Director of OPMC may review Respondent's professional performance. This review may include but shall not be limited to: a review of office records, patient records, hospital charts, and/or electronic records; and interviews with or periodic visits with Respondent and staff at practice locations or OPMC offices.
- 5) Respondent shall adhere to federal and state guidelines and professional standards of care with respect to infection control practices. Respondent shall ensure education, training and oversight of all office personnel involved in medical care, with respect to these practices.
- 6) Respondent shall maintain complete and legible medical records that accurately reflect the evaluation and treatment of patients and contain all information required by State rules and regulations concerning controlled substances.
- 7) Within 30 days of this Order's effective date, Respondent's practice as a physician assistant shall be subject to review by a licensed physician, board certified in an appropriate specialty (henceforth, "Practice and Records Supervisor"), proposed by Respondent and subject to the written approval of the Director of OPMC. Any practice by Respondent as a physician assistant in violation of this term shall constitute unauthorized practice.
 - a) Respondent shall make available to the Practice and Records Supervisor any and all records or access to the practice requested by the Practice

and Records Supervisor, including on-site observation. The Practice and Records Supervisor shall visit each and every location where Respondent practices as a physician assistant, on a random unannounced basis at least monthly, and shall examine a selection (no fewer than 20) of records maintained by Respondent, including patient records, prescribing information and office records. The review will determine whether the Respondent's practice as a physician assistant is conducted in accordance with the generally accepted standards of the profession. Any perceived deviation of accepted standards of medical care or refusal to cooperate with the Practice and Records Supervisor shall be reported within 24 hours to OPMC.

- b) Respondent shall be solely responsible for all expenses associated with the Practice and Records Supervisor's review, including fees, if any, to the Practice and Records Supervisor.
- c) Respondent shall cause the Practice and Records Supervisor to report quarterly, in writing, to the Director of OPMC.

8) The period of Practice Conditions, including the period during which Respondent's practice as a physician assistant shall be subject to review by a Practice and Records Supervisor shall toll when Respondent is not engaged in active practice as a physician assistant in New York State for 30 consecutive days or more. Respondent shall notify the Director, in writing, if Respondent is not currently engaged in or intends to leave active practice as a physician assistant in New York State for 30 consecutive days or more and Respondent shall then notify the Director again at least 14 days before returning to active practice as a physician assistant in New York State. Upon Respondent's return to active practice as a physician assistant in New York State, the period of such Conditions shall resume and Respondent shall fulfill any unfulfilled terms and such additional requirements as the Director may impose as reasonably relate to the matters set forth in Exhibit "A" or as are necessary to protect the public health.

9) Within 30 days of the effective date of this Order, Respondent shall enroll, or continue enrollment, in the Committee for Physicians' Health (CPH) or other approved course of therapy and shall engage in a contract that fully describes the terms, conditions and duration of the therapy. Respondent shall comply with the contract. Respondent shall provide a written authorization for CPH/ approved therapist to provide the Director of OPMC with any/all information or documentation requested by OPMC to determine whether Respondent is in compliance with the contract and with this Order, including full access to the records maintained by CPH/the therapist with respect to Respondent.

- a) Respondent shall cause CPH/the approved therapist to report to OPMC promptly if Respondent refuses to comply with the contract, refuses to submit to treatment or if Respondent fails to make progress during the course of treatment.

- b) Respondent shall cause CPH/the therapist to report immediately to OPMC if Respondent is regarded at any time to be an imminent danger to the public.
 - c) Within seven days of learning that an approved therapist is no longer willing or able to serve, Respondent shall submit the name of a proposed successor to the Director of OPMC for approval.
- 10) At the direction of the Director of OPMC, Respondent shall submit to evaluations by a board-certified psychiatrist, licensed mental health practitioner or other health care professional or program designated by the Director (hereafter "Evaluator.") Respondent shall provide the Evaluator with a copy of this Order and copies of all previous treatment records. OPMC, at its discretion, may provide information or documentation from its investigative files concerning Respondent to Respondent's Evaluator. The Evaluator shall report to the Director regarding Respondent's condition and fitness or incapacity to practice medicine. Respondent shall comply with all treatment recommendations based upon the evaluation; failure to comply with such treatment recommendations shall constitute professional misconduct
 - 11) Licensee shall provide the Director of OPMC with, and ensure to keep current and effective, fully executed waivers of patient confidentiality for any prior or prospective evaluation and treatment records; these waivers shall comply with the requirements of federal confidentiality laws and regulations, including but not limited to: HIPAA, Public Law 104-191, et seq., and the laws governing confidentiality of substance abuse records, at 42 U.S.C. § § 290dd-3 and ee-3 and 42 C.F.R, Part 2.
 - 11) Respondent shall enroll in and successfully complete continuing education as directed by the Office of Professional Medical Conduct, subject to the Director of OPMC's prior written approval.
 - 12) Respondent shall comply with this Consent Order and all its terms and shall bear all associated compliance costs. Upon receiving evidence of noncompliance with, or a violation of, these terms, the Director of OPMC and/or the Board may initiate any other such proceeding authorized by law, against Respondent.