

Department of Health

KATHY HOCHUL Governor

JAMES V. McDONALD, M.D., M.P.H.

Commissioner

MEGAN E. BALDWIN Acting Executive Deputy Commissioner

June 14, 2023

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

William M. Bock, M.D.

Re: License No. 195334

Dear Dr. Bock:

Enclosed is a copy of the New York State Board for Professional Medical Conduct (BPMC) Order No. 23-127. This order and any penalty provided therein goes into effect June 21, 2023.

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,



David Besser, M.D. **Executive Secretary Board for Professional Medical Conduct**

Enclosure

CC:

Richard Tubiolo, Esq. Hirsch & Tubiolo, PC. 1000 Reynolds Arcade Building 16 East Main Street

Rochester, New York 14614

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

IN THE MATTER
OF
WILLIAM M. BOCK, M.D.

BPMC No. 23-127

CONSENT ORDER

Upon the application of (Respondent) WILLIAM M. BOCK, M.D. 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

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,

it is further

DATE: 6/12/2023

THOMAS T. LEE, M.D.

Chair

State Board for Professional Medical Conduct

IN THE MATTER OF WILLIAM M. BOCK, M.D.

CONSENT AGREEMENT

WILLIAM M. BOCK, M.D., represents that all of the following statements are true:

That on or about April 12, 1994, I was licensed to practice as a physician in the State of New York and issued License No. 195334 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 do not contest the Statement of Charges, 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.

 Pursuant to N.Y. Pub. Health Law § 230-a(9), I shall be placed on probation for a period of thirty-six months, subject to the terms set forth in attached Exhibit "B."

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 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 remain in continuous compliance with all requirements of N.Y. Pub. Health Law § 2995-a(4) and 10 NYCRR 1000.5, including but not limited to the requirements that a licensee shall: report to the Department all information required by the Department to develop a

public physician profile for the licensee; continue to notify the Department of any change in profile information within 30 days of any change (or in the case of optional information, within 365 days of such change); and, in addition to such periodic reports and notification of any changes, update the Licensee's profile information within six months prior to the expiration date of the licensee's registration period. Licensee shall submit changes to the Licensee's physician profile information either electronically using the Department's secure web site or on forms prescribed by the Department, and licensee shall attest to the truthfulness, completeness and correctness of any changes licensee submits to the Department. This condition shall take effect 30 days after the Order's effective date and shall continue so long as Respondent remains a licensee in New York State. Respondent's failure to comply with this condition, if proven and found at a hearing pursuant to N.Y. Pub. Health Law § 230, shall constitute professional misconduct as defined in N.Y. Educ, Law § 6530(21) and N.Y. Educ, Law § 6530(29). Potential penalties for failure to comply with this condition may include all penalties for professional misconduct set forth in N.Y. Pub. Health Law § 230-a, including but not limited to: revocation or suspension of license. Censure and Reprimand, probation, public service and/or fines of up to \$10,000 per specification of misconduct found; 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 the 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 15 May 23

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WILLIAM M. BOCK, M.D. RESPONDENT

The undersign proposed penalty, to	ned agree to Respondent's attached Consent Agreement and to its erms and conditions.
DATE: <u>5/26/2</u>	RICHARD S. TUBIOLO, ESQ. Attorney for Respondent
DATE:	NATHANIAL WHITE Associate Counsel Bureau of Professional Medical Conduct
6/12/202 DATE:	3 For

EXHIBIT A

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

IN THE MATTER

STATEMENT

OF

CHARGES

OF

WILLIAM M. BOCK, M.D.

WILLIAM M. BOCK, M.D., the Respondent, was authorized to practice medicine in New York State on or about April 12, 1994 by the issuance of license number 195334 by the New York State Education Department.

FACTUAL ALLEGATIONS

- A. Respondent provided medical care to Patient A (patients are identified in Appendix "A") who was forty-three-years-old when treatment started, at a practice in Auburn, New York between about February 2012 to about November 2020 for various conditions including chronic pain. Respondent's care and treatment of Patient A deviated from accepted standards in that:
 - Respondent, on more than one occasion, failed to adequately obtain and/or document a history for Patient A, and failed to adequately perform and/or document a physical exam for Patient A.
 - 2. Respondent failed to check the prescription monitoring program prior to prescribing controlled substances to Patient A.
- B. Respondent provided medical care to Patient B who was twenty-seven years old when treatment started, at a practice in Auburn, New York between about March 2017 and about November 2020 for various conditions including acute and chronic pain. Respondent's care and treatment of Patient B deviated from accepted standards in that:

- Respondent, on more than one occasion, failed to adequately obtain and/or document a history for Patient B, and failed to adequately perform and/or document a physical exam for Patient B.
- 2. Respondent failed to check the prescription monitoring program prior to prescribing controlled substances to Patient B.
- C. Respondent provided medical care to Patient C who was twenty-six years old when treatment started, at a practice in Auburn, New York between about January 2012 to about October 2020 for various conditions including anxiety and chronic pain. Respondent's care and treatment of Patient C deviated from accepted standards in that:
 - Respondent, on more than one occasion, failed to adequately obtain and/or document a history for Patient C, and failed to adequately perform and/or document a physical exam for Patient C.
 - 2. Respondent failed to check the prescription monitoring program prior to prescribing controlled substances to Patient C.

SPECIFICATION OF CHARGES FIRST SPECIFICATION

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(3) by practicing the profession of medicine with negligence on more than one occasion as alleged in the facts of:

1. Paragraphs A and A.1, A and A.2, B and B.1, B and B.2, C and C.1, and/or C and C.2.

SECOND SPECIFICATION

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. Paragraphs A and A.1, B and B.1, and/or C and C.1.

DATE:June 9, 2023 Albany, New York

> J린데REY(). CONKLIN Deputy Director Bureau of Professional Medical Conduct

EXHIBIT "B"

Terms of Probation

- 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 of probation and may subject Respondent to an action pursuant to N.Y. Pub. Health Law § 230(19).
- 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.
- 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].
- The probation period shall toll when Respondent is not engaged in active medical practice in New York State for a period of 30 consecutive days or more. Respondent shall notify the Director of OPMC, in writing, if Respondent is not currently engaged in, or intends to leave, active medical practice in New York State for a consecutive 30 day period. Respondent shall then notify the Director again at least 14 days before returning to active practice. Upon Respondent's return to active practice in New York State, the probation period shall resume and Respondent shall fulfill any unfulfilled probation 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.
- 5) 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.
- 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.

- 7) 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.
- 8) 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.
- 9) 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 a violation of probation proceeding, and/or any other such proceeding authorized by law, against Respondent.
- 10) No more than 30 days after the Consent Order's effective date, Respondent shall practice medicine only when monitored by a licensed physician, board-certified in an appropriate specialty, ("practice monitor") proposed by Respondent and subject to the Director of OPMC's written approval. No more than 30 days after learning that the approved practice monitor is no longer willing or able to serve or no more than 30 days after having been notified by the Director that the practice monitor has been discharged for cause, which shall include but not be limited to the inadequacy of the practice monitor's reports and/or performance, Respondent shall have an approved successor in place, subject to the Director's written approval. Upon approval, the new practice monitor shall perform the duties described in (a) and (c) below. Regardless of the reason necessitating a replacement, if the Director does not approve Respondent's proposed new practice monitor, Respondent shall immediately cease the practice of medicine, unless notified by the Director, in writing, of an extension, which may be granted at the Director's discretion. In that event, Respondent shall propose another practice monitor, which the Director has 30 days to approve or disapprove until a practice monitor is accepted. Any medical practice in violation of this term shall constitute the unauthorized practice of medicine.
 - a) Respondent shall make available to the monitor any and all records or access to the practice requested by the monitor, including on-site observation. The practice monitor shall visit Respondent's medical practice at each and every location, 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 medical practice is conducted in accordance with the generally accepted standards of professional medical care. Any

- perceived deviation of accepted standards of medical care or refusal to cooperate with the monitor shall be reported within 24 hours to OPMC.
- b) Respondent shall be solely responsible for all expenses associated with monitoring, including fees, if any, to the monitoring physician.
- c) Respondent shall cause the practice monitor to report quarterly, in writing, to the Director of OPMC.
- d) Respondent shall maintain medical malpractice insurance coverage with limits no less than \$2 million per occurrence and \$6 million per policy year, in accordance with Section 230(18)(b) of the Public Health Law. Proof of coverage shall be submitted to the Director of OPMC prior to Respondent's practice after the effective date of this Order.
- 11) Respondent shall comply with all requirements of Article 33 of the Public Health Law and of New York State Department of Health regulations, including but not limited to all requirements related to consultation of the iStop / Prescription Monitoring Program (PMP) Registry when writing prescriptions for Schedule II, III, and/or IV controlled substances, pursuant to Public Health Law Section 3343-a and 10 NYCRR 80.63. Respondent shall meet as requested with OPMC to provide proof of compliance.
- 12) Respondent shall maintain, in a format that is acceptable to OPMC, a log of all ordering, prescribing, administering and/or dispensing of all controlled substances.
 - a) This log shall include the following information: the drug, the dose, the patient, the diagnosis, the date that the drug was prescribed, and such other information related to ordering, prescribing, administering and/or dispensing as may be requested by OPMC. The log shall also include all information related to compliance with iStop /PMP Registry consultation requirements, as set forth in paragraph eleven above, including a notation of all iStop / PMP Registry consultations performed, including the date and time performed, and the information contained in the registry upon each consultation. The log entry shall not, by itself, satisfy Respondent's obligation to document consultation with the iStop / PMP Registry in a patient's medical chart.
 - b) This log shall be subject to review by Respondent's Practice Monitor and Respondent shall make this log, and the records of any patient referenced in this log, immediately available to OPMC, upon demand.

c) Respondent shall cause the Practice Monitor to examine this log, and include, as part of the Practice Monitor's review of the medical records of patients treated by Respondent, an examination of at least 10 medical records per month obtained through examination of the log entries.