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Antonia C. Novello, M.D., M.P.H.

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NYS Department of Health

Anne F. Saile, Director
Office of Professional Medical Conduct

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Chair

Denise M. Bolan, R.P.A.
Vice Chair

Ansel R. Marks, M.D., J.D.
Executive Secretary

December 20, 1999

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Nora M. Costa, M.D. 501 N.W. 136th Avenue Miami, FL 33182

RE: Lice

License No. 165123

Dear Dr. Costa:

Enclosed please find Order #BPMC 99-315 of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect December 20, 1999.

If the penalty imposed by the Order is a surrender, revocation or suspension of this license, you are required to deliver to the Board the license and registration within five (5) days of receipt of the Order to Board for Professional Medical Conduct, New York State Department of Health, Hedley Park Place, Suite 303, 433 River Street, Troy, New York 12180.

Sincerely,

Ansel R. Marks, M.D., J.D. Executive Secretary

Board for Professional Medical Conduct

Enclosure

cc: I

Robert Bogan, Esq.

STATE OF NEW YORK : DEPARTMENT OF HEALTH	` ,
STATE BOARD FOR PROFESSIONAL MEDICAL CONDUCT	
X	
IN THE MATTER	SURRENDER
OF	ORDER
NORA MARIA COSTA, M.D.	BPMC # 99-315
X	

NORA MARIA COSTA, M.D., says:

On or about December 30, 1985, I was licensed to practice medicine as a physician in the State of New York having been issued License No. 165123 by the New York State Education Department. My address is 501 N.W. 136th Avenue, Miami, Florida 33182.

I understand that I have been charged with one (1) specifications of professional misconduct as set forth in the Statement of Charges, annexed hereto, made a part hereof, and marked as Exhibit "A."

I am applying to the State Board for Professional Medical Conduct for an agreement to allow me to surrender my license as a physician in the State of New York and request that the Board issue this Surrender Order.

I agree not to contest the one (1) specification set forth in the Statement of Charges.

I understand that, in the event that this proposed agreement is not granted by the State Board for Professional Medical Conduct, nothing contained herein shall be binding upon me or construed to be an admission of any act of misconduct alleged or charged against me, such proposed agreement shall not be used against me in any way, and shall be kept in strict confidence during the pendency of the professional misconduct disciplinary proceeding; and such denial by the State Board for Professional Medical Conduct shall be made without prejudice to the continuance of any disciplinary proceeding and the final determination by a Committee on Professional Medical Conduct pursuant to the provisions of the Public Health Law.

I agree that in the event the State Board for Professional Medical Conduct agrees with my proposal, this Order shall be issued striking my name from the roster of physicians in the State of New York without further notice to me. I agree that this Order shall be effective upon issuance by the Board, which may be accomplished by mailing, by first class mail, a copy of the Order to me at the address set forth above, or to my attorney, or upon transmission via facsimile to me or my attorney, whichever is earliest.

I am making this agreement of my own free will and accord and not under duress, compulsion, or restraint of any kind or manner.

NORA MARIA COSTA, M.D.

Respondent

AGREED TO:

Date: 1

Date: Deumhu 13/1999

ROBERT BOGAN
Assistant Counsel
Bureau of Professional
Medical Conduct

ANNE F. SAILE
Director, Office of
Professional Medical Conduct

ORDER

Upon the proposed agreement of NORA MARIA COSTA, M.D., to Surrender his license as a physician in the State of New York, which proposed agreement is made a part hereof, it is AGREED TO and

ORDERED, that the proposed agreement and the provisions thereof are hereby adopted; it is further

ORDERED, that the name of Respondent be stricken from the roster of physicians in the State of New York; it is further

ORDERED, that this Order shall be effective upon issuance by the Board, which may be accomplished by mailing, by first class mail, a copy of this Order to Respondent at the address set forth in this agreement or to Respondent's attorney, or upon transmissions via facsimile to Respondent or Respondent's attorney, whichever is earliest.

DATED:_/2//6/99

VILLIAM P. DILLON, I

Chair

State Board for Professional Medical Conduct

ETHIBITA

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

OF NORA MARIA COSTA, M.D.

STATEMENT OF CHARGES

NORA MARIA COSTA, M.D., the Respondent, was authorized to practice medicine in New York state on December 30, 1985 by the issuance of license number 165123 by the New York State Education Department.

FACTUAL ALLEGATIONS

A. On or about April 22, 1999, in the United States District Court, Southern District of Florida, the Respondent was found guilty of a violation of 18 U.S.C. § 371, Conspiracy to Defraud the United States, by making false claims to the Health and Human Services in its administration of the Medicare program and was sentenced to 18 months imprisonment, 3 years supervised release, \$50.00 Assessment, and \$1,211,106.00 Restitution.

SPECIFICATION

Respondent violated New York Education §6530(9)(a)(ii) by having been convicted of committing an act constituting a crime under federal law:

1. The facts in paragraph A.

DATED: , 1999 Albany, New York

PETER D. VAN BUREN
Deputy Counsel
Bureau of Professional
Medical Conduct