



Department of Health

ANDREW M. CUOMO
Governor

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

SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

April 4, 2018

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Vasil I. Moshkovitch, P.A.



Re: License No. 000786

Dear Mr. Moshkovitch:

Enclosed is a copy of the New York State Board for Professional Medical Conduct (BPMC) Order No. 18-078. This order and any penalty provided therein goes into effect April 11, 2018.

You are required to deliver your license and registration within 5 days of the effective date of the surrender provision to: c/o Physician Monitoring Unit, NYS DOH - OPMC, Riverview Center, Suite 355, 150 Broadway, Albany, NY 12204-2719.

If your license is framed, please remove it from the frame and only send the parchment paper on which your name is printed. Our office is unable to store framed licenses.

If the document(s) are lost, misplaced or destroyed, you are required to submit to this office an affidavit to that effect. Please complete and sign the affidavit before a notary public and return it to the Office of Professional Medical Conduct.

Please direct any questions to: NYS DOH - OPMC, Riverview Center, Suite 355, 150 Broadway, Albany, NY 12204-2719, telephone # (518) 402-0846.

Sincerely,



Robert A. Catalano, M.D.
Executive Secretary
Board for Professional Medical Conduct

Enclosure

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

BPMC No. 18-078

IN THE MATTER
OF
VASIL MOSHKOVITCH, P.A.

SURRENDER
ORDER

Upon the application of (Respondent) VASIL MOSHKOVITCH, P.A. to surrender his or her license as a physician assistant in the State of New York, which is made a part of this Surrender Order, it is

ORDERED, that the Surrender, and its terms, are adopted and it is further

ORDERED, that Respondent's name be stricken from the roster of physician assistants in the State of New York; it is further

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

- by mailing of a copy of this Surrender Order, either by first class mail to Respondent at the address in the attached Surrender of License application or by certified mail to Respondent's attorney, OR
- upon facsimile transmission to Respondent or Respondent's attorney,

Whichever is first,

SO ORDERED.

DATE: 4/03/2018


ARTHUR S. HENGERER, M.D.
Chair
State Board for Professional Medical Conduct

**IN THE MATTER
OF
VASIL MOSHKOVITCH, P.A.**

**SURRENDER
OF
LICENSE
AND
ORDER**

VASIL MOSHKOVITCH, P.A., represents that all of the following statements are true:

That on or about October 21, 1977, I was authorized to perform medical services as a physician assistant, under the supervision of and within the scope of practice of a supervising physician in New York State, by the issuance of license number 000786 by the New York State Education Department.

My current address is 1450 East 3rd Street, Brooklyn, N.Y. 11230.

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", which is attached to and part of this Surrender of License.

I am applying to the State Board for Professional Medical Conduct for permission to surrender my license as a physician assistant in the State of New York on the grounds that I assert that I cannot successfully defend against at least one of the acts of misconduct alleged in full satisfaction of the charges against me.

I understand that, if the Board does not accept my Surrender of License, none of its terms shall bind me or constitute an admission of any of the acts of misconduct alleged;

this application 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 Public Health Law.

I agree that, if the Board accepts my Surrender of License, the Chair of the Board shall issue a Surrender Order in accordance with its terms. I agree that this Order shall take effect upon its issuance by the Board, either by mailing of a copy of the Surrender Order by first class mail to me at the address in this Surrender of License, or to my attorney by certified mail, or upon facsimile transmission to me or my attorney, whichever is first. The Surrender 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(s). OPMC shall report this action to the National Practitioner Data Bank, the Federation of State Medical Boards, and any other entities that the Director of OPMC shall deem appropriate.

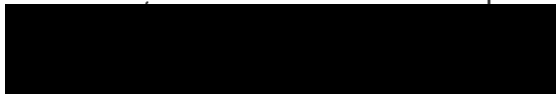
I ask the Board to accept this Surrender of License, which I submit of my own free will and not under duress, compulsion or restraint. In consideration of the value to me of the Board's acceptance of this Surrender of License, allowing me to resolve this matter without the various risks and burdens of a hearing on the merits, I knowingly waive my right to contest the Surrender Order for which I apply, whether administratively or judicially, and I agree to be bound by the Surrender Order.

I understand and agree that the attorney for the Department, the Director of the Office of Professional Medical Conduct and the Chair of the State Board for Professional Medical Conduct each retain complete discretion either to enter into the proposed

agreement and 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

3/19/18



VASIL MOSHKOVITCH, P.A.
RESPONDENT

The undersigned agree to Respondent's attached Surrender of License and Order and to its proposed penalty, terms and conditions.

DATE: 3/27/18

Attorney for Respondent, ESQ.

DATE: 3/23/18

ANNA R. LEWIS, ESQ. *u*
Associate Counsel
Bureau of Professional Medical Conduct

DATE: 4/2/18

KEITH W. SERVIS *u*
Director
Office of Professional Medical Conduct

EXHIBIT "A"

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

IN THE MATTER
OF
VASIL MOSHKOVITCH, P. A.

STATEMENT
OF
CHARGES

VASIL MOSHKOVITCH, P.A., the Respondent, was authorized to perform medical services as a physician assistant, under the supervision of and within the scope of practice of a supervising physician in New York State, on or about October 21, 1977, by the issuance of license number 000786 by the New York State Education Department.

FACTUAL ALLEGATIONS

- A. On or about December 23, 2016, the New Jersey Board of Medical Examiners ("Board") issued a Consent Order ("Order") based upon a Verified Complaint that Respondent engaged in indiscriminate prescribing and that his continuing practice of medicine presented a clear and imminent danger to the public. Respondent was alleged to have engaged in gross and repeated acts of negligence, professional misconduct, failure to comply with the provisions of an act or regulation administered by the Board and indiscriminate prescribing in violation of N.J.S.A. 45:1-21(c), (d), e, (m) and (h) as well as N.J.A.C. 13:35-7.1. Respondent agreed to the permanent revocation of his license to practice medicine and surgery in all jurisdictions, and that he shall be permanently ineligible to apply or obtain a license to practice medicine and surgery in the State of New Jersey. With the consent of the Director of the New Jersey Division of Consumer Affairs, pursuant to his authority under N.J.S.A. 24:21-9 et seq., Respondent's New Jersey Controlled Dangerous Substances ("CDS") Registration was permanently revoked.

Respondent was assessed civil penalties and costs in the amount of \$100,000 which were stayed until and unless the Board finds Respondent has violated the terms of the Order or has engaged in other violations.

1. The conduct resulting in the Board's Order against Respondent would constitute misconduct under the laws of New York State pursuant to New York Education Law §6530 (2)(Practicing the profession fraudulently or beyond its authorized scope), §6530(3)(Practicing the profession with negligence on more than one occasion), and §6530(16)(A willful or grossly negligent failure to comply with substantial provisions of federal, state, or local laws, rules, or regulations governing the practice of medicine).

B On or about December 12, 2017, the State of Florida, Board of Medicine ("Board") issued a Final Order based upon the New Jersey Order dated December 23, 2016, wherein it accepted Respondent's voluntary relinquishment of his license to practice medicine in the state of Florida. The Order stated that this Voluntary Relinquishment shall be construed as disciplinary action against Respondent's license pursuant to 456.072(1)(f), Florida statutes. Respondent agreed never to apply for licensure as a physician in the state of Florida.

SPECIFICATION OF CHARGES
HAVING HAD DISCIPLINARY ACTION TAKEN

Respondent is charged with committing professional misconduct as defined in N.Y. Educ. Law § 6530(9)(d) by having his or her license to practice medicine revoked, suspended or having other disciplinary action taken, or having his or her application for a license refused, revoked or suspended or having voluntarily or otherwise surrendered his or her license after a disciplinary action was instituted by a duly authorized professional disciplinary agency of another state, where the conduct resulting in the revocation, suspension or other disciplinary action involving the license or refusal, revocation or

suspension of an application for a license or the surrender of the license would, if committed in New York state, constitute professional misconduct under the laws of New York state (namely N.Y. Educ. Law § 6530(2), § 6530 (3) and § 6530 (16) as alleged in the facts of the following:

1. Paragraphs A. and A.1. and B.

DATE: March 23, 2018
New York, New York



Roy Nemerson
Deputy Counsel
Bureau of Professional Medical Conduct