

Department of Health

KATHY HOCHUL
Governor

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

MEGAN E. BALDWINActing Executive Deputy Commissioner

April 25, 2023

CERTIFIED MAIL-RECEIPT REQUESTED

Marina C. Lukac, D.O. 1459 Laney Walker Boulevard, AE 3042 Augusta, Georgia 30912

Re: License No. 000000

Dear Dr. Lukac:

Enclosed is a copy of the New York State Board for Professional Medical Conduct (BPMC) Order No. 23-089. This Order of Conditions pursuant to Public Health Law Section 230 is effective May 2, 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

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

BPMC No. 23-089

IN THE MATTER OF MARINA C. LUKAC, D.O.

ORDER
OF CONDITIONS
PURSUANT TO
N.Y. PUB. HEALTH
LAW § 230

Upon the application of MARINA C. LUKAC, D.O. (Signee) in the attached Stipulation and Application for an Order of Conditions Pursuant to N.Y. Pub. Health Law § 230 (Application), which is made a part of this Order of Conditions Pursuant to N.Y. Pub. Health Law § 230 (Order), it is agreed that:

- the Application and its terms are adopted; and
- this Order shall be effective upon issuance by the Board, either by mailing of a
 copy of this Order by first class mail to Signee at the address in the attached
 Application or by certified mail to Signee's attorney, or upon facsimile
 transmission to Signee or Signee's attorney, whichever is first.

SO ORDERED.

DATE: 4/24/2023

Deborah Whitfield, M.A., Ph.D., MBA
Vice Chair
State Board for Professional Medical Conduct

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

IN THE MATTER OF MARINA C. LUKAC, D.O.

APPLICATION FOR ORDER OF CONDITIONS PURSUANT TO N.Y. PUB. HEALTH LAW § 230

MARINA C.LUKAC, D.O., represents that all of the following statements are true:

That from on or about June 2016 to on or about September 2020, I was employed as a medical resident in Elmira, New York and was a "licensee" as that term is defined in New York Education Law section 230(7) at the times referenced above, even though I do not hold, and have not held, a license to practice medicine in New York State issued by the New York State Education Department. I am currently not licensed as a physician, and do not hold a limited permit to practice medicine, in any jurisdiction outside of New York State, with the exception of (list the jurisdictions and license numbers or write "None"):

Georgia Residency Training Permit # 13602

My current address is 1459 Laney Walker Blvd, AE 3042, Augusta, GA 30912 and I will advise the Director of the Office of Professional Medical Conduct of any change of address. I am affiliated with the following hospitals and/or facilities: None in New York State. I understand that the New York State Board for Professional Medical Conduct ("the Board") has investigated the issues set forth in attached Exhibit "A".

I request that the Board and the Director of the Office of Professional Medical Conduct ("the Director"), in reliance upon the results of the investigation to date and upon my representation that I have practiced medicine without incident for at least a year before this Application, conclude the investigation of these issues, provided I successfully and without incident comply with the Conditions set forth below. In consideration of the Board and the Director granting this Application, and upon the Board's election not to bring disciplinary charges against me, I agree that the Board and the Director shall issue an Order of Conditions Pursuant to N.Y. Pub. Health Law § 230.

i agree that the Order shall impose the following conditions:

I agree that I shall not apply for the issuance of a medical license in New York State, that I shall not seek or enter into any graduate medical education program in New York State, including but not limited to an internship, residency, fellowship, or similar program, and that I shall not practice medicine or provide patient care in any manner in New York State.

I stipulate that my failure to comply with the conditions imposed by this order, if proven and found at a hearing pursuant to N. Y. Pub. Health Law § 230(10), shall constitute professional misconduct as defined in N.Y. Educ. Law § 6530(29). I agree that if I am charged with professional misconduct in future, this Application and Order shall be admitted into evidence in that proceeding.

I understand that nothing in this Application shall be construed as an admission by me of any act of alleged misconduct or as a finding of misconduct as to those issues referred to in Exhibit "A". I deny any acts of misconduct and reserve my right to assert all defenses I may have in any later or other proceeding.

I understand and agree that my failure to comply with, successfully complete, or satisfy any of the material conditions of this Order, and/or any unsatisfactory report by the practice monitor (if any), shall vest the Director with the authority, in the exercise of reasonable discretion, to vacate this agreement and shall permit the Director to pursue further investigation and/or prosecution of misconduct charges against me as to the issues set forth in Exhibit "A" to the full extent authorized by the Public Health Law and the Education Law.

I understand that an Order issued upon this Application does not bar prosecution for professional misconduct based upon allegations of violations of N.Y. Educ. Law § 6530 unrelated to the issues set forth in Exhibit "A", whether those alleged violations occurred before or after this Application. The Director may, at such time, also direct counsel to prepare charges that include allegations as to the issues set forth in Exhibit "A".

I agree that, if the Board grants this Application, the Chair of the Board shall issue an Order of Conditions in accordance with its terms. I further agree that the Department of Health shall notify the National Practitioner Data Bank and the Federation of State Medical Boards of this Order of Conditions pursuant to N.Y. Pub. Health Law § 230 and that the Order of Conditions is not disciplinary in nature. This Order of Conditions [with the

exception of Exhibit "A," which shall remain a part of the investigative files of the Office of Professional Medical Conduct within the meaning of N.Y. Pub. Health Law § 230(10)(a)(v)] shall be posted on the Department of Health website(s).

I make this Application 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 Application, I waive my right to contest the Order for which I apply, whether administratively or judicially, I agree to be bound by the Order, and I ask that the Board grant this Application.

I understand and agree that the attorney for the Department of Health, 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 4/17/23

MARINA Č. LUKAC, D.O. SIGNEE The undersigned agree to Signee's attached Order of Conditions and to its proposed terms and conditions.

DATE: April 18, 2023

NATHANIAL WHITE Associate Counsel Bureau of Professional Medical Conduct

DATE: April 21, 2023

SHELLY WANG BANDAGO
Director
Office of Professional Medical Conduct