



New York State Board for Professional Medical Conduct

433 River Street, Suite 303 • Troy, New York 12180-2299 • (518) 402-0863

Antonia C. Novello, M.D., M.P.H., Dr. P.H.
*Commissioner
NYS Department of Health*

Dennis P. Whalen
*Executive Deputy Commissioner
NYS Department of Health*

Dennis J. Graziano, Director
Office of Professional Medical Conduct

PUBLIC

Michael A. Gonzalez, R.P.A.
Vice Chair

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

May 4, 2004

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

Jonathan Zizmor, M.D.
1017 Third Avenue
New York, NY 10021

RE: License No. 106081

Dear Dr. Zizmor:

Enclosed please find Order #BPMC 04-97 of the New York State Board for Professional Medical Conduct. This Order and any penalty provided therein goes into effect May 11, 2004.

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 or receipt of the 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

If the penalty imposed by the Order is a fine, please write the check payable to the New York State Department of Health. Noting the BPMC Order number on your remittance will assist in proper crediting. Payments should be directed to the following address:

Bureau of Accounts Management
New York State Department of Health
Corning Tower, Room 1258
Empire State Plaza
Albany, New York 12237

Sincerely,

A handwritten signature in black ink, appearing to read "Ansel R. Marks". The signature is written in a cursive style with a large initial "A".

Ansel R. Marks, M.D., J.D.
Executive Secretary
Board for Professional Medical Conduct

cc: Robert Abrams, Esq.
Stroock, Stroock & Lavan, LLP
180 Maiden Lane
New York, NY 10038-4982

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

**IN THE MATTER
OF
JONATHAN ZIZMOR, M.D.**

**CONSENT
ORDER**

BPMC No. 04-97

Upon the application of (Respondent) JONATHAN ZIZMOR, 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 **SO ORDERED**, and it is further

ORDERED, that this 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.

DATED: 5/3/04


MICHAEL A. GONZALEZ, R.P.A.
Vice Chair
State Board for Professional Medical Conduct

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

**IN THE MATTER
OF
JONATHAN ZIZMOR, M.D.**

**CONSENT
AGREEMENT
AND
ORDER**

JONATHAN ZIZMOR, M.D., representing that all of the following statements are true, deposes and says:

That on or about July 1, 1970, I was licensed to practice as a physician in the State of New York, and issued License No. 106081 by the New York State Education Department.

My current address is 1017 Third Avenue, N.Y., N.Y. 10021, 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 has charged me with two specifications of professional misconduct.

A copy of the Statement of Charges, marked as Exhibit "A", is attached to and part of this Consent Agreement.

I agree not to contest the first specification of negligence on more than one occasion and the second specification, failure to maintain accurate records, in full satisfaction of the charges against me, and agree to the following penalty:

Pursuant to §230-a(2) of the Public Health law, my license to practice medicine in the State of New York shall be suspended for a period of three years, said suspension to be entirely stayed.

Pursuant to §230-a(9) of the Public Health Law, I shall be placed on probation for a period of three years, subject to the terms set forth in attached Exhibit "B."

I shall be subject to a fine in the amount of \$40,000.00, pursuant to §230-a(7) and (9) of the Public Health Law, to be paid in monthly installments of \$10,000, the first to be paid within 30 days of the effective date of this order. Payments must be submitted to:

Bureau of Accounts Management
New York State Department of Health
Empire State Plaza
Corning Tower, Room 1245
Albany, New York 12237

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

That Respondent shall maintain current registration of licensure with the New York State Education Department Division of Professional Licensing Services (except during periods of actual suspension), and shall pay all registration fees. This condition shall take effect thirty (30) days after the Consent Order's effective date and will continue so long as Respondent remains licensed in New York State; and

That Respondent shall cooperate fully with the Office of Professional Medical Conduct (OPMC) in its administration and enforcement of this 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 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 Order shall constitute misconduct as defined by New York State Education 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 statutory violations; 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 Public 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 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.

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 ask that the Board adopt this Consent Agreement.

DATED


4/20/04



JONATHAN ZIZMOR, M.D.
RESPONDENT

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

DATE: 4/20/04


ROBERT ABRAMS, ESQ.
Attorney for Respondent

DATE: 4/21/04


DIANNE ABELLOFF, ESQ.
Associate Counsel
Bureau of Professional Medical Conduct

DATE: 4/30/04

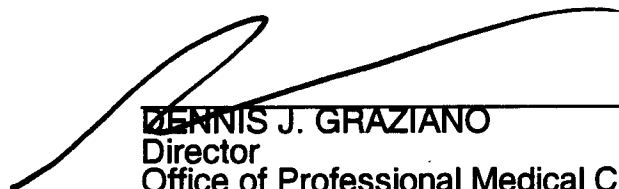

DENNIS J. GRAZIANO
Director
Office of Professional Medical Conduct

EXHIBIT "A"

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

IN THE MATTER
OF
JONATHAN ZIZMOR, M.D.

STATEMENT
OF
CHARGES

JONATHAN ZIZMOR, M.D., the Respondent, was authorized to practice medicine in New York State on or about July 1, 1970, by the issuance of license number 10681 by the New York State Education Department.

FACTUAL ALLEGATIONS

- A. On or about February 22, March 6, April 1 and April 22, 1996, an agent from Blue Cross/ Blue Shield Insurance Company, known to Respondent as Patient A (all patients and/or persons presenting as patients are identified in Appendix "A"), went to Respondent's office, located at 800-B Fifth Avenue, N.Y., N.Y., 10021, requesting removal of a tattoo on her left ankle and skin treatment.
1. Respondent failed to perform an adequate history and physical examination on any of the visits.
 2. After each of the visits, Respondent's office staff gave Patient A a bill to submit to her insurance company for medical conditions not in fact established and services not in fact rendered.
 3. Respondent's medical record for Patient A failed to accurately reflect the care and treatment rendered to Patient A.

B. On or about May 6 and 13, 1996, an agent from Blue Cross/ Blue Shield Insurance Company, known to Respondent as Patient B, went to Respondent's office, located at 800-B Fifth Avenue, N.Y., N.Y., 10021, requesting evaluation and treatment of her skin. Respondent's care deviated from accepted medical standards, in that:

1. Respondent failed to perform adequate histories and physical examinations on Patient B.
2. After each of the visits, Respondent's office staff gave Patient B a bill to submit to her insurance company for medical conditions not in fact established and services not in fact rendered.
3. Respondent's medical record for Patient B failed to accurately reflect the care and treatment rendered to Patient B.

C. On or about May 5 and 12, 1996, and again on May 19, 1999, an agent from Blue Cross/ Blue Shield Insurance Company, known to Respondent as Patient C went to Respondent's office, located at 800-B Fifth Avenue, N.Y., N.Y., 10021, requesting evaluation and treatment of her skin. Respondent's care deviated from accepted medical standards, in that:

1. Respondent failed to perform an adequate history and physical on May 5, 1996 and May 19, 1999.

2. After each of the three visits, Respondent's office staff gave Patient C a bill to submit to her insurance company for medical conditions not in fact established and services not in fact rendered.
3. Respondent's medical record for Patient C failed to accurately reflect the care and treatment rendered to Patient C.

D. On or about January 28, February 18 and March 18, 1997, an agent from Blue Cross/ Blue Shield Insurance Company, known to Respondent as Patient D went to Respondent's office, located at 800-B Fifth Avenue, N.Y., N.Y., 10021, requesting evaluation and treatment of her skin. Respondent's care deviated from accepted medical standards, in that:

1. Respondent failed to perform an adequate history and physical on any of the dates of treatment.
2. After each of the three visits, Respondent's office staff gave Patient D a bill to submit to her insurance company for medical conditions not in fact established and services not rendered.
3. Respondent's medical record for Patient D failed to accurately reflect the care and treatment rendered to Patient D.

E. On or about April 1 and 8, 1997, Patient E went to Respondent's office, located at 800-B Fifth Avenue, N.Y., N.Y., 10021, for evaluation and treatment of her skin. Respondent's care deviated from accepted medical standards, in that:

1. Respondent failed to perform an adequate history and physical on either of the dates of treatment.
2. Respondent's medical record for Patient E failed to accurately reflect the care and treatment rendered to Patient E.

F. From on or about October 30, 1996, through on or about August 15, 1997, Patient F went to Respondent's office, located at 800-B Fifth Avenue, N.Y., N.Y., 10021, for evaluation and treatment of her skin. Respondent's care deviated from accepted medical standards, in that:

1. Respondent failed to perform an adequate history and physical at any of the examinations.
2. Respondent failed to ascertain whether his treatments improved Patient F's skin condition.
3. Respondent's medical record for Patient F failed to accurately reflect the care and treatment rendered to Patient F.

G. From on or about January 15, 1997 through on or about March 30, 1998, Patient G went to Respondent's office, located at 800-B Fifth Avenue, N.Y., N.Y., 10021, for evaluation and treatment of her skin. Respondent's care deviated from accepted medical standards, in that:

1. Respondent failed to perform an adequate history and physical at any of the examinations.
2. Respondent's medical record for Patient G failed to accurately reflect the care and treatment rendered to Patient G.

H. On or about April 4, 1995 and then on June 6, 1996, Patient H went to Respondent's office, located at 800-B Fifth Avenue, N.Y., N.Y., 10021, for evaluation and treatment of her skin. Respondent's care deviated from accepted medical standards, in that:

1. Respondent failed to perform an adequate history and physical at any of the examinations.
2. Respondent's medical record for Patient H failed to accurately reflect the care and treatment rendered to Patient H.

I. From on or about August 13, 1996, through on or about January 20, 1997, Patient I went to Respondent's office, located at 800-B Fifth Avenue, N.Y., N.Y., 10021, for evaluation and treatment of his skin. Respondent's care deviated from accepted medical standards, in that:

1. Respondent failed to perform an adequate history and physical at any of the examinations.
2. Respondent's medical record for Patient I failed to accurately reflect the care and treatment rendered to Patient I.

SPECIFICATION OF CHARGES

FIRST SPECIFICATION

NEGLIGENCE ON MORE THAN ONE OCCASION

Respondent is charged with violating 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 two or more of the following:

1. Paragraph A and its subparagraphs; paragraph B and its subparagraphs; paragraph C and its subparagraphs; paragraph D and its subparagraphs; paragraph E and its subparagraphs; paragraph F and its subparagraphs; paragraph G and its subparagraphs; paragraph H and its subparagraphs; paragraph I and its subparagraphs.


SECOND SPECIFICATION

FAILURE TO MAINTAIN RECORDS

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

2. Paragraph A and A 3; paragraph B and B3 ; paragraph C and C3 ; paragraph D and D3 ; paragraph E and E2 ; paragraph F and F3; paragraph G and G2; paragraph H and H2; paragraph I and I2.

DATED: April 30, 2004
New York, New York



Roy Nemerson
Deputy Counsel
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 New York State Education Law §6530 or §6531 shall constitute a violation of probation and may subject Respondent to an action pursuant to New York State Public Health Law §230(19).
2. Respondent shall maintain current registration of licensure with the New York State Education Department Division of Professional Licensing Services (except during periods of actual suspension), and shall pay all registration fees.
3. Respondent shall provide the Director, Office of Professional Medical Conduct (OPMC), Hedley Park Place, 433 River Street Suite 303, Troy, New York 12180-2299 with the following information, in writing, and ensure that such 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, charges, convictions or disciplinary actions by any local, state or federal agency, institution or facility, within thirty (30) days of each action.
4. 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.
5. 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 section 171(27)]; State Finance Law section 18; CPLR section 5001; Executive Law section 32].
6. The probation period shall toll when Respondent is not engaged in active medical practice in New York State for a period of thirty (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 thirty (30) day period. Respondent shall then notify the Director again at least fourteen (14) days before returning to active practice. Upon Respondent's return to active practice in New York State, the probation period will resume and Respondent shall fulfill any unfulfilled probation terms.

PRACTICE MONITOR

7. Within thirty days of the effective date of the order, 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 written approval of the Director of OPMC.

- 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 make available to the monitor any and all records or access to the practice requested by the monitor pertaining to Respondent's billing and billing procedures. The practice monitor shall review such records, billing, and/or billing procedures at a minimum, to the extent and with a frequency, requested by the Director of OPMC, and to any further extent and frequency as the monitor may deem appropriate.
 - c. Respondent shall be solely responsible for all expenses associated with monitoring, including fees, if any, to the monitoring physician.
 - d. Respondent shall cause the practice monitor to report quarterly, in writing, to the Director of OPMC, as to all monitoring.
 - e. 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.
8. 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 and/or hospital charts; and interviews with or periodic visits with Respondent and staff at practice locations or OPMC offices.
 9. 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.
 10. Respondent shall enroll in and complete a continuing education program in the area of billing codes for a minimum of 15 credit hours. This continuing education program is subject to the Director of OPMC's prior written approval and shall be completed within the probation period, unless the Order specifies otherwise.
 11. Respondent shall comply with this Order and all its terms, and shall bear all associated compliance costs. Upon receiving evidence of noncompliance with, or 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.