

STATE OF CONNECTICUT  
DEPARTMENT OF HEALTH SERVICES  
BUREAU OF HEALTH SYSTEM REGULATION  
DIVISION OF MEDICAL QUALITY ASSURANCE

In re:

Daniel Pinto, D.P.M.

Petition No. 860501-19-004

CONSENT ORDER

WHEREAS, Daniel Pinto of 28 Clark Street, Wolcott, Connecticut has been issued license number ~~P~~<sup>0</sup>00141 to practice as a podiatrist by the Department of Health Services pursuant to Chapter 375 of the General Statutes of Connecticut, as amended; and

WHEREAS, Daniel Pinto hereby admits and acknowledges:

- a. That at all times herein complained of he was a provider/vendor under the Medical Assistance Program, a/k/a/ Medicaid or Title XIX, having Provider Number 4048401.
- b. That from approximately November 1981 through January 1984 he rendered podiatric care to patients at the following facilities: Prospect Restorative Health Center, Marbridge Rest Home, Watertown Rest Home, New Lakeview Convalescent Home, Cook Willow Convalescent Home, Margaret's Rest Home, Mattatuck Health Care Facility, Inc., and Wolcott View Manor. Said patients were beneficiaries of the Medicaid Program.
- c. At various times from November, 1981 through January, 1984 he mistakenly overbilled the State of Connecticut, Department of Income Maintenance for services to Medicaid Program patients. On or about August 16, 1985 he paid the Department of Income Maintenance \$1,586.00 for said overcharges.

- d. That due to his age and physical impairments he is unable to provide the full range of podiatric services.
- e. That such conduct and conditions as described in paragraphs 1 through 4 above are grounds for disciplinary action pursuant to §20-59 of the Connecticut General Statutes.

NOW THEREFORE, pursuant to §19a-17 and §20-59 of the Connecticut General Statutes, Daniel Pinto hereby stipulates and agrees to the following:

1. That he waives the right to a hearing on the merits of this matter.
2. That he understands that this Consent Order is a matter of public record.
3. From this point in time and at all times in the future, he shall cease and desist from overbilling for services to Medicaid Program patients.
4. From this point in time and at all times in the future, he shall limit his podiatric practice to the following: simple foot care including: foot hygiene; clipping or trimming toe nails; removal of portions of toe nails, including in-grown toe nails; treatment and care of corns, callouses, warts, infections, and other podiatric conditions where such treatment and care does not require subcutaneous surgery under general, oral, or injectable local anesthetic; it being understood that Dr. Pinto is permitted to apply topical anesthetics and lance the skin in such a manner that closure can be obtained by the application of butterfly sutures or bandages.

5. Nothing in this Consent Order shall be construed as limiting the powers of the Department of Health Services pursuant to §4-182(c) of the Connecticut General Statutes.
6. That he understands that this Consent Order may be considered as evidence of the above admitted violations in any proceeding before the Connecticut Board of Examiners in Podiatry (1) in which his compliance with this same order is at issue, or (2) in which his compliance with §20-59 of the General Statutes of Connecticut, as amended, is at issue.
7. That this Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Further, that said order is not subject to appeal or review under the provisions of Chapters 54 or 368a of the General Statutes of Connecticut, provided that this stipulation shall not deprive him of any rights that he may have under the laws of the State of Connecticut or of the United States.
8. That he permits the Public Health Hearing Office of the Division of Medical Quality Assurance, Connecticut Department of Health Services or a representative thereof to present this Consent Order and the factual basis for said Consent Order to the Connecticut Board of Examiners in Podiatry. He understands that the Connecticut Board of Examiners in Podiatry has complete and final discretion as to whether or not an executed Consent Order is approved or granted.
9. That he understands that he has the right to consult with an attorney prior to signing this document.

10. That this Consent Order is effective on the date said Consent Order is ordered and accepted by the Connecticut Board of Examiners in Podiatry.

I, Daniel Pinto, have read the above Consent Order, and I agree and admit to the terms and allegations set forth therein. I further declare the execution of this Consent Order to be my free act and deed.

Daniel B. Pinto  
Daniel Pinto

Subscribed and sworn to before me this 16<sup>th</sup> day of October 1986.

Clair L. King  
Notary Public or person authorized  
by law to administer an oath or  
affirmation Conn. G.S. 3-31-88

The above Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Health Services on the 23<sup>rd</sup> day of October 1986, it is hereby accepted.

Stanley K. Peck  
Stanley K. Peck, Director  
Division of Medical Quality Assurance

The above Consent Order having been presented to the duly appointed agent of the Connecticut Board of Examiners in Podiatry on the 5 day of November 1986, it is hereby ordered and accepted.

CONNECTICUT BOARD OF EXAMINERS IN PODIATRY

Samy Freedman, D.P.M. Chairman  
For the Connecticut Board of Examiners in  
Podiatry

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cc pinto  
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