



JOHN ELIAS BALDACCI  
GOVERNOR

STATE OF MAINE  
BOARD OF LICENSURE IN MEDICINE  
137 STATE HOUSE STATION  
AUGUSTA, MAINE  
04333-0137

EDWARD DAVID, M.D., J.D.  
CHAIRMAN

RANDAL C. MANNING  
EXECUTIVE DIRECTOR

March 22, 2006

Timothy P. Toto, P.A.  
9924 W. 55<sup>th</sup> Street  
Merriam, KS 66203

Dear Mr. Toto:

At its meeting on March 14, 2006, at which you appeared before the Licensure Committee, the Board considered your status regarding re-application for licensure. You had requested reinstatement in inactive status - a status not available by statute or rule to Physician Assistants. After discussion, you and the Board agreed that you would withdraw the licensure application. Since your application was not considered, the Board agreed to refund the fees paid. A refund check will be sent separately.

The Board reviewed the evidence you submitted and determined that you have complied with all the terms and met all the conditions of your 2004 Consent Agreement. You are hereby released from the requirements of that Consent Agreement which is dated May 11, 2004.

You are eligible to apply for relicensure in Maine. You understand that in any re-application all historical documents will be included and considered, and that such a license, if granted, could be conditioned.

Please let me know if you have any questions or concerns.

Very truly yours,

Edward David, M.D., J.D.  
Chairman

STATE OF MAINE  
BOARD OF LICENSURE IN MEDICINE

In re: ) CONSENT AGREEMENT  
Timothy P. Toto, P.A.-C. ) AND ORDER

This document is a Consent Agreement and Order, effective when signed by all parties, regarding the voluntary surrender of a license to practice medicine as a Physician Assistant in the State of Maine held by Timothy P. Toto, P.A.-C. The parties to the Consent Agreement are: Timothy P. Toto, P.A.-C. ("the Licensee"), the State of Maine Board of Licensure in Medicine ("the Board") and the State of Maine Department of the Attorney General.

STATEMENT OF FACTS

1. The Licensee has been licensed as a Physician Assistant in the State of Maine since June 12, 1991.
2. On March 12, 2002, the Licensee signed a Consent Agreement with the Board which resulted in a thirty (30) day suspension of his license and a seven (7) month period of probation. As part of the Agreement, the Licensee also surrendered his DEA Registration.
3. The Licensee further agreed to have a substance abuse evaluation performed by a physician approved by the Board during the term of his probation.
4. After signing the Consent Agreement, the Licensee was incarcerated in 2002 and again in 2003 for probation violations related to alcohol consumption. He

later completed a 28-day treatment program at the Limestone Facility in September, 2003.

5. The substance abuse evaluation was not performed within the time period required by the 2002 Consent Agreement. The Licensee was ultimately evaluated by Jonathan Seigel, Ph.D., in September and October of 2003. Dr. Seigel diagnosed alcohol abuse and dependency.

6. After the Licensee was released from incarceration in 2002, he began a relationship with a woman who alleges that he inappropriately administered medication to her.

7. The Board issued a complaint, on its own motion, alleging unprofessional conduct, incompetence and habitual substance abuse as defined by 32 M.R.S.A. §§ 3282-A(2)(E), (F) and (B).

#### AGREEMENT

In lieu of proceeding to an adjudicatory hearing to resolve the pending complaint, the Licensee, the Board and the Department of the Attorney General agree to the following:

1. The Board has jurisdiction of the Licensee and all matters are currently pending before the Board.

2. The Licensee will voluntarily **SURRENDER** his license to practice as a Physician Assistant in the State of Maine when he signs this Agreement. If the Licensee applies for a Physician Assistant license in any other jurisdiction, he will notify the

Board and provide the other jurisdiction with copies of all of his consent agreements with this Board.

3. If the Licensee applies for reinstatement of his license in Maine, he must first complete the following:

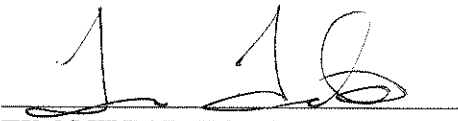
- (a) document one (1) year of monitored sobriety through participation in the Physicians Health Program;
- (b) participate in professional counseling in order to address the issues raised and documented in the evaluation performed by Dr. Jonathan Seigel;
- (c) demonstrate significant education related to professional boundary issues and appropriate prescribing practices. These issues should account for at least half of his required CME credits upon application for reinstatement;
- (d) provide the Board with releases to obtain all substance abuse evaluation and treatment records as well as all psychological and medical records from 2002 to the time of the Licensee's application for reinstatement.

4. The Licensee will have the burden of demonstrating and proving that the conduct and conditions which gave rise to this Order and his previous Consent Agreement have been professionally treated. He will appear before the Board to answer any questions related to his application for reinstatement. The Board will determine whether his license will be reinstated pursuant to whatever terms and conditions the Board deems appropriate to ensure professional practice by the Licensee as a Physician Assistant.

5. The Licensee has been represented by Mitchell Flick, Esq., who has participated in the negotiation of this Consent Agreement on his behalf.


6. In regard to all terms and conditions of this Consent Agreement, the Licensee waives any further hearings or appeals to the courts regarding this Agreement. The Licensee agrees that this Consent Agreement is the final Order resolving all issues addressed in the Notice of Hearing dated February 12, 2004.

**I, TIMOTHY P. TOTO, P.A.-C., HAVE READ AND UNDERSTAND THE FOREGOING CONSENT AGREEMENT. I UNDERSTAND THAT BY SIGNING IT, I WAIVE CERTAIN RIGHTS. I SIGN THIS CONSENT AGREEMENT VOLUNTARILY, WITHOUT ANY THREAT OR PROMISE. I UNDERSTAND THAT THIS CONSENT AGREEMENT IS A PUBLIC DOCUMENT. IT CONTAINS THE ENTIRE AGREEMENT AND THERE IS NO OTHER AGREEMENT OF ANY KIND, VERBAL, WRITTEN OR OTHERWISE.**

DATED: 5/11/04   
TIMOTHY P. TOTO, P.A.-C.

STATE OF MAINE  
Kennebec, S.S.

Personally appeared before me the above-named Timothy P. Toto, P.A.-C., and swore to the truth of the foregoing based upon his own personal knowledge, or upon information and belief, and so far as upon information and belief, he believes it to be true.

DATED: 5/11/04   
NOTARY PUBLIC/ATTORNEY AT LAW

DATED: 5/11/04   
MITCHELL J. FLICK, ESQ.  
Attorney for Timothy P. Toto, P.A.-C.

STATE OF MAINE  
BOARD OF LICENSURE IN MEDICINE

DATED: 5-11-04



EDWARD DAVID, M.D., J.D.,  
Chairman

STATE OF MAINE, DEPARTMENT  
OF ATTORNEY GENERAL

DATED: 5/11/04



RUTH E. MCNIFF  
Assistant Attorney General

APPROVED  
EFFECTIVE: 5/11/04

STATE OF MAINE  
BOARD OF LICENSURE IN MEDICINE

In re: ) CONSENT  
Timothy P. Toto, P.A.-C. ) AGREEMENT

This document is a Consent Agreement, effective when signed by all parties, entered into by Timothy P. Toto, P.A.-C. ("the Licensee"), the State of Maine Board of Licensure in Medicine ("the Board") and the State of Maine Department of the Attorney General.

STATEMENT OF FACTS

1. At all times relevant to this agreement, the Licensee has been licensed as a Physician's Assistant in the State of Maine and employed by Prime Care Medical ("PCM") at the Cumberland County Jail.
2. In 2000 and 2001, the Licensee wrote prescriptions on Cumberland County Jail prescription blanks for persons who were not inmates in the Cumberland County Jail and not his patients. The Licensee's writing of these prescriptions was outside of his plan of supervision and without the knowledge or approval of his supervising physician. These prescriptions were for controlled substances, primarily Alprazolam and Hydrocodone.
3. The Licensee also wrote prescriptions for Hydrocodone for an employee of PCM. When the employee filled the prescriptions with the Licensee, he took possession of some of the controlled substances for himself. The Licensee denies that he

has a substance abuse problem and there is no evidence that he consumed the substances himself.

4. The Licensee voluntarily surrendered his controlled substances registration to the Drug Enforcement Agency on June 27, 2001.

5. The Board reviewed the facts which led to the Licensee's voluntary surrender of his DEA registration and issued a complaint alleging unprofessional conduct.

#### AGREEMENT

In lieu of proceeding to an adjudicatory hearing, the Licensee, the Board and the Department of the Attorney General agree to the following:

1. The Licensee admits that writing prescriptions on Cumberland County Jail prescription pads for individuals who were not inmates and not patients of the Licensee constitutes unprofessional conduct.

2. The Licensee's license to practice as a physician's assistant will be SUSPENDED for 30 days and he will be placed on PROBATION until October 30, 2002 which is when his probation for his criminal conviction ends.

3. As a condition of his probation, the Licensee will have an independent substance abuse evaluation performed by a physician approved by the Board. If the evaluator suggests that treatment, counseling and/or monitoring is appropriate, the Licensee agrees to follow the evaluator's recommendations.



4. The Licensee has surrendered his DEA registration. Before he applies for reinstatement of his DEA registration, the Licensee will contact the Board and provide any information requested by the Board for their review.

5. The Licensee will show this agreement to any physician who agrees to be his supervising physician.

6. The Board has jurisdiction of the Licensee, his license and all matters currently pending before the Board.

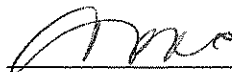
7. The Licensee has been represented by Daniel J. Dubord, Esq. in the negotiations of the terms of this agreement.

8. The Licensee waives his right to a hearing before the Board or any court regarding all terms, subject matter and conditions of this Consent Agreement.

**I, TIMOTHY P. TOTO, P.A.-C., HAVE READ AND UNDERSTAND THE FOREGOING CONSENT AGREEMENT. I UNDERSTAND THAT BY SIGNING IT, I WAIVE CERTAIN RIGHTS. I SIGN THIS CONSENT AGREEMENT VOLUNTARILY, WITHOUT ANY THREAT OR PROMISE. I UNDERSTAND THAT THIS CONSENT AGREEMENT CONTAINS THE ENTIRE AGREEMENT AND THERE IS NO OTHER AGREEMENT OF ANY KIND, VERBAL, WRITTEN OR OTHERWISE.**

DATED:

MARCH 12, 2002



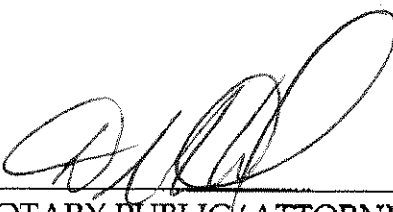
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TIMOTHY P. TOTO, P.A.-C.

STATE OF MAINE

Kennebec, S.S.

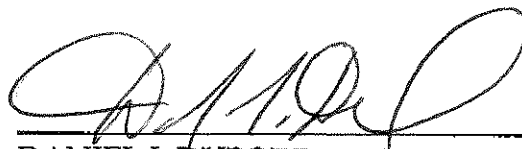
Personally appeared before me the above-named Timothy P. Toto, P.A.-C., and swore to the truth of the foregoing based upon his own personal knowledge, or upon information and belief, and so far as upon information and belief, he believes it to be true.

DATED: March 12, 2002

  
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NOTARY PUBLIC/ ATTORNEY AT LAW


DANIEL J. DUBORD  
NOTARY PUBLIC - MAINE  
MY COMMISSION EXP. 09/29/2005

DATED: March 12, 2002

  
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DANIEL J. DUBORD, ESQ.  
Attorney for Timothy P. Dubord, P.A.-C.

STATE OF MAINE  
BOARD OF LICENSURE IN MEDICINE

DATED: 3/12/02

  
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EDWARD DAVID, P.A.-C., Chairman  
MD, JD

STATE OF MAINE DEPARTMENT  
OF THE ATTORNEY GENERAL

DATED: 3/12/02

  
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RUTH E. McNIFF  
Assistant Attorney General

APPROVED  
EFFECTIVE: