

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Accusation Against:

Richard Alan Heiner, M.D.

Physician's and Surgeon's
Certificate No. C 51617

Respondent.

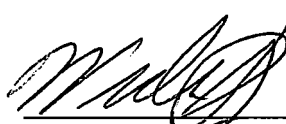
MBC File # 800-2019-054990

**ORDER CORRECTING NUNC PRO TUNC
CLERICAL ERROR IN AGREEMENT FOR SURRENDER**

On its own motion, the Medical Board of California (hereafter "Board") finds that there is a clerical error throughout the Agreement for Surrender and that such clerical error shall be corrected so that every reference to "Richard A. Heiner" is known to mean "Richard Alan Heiner".

IT IS HEREBY ORDERED that Respondent's name is hereby amended and corrected nunc pro tunc as of the date of entry of the Decision to read as "Richard Alan Heiner".

November 19, 2021



William Prasifka
Executive Director

BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation
Against:

Richard A. Heiner, M.D.
551 Watson Street, Apartment 4
Monterey, CA 93940-2273

Physician's and Surgeon's
Certificate No. C 51617

Respondent.

Case No. 800-2019-054990

AGREEMENT FOR
SURRENDER OF LICENSE

TO ALL PARTIES:

IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-entitled proceedings, that the following matters are true:

1. Complainant, William Prasifka, is the Executive Director of the Medical Board of California, Department of Consumer Affairs ("Board").

2. Richard A. Heiner, M.D. ("Respondent") has carefully read and fully understands the effect of this Agreement.

3. Respondent understands that by signing this Agreement he is enabling the Board to issue this order accepting the surrender of license without further process. Respondent understands and agrees that Board staff and counsel for complainant may communicate directly with the Board regarding this Agreement, without notice to or participation by Respondent. The Board will not be disqualified from further action in this matter by virtue of its consideration of this Agreement.

4. Respondent acknowledges there is current disciplinary action against his license, that on August 13, 2019, an Accusation was filed against him and on March 27, 2020, a Decision was rendered wherein his license was revoked, with

RHA 10/20/1961

1 the revocation stayed, and placed on Five (5) years' probation with various
2 standard terms and conditions.

3 5. The current disciplinary action provides in pertinent part, "Following the
4 effective date of this Decision, if Respondent ceases practicing due to retirement,
5 health reasons, or is otherwise unable to satisfy the terms and conditions of
6 probation, Respondent may request voluntary surrender of Respondent's license."
7 (Condition #22).

8 6. Upon acceptance of the Agreement by the Board, Respondent
9 understands he will no longer be permitted to practice as a physician and surgeon
10 in California, and also agrees to surrender his wallet certificate, wall license and
11 any D.E.A. Certificate(s) for an address in California.

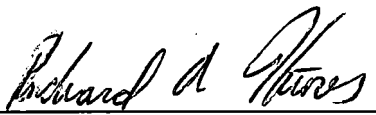
12 7. Respondent fully understands and agrees that if Respondent ever files
13 an application for relicensure or reinstatement in the State of California, the Board
14 shall treat it as a Petition for Reinstatement of a revoked license in effect at the
15 time the Petition is filed. In addition, any Medical Board Investigation Report(s),
16 including all referenced documents and other exhibits, upon which the Board is
17 predicated, and any such Investigation Report(s), attachments, and other exhibits,
18 that may be generated subsequent to the filing of this Agreement for Surrender of
19 License, shall be admissible as direct evidence, and any time-based defenses,
20 such as laches or any applicable statute of limitations, shall be waived when the
21 Board determines whether to grant or deny the Petition.

22 ///
23
24
25
26
27
28

NAH 10/20/2021

ACCEPTANCE

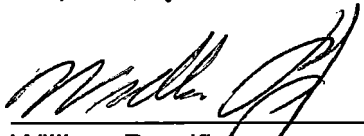
I, Richard A. Heiner, M.D. have carefully read the above Agreement and enter into it freely and voluntarily, with the optional advice of counsel, and with full knowledge of its force and effect, do hereby surrender Physician's and Surgeon's Certificate No. C 51617, to the Medical Board of California for its acceptance. By signing this Agreement for Surrender of License, I recognize that upon its formal acceptance by the Board, I will lose all rights and privileges to practice as a Physician and Surgeon in the State of California and that I have delivered to the Board my wallet certificate and wall license.


Richard A. Heiner, M.D.

10/20/2021
Date

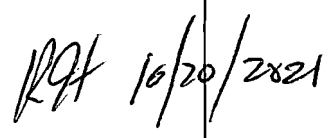

Attorney or Witness
ADRIENNE ELDER

10/20/2021
Date


William Prasifka
Executive Director
Medical Board of California

NOV 08 2021
Date

///
///
///


10/20/2021