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FILED

MARCH 21, 2005

NEW JERSEY STATE BOARD
OF MEDICAL EXAMINERS

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STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
BOARD OF MEDICAL EXAMINERS
OAL DOCKET NO.

IN THE MATTER OF THE SUSPENSION :
OR REVOCATION OF THE LICENSE OF :

Ronald L. Brody
LICENSE NO. 25MA04660000

Administrative Action

CONSENT ORDER

TO PRACTICE MEDICINE AND SURGERY :
IN THE STATE OF NEW JERSEY

This matter was opened to the New Jersey State Board of Medical Examiners, (hereafter the "Board") upon receipt of investigative information concerning Respondent, Ronald L. Brody, M.D.'s billing practices. The investigation revealed that Respondent billed range of motion tests and manual muscle tests performed on patient M.F. separately, when they should have been included as part of the physiatriic evaluation. The investigation further revealed that Respondent submitted two (2) health insurance claim forms for patient C.A. with Respondent's stamped signature, but with Randall B. Gurak, M.D.'s name and address as the recipient of payment. In fact, Dr. Gurak had never treated patient C.A. In



addition, Respondent submitted health insurance claim forms for patients D.I., E.V., P.C., J.L., R.C., and T.S., all with his stamped signature, but with Randall B. Gurak, M.D.'s name and address as the recipient of payment.

The Board finds that Respondent engaged in acts violative of the Board's recordkeeping regulation, N.J.A.C. 13:35-6.5, therefore violating N.J.S.A. 45:1-21(h) as evidenced by the unbundling of medical services provided to patient M.F. and submitting incorrect and inaccurate health insurance claim forms for patients C.A., D.I., E.V., P.C., J.L., R.C., and T.S. Respondent, being desirous of resolving the within matter without further formal proceedings and the Board finding the within disposition to be adequately protective of the public health, safety and welfare,

IT IS, therefore, on this 21ST day of MARCH, 2005,

ORDERED THAT:

1. Respondent, Ronald L. Brody, M.D. is hereby reprimanded for acts violative of N.J.A.C. 13:35-6.5 and N.J.S.A. 45:1-21(h).

2. Respondent shall pay a civil penalty of Two Thousand Five Hundred Dollars (\$2,500.00) to the New Jersey State Board of Medical Examiners upon execution of the within Order. The Board reserves the right to file a Certificate of Debt in the event payment is not submitted in a timely manner.

3. Respondent shall pay costs in the amount of \$ 3,175.00 to the New Jersey State Board of Medical Examiners upon execution of

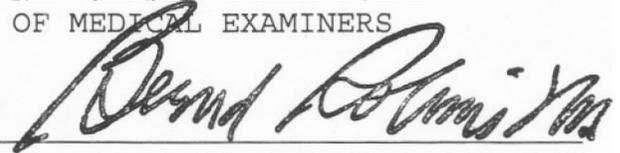
the within Order. The Board reserves the right to file a Certificate of Debt in the event payment is not submitted in a timely manner.

4. Respondent shall enroll in and successfully complete a Board approved ethics course within one year of the execution of this Order. Successful completion means that all sessions were attended, all assignments were properly and appropriately completed, and a passing grade was achieved which was unconditional, and without reservations.

5. Respondent shall comply with the applicable portions of the attached "Directives" which are incorporated herein by reference.

NEW JERSEY STATE BOARD
OF MEDICAL EXAMINERS

By:



Bernard Robbins, M.D., F.A.C.P.
President

I have read and understood the within Order and agree to be bound by its terms. Consent is hereby given to the Board to enter this Order.



Ronald L. Brody, M.D.

DATED:

3/10/02

DATED:

Frank Schwartz, Esq.



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NEW JERSEY STATE BOARD
OF MEDICAL EXAMINERS

BY: _____

Bernard Robbins, M.D., F.A.C.P.
President

I have read and understood
the within Order and agree
to be bound by its terms,
Consent is hereby given to
the Board to enter this Order.



Ronald L. Brody, M.D.

DATED: 3/10/05



DATED: 3/16/05

**DIRECTIVES APPLICABLE TO ANY MEDICAL BOARD LICENSEE
WHO IS DISCIPLINED OR WHOSE SURRENDER OF LICENSURE
HAS BEEN ACCEPTED**

APPROVED BY THE BOARD ON MAY 10, 2000

All licensees who are the subject of a disciplinary order of the Board are required to provide the information required on the **Addendum** to these Directives. The information provided will be maintained separately and will **not be part** of the public document filed with the Board. Failure to provide the information **required** may result in further **disciplinary** action **for failing to cooperate with** the Board, as required by **N.J.A.C. 13:45C-1 et seq.** **Paragraphs 1 through 4 below shall apply** when a **license is suspended or revoked** or permanently surrendered, with or without **prejudice**. **Paragraph 5 applies** to licensees **who** are the **subject** of an order which, while permitting continued practice, contains a **probation** or monitoring requirement.

1. Document Return and Agency Notification

The licensee shall promptly **forward** to the Board office at Post Office **Box 183**, 140 **East** Front Street, 2nd floor, Trenton, New Jersey **08625-0183**, the original license, current biennial **registration** and, if applicable, the original CPS registration. In addition, if the licensee **holds** a Drug Enforcement Agency (DEA) registration, he or she shall promptly advise the **DEA** of the **licensure** action. (With respect to suspensions of a finite Term, at the conclusion of the term, the licensee may contact the **Board office** for the return of the documents previously surrendered to the Board. In addition, at the conclusion of **the** term, the licensee should contact the DEA to **advise** of the **resumption of** practice and to ascertain the impact of that change upon his/her DEA registration.)

2. Practice Cessation

The licensee **shall** cease and desist from engaging in the practice of **medicine** in **this** State. This **prohibition** not only bars a licensee from rendering professional services, **but** also from providing an opinion as to professional practice or its application, or representing **him/herself** as being eligible to practice. (Although the licensee **need not** affirmatively advise patients or others of the revocation, suspension or surrender, the licensee must truthfully disclose his/her **licensure** status in response to inquiry.) The disciplined licensee is also prohibited from occupying, sharing or using office space in which another licensee provides health care services. The disciplined licensee may contract for, accept payment from another licensee for or rent at fair market value office premises **and/or** equipment. In no case may the disciplined licensee authorize, allow or condone the use of his/her provider number by any health care practice or any other licensee or health care provider. (In situations where the licensee **has been suspended** for **less** than one year, the licensee may accept payment from another professional who is **using** his/her office during the period that the licensee is **suspended**, for the payment of **salaries** for office **staff** employed at the time of the **Board** action.)

A licensee whose license has been revoked, suspended for one (1) year or more or **permanently surrendered** must remove signs and take affirmative action to stop advertisements by which his/her eligibility to practice is represented. The licensee must **also take steps** to remove his/her name from professional listings, telephone directories, professional **stationery**, or billings. If the licensee's name is utilized in a group practice title, it shall be deleted. Prescription pads bearing the licensee's name shall be destroyed. A destruction report form obtained from the Office of Drug Control (973-504-6558) must be filed. If no other licensee is providing services at the location, all medications must be removed and returned to the manufacturer, if possible, destroyed or safeguarded. (In situations where a license has been suspended for less than one year, prescription pads and medications need not be destroyed but must be secured in a locked place for safekeeping.)

3. Practice Income Prohibitions/Divestiture of Equity Interest in Professional Service Corporations and Limited Liability Companies

A licensee shall not charge, receive or **share in** any fee for professional services rendered by him/herself or others while **barred from** engaging in the professional practice. The licensee may be compensated for the reasonable value of **services** lawfully rendered and **disbursements** incurred on a patient's behalf prior to the effective date of the **Board** action.

A licensee who is a shareholder in a professional service corporation organized to engage in the professional practice, whose license is revoked, surrendered or suspended for a term of one (1) **year** or more **shall be** deemed to be disqualified from the practice within the meaning of the Professional Service Corporation Act. (N.S.S.A. 14A:17-11). A disqualified licensee shall divest him/herself of all financial interest in the professional service corporation pursuant to N.J.S.A. 14A:17-13(c). A **licensee** who is a member of a limited liability company organized pursuant to N.J.S.A. 42:1-44, shall divest him/herself of all financial interest. Such divestiture shall occur within 90 days following the the entry of the **Order** rendering the licensee disqualified to participate in the applicable form of ownership. Upon divestiture, a licensee shall forward to the Board a **copy** of documentation forwarded to the Secretary of State, Commercial Reporting Division, demonstrating that the interest has been terminated. If the licensee is the sole shareholder in a professional service corporation, the corporation must be dissolved within 90 days of the licensee's disqualification.

4. Medical Records

If, as a result of the Board's action, a practice is closed or transferred to another location, the licensee shall **ensure** that during the three (3) month period following the effective date of the **disciplinary** order, a message will be delivered to patients calling the former office premises, advising where records may be obtained. The message should inform patients of the names and telephone numbers of the licensee (or his/her attorney) assuming custody of the records. The same information shall also be disseminated by means of a notice to be published at least once per month for three (3) months in a newspaper of

general circulation in the geographic vicinity in which the practice was conducted. At the end of the three month **period**, the licensee shall file with the Board the name **and** telephone number of the contact **person** who **will** have access to medical records of former patients. **Any change** in that individual or his/her telephone number shall be promptly reported to the Board. When a patient or his/her representative requests a copy of his/her medical record or asks that record **be forwarded** to another health care provider, the licensee shall **promptly** provide **the record** without charge to the patient.

5. Probation/Monitoring Conditions

With respect to any licensee **who is** the subject of any Order imposing a probation or monitoring requirement or a stay of an active suspension, in whole or in part, which is **conditioned** upon compliance with a probation or monitoring requirement, the licensee **shall fully** cooperate **with** the Board **and** its designated representatives, including the Enforcement Bureau of the Division of Consumer Affairs, in ongoing monitoring of the licensee's status and practice. Such monitoring shall be at *the expense* of the disciplined practitioner.

(a) Monitoring of practice conditions may include, **but is** not limited to, inspection of the professional premises and equipment, and inspection **and** copying of patient records (confidentiality of patient identity shall **be** protected **by** the Board) to verify compliance with the Board Order and accepted standards of practice.

(b) Monitoring of status conditions for an impaired practitioner may include, **but is** not limited to, practitioner cooperation in **providing** releases permitting unrestricted access to **records and** other information to the extent permitted **by** law from any treatment facility, other treating practitioner, support group or other individual/facility involved in the education, treatment, monitoring or oversight of the practitioner, or maintained by a rehabilitation program for impaired practitioners. If bodily **substance** monitoring **has been ordered**, the practitioner shall fully cooperate by responding to a demand for breath, **blood**, urine or other **sample** in a timely manner and providing the designated sample.



**NOTICE OF REPORTING PRACTICES OF BOARD
REGARDING DISCIPLINARY ACTIONS**

Pursuant to N.J.S.A. 52:14B-3(3), **all orders** of the New Jersey State Board of Medical Examiners are available **for** public inspection. Should any **inquiry be made** concerning the status of a licensee, the **inquirer will be** informed of the existence of the **order and a copy will be provided** if requested. **All evidentiary** hearings, proceedings on motions or other applications which **are conducted** as public hearings and the record, including the transcript and documents marked in evidence, are available for public inspection, upon request.

Pursuant to 45 CFR Subtitle A 60.8, the Board is obligated to report to the National Practitioners Data Bank any action relating to a physician which is based on reasons relating to professional competence or professional conduct:

- (1) **Which revokes or suspends (or otherwise restricts) a license,**
- (2) **Which censures, reprimands or places on probation,**
- (3) **Under which a license is surrendered.**

Pursuant to 45 CFR Section 61.7, the Board is obligated to report to the Healthcare Integrity and Protection (HIP) Data Bank, any formal or official actions, such as revocation or suspension of a license (and the length of any such suspension), reprimand, censure or probation or any other loss of license or the right to apply for, or renew, a license of the provider, supplier, or practitioner, whether by operation of law, voluntary surrender, non-renewability, or otherwise, or any other negative action or finding by such Federal or State agency that is publicly available information.

Pursuant to N.J.S.A. 45:9-19.13, if the **Board refuses to issue, suspends, revokes or otherwise places conditions** on a license or permit, it is obligated to notify each **licensed** health care facility and health maintenance organization with which a licensee is affiliated and every other board licensee in this state with whom he or she is directly associated in private **medical** practice.

In accordance with an agreement with the Federation of State Medical **Boards** of the United States, a list of all disciplinary orders are provided to that organization on a monthly basis.

Within the month following entry of an order, a summary of **the order** will appear on the **public** agenda for the next monthly Board meeting and is forwarded to those members of the public requesting a copy. In addition, the same summary will appear in **the** minutes of **that** Board meeting, which are also made available to those requesting a copy,

Within the month following entry of an order, a summary of **the order will appear** in a Monthly Disciplinary Action Listing which is **made** available to **those members** of the public requesting a copy.

On a periodic basis the **Board** disseminates to its licensees a newsletter which includes a brief description of **all** of **the** orders entered by the Board.

From time to time, the Press Office of the Division of **Consumer** Affairs may issue releases including the summaries of the content of **public orders**.

Nothing herein is intended in any way to limit the Board, the Division or the **Attorney General** from disclosing any public document.

ADDENDUM

Any licensee who is the subject of an order of the Board suspending, revoking or otherwise conditioning the license, shall provide the following information at the time that the order is signed, if it is entered by consent, or immediately after service of a fully executed order entered after a hearing. The information required here is necessary for the Board to fulfill its reporting obligations:

Social Security Number: _____

List the Name and Address of any and all Health Care Facilities with which you are affiliated:

List the Names and Address of any and all Health Maintenance Organizations with which you are affiliated:

Provide the names and addresses of every person with whom you are associated in your professional practice: (You may attach a blank sheet of stationery bearing this information).

¹ Pursuant to 45 CFR Subtitle A Section 61.7 and 45 CFR Subtitle A Section 60.8, the Board is required to obtain your Social Security Number and/or federal taxpayer identification number in order to discharge its responsibility to report adverse actions to the National Practitioner Data Bank and the HIP Data Bank.