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FILED
February 21, 2012

NEW JERSEY STATE BOARD OF MEDICAL EXAMINERS

By: Meaghan Goulding Deputy Attorney General (973) 648-4741

STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF MEDICAL EXAMINERS

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

CHERYL ACKERMAN, M.D. LICENSE NO.: 25MA06096100

TO PRACTICE MEDICINE AND SURGERY IN THE STATE OF NEW JERSEY

Administrative Action

ORDER OF AUTOMATIC SUSPENSION OF LICENSE

This matter was most recently opened to the New Jersey State Board of Medical Examiners ("Board") upon receipt of a letter dated February 14, 2012 from Louis E. Baxter, M.D., FASAM, Executive Medical Director of the Professional Assistance Program of New Jersey ("PAP"), which gave notice that Respondent, Cheryl Ackerman, M.D., is non-compliant with the Private Letter Agreement that she had entered into with the Board on October 24, 2011 and with the recommendations of the PAP. Specifically, Respondent has failed to provide the requested psychiatric reports to the PAP and has refused to undergo an independent psychiatric evaluation. Additionally, the PAP has expressed its concerns about Respondent's overall fitness to practice.

# CERTIFIED TRUE COPY

Respondent entered into a Private Letter Agreement with the Board on October 24, 2011 after the Board found that it had serious concerns about her professional practice and mental health. Among the items agreed to between Respondent and the Board was Respondent's continued enrollment in the PAP and full compliance with all the recommendations of the PAP. A copy of the PLA is attached.

Pursuant to Paragraph 4 of the October 24, 2011 PLA, Respondent consented

that upon reliable information of any failure to comply with any terms of this private letter agreement or failure to follow any recommendation of the PAP or your therapist, the Board may automatically suspend your license to practice medicine in New Jersey and initiate disciplinary action based on the facts that gave rise to this private letter.

In addition, pursuant to Paragraph 5 of the October 24, 2011 Private Letter Agreement, Respondent consented that

in the event of an allegation of a violation of this agreement the document will become public and may be utilized in any proceeding regarding licensure.

The Board finding Respondent in violation of the October 24, 2011 agreement, in that she has been non-compliant with the Board and the PAP by refusing to provide requested psychiatric reports to the PAP and has refused to undergo an independent psychiatric evaluation, and it further appearing that the Board finding the within Order is adequately protective of the public health, safety, and welfare,

ORDERED: DAY OF February , 2012.

- 1. The license of Respondent Cheryl Ackerman, M.D. to practice medicine and surgery in this State is hereby actively suspended. Respondent shall immediately cease and desist any practice of medicine and surgery in this State.
- 2. Upon receipt of a filed copy of this Order, Respondent shall return her original New Jersey license and current biennial registration to the New Jersey State Board of Medical Examiners, P.O. Box 183, Trenton, New Jersey 08625-0183.
- 3. Upon receipt of a filed copy of this Order, Respondent shall return her original CDS registration to the New Jersey State Board of Medical Examiners, P.O. Box 183, Trenton, New Jersey 08625-0183.
- 4. Upon receipt of a filed copy of this Order, Respondent shall immediately advise the DEA of this Order and forward a copy of this Order.
- 5. Respondent shall comply with the attached directives for physicians who are disciplined or whose surrender of licensure has been accepted by the Board, which are incorporated herein by reference.
- 6. The entry of this Order is without prejudice to further action, investigation or restrictions upon any reinstatement, by this Board, the Attorney General, the Drug Control Unit, the Director of the Division of Consumer Affairs or other law enforcement resulting from Dr. Ackerman's conduct prior to the entry of this Order.
- 7. Respondent shall have the right to apply for removal of the automatic suspension on five (5) days notice but in such event shall be limited to a showing that the information received regarding her violation of the agreement was materially false.
- 8. In the event Respondent wishes to petition the Board for reinstatement of her license to practice medicine in the State of New Jersey, she shall appear personally before the

Board or a Committee of the Board and demonstrate to the satisfaction of the Board that she is capable of discharging the functions of a licensee in a manner consistent with the public's health, safety, and welfare. At the appearance Respondent shall provide at a minimum reports from all mental health professionals who have participated in Respondent's care and/or treatment during the period of time during her suspension, and a report from the PAP detailing the nature and extent of her involvement with that entity, if any. She shall also submit documentation, if any, of all continuing medical education she has completed during his inactive status. Respondent shall be prepared to discuss her readiness to re-enter the practice of medicine. At that time she shall be prepared to propose her future plans for practice and affirmatively establish her fitness, competence, and capacity to re-enter the active practice of medicine and surgery in New Jersey. Following its review of all the relevant documents and submissions, the Board, in its sole discretion, will determine whether the Respondent is physically and psychologically fit to practice medicine and surgery in the State of New Jersey.

NEW JERSEY STATE BOARD OF

MEDICAL EXAMINER

By: Paul T. Jordan, M.D.

President



CHRIS CHRISTIE
Governor

KIM GUADAGNO Lt. Governor

#### New Jersey Office of the Attorney General

Division of Consumer Affairs State Board of Medical Examiners P.O. Box 183, Trenton, NJ 08625-0183



OCTOBER 24, 2011

NEW JERSEY STATE BOARD OF MEDICAL EXAMINERS

Cheryl Ackerman, MD 368 Ridgewood Avenue Glen Ridge, NJ 07028



PAULA T. DOW Attorney General

THOMAS R. CALCAGNI
Acting Director

For Delivery Services: 140 East Front St. PO Box 183, 3<sup>rd</sup> Floor Trenton, NJ 08608 (609) 826-7100 (609) 826-7117 FAX

## NOT A PUBLIC RECORD

RE: I/M/O Cheryl Ackerman, M.D./Private Letter Agreement

Dear Dr. Ackerman:

As you are aware, the State Board of Medical Examiners has undertaken an investigation premised upon multiple patient complaints alleging possible substance abuse, impairment, fraud, professional misconduct and incompetence as well as a report from the Professional Assistance Program (PAP) that you have been noncompliant, have not seen a psychotherapist for recommended follow-up, and have failed to cooperate with Board requests for copies of patient records. The Board considered the following prior to a determination to enter a private letter agreement:

- Consumer Complaints regarding your care and treatment of B

  Broken, Marie Property, Carlot Harry, Daniel See and State

  Lagran;
- Dr. Ackerman's office medical records of B M M A Ackerman, C H M D S and S L
- Dr. Ackerman's written response to complaints regarding her care and treatment of Manager Page 1, Carl Harm, Day San and San Land
- 4. Letter from Paul T. Jordan, M.D., President Board of Medical Examiners to Dr. Ackerman dated December 30, 2010.
- Letter from Executive Director Roeder to Dr. Ackerman dated January 6, 2011
   New Jersey Is An Equal Opportunity Employer Printed on Recycled Paper and Recyclable

- 6. Dr. Ackerman's letters to the Board dated January 8, 2011 and April 7, 2011.
- 7. Letters from the PAP to Executive Director Roeder dated January 26, 201 and April 5, 2011
- 8. Letter from the PAP to Joseph Gorrell, Esq. Dated July 20, 2011
- 9. Letter dated July 7, 2011 from Mark P. Faber, M.D.
- 10. Letter dated July 12, 2011 from Ben J. Susswein, Ph.D.
- 11. Dr. Ackerman's sworn testimony before the Preliminary Evaluation Committee on July 27, 2011.

The Board has concluded that there have been serious allegations regarding your professional conduct, and while we do feel entry of this private letter is protective at this time, we reserve the right to reopen these consumer complaints and take further action, including disciplinary action, upon receipt of any new complaints of a similar nature or any non-compliance with this private letter agreement. The Board is concerned about your apparent denial of diagnoses by multiple therapists of adjustment disorder, personality disorder and depressive disorder and the concurrent need to engage in counseling. In your written response to the complaints regarding patients Same Leman, Damie Same and Managery you referred to yourself in both the first and third person. During your appearance before the Board, you were often unable to answer questions directly, especially questions regarding psychotherapy and patient complaints regarding your alleged erratic behavior. Additionally, it is the Board's opinion that anxiety was interfering with your ability to focus during your appearance. This inability to focus on a task could adversely affect the quality of care and may explain some of the patient complaints alleging inappropriate or erratic behavior or conversation.

The Board has determined that its concerns with regard to any possible risk of harm to your patient population would be satisfactorily addressed by your representation to comply with certain requirements, as commemorated by your entry into this private letter agreement.

Specifically, you have agreed that:

1. You will continue enrollment in the PAP and you will comply fully with all

recommendations of the PAP. You will obtain the agreement of the PAP via a signature of its representative on this Agreement to notify the Board within 24 hours of its receipt of information of any noncompliant behavior, including but not limited to failure to appear for any scheduled appointment or any discontinuance of the PAP program whether initiated by Respondent or by the PAP. You expressly waive any claim to privilege or confidentiality that you may have concerning reports and disclosures to the Board, and use by the Board of that information in any license proceedings, including reports and disclosures by the PAP, or any other person or entity involved in your treatment plan as outlined by the PAP. All costs associated with the monitoring outlined above shall be the responsibility of, and paid directly by, you.

- 2. You will engage in regular therapy with a therapist pre-approved by the Board and the PAP and follow all recommendations of your therapist. Regular therapy means that you will meet with your therapist no less than once per week for at least 3 months, and then at frequency to be determined by your therapist after discussion with the PAP.
- 3. You consent to the Board providing directly to the PAP and your therapist copies of this private letter agreement and all documents listed above.
- 4. You will comply fully with any Board request for information within 10 days of receipt.
- 5. You will enroll in and complete a course in medical office management that is pre-approved by the Board within six months of entering into this agreement.

You have also indicated that you are aware that upon reliable information of any failure to comply with any terms of this private agreement or failure to follow any recommendation of the PAP or your therapist, the Board may automatically suspend your license to practice medicine in New Jersey and initiate disciplinary action based on the facts that gave rise to this private letter. You may, upon five days notice, request a hearing to contest the entry of such an order. At any such hearing, the sole issue shall be whether any of the information received regarding your violation of the agreement or your relapse was materially false. In addition, the Board reserves the right to bring further disciplinary action.

Your signature on this document indicates the provisions are acceptable to you. This document is not a public document and shall be maintained privately by the Board. However, in the event of an allegation of a violation of this agreement the document will become public and may be utilized in any proceeding regarding licensure. If you consent to entry of this private

letter agreement, please sign the enclosed copy of this letter after consultation with counsel identified below and arrange for it to be signed by Louis E. Baxter, Sr., M.D., FASAM, Medical Director, Professional Assistance Program. It will then be filed in the Board office as a private document. In the event that you have any questions regarding the foregoing, please contact counsel, or if at this time, you are not represented, the DAG indicated below.

Sincerely yours,

NEW JERSEY BOARD OF MEDICAL EXAMINERS

By:

Paul T. Jordan, M.D. Board President

I have read and understand the above Agreement and I agree to be bound by its terms. I hereby consent to entry of this Private Letter Agreement.

Agreed as to the monitoring and reporting requirements of this Agreement on behalf of the Professional Assistance Program.

Louis E. Baxter, Sr., M.D., FASAM Medical Director

Professional Assistance Program

Agreed as to form and content:

cc:

Attorney for Chery Ackerman, M.D.

William Roeder, Executive Director, Board of Medical Examiners

Megan K. Cordoma, DAG

Joseph Gorrell, Esq.



# PROFESSIONAL ASSISTANCE PROGRAM OF NEW JERSEY 742 ALEXANDER ROAD PRINCETON, NEW JERSEY 08540-8568 Tel: 609 919-1660; Fax: 609 919-1611

February 14, 2012

Mr. William Roeder Executive Director State Board of Medical Examiners Post Office Box 183 Trenton, New Jersey 08625

RE: CHERYL ACKERMAN, M.D.

Dear Mr. Roeder:

I am writing to advise you that Dr. Cheryl Ackerman is non-compliant with the Private Letter Agreement that she entered with the State Board of Medical Examiners and with the recommendations of the Professional Assistance Program for her ongoing monitoring. I met with Dr. Ackerman this morning as a result of a call from Mountainside Hospital regarding her status there. I should note that she called several times while in route asking for directions. This was the eighth followup appointment that she has had in our offices. She reported to me that she did not know where she was.

We still have not received reports from Drs. Farber or Latimer. She again assured me that she would have Dr. Farber send in a report.

It was my strong recommendation to her that she undergo an independent psychiatric evaluation. I gave her the name of a psychiatrist. She responded that she did not wish to do this. I also requested that she undergo a comprehensive medical evaluation and have a report sent to me. She said that she would consider this.

PROHIBITION ON REDISCLOSURE Sec. 2.32, Prohibition on Redisclosure: This information has been disclosed to you from records protected by Federal confidentiality rules (42 CFR Part 2). The Federal rules prohibit you from making any further disclosure of this information making any further disclosure of this information 2. A general authorization for release of medical or other information is NOT sufficient for this purpose. The Federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient.

Mr. William Roeder February 14, 2012 Page two

At this time, based on the lack of any psychiatric reports since the initial psychiatric evaluation was done by Dr. Hammer a year ago, Mountainside Hospital's concern about her actions and my concern about her fitness to remain in practice, I am forwarding this case to the State Board of Medical Examiners for further action.

Very truly yours,

Louis E. Baxter, M.D., FASAM

**Executive Medical Director** 

Immediate Past President

American Society of Addiction Medicine

National Association of Drug Court Professionals-Director

LEB:lap

PROHIBITION ON REDISCLOSURE Sec. 2.32, Prohibition on Redisclosure: This information has been disclosed to you from records protected by Federal confidentiality rules (42 CFR Part 2). The Federal rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Part 2. A general authorization for release of medical or other information is NOT sufficient for this purpose. The Federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient.

# 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 CDS 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.J.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.