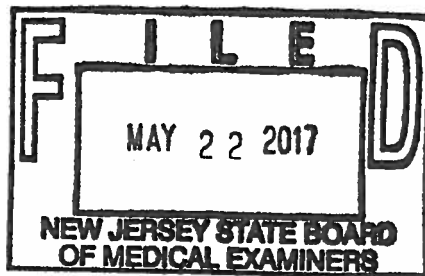


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STATE OF NEW JERSEY
DEPARTMENT OF LAW AND PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF MEDICAL EXAMINERS

IN THE MATTER OF THE SUSPENSION :
OR REVOCATION OF THE LICENSE OF :
: Administrative Action
BARRY K. RAY, JR., M.D. :
LICENSE NO. 25MA07888100 : CONSENT ORDER
:
TO PRACTICE MEDICINE AND SURGERY :
IN THE STATE OF NEW JERSEY :

This matter was most recently opened to the New Jersey State Board of Medical Examiners ("Board") upon information that Barry K. Ray, Jr., M.D. relapsed in his use of cocaine on at least three occasions from late March 2017 through April 8, 2017.

The Board's records with regard to Dr. Ray reflect that he was first enrolled in the Professional Assistance Program ("PAP"), which oversaw his recovery, in October 2010. Dr. Ray's enrollment in the PAP followed his arrest on August 27, 2010 on both Controlled Dangerous Substances (CDS) charges and possession of hollow point bullets. On September 8, 2010, Dr. Ray entered into a Consent Order with the Board whereby he voluntarily surrendered his medical license pending the outcome of his criminal charges. On

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December 13, 2011, he pled guilty to possession of hollow point bullets. On April 12, 2012, Dr. Ray entered into a Final Consent Order with the Board whereby he was formally suspended for four years with a two year active suspension period retroactive to September 14, 2010 and two years stayed as a period of probation. In addition, Dr. Ray was ordered to complete courses in ethics and record-keeping and remedial coursework in CDS prescribing. Under the 2012 Order, Dr. Ray's prescribing privileges were restricted for a ten year period effective December 13, 2011. Dr. Ray was also ordered to continue to comply with the recommendations of the PAP.

After more than six years of monitored recovery and demonstrated sobriety, on April 13, 2017 Dr. Ray reported to the PAP that he had relapsed into the use of cocaine at the end of March 2017. The PAP instructed him to not return to practice until further notice. On May 1, 2017, Dr. Ray was seen by a subcommittee of the Board, the Impairment Review Committee ("IRC"), to address his recent drug use. Dr. Ray admitted to cocaine use on three occasions between the end of March and April 8, 2017. He denied that he ever used cocaine on days he was working or on call. Dr. Ray testified to re-engaging in drug treatment on April 24, 2017 and complying with increased drug screening.

The parties being desirous of resolving this matter without the necessity of further proceedings, and it appearing that Dr. Ray

has read the terms of the within Order and understands their meaning and effect and having been specifically informed that he may consult an attorney to represent him in this matter, and that he chooses to voluntarily enter into this Consent Order and to be bound by same, and the Board finding that the within Order is adequately protective of the public health, safety, and welfare; and it appearing that good cause exists for the entry of the within Order;

IT IS, therefore, on this 22nd day of May, 2017,

ORDERED AND AGREED THAT:

1. Barry K. Ray, Jr., M.D. shall at a minimum, undertake the following:

a. Continue to participate in the PAP and comply with the requirements of the program which shall include but not be limited to:

1. Comply with a substance abuse treatment program as recommended and approved by the PAP as well as any and all recommendations made by that program for ongoing treatment;

2. Abstain from the use of all psychoactive substances, including alcohol and medications containing alcohol, unless prescribed by a treating physician for a documented medical condition, with notification from Dr. Ray's

treating physician to the PAP of the diagnosis, treatment plan, prognosis and medications prescribed;

3. Comply with random drug screens for the duration of his substance abuse treatment on a frequency as determined by the Executive Medical Director of the PAP;

4. Comply with face to face follow up meetings with the PAP on a monthly basis, until further Order of the Board or until the Executive Medical Director of the PAP recommends, in writing, a reduction in the frequency of these meetings;

5. Sign releases with his treating physicians and counselors in order that the PAP may ascertain his level of compliance and progress with treatment;

b. Provide the Board with detailed discharge summaries from any substance abuse programs and reports from each and every mental health professional (including but not limited to: psychologists, counselors, therapists, psychiatrists) who have participated in Dr. Ray's care and/or treatment for the disability in this

matter during the period of time from the date the within Order is filed to his successful discharge from the program.

2. The parties hereby stipulate that entry of this Consent Order is without prejudice to further action, investigation or restrictions upon Dr. Ray's license, by this Board, the Attorney General, the Drug Control Unit, the Director of the Division of Consumer Affairs, or other law enforcement entities resulting from Dr. Ray's conduct prior to the entry of this Order.

3. Dr. Ray hereby consents to the entry of an Order of automatic suspension of license without notice upon the Board's receipt of any information, which the Board in its sole discretion deems reliable, that he has failed to comply with any of the conditions set forth above, any other provision of this Order, any report of a confirmed positive urine, or a prima facie showing of a relapse or recurrence of the use of alcohol or any psychoactive substance which is not prescribed by a treating health care professional aware of Dr. Ray's substance abuse history for a documented medical condition with notification to the PAP as described above.

4. Dr. Ray 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 urine tested was not his or was a false positive in the case of urine testing, or that other

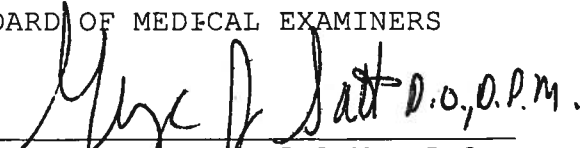
information submitted was false.

5. The entry of this Order does not obviate any agreements contained within the April 12, 2012 Final Consent Order not yet fulfilled.

6. Dr. Ray acknowledges that he has been specifically advised of his right to have this Consent Order reviewed by an attorney of his choosing. He enters this Consent Order knowingly and voluntarily and acknowledges that there have been no other representations or agreements not stated in writing herein.

NEW JERSEY STATE
BOARD OF MEDICAL EXAMINERS


BY:


George J. Scott, D.P.M., D.O.
Board President

I have read this Order and understand the Order and agree to be bound by its terms and conditions. I hereby give consent to the Board to enter this Order.


Barry K. Ray, Jr., M.D. Date: 5/15/17

Consented to on behalf of the Professional Assistance Program of New Jersey


Louis E. Baxter, M.D., FASAM
Executive Medical Director Date: 5/15/17

**DIRECTIVES APPLICABLE TO ANY MEDICAL BOARD LICENSEE
WHO IS DISCIPLINED OR WHOSE SURRENDER OF LICENSURE
OR CESSATION OF PRACTICE HAS BEEN ORDERED OR AGREED UPON**

APPROVED BY THE BOARD ON AUGUST 12, 2015

All licensees who are the subject of a disciplinary order or surrender or cessation order (herein after, "Order") of the Board shall provide the information required on the addendum to these directives. 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 licensee is suspended, revoked, has surrendered his or her license, or entered into an agreement to cease practice, with or without prejudice, whether on an interim or final basis. Paragraph 5 applies to licensees who are the subject of an order which, while permitting continued practice, contains probationary terms 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. Prior to the resumption of any prescribing of controlled dangerous substances, the licensee shall petition the Director of Consumer Affairs for a return of the CDS registration if the basis for discipline involved CDS misconduct. 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, surrender or cessation, the licensee must truthfully disclose his/her licensure status in response to inquiry.) The licensee subject to the order

is also prohibited from occupying, sharing or using office space in which another licensee provides health care services. The licensee subject to the order may contract for, accept payment from another licensee for rent at fair market value for office premises and/or equipment. In no case may the licensee subject to the order 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 subject to the order 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), subject to the order for the payment of salaries for office staff employed at the time of the Board action.

A licensee whose license has been revoked, suspended or subject to a surrender or cessation order for one (1) year or more must immediately take steps to 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 subject to the order 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.¹ 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 order.

¹This bar on the receipt of any fee for professional services is not applicable to cease and desist orders where there are no findings that would be a basis for Board action, such as those entered adjourning a hearing.

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 or who is ordered to cease practice 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 disqualified licensee who is a member of a limited liability company organized pursuant to N.J.S.A. 42:1-44, shall also divest him/herself of all financial interest. Such divestiture of the licensee's interest in the limited liability company or professional service corporation shall occur within 90 days following 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 Division of Revenue and Enterprise Services demonstrating that the interest has been terminated. If the licensee is the sole shareholder in a professional service corporation or sole member of the limited liability company, the corporation must be dissolved within 90 days of the licensee's disqualification unless it is lawfully transferred to another licensee and documentation of the valuation process and consideration paid is also provided to the Board.

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) immediately 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. If the licensee has a website, a notice shall be posted on the website as well.

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.

6. Payment of Civil and Criminal Penalties and Costs.

With respect to any licensee who is the subject of any order imposing a civil penalty and/or costs, the licensee shall satisfy the payment obligations within the time period ordered by the Board or be subject to collection efforts or the filing of a certificate of debt. The Board shall not consider any application for reinstatement nor shall any appearance before a committee of the Board seeking reinstatement be scheduled until such time as the Board ordered payments are satisfied in full. (The Board at its discretion may grant installment payments for not more than a 24 months period.)

As to the satisfaction of criminal penalties and civil forfeitures, the Board will consider a reinstatement application so long as the licensee is current in his or her payment plans.

NOTICE OF REPORTING PRACTICES OF BOARD
REGARDING DISCIPLINARY ORDERS/ACTIONS

All Orders filed by the New Jersey State Board of Medical Examiners are "government records" as defined under the Open Public Records Act and are available for public inspection, copying or examination. See N.J.S.A. 47:1A-1, et seq., N.J.S.A. 52:14B-3(3). Should any inquiry be made to the Board concerning the status of a licensee who has been the subject of a Board Order, the inquirer will be informed of the existence of the Order and a copy will be provided on request. Unless sealed or otherwise confidential, all documents filed in public actions taken against licensees, to include documents filed or introduced into evidence in evidentiary hearings, proceedings on motions or other applications conducted as public hearings, and the transcripts of any such proceedings, are "government records" available for public inspection, copying or examination.

Pursuant to N.J.S.A. 45:9-22, a description of any final board disciplinary action taken within the most recent ten years is included on the New Jersey Health Care Profile maintained by the Division of Consumer Affairs for all licensed physicians. Links to copies of Orders described thereon are also available on the Profile website. See <http://www.njdoctorlist.com>.

Copies of disciplinary Orders entered by the Board are additionally posted and available for inspection or download on the Board of Medical Examiners' website.

See <http://www.njconsumeraffairs.gov/bme>.

Pursuant to federal law, the Board is required to report to the National Practitioner Data Bank (the "NPDB") certain adverse licensure actions taken against licensees related to professional competence or conduct, generally including the revocation or suspension of a license; reprimand; censure; and/or probation. Additionally, any negative action or finding by the Board that, under New Jersey law, is publicly available information is reportable to the NPDB, to include, without limitation, limitations on scope of practice and final adverse actions that occur in conjunction with settlements in which no finding of liability has been made. Additional information regarding the specific actions which the Board is required to report to the National Practitioner Data Bank can be found in the NPDB Guidebook issued by the U.S. Department of Health and Human Services in April 2015. See <http://www.npdb.hrsa.gov/resources/npdbguidebook.pdf>.

Pursuant to N.J.S.A.45:9-19.13, in any case in which the Board refuses to issue, suspends, revokes or otherwise places conditions on a license or permit, the Board is required 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 entered by the Board is provided to the Federation on a monthly basis.

From time to time, the Press Office of the Division of Consumer Affairs may issue press releases including information regarding public actions taken by the Board.

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