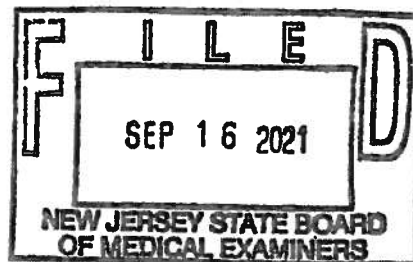


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STATE OF NEW JERSEY  
DEPARTMENT OF LAW AND PUBLIC SAFETY  
DIVISION OF CONSUMER AFFAIRS  
STATE BOARD OF MEDICAL EXAMINERS

IN THE MATTER OF THE SUSPENSION :  
OR REVOCATION OF THE LICENSE OF : Administrative Action  
:  
Richard Blum, M.D. :  
LICENSE NO. 25MA02517400 : **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 ("Board") upon receipt of information that Richard Blum, M.D. ("Respondent") License No. 25MA02517400 was found to be noncompliant with the terms of an agreement that he entered into with the Board on February 21, 2008, requiring that he successfully complete within one year Board-approved courses in medical record-keeping and communication skills. Respondent also agreed to complete within sixty days a one-day peer mentorship, approved by the Board's Medical Education Director. The Board-approved mentor was to provide a statement to the Medical Education Director verifying Respondent's successful completion of this requirement. Furthermore, Respondent agreed to perform breast or pelvic

examinations only with a chaperone present and with the patient fully gowned in all medical and hospital treatment venues.

Subject to an investigation by the Enforcement Bureau in 2018, Respondent was found to be noncompliant, in part, with the terms of this agreement. Respondent admitted to not completing the required record-keeping and communication skills courses. He could not produce documentary proof of doing the peer mentorship although he stated that it was in fact completed. He further admitted to failing to have a chaperone present during every breast or pelvic examination because, although he offered the chaperone to every patient, he honored certain patients' right to decline a chaperone. Further investigation revealed that Respondent closed his private practice in or about June, 2018 and has since worked at practices requiring chaperones to be present for every patient encounter. There has been no complaint about Respondent's conduct since 2008, and since he has appeared before a Committee of the Board in 2018, he has always had a chaperone present when he treated his patients.

It is the Board's position that Respondent's failure to comply with the Private Letter Agreement of 2008 constitutes professional misconduct and provides grounds for the Board to take disciplinary action against Respondent's license to practice medicine in New Jersey pursuant to N.J.S.A. 45:1-21(e).

The parties being desirous of resolving this matter, and the Board, being satisfied that the entry of the within Order obviates

the need for formal proceedings, and being further satisfied that the within Order is adequately protective of the public health, safety and welfare, and that good cause exists to support entry of this Order,

IT IS, therefore, on this 16<sup>th</sup> day of September, 2021,

ORDERED AND AGREED THAT:

1. Respondent's license to practice medicine and surgery is hereby suspended for one year, with the entire term of suspension stayed and served as a period of probation.

2. Respondent shall have a Board-approved chaperone when treating any female patient. The chaperone must take an on-line chaperone course pre-approved by the Medical Director of the Board.

3. Respondent shall post a sign in his office that he provides a chaperone when examining all female patients.

4. Respondent shall take and successfully complete one communication course and one recordkeeping course, pre-approved by the Board within six months of filing 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 reservation. Respondent shall bear the cost of the courses and shall not use any credits obtained through the courses towards the fulfillment of his biennial continuing medical education requirement. Respondent has completed these requirements.

5. Respondent is hereby assessed costs in the amount of \$5,000 and monetary penalties in the amount of \$5,000. A Certificate of Debt reflecting the \$10,000 currently due and owing shall be filed pursuant to N.J.S.A. 45:1-24 to protect the judgment. In addition, but not in lieu of the filing of the Certificate of Debt, the Board will allow the costs and penalties to be paid in equal monthly installments of \$500 through April 1, 2023. Each payment shall be due on the first business day of each month, commencing on September 1, 2021. In the event that a monthly payment is not received within five days of its due date, the entire balance shall become due and owing. Respondent may prepay at any time. Interest on all financial assessments shall accrue in accordance with Rule of Court 4:42-11. All payments shall be made by certified bank check, certified check, wire transfer or money order, payable to the State of New Jersey and forwarded to the attention of Terri Goldberg, Acting Executive Director, Board of Medical Examiners, 140 East Front Street, 2nd floor, Trenton, New Jersey 08608. Any payment in a form other than those noted in this Paragraph will be rejected and returned to the sender.

6. Respondent shall comply with the 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, and the Uniform Requirements Pertaining to Chaperone Approval and

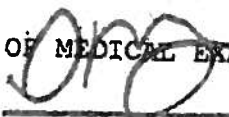
Utilization which are, collectively, attached hereto and incorporated herein.

7. Failure to comply with any provision of this Order will result in subsequent disciplinary proceedings for failure to comply with an Order of the Board.

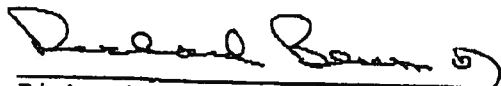
8. The parties hereby stipulate that entry of this Consent Order is without prejudice to further action or investigation by the Attorney General, the Drug Control Unit, the Director of the Division of Consumer Affairs, or other law enforcement entities resulting from Respondent's conduct prior to the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

STATE BOARD OF MEDICAL EXAMINERS

BY:

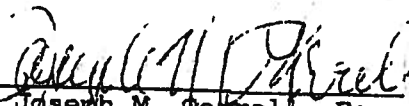
  
~~Metzger, Scott E., M.D.~~  
Scott E. Metzger, M.D.  
Board President

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.

  
Richard Blum, M.D.

7/22/21  
Date

Consent is hereby given as to the form and entry of this Order.

  
By: Joseph M. Correll, Esq.  
Attorney for Respondent  
Richard Blum, M.D.

7/23/21  
Date

## UNIFORM REQUIREMENTS PERTAINING TO CHAPERONE APPROVAL AND UTILIZATION

All licensees who are the subject of a Board order mandating the presence of a chaperone shall adhere to the requirements below, which are incorporated by reference in the order. Failure to abide by any of these requirements may result in further disciplinary action for violating the terms of the order and/or for failing to cooperate as required by N.J.A.C. 13:45C-1 et seq. Any written submissions and notifications referenced here can be provided via email.

### 1. Process to Secure Board Approval of Proposed Chaperones

- A. A licensee subject to a chaperoning requirement may only use a Board approved chaperone(s), and must secure written approval from the Medical Director of the Board, or his or her designee (hereinafter the "Medical Director"), for each and every chaperone.
- B. In order to secure Board approval for a proposed chaperone(s), the licensee shall submit the following information in writing to the Board regarding each individual proposed:
- i) the individual's name;
  - ii) verification that the individual is a licensed health care professional who holds a valid and unencumbered license issued in New Jersey, the type of license held and the license number,
  - iii) the individual's home and work addresses, telephone numbers and e-mail addresses;
  - iv) the individual's curriculum vitae
  - v) specific information regarding any relationship the individual may have with the licensee (i.e. relative, friend, employee, business associate);
  - vi) the proposed work schedule for each individual;
  - vii) proof that the individual proposed has been provided with a copy of the Board order (to include this attachment), as demonstrated by the return of a signed copy of the order, signifying that the individual has read the order and agrees to abide by its terms.
- C. The above information shall be subject to review by the Medical Director. Upon review, the Medical Director shall determine whether any proposed chaperone is preliminarily approved or rejected. If an individual is preliminarily approved, that individual must thereafter schedule and complete a consultation with the Medical Director, as

required by paragraph 2 below. Following that consultation, the licensee shall receive final notification from the Medical Director, in writing, whether a proposed chaperone has been approved by the Board.

## 2. Chaperone Consultation with Medical Director

Upon notification that a proposed individual has been approved to serve as a chaperone, the chaperone shall have a discussion in person or by telephone with the Medical Director of the Board or his or her designee, prior to the licensee's resumption of practice, and then as needed as to any questions he or she may have regarding the requirements of this order.

## 3. Reporting of Any Changes

A. The licensee shall inform the Board in writing within 10 days of any change in any of the information above with regard to an approved chaperone.

B. The licensee shall immediately notify the Board in writing, of any termination of or change of chaperone, provide all information required above and seek approval for such change within 10 days of such termination or change. However, in no event shall the licensee see, examine or treat a patient without a chaperone while awaiting approval.

## 4. Chaperone Presence Requirement

After receipt of approval and the initial consultation with the Medical Director or his or her designee, the licensee may resume practice, subject to the requirement that an approved chaperone is present at all practice locations (other than at a licensed health care facility at which other licensed health care practitioners are also concurrently practicing.) Until further order of the Board, whenever the licensee is in the presence of or sees, treats or examines any patient from the population, as identified in the order, for any reason whatsoever in the context of a patient visit for professional services, an approved chaperone shall be present in the room throughout the patient encounter and shall maintain a clear line of sight to the patient.

## 5. Chaperone Documentation Requirement

The chaperone shall initial or sign the patient record to verify that he or she was present for the entire patient encounter and examination.

**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.<sup>1</sup> 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.

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<sup>1</sup>This 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.