

STATE OF CONNECTICUT
OFFICE OF HEALTH CARE ACCESS

M. JODI RELL
GOVERNOR

CRISTINE A. VOGEL
COMMISSIONER

August 2, 2006

Gina Marie Carucci, D.C.
Carucci Chiropractic Center, LLC
415 Silas Deane Highway
Wethersfield, CT 06109

Dear Dr. Carucci:

On July 11, 2006, the Office of Health Care Access ("OHCA") received the attached Change in Facility Licensure Information form from the Department of Public Health, which indicates that, effective June 27, 2006, the licensed substance abuse facility services at the Carucci Chiropractic Center were closed. Pursuant to Section 19a-639 of the Connecticut General Statutes, any termination of a health care service by a health care facility or institution may require Certificate of Need authorization from this agency. It is unclear from the attached document if a termination of service has occurred. Please provide a letter to OHCA which clarifies the current status of substance abuse services at the Carucci Chiropractic Center. Please note that under Docket Number 03-30175-CON, this agency reviewed and authorized the establishment of these services pursuant to Section 19a-638. In light of the above, please respond to the following in your letter:

1. Has the Carucci Chiropractic Center terminated its previously offered substance abuse services and if so, on what date?
2. If these services continue, please indicate whether they have been relocated or modified.
3. If there has been no service change related to these substance abuse services, please provide a brief explanation of the need for licensure change.

Please respond to this clarification inquiry by August 16, 2006. Contact me at (860) 418-7041 if you have any questions regarding the above inquiry.

Sincerely,

Karen Roberts
Compliance Officer

Enclosure



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

FACILITY LICENSING & INVESTIGATIONS UNIT

LP-173
Rev. 5/04

TO: Office of Health Care Access
Dept. of Social Services
O.P.M. Budget Division
Building & Fire Safety - Health Statistics
Facility File
DMHAS

FROM: Sandra C. Bauer
Licensing Examination Assistant
Facility Licensing & Investigations Section

DATE: July 10, 2006

Subject: Change in Facility Licensure Information

Please adjust your records accordingly.

Substance Abuse Facility Residential Care Home
 Psychiatric Outpatient Facility Mental Health other:
 Mental Health Day Treatment Other _____

Carucci Chiropractic Center, 415 Silas Deane Highway, Wethersfield, lic# 0310

- Opened effective ____ with ____ licensed beds.
- Closed effective 6/27/06 with ____ licensed beds.
- Increase in bed capacity from ____ to ____ EFF: ____
- Decrease in bed capacity from ____ to ____ EFF: ____
- Relocated to: _____ Effective: _____
- Changed d/b/a name to: _____ Eff: _____
- Changed ownership effective _____
- Operating entity: New License # is _____
- Changed licensee name to: _____ Eff: _____
- Real Property: _____
- Stock Change within the entity that operates the facility.
- Other: _____

Type of Ownership:

Proprietorship Non-Profit Corporation
 Limited Liability Municipality
 Profit Corporation Trust
 Partnership



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Telephone Device for the Deaf (860) 509-7191
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Gina M. Carucci, D.C., M.S., C.Ad, DICCP

Michael J. Carucci, D.C.

415 Silas Deane Highway, Suite 400 Wethersfield, CT 06109 Tel: (860) 257-8445 Fax: (860) 257-8084 Email: gina@drcarucci.com
Family Health Through Chiropractic

August 20, 2006

Karen Roberts
Compliance Officer
State of Connecticut
Office of Health Care Access
410 Capitol Avenue
MS #13 HCA
PO Box 340308
Hartford, CT 06134-0308

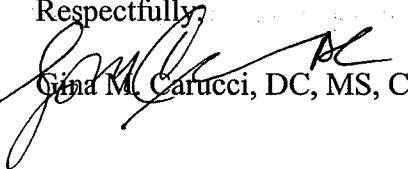
2006 AUG 24 AM 11:52
UNIVERSITY OFFICE OF
HEALTH CARE ACCESS

RE: Substance Abuse Services at Carucci Chiropractic Center

Dear Ms. Roberts:

Please excuse the tardiness of this communication which was due to vacation. In response to your query about the MountainTop Recovery Program at Carucci Chiropractic Center there has been a slight service change in the program. The change we have instituted is that we do not have an on site counselor and as such we refer out to qualified providers based on the individual's need and the mental status and bio-psychosocial exam completed on intake by myself and our mental health provider, Susan Richmond, LCSW. The decision to relinquish licensure was multifold. The program is VERY small and to date has seen only one person. The expense and time to respond to the licensure process exceeds what we have gained from the program and after consideration of what I thought would be a benefit (state licensure) has turned out to be a credential that did not "payoff" in a manner of speaking. So, in summary, we continue to make the services available should a client/patient inquire about them. The quality of the program remains, the confidentiality remains and the intent of providing holistic recovery services to those that seek them out remain as our primary focus and goal. I hope this answers your questions. Please do not hesitate to contact me should there be any further question(s).

Respectfully,


Gina M. Carucci, DC, MS, C.Ad., DICCP



Gina M. Carucci, D.C., M.S., C.Ad, DICCP

Michael J. Carucci, D.C.

415 Silas Deane Highway, Suite 400 Wethersfield, CT 06109 Tel: (860) 257-8445 Fax: (860) 257-8084 Email: gina@drcarucci.com
Family Health Through Chiropractic

September 11, 2006

Karen Roberts
State of Connecticut
Office of Health Care Access
410 Capitol Avenue, MS #13HCA
P.O. Box 340308
Hartford, CT 06134-0308

RECEIVED
2006 SEP 18 AM 11:17
CONNECTICUT DEPT OF
HEALTHCARE ACCESS

Dear Karen Roberts:

I am writing to you today to respond to your September 6, 2006 letter by repeating each compliance question followed by a response.

1. How many substance abuse treatment patients has the MountainTop Recovery Program served since its initial licensure in September 2004? If only one, as your August 24, 2006 letter implies, please identify when that one patient was served.

MountainTop Recovery Program has seen one patient to date and the dates of care were from April 2005 – June, 2005.

2. If more than one patient has received substance abuse treatment at this facility, please identify the date of service for the last patient served.

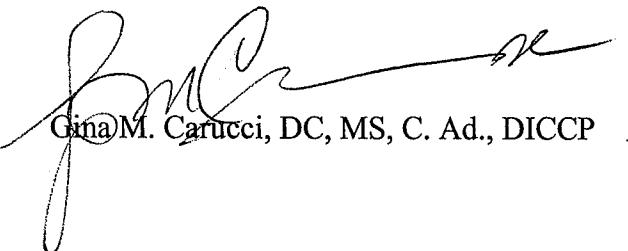
To date the MountainTop Recovery Program has serviced only one patient.

3. Clarify that due to lack of an on-site counselor and the relinquishment of your license as an outpatient substance abuse facility, any patient of Carucci Chiropractic Center which is determined to require substance abuse treatment is referred out to another, separate and independent, provider.

Yes, that is a true statement.

Should you have any additional questions, please feel free to contact me.

Sincerely,

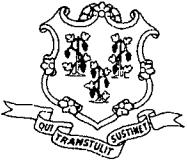


Gina M. Carucci, DC, MS, C. Ad., DICCP

RECEIVED

2006 SEP 18 AM 11:17

CONNECTICUT OFFICE OF
HEALTH CARE ACCESS



STATE OF CONNECTICUT
OFFICE OF HEALTH CARE ACCESS

M. JODI RELL
GOVERNOR

CRISTINE A. VOGEL
COMMISSIONER

October 3, 2006

Gina M. Carucci, D.C., C.Ad, DICCP
Carucci Chiropractic Center
415 Silas Deane Highway
Suite 400
Wethersfield, CT 06109

RE: Certificate of Need Determination; Report Number 06-30837-DTR
Carucci Chiropractic Center
Termination of Substance Abuse Treatment Services

Dear Dr. Carucci:

On August 24, 2006, the Office of Health Care Access (“OHCA”) received your response to the August 2, 2006 Office of Health Care Access (“OHCA”) inquiry regarding the termination of your Substance Abuse Facility license effective June 27, 2006. Additional information was submitted regarding this matter on September 18, 2006. OHCA is reviewing this matter under Certificate of Need (“CON”) Determination Report Number 06-30837-DTR. Please be advised that OHCA has reviewed this matter and makes the following findings:

1. On April 12, 2004, under CON Docket Number 03-30175-CON, OHCA granted a Certificate of Need to Carucci Chiropractic Center (“Applicant”) to establish the Mountain Top Recovery Program, which is an outpatient substance abuse recovery program, at 415 Silas Deane Highway in Wethersfield.
2. The program was initially licensed effective September 10, 2004. On July 11, 2006, OHCA received a licensure change sheet from the Department of Public Health, Facility Licensing & Investigations Unit which indicated that the program closed effective June 27, 2006. On August 2, 2006, OHCA initiated an inquiry regarding this closure.

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Fax: (860) 418-7053

Dr. Gina M. Carucci
Carucci Chiropractic Center
CON Determination; Report No. 06-30837-DTR

October 3, 2006
Page 2 of 2

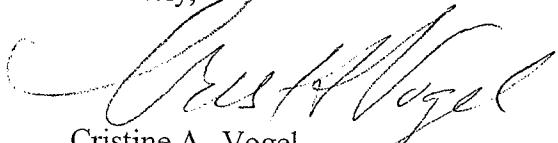
3. The Applicant indicates the following in its August 24, 2006 and September 18, 2006 submissions:
 - a. The program no longer has an on site counselor and they now refer out of qualified providers based on the individual's need and mental status and biopsychosocial exam completed on intake.
 - b. During the time that it was operating, the program only saw one patient, during the period April 2005 to June 2005.
 - c. The Applicant indicates that the time and expense to respond to the licensure process exceeded what was gained from the program.
4. Section 19a-638 (3) of the Connecticut General Statutes ("C.G.S.") states that
"(3) Each health care facility or institution or state health care facility or institution which intends to terminate a health service offered by such facility or institution or reduce substantially its total bed capacity, shall submit to the office, prior to the proposed date of such termination or decrease, a request to undertake such termination or decrease."

OHCA determines that Carucci Chiropractic Center's June 27, 2006 termination of its substance abuse license for the Mountain Top Recovery Program at 415 Silas Deane Highway in Wethersfield constitutes a termination of services pursuant to Section 19a-638, C.G.S. and therefore a Certificate of Need application is required related to this matter.

OHCA considers the submission of information received on August 24, 2006 as the Letter of Intent for this matter. Carucci Chiropractic Center may file a completed CON application with OHCA between October 23, 2006 and December 22, 2006. The CON application is being mailed to your attention separately.

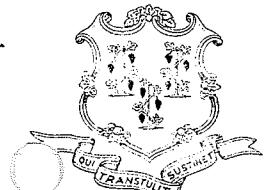
If you have any questions concerning this letter, please contact Karen Roberts, Compliance Officer at (860) 418-7041. If you have any questions regarding the Letter of Intent and Certificate of Need application process, please contact Kimberly Martone, Supervisor of Certificate of Need at (860) 418-7029.

Sincerely,



Cristine A. Vogel
Commissioner

CAV:kr



M. JODI RELL
GOVERNOR

STATE OF CONNECTICUT

OFFICE OF HEALTH CARE ACCESS

CRISTINE A. VOGEL
COMMISSIONER

October 17, 2006

Gina Carucci, D.C., C.Ad, DICCP
Executive Director/Owner
Carucci Chiropractic Center
415 Silas Deane Highway Suite 400
Wethersfield, CT 06109

RE: Certificate of Need Application Forms, Docket Number 06-30837-CON
Carucci Chiropractic Center
Termination of Substance Abuse Treatment Services

Dear Dr. Carucci:

Enclosed are the application forms for Carucci Chiropractic Center's Certificate of Need ("CON") proposal for the Termination of Substance Abuse Treatment Services with no associated capital expenditure. According to the parameters stated in Section 19a-638 of the Connecticut General Statutes the CON application may be filed between October 23, 2006, and December 22, 2006.

When submitting your CON Application, please paginate and date each page contained in your submission. In addition, please submit one (1) original and three hard copies; as well as a scanned copy of the complete Application, including all attachments, on CD or Diskette. OHCA requests a copy of the submission be in MS Word format and the scanned copy be in Adobe format. Please submit the Financial Attachment and other data as appropriate in MS Excel format.

The analyst assigned to the CON application is Paolo Fiducia. Please feel free to contact him at (860) 418-7001, if you have any questions.

Sincerely,

Kimberly Martone
Certificate of Need Supervisor

Enclosures

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