



M. JODI RELL  
GOVERNOR

**STATE OF CONNECTICUT**  
OFFICE OF HEALTH CARE ACCESS

CRISTINE A. VOGEL  
COMMISSIONER

January 8, 2007

Marjorie Simpson  
Administrator  
The Smith House Nurse Health Care Center  
88 Rock Rimmson Road  
Stamford, CT 06903-3428

Re: CON Determination Report Number 06-30898-DTR  
The Smith House Nurse Health Care Center  
Establishment of Outpatient Rehabilitation Therapy Services

Dear Ms. Simpson:

On January 5, 2007, the Office of Health Care Access ("OHCA") received your Certificate of Need ("CON") completed Determination request on behalf of The Smith House Health Care Center to establish outpatient rehabilitation therapy services. OHCA has reviewed your request and makes the following findings:

1. The Smith House Nurse Health Care Center ("Center") is a for-profit facility located at 88 Rock Rimmson Road in Stamford, Connecticut.
2. The Center is a skilled nursing center with a total of 128 beds.
3. The Center currently offers long term and short term nursing care, physical, occupational and speech therapies to its inpatient residents.
4. The Center is seeking to provide outpatient rehabilitation therapy services.
5. The proposed outpatient rehabilitation therapy services will be offered by Norwalk Rehabilitation Services, Inc., the same provider who is currently providing inpatient rehabilitation therapy services at the Center.
6. The Center will be responsible for billing of the outpatient rehabilitation services.

7. There is no capital expenditure associated with the proposal.
8. According to Section 19a-639a of the Connecticut General Statutes, Residential Care Homes and Nursing Homes are exempt from Certificate of Need review by OHCA.

Based on these findings, OHCA has determined that Certificate of Need approval is not required from OHCA for The Smith House Health Care Center, to proceed with its proposal to establish outpatient rehabilitation services. Please be advised that according to Section 19a-639a, C.G.S., 10 to 60 days prior to initiating services, you must register this service with OHCA. A copy of the registration form is attached for your convenience.

If you have any questions concerning this letter, please contact Steven W. Lazarus at (860) 418-7001.

Sincerely,

Sigend by Cristine A. Vogel  
Commissioner

Attachment

c: Rose McLellan, Licensing Examination Assistant, DHSR, DPH

CAV:swl