OHIO DEPARTMENT OF HEALTH



246 North High Street Columbus, Ohio 43215 614/466-3543 www.odh.ohio.gov

John R. Kasich / Governor

Theodore E. Wymyslo, M.D. / Director of Health

AUG 0 2 2013

Terrie Hubbard, RN, Owner Capital Care Network of Toledo 1243 E. Broad Street Columbus, OH 43205

Re:

Proposed License Revocation and Refusal to Renew

ID # 0763AS

Dear Ms. Hubbard:

I propose to issue an Order revoking and refusing to renew Capital Care Network of Toledo's health care facility license (ambulatory surgical facility) in accordance with Revised Code (R.C.) Chapter 119 and R.C. 3702.32(D)(2) due to a violation of Ohio Administrative Code (O.A.C.) 3701-83-19(E). O.A.C. 3701-83-19(E) requires an ambulatory surgical facility have a transfer agreement with a hospital for the transfer of patients in the event of medical complications, emergency situations, and for other needs as they arise. Capital Care Network of Toledo does not have a transfer agreement with a hospital, as required in O.A.C. 3701-83-19(E).

On July 30, 2013, the Ohio Department of Health (ODH) faxed and emailed you a letter reminding you that the transfer agreement between Capital Care Network of Toledo and the University of Toledo Medical Center was set to expire on July 31, 2013 based on the April 4, 2013 letter from University of Toledo Medical Center that you provided to the department. Our letter also stated that O.A.C. 3701-83-19(E) requires an Ambulatory Surgical Facility have a written transfer agreement with a hospital for the "transfer of patients in the event of medical complaints, emergency situations, and for other needs as they arise." You were further notified that you must notify ODH of the status of the transfer agreement by submitting a copy of another transfer agreement or your facility's plan for how it will comply with O.A.C. 3701-83-19(E), no later than 5:00 pm on July 31, 2013. The department has not received any response to the July 30, 2013 letter.

On August 1, 2013, ODH surveyors were present at your facility and were not provided with a current transfer agreement. While you indicated that you were finalizing a written transfer agreement, to date, ODH has not received a copy of a transfer agreement or a plan from Capital Care Network of Toledo setting forth how it plans to comply with O.A.C. 3701-83-19(E).

You may request a hearing before me or my duly authorized representative concerning my proposal to revoke and refuse to renew Capital Care Network of Toledo's health care facility license. Such request must be made in writing and received within thirty (30) days of receipt of this letter and should be directed to Kaye Norton, Ohio Department of Health, 246 N. High Street, Office of the General Counsel, Columbus, Ohio, 43215. A request is considered timely if it is received by ODH via FAX, hand delivery,

Terrie Hubbard, RN Capital Care Network of Toledo Page 2

or ordinary United States mail, within thirty days of the date of receipt of this letter.

At a hearing, you may appear in person or be represented by an attorney. You may present evidence and you may examine witnesses for and against you. You also may present your position, contentions, or arguments in writing, rather than appear in person for a hearing. If you are a corporation, you must be represented by an attorney licensed to practice in Ohio. Please be advised that if you do not request a hearing within thirty days of receipt of this letter, I may revoke and/or refuse to renew Capital Care Network of Toledo's health care facility license.

Please contact Rachel Belenker, Assistant Counsel, at (614) 466-4882, if you have questions about this matter.

Sincerely,

C:

Theodore E. Wymyslo, M.D.
Director of Health

CMRRR: 7011 3500 0001 9186 5434

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