

**STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH  
BUREAU OF HEALTHCARE SYSTEMS**

In re: Colonial Opticians

Petition No. 2003-1023-057-001

**REINSTATEMENT CONSENT ORDER**

WHEREAS, Colonial Opticians of Danbury (hereinafter "respondent") has been issued optical shop permit number 001113 to operate an optical shop by the Department of Public Health (hereinafter "the Department") pursuant to Chapter 381 of the General Statutes of Connecticut, as amended; and,

WHEREAS, the respondent's permit expired on August 31, 1999, and respondent has now applied to have said permit reinstated by the Department pursuant to Chapter 368a of the General Statutes of Connecticut, as amended; and,

WHEREAS, respondent hereby admits as follows:

1. During the period September 1, 1999 until the present, respondent operated as an optical shop during which time respondent's permit had lapsed.
2. That the conduct described above constitutes grounds for denial of respondent's application for reinstatement pursuant to §19a-14(a)(6) of the General Statutes of Connecticut.

NOW THEREFORE, pursuant to §§19a-17 and 20-154 of the General Statutes of Connecticut, as amended, respondent hereby stipulates and agrees as follows:

1. Respondent waives its right to a hearing on the merits of this matter.
2. Respondent's permit to operate as a optical shop shall be reinstated when it satisfies the requirements for reinstatement of its permit, as set forth in §§ 19a-14-1 through 19a-14-5,

inclusive, of the Regulations of Connecticut State Agencies, and this Reinstatement Consent Order is executed by all parties.

3. Respondent shall pay a civil penalty of one thousand five hundred dollars (\$1,500.00) by certified or cashier's check payable to "Treasurer, State of Connecticut." The check shall reference the Petition Number on the face of the check. Said civil penalty shall be payable at the time respondent submits this executed Reinstatement Consent Order to the Department.
4. Immediately upon issuance, respondent's permit shall be reprimanded.
5. The execution of this document has no bearing on any criminal liability without the written consent of the Director of the Medicaid Fraud Control Unit or the Bureau Chief of the Division of Criminal Justice's Statewide Prosecution Bureau.
6. Respondent shall comply with all federal and state statutes and regulations applicable to its permit.
7. Respondent shall notify the Department of any change in its business address within fifteen (15) days of such change.
8. Legal notice shall be sufficient if sent to respondent's last known address of record reported to the Office of Practitioner Licensing and Certification of the Bureau of Healthcare Systems of the Department.
9. Respondent understands this Reinstatement Consent Order may be considered as evidence of the above-admitted violations in any proceeding before the Connecticut Board of Examiners for Opticians in which (1) its compliance with this Reinstatement Consent Order is at issue, or (2) its compliance with §20-154 of the General Statutes of Connecticut, as amended, is at issue.

10. This Reinstatement Consent Order and the terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Further, this Reinstatement Consent Order is not subject to appeal or review under the provisions of Chapters 54 or 368a of the Connecticut General Statutes provided that this stipulation shall not deprive respondent of any other rights that it may have under the laws of the State of Connecticut or of the United States.
11. This Reinstatement Consent Order is a revocable offer of settlement which may be modified by mutual agreement or withdrawn by the Department at any time prior to its being executed by the last signatory.
12. This Reinstatement Consent Order is effective when accepted and approved by a duly appointed agent of the Department.
13. Respondent has the right to consult with an attorney prior to signing this document.
14. This Reinstatement Consent Order is a matter of public record.

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I, John J. Nahley, owner of Colonial Opticians have read the above Reinstatement Consent Order, and I agree to the terms and allegations set forth therein. I further declare the execution of this Reinstatement Consent Order to be my free act and deed.

John J. Nahley  
John J. Nahley, Owner,  
Colonial Opticians

Subscribed and sworn to before me this 12<sup>th</sup> day of January 2004  
~~2003.~~

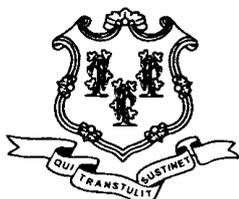
J. Timothy Deakin

~~Notary Public or person authorized  
by law to administer an oath or  
affirmation~~

J. Timothy  
Deakin  
Commissioner of  
The Superior  
Court

The above Reinstatement Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health on the 30<sup>th</sup> day of January 2004  
~~2004~~, it hereby ordered and accepted.

Marianne Horn  
Marianne Horn, Director  
Division of Health Systems Regulation  
Bureau of Healthcare Systems



# STATE OF CONNECTICUT

## DEPARTMENT OF PUBLIC HEALTH

CERTIFIED MAIL RETURN RECEIPT REQUESTED

7099 3400 0018 3795 3521

January 20, 2004

Colonial Opticians  
40 ½ Padanaram Road  
Danbury, CT 06811

Dear Permittee:

This is to advise you that Colonial Opticians has completed all requirements for a Connecticut optical shop permit. Permit number 001113 has been issued effective January 20, 2004.

Enclosed is a copy of the fully executed Reinstatement Consent Order in accordance with which your permit is being granted. The Reinstatement Consent Order takes effect immediately.

You will receive your permit in approximately eight (8) weeks, at your address of record. Instructions regarding future renewal will be enclosed. Renewal will be required in the first August immediately following the issuance of the permit. Failure to renew this permit within ninety (90) days of the due date will result in the permit becoming void. In that event, re-issuance of the permit would require a new application to the Department and an inspection of the optical shop to determine whether you satisfy current requirements.

It is your responsibility to notify the Department of Public Health, Office of Practitioner Licensing and Certification, in writing, of any proposed change in your place of business or change in manager at least thirty days in advance of such change. Such notification to the Department of Public Health is required by law; failure to provide same may jeopardize the status of your permit. Upon disassociation of the licensed optician of record from an establishment or the relocation of the optical shop, the permit is terminated and a new application and fee must be submitted.

If you have any questions, please do not hesitate to contact this office at 860-509-7590.

Sincerely,

Stephen B. Carragher  
Health Program Supervisor  
Office of Practitioner Licensing and Certification

cc: Jennifer Filippone, Public Health Services Manager  
Donna Brewer, Director, Public Health Hearing Office  
Stanley Peck, Director, Legal Office

SBC/dl

Petition Number: 2003-1023-057-001



Phone:

Telephone Device for the Deaf: (860) 509-7191

410 Capitol Avenue - MS # \_\_\_\_\_

P.O. Box 340308 Hartford, CT 06134

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