



State of New Jersey  
DEPARTMENT OF HEALTH  
PO BOX 358  
TRENTON, N.J. 08625-0358

MIKIE SHERRILL  
Governor

DR. DALE G. CALDWELL  
Lt. Governor

[www.nj.gov/health](http://www.nj.gov/health)

DR. RAYNARD E. WASHINGTON  
Acting Commissioner

IN RE: LICENSURE VIOLATION	:	
TRANSFER OF OWNERSHIP WITHOUT	:	
DEPARTMENT APPROVAL	:	
	:	AMENDED NOTICE OF ASSESSMENT
Specialty Surgical Center of North Brunswick	:	OF PENALTIES
License # 24210	:	
Application # LA - 24210 - 30384	:	
	:	

TO: Cassandra Fertig- Administrator  
Specialty Surgical Center of North Brunswick  
1520 Highway 30  
North Brunswick, NJ 08902

Dear Ms. Fertig:

The Department is issuing this Amended Notice of Assessment of Penalties, correcting the March 16, 2026, notice which incorrectly miscategorized your August 2024, change in ownership as a transfer of ownership.

Effective immediately, the Department of Health (hereinafter, "the Department") is assessing penalties pursuant to N.J.A.C. 8:43E-3.4(a)(5) upon Specialty Surgical Center of North Brunswick (hereinafter "SSCNB" or "the Facility") because the facility completed a transfer of ownership prior to obtaining approval by the Department. Only after a transfer of ownership application has been reviewed and deemed acceptable by the Office of Certificate of Need and Healthcare Facility Licensure will a prospective new owner be given the approval needed to complete transfer. N.J.A.C. 8:43-4.3(d).

### **LICENSURE VIOLATIONS:**

The Department received a transfer of ownership application # LA-24210-30384 on May 22, 2024, though records show a change in ownership occurred May 1, 2024. This transfer of ownership failed to meet the regulatory requirement of N.J.A.C. 8:43A-3.3(a), which states the “licensee[s] shall disclose the ownership of the facility and the property on which it is located to the Department, shall make proof of this ownership available in the facility or at a designated location, and shall report any proposed change in ownership to the Director of the Division of Certificate of Need and Licensing in writing at least 30 days prior to the change and in conformance with requirements for Certificate of Need applications.”

### **MONETARY PENALTIES:**

In accordance with N.J.A.C. 8:43E-3.4(a)(5), a penalty of \$ 500.00 per day for the transfer of ownership of a healthcare facility without prior approval of the Department will be assessed from the date of the transfer of interest to the date of discovery by the Department. Such fine may be assessed against each of the parties at interest.

The Department became aware of the May 1, 2024, unapproved transfer of ownership when application # LA-24210 – 30384 was received on May 22, 2024. Thus, there were 21 days from the date of transfer of ownership until the date of discovery by the Department. **Therefore, the total penalty assessed for the May 1, 2024, transfer of ownership prior to approval in violation of N.J.A.C. 8:43-4.3(d), is \$10,500 (21 days x \$500).**

The total amount of this penalty is required to be paid within 30 days of receipt of this letter by certified check or money order made payable to the “Treasurer of the State of New Jersey” and forwarded to Office of Program Compliance, New Jersey Department of Health, P.O. Box 358, Trenton, New Jersey 08625-0358, Attention: Lisa King. **On all future correspondence related to this Notice, please refer to Control AX25028.**

### **INFORMAL DISPUTE RESOLUTION:**

N.J.A.C. 8:43E-2.3 provides facilities the option to challenge factual findings by requesting Informal Dispute Resolution with Department representatives. Facilities wishing to challenge only the assessment of penalties are not entitled to IDR review, but such facilities may request a formal hearing at the Office of Administrative Law as set forth herein below. Please note that the facility's rights to IDR and administrative hearings are not mutually exclusive and both may be invoked simultaneously. IDR requests must be made in writing within ten (10) business days from receipt of this letter and must state whether the facility opts for a telephone conference, or review of facility documentation only. The request must include an original and ten (10) copies of the following:

1. A specific explanation of why you are contesting the facts supporting the imposition of the civil monetary penalty; and
2. Any relevant supporting documentation.

Any supporting documentation or other papers submitted later than 10 business days prior to the scheduled IDR may not be considered at the discretion of the IDR panel.

Send the above-referenced information to:

Nadine Jackman  
Office of Program Compliance  
New Jersey Department of Health  
P.O. Box 358  
Trenton, New Jersey 08625-0358

The IDR review will be conducted by professional Department staff who do not participate in the licensure process. **Requesting IDR does not delay the imposition of any enforcement remedies.**

**FORMAL HEARING:**

The facility is entitled to contest the assessment of penalties pursuant to N.J.S.A. 26:2H-13, by requesting a formal hearing at the Office of Administrative Law (OAL). The facility may request a hearing to challenge any or all of the following: the factual findings and/or the assessed penalties. The facility must advise this Department within 30 days of the date of this letter if it requests an OAL hearing.

Please forward your OAL hearing request to:

Attention: OAL Hearing Requests  
Office of Legal and Regulatory Compliance, New Jersey Department of Health  
P.O. Box 360  
Trenton, New Jersey 08625-0360

Corporations are not permitted to represent themselves in OAL proceedings. Therefore, if the facility is owned by a corporation, representation by counsel is required. In the event of an OAL hearing regarding the penalty, the facility is further required to submit a written response to each and every charge as specified in this notice, which shall accompany its written request for a hearing.

Failure to submit a written request for a hearing within 30 days from the date of this notice will render this a final agency decision. The final agency order shall thereafter have the same effect as a judgment of the court. The Department also reserves the right to pursue all other remedies available by law.

Thank you for your attention to this important matter and for your anticipated cooperation. If you have any questions regarding this Notice of Assessment, please contact Nadine Jackman, Office of Program Compliance, at [Nadine.Jackman@doh.nj.gov](mailto:Nadine.Jackman@doh.nj.gov).

Sincerely,

A handwritten signature in blue ink, consisting of a vertical line that curves into a circle, with a horizontal line extending to the right from the top of the circle.

Lisa King, Program Manager  
Office of Program Compliance  
Division of Certificate of Need and Licensing

LK:Jl:nj

DATE: April 22, 2026

EMAIL: Cassandra.Fertig@amsurg.com

REGULAR AND CERTIFIED MAIL

RETURN RECEIPT REQUESTED

Control # AX25028