



State of New Jersey
DEPARTMENT OF HEALTH

PO BOX 360
TRENTON, N.J. 08625-0360

www.nj.gov/health

PHILIP D. MURPHY
Governor

TAHESHA L. WAY
Lt. Governor

KAITLAN BASTON, MD, MSc, DFASAM
Acting Commissioner

In Re Licensure Violation:	:	
	:	
Limecrest Subacute and Rehabilitation Center	:	NOTICE OF LIFTING OF
	:	SUMMARY SUSPENSION,
	:	CURTAILMENT AND
(NJ Facility ID# NJ 61902)	:	DIRECTED PLAN OF CORRECTION
	:	
	:	
	:	

TO: Sonia Velmonte, Administrator
Limecrest Subacute and Rehabilitation Center
1 O'Brien Lane
Lafayette, New Jersey 07848-1279

Dear Ms. Velmonte:

This letter confirms our telephone call with you on February 2, 2024, during which the Department of Health (Department) notified your facility that the Notice of Summary Suspension issued on January 22, 2024, and the curtailment of admissions and directed plan of correction (DPOC) issued on November 17, 2023, requiring Limecrest Subacute and Rehabilitation and Center (hereinafter, "Limecrest" or "facility") to curtail admissions and to retain the full-time services of a Consultant Administrator, are lifted, effective immediately. On January 26, 2024, the Department revised the Notice of Summary Suspension to extend the deadlines for the effective date of the summary suspension, the notification to residents and the transfer of residents set forth in the January 22, 2024 Notice of Summary Suspension.

The Department also lifts the requirement imposed in the Notice of Summary Suspension, pursuant to N.J.S.A. 26:2H-126, that Limecrest send a notice to the Department and to all residents, their family members and legal representatives that the facility will close on April 3, 2024. You were notified during our telephone call of February 2, 2024, that the notification requirement of N.J.S.A. 26:2H-126 is lifted.

On January 17, 2024, the Department partially lifted the DPOC issued on November 17, 2023, by lifting the requirements for Limecrest to hire a Consultant Director of Nursing and a Certified Infection Control Practitioner (ICP) consultant.

This action is being taken because Department has been advised that a transfer of ownership of the facility has been completed and that the suspension of Limecrest from the New Jersey Medicaid Program by the New Jersey Office of the State Comptroller, Medicaid Fraud Division, has been lifted.

Thank you for your attention to this important matter and for your anticipated cooperation. Should you have any questions concerning this order, please contact Lisa King, Office of Program Compliance at (609) 376-7751.

Sincerely,

A handwritten signature in blue ink, appearing to read "Lisa King", written in a cursive style.

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

DATE: February 2, 2024

E-MAIL (svelmonte@limecrestrehab.com)
REGULAR AND CERTIFIED MAIL
RETURN RECEIPT REQUESTED
Control # X23043