



DEPARTMENT OF HEALTH AND HUMAN SERVICES

## OFFICE OF INSPECTOR GENERAL

WASHINGTON, DC 20201



August 25, 2016

Faraj Alhadi Ghabag, M.D.  
7 Hickory Lane  
Rock Hill, CT 06067

Dear Faraj Alhadi Ghabag:

RE: OI File Number 5-07-40958-9

On March 31, 2016, you were notified by the Office of Inspector General (OIG) that you were being excluded from participation in the Medicare, Medicaid, and all Federal health care programs for a minimum period of 5 years. That action was taken under section 1128(a)(1) of the Social Security Act (Act) and was based on your conviction in the United States District Court, Eastern District of Michigan, of a criminal offense related to the delivery of an item or service under the Medicare or a State health care program. Your exclusion became effective April 20, 2016, and remains in effect.

By letter dated May 27, 2016, Mark Masselli, President/CEO, CHC, Inc., a State Health Program, requested a waiver of your exclusion from Medicare, Medicaid, and all Federal health care programs as defined in section 1128(h) of the Act. The request is based on the State agency's determination that you are the sole source of essential specialized services in Meriden, Connecticut, and that the agency intends to employ you in a full time salaried position. Since this request meets the criteria set forth in 42 CFR 1001.1801(b) and section 1128(c)(3)(B) of the Act, we are granting the State agency's request for the waiver of your exclusion with respect to the provision of services as a salaried employee of Community Health Centers, Inc., and with respect to any resultant prescriptions or referred services which you provide in connection with that employment, under the Medicare, Medicaid, and all Federal health care programs. This waiver does not extend to any other employment or activities outside of your employment with Community Health Centers, Inc., Meriden, Connecticut.

This waiver affects only the specified employment by Community Health Centers, Inc. for as long as the State agency determines that such need exists. Your exclusion remains in effect for all items and services you furnish, order, or prescribe within all other programs in Connecticut and in all other States. This action does not otherwise change your current exclusion; it remains in effect and, as detailed in your exclusion notice, reinstatement is not automatic. You must apply for reinstatement at the end of your exclusion period in order to be considered for reinstatement.

Approval of the waiver request means that, **effective with the date of this notice**, you may submit claims for payment of covered items and services furnished, ordered, or prescribed by you in the course of your employment by Community Health Centers, Inc. **This waiver is not**

**retroactive** and does not authorize you to claim program payment for items and services that you have already rendered subsequent to the date of your exclusion.

Should you wish to obtain a waiver of your exclusion for the purpose of participating in any Federal or State health care program that is not covered by your employment by Community Health Centers, Inc., you will have to contact those programs directly. You may present a copy of this letter to the appropriate officials of those other programs to substantiate that you have been granted a waiver by the OIG for Medicare, Medicaid, and all Federal health care programs incident to your employment by Community Health Centers, Inc.

Your exclusion remains in effect until you have applied for and been granted reinstatement by the OIG. The waiver remains in effect as long as the State agency determines that a need for your services as a salaried employee of Community Health Centers, Inc. exists. Should the State agency determine that such need no longer exists or you cease to be employed by Community Health Centers, Inc., your waiver will no longer apply to services you furnish, order, or prescribe.

Sincerely,  
/Thomas J. Sowinski/

Thomas J. Sowinski  
Reviewing Official  
Health Care Program Exclusions

cc: Kenneth J. Haber, Esq.  
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