

CHRIS CHRISTIE
Governor

New Jersey Office of the Attorney General

Division of Consumer Affairs
State Board of Dentistry

124 Halsey Street, 6th Floor, Newark, NJ 07102



JOHN J. HOFFMAN
Acting Attorney General

Via Certified and Regular Mail

KIM GUADAGNO
Lt. Governor

June 19, 2015

STEVE C. LEE
Acting Director

Helena Correa
998 East 25th Street
Paterson, NJ 07513

RECEIVED AND FILED
WITH THE
N.J. BOARD OF DENTISTRY
ON 7-15-15 DA

Mailing Address:
P.O. Box 45005
Newark, NJ 07101
(973) 504-6405

**RE: OFFER OF SETTLEMENT IN LIEU OF
FORMAL ACTION – File #102278
In the Matter of the Unlicensed Practice of
Helena Correa**

Dear Ms. Correa:

The New Jersey State Board of Dentistry (“Board”) received information concerning your arrest by the Paterson Police Department on March 27, 2014. Specifically, the board notes that you were arrested for practicing dentistry without a license, in violation of **N.J.S.A.** 2C:21-30. You were charged possession of prescription legend drugs with the intent to distribute (**N.J.S.A.** 2C:35-10.5A(4)), and the unlicensed practice of dentistry (**N.J.S.A.** 2C:21-30). These allegations would support the initiation of civil or administrative proceedings seeking injunctive and other relief based on the unlicensed practice of dentistry in this State.

Prior to commencing formal action, the Board is offering you an opportunity to settle this matter. Please review the terms contained in this letter and if you agree, sign the attached “Acknowledgment and Agreement” and return it to the Board. This letter and the signed Acknowledgment and Agreement will be considered the equivalent of an order of the Board and will be public information. Once signed, failure to comply with the terms of this agreement will result in further action and additional sanctions.

By resolving this matter through signing the Acknowledgment and Agreement, you will:

1. Admit that you engaged in the unlicensed practice of dentistry in New Jersey and agree to immediately cease and desist from practicing dentistry or otherwise holding yourself out as a dentist in this State. This includes offering or performing any services defined as the practice of dentistry in the Dental Practice Act, specifically, **N.J.S.A.** 45:6-19, unless and until you hold a valid and active license issued by the Board.

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2. Agree to pay a civil penalty of \$10,000.00 for engaging in the practice of dentistry in the State of New Jersey. Payment of this penalty should be made by check or money order made payable to the State of New Jersey. You acknowledge and understand the Board will pursue additional sanctions, including enhanced penalties, costs, attorney's fees, and contempt based on any new violation.

3. Agree that should you make an application for licensure, you will appear before the Board to discuss your activities prior to licensure, including the actions leading to your arrest. You further agree and understand that should your application for a license be granted, the Board specifically reserves the right to impose restrictions on your practice as may be necessary to ensure the public health, safety, and welfare.

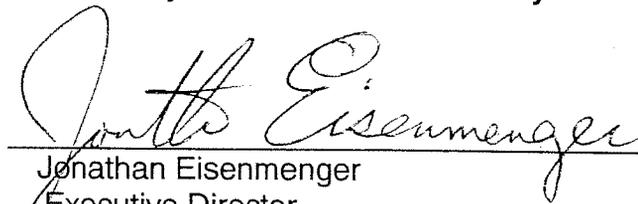
If you agree to these terms, sign the Acknowledgment and Agreement and return it to Jonathan Eisenmenger, Executive Director, New Jersey State Board of Dentistry, P.O. Box 45005, 124 Halsey Street, Newark, New Jersey 07101. Once filed, a copy will be forwarded to you. You may wish to consult with counsel regarding this offer of settlement.

This settlement offer will remain open to you for twenty (20) days from the date of this letter. In the event that no response is received from you on or before June 19, 2015, the Board will deem its offer rejected and the offer will be withdrawn.

As stated above, should the Board file a civil or administrative action, it will seek penalties in excess of those offered in settlement and may seek an order requiring you to reimburse certain monies and/or requiring you to pay costs and attorney's fees.

Should you have any questions concerning this letter or the settlement offer, please do not hesitate to contact me at (973) 648-2500.

Sincerely,
New Jersey State Board of Dentistry


Jonathan Eisenmenger
Executive Director

cc: Swang Oo, DAG

ACKNOWLEDGMENT AND AGREEMENT

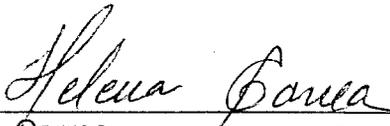
I, **Helena Correa**, admit that I engaged in the practice of dentistry in New Jersey without having obtained a license to practice in this State as detailed in the letter of June 19, 2015.

I agree to cease and desist from engaging in the practice of dentistry or providing dental services unless and until I hold a valid and active license issued by the Board.

I agree to the assessment of a civil penalty of \$10,000.00 against me. Payment of this penalty will be made by check or money order made payable to the State of New Jersey, and sent to the Board office with this Acknowledgment and Agreement. I will make twenty (20) monthly payments of \$500, with the first payment submitted with this signed acknowledgment, and each subsequent payment will be submitted on the first business day of each subsequent month until the total payment has been satisfied. I understand that failure to submit a payment timely will result in the filing of a Certificate of Debt by the Board for the total outstanding penalty.

I agree that if I engage in the practice of dentistry without a license to practice dentistry, I will be subject to additional sanctions, including injunctive relief, second offense penalties consistent with N.J.S.A. 45:1-25, attorney's fees, and costs.

I am aware that by signing this acknowledgment and agreement, I am certifying that I have read and understand the settlement proposal offered in the letter from the New Jersey State Board of Dentistry dated June 19, 2015. I understand that by signing this document, I am waiving any rights I may have to defend myself against the charges of wrongdoing. I am also aware that the action taken against me by the Board is a matter of public record, and that the letter and the Acknowledgment and Agreement are public documents.



Helena Correa

07-10-15

Date