



**Office of Alcoholism and
Substance Abuse Services**

ANDREW M. CUOMO
Governor

**ARLENE GONZÁLEZ-SÁNCHEZ, M.S.,
L.M.S.W.**
Commissioner

October 14, 2015

UPS GROUND

Ms. Kimberly Boynton
Chief Executive Officer
Crouse Health Hospital, Inc.
736 Irving Avenue
Syracuse, New York 13210-1687

Re: Provider #85010
Operating Certificate #171010567
PRU #s 704 and 50244

Dear Ms. Boynton:

Operating Certificate #171010567 is issued by the Office of Alcoholism and Substance Abuse Services (OASAS) pursuant to the New York State Mental Hygiene Law. This Operating Certificate renews authorization for Crouse Health Hospital, Inc. to operate Part 822-4 chemical dependence outpatient and outpatient rehabilitation services at 410 South Crouse Avenue, Syracuse, and including the certified site listed on the Operating Certificate Addendum, effective November 1, 2015.

The two year term of the Operating Certificate is based on the scores identified on the attached *Operating Certificate Renewal Compliance Summary Sheet*.

Crouse Health Hospital, Inc. is responsible for complying with applicable building occupancy limitations and securing any necessary approvals from other governmental entities.

This Operating Certificate is to be prominently displayed at the service site.

The Mental Hygiene Law requires services to be operated in accordance with the terms of the Operating Certificate. Therefore, please carefully examine this certificate and notify the Bureau of Certification immediately if it contains any inaccuracies.

Sincerely,

Janet L. Paloski
Director
Bureau of Certification and Systems Management

Enclosures

Ms. Kimberly Boynton
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October 14, 2015

cc w/encs.: Charles W. Monson
Tim Donovan
Rochelle Cardillo
Cathy Shippey
Lynn DeFruscio
Rate Based Provider Unit (DOH)
Lisa Alford (Onondaga County)
Patrick Mannion (Chair of the Board, Crouse Health Hospital, Inc.)
Monika Taylor (Director of Behavioral Health, Crouse Health Hospital, Inc.)

**NEW YORK STATE OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
DIVISION OF QUALITY ASSURANCE AND PERFORMANCE IMPROVEMENT -- BUREAU OF CERTIFICATION**

OPERATING CERTIFICATE RENEWAL - COMPLIANCE SUMMARY SHEET

Provider Legal Name:	Crouse Health Hospital, Inc.
Active Parent Corporation:	
Certified Program/Service Reviewed:	Outpatient Services

Building:	
Room/ Floor	1st, 2nd and 3rd Floors
Street Address:	410 South Crouse Avenue
City and Zip Code:	Syracuse, 13210

Provider Number:	85010
Operating Certificate Number:	1710 10567
Recertification Review Number:	AL15016
Recertification Review Conducted:	4/14/2015 to: 4/17/2015

PRU Number(s): 704 Capacity:

RECERTIFICATION REVIEW COMPLIANCE RATING TABLE

<u>Compliance Scores</u>	<u>Compliance Ratings</u>	<u>Term of Renewed Operating Certificate</u>
---	Quality Services Review	9 months
---	Red Flag Deficiency(ies)	6 months
0 - 1.75	Noncompliance	6 months
1.76 - 2.50	Minimal Compliance	1 year
2.51 - 3.25	Partial Compliance	2 years
3.26 - 4.00	Substantial Compliance	3 years

RECERTIFICATION REVIEW RESULTS

COMPLIANCE STATUS

	<u>Quality Indicator</u>	<u>Overall</u>	<u>Yes/No</u>	<u>Renewal Term</u>
▶ Case Records	2.79	3.17		2 years
▶ Service Management	4.00	4.00		3 years
▶ Red Flag Deficiency(ies) (For specific Red Flag Deficiency(ies), please refer to Program Review Report issued at conclusion of Recertification Review)				
▶ Quality Services Review				n/a

FACILITY INSPECTION RESULTS

Site#	Address	Site Type	Ins #	Date	Deficiency	Renewal Term
4040	Commonwealth Place, 1st Floor, 6010 East Molloy Road, Syracuse 13211	AL	21088	4/14/2015	None	3 years
7782	1st, 2nd and 3rd Floors, 410 South Crouse Avenue, Syracuse 13210	ML	21089	4/14/2015	None	3 years

Site Type Codes

ML - Main Location
AL - Additional Location
Apt - Apartment

Deficiency Code Examples

Red Flag - imminent structural failure; fire service sprinkler system disabled; or a required exit that is permanently blocked
Significant - pathways to exits blocked; fire alarm systems in trouble mode; or broken stair treads
Notable - any other OASAS or building code violation

NEW YORK STATE OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
DIVISION OF QUALITY ASSURANCE AND PERFORMANCE IMPROVEMENT -- BUREAU OF CERTIFICATION

OPERATING CERTIFICATE RENEWAL - COMPLIANCE SUMMARY SHEET

FISCAL VIABILITY REVIEWS

Term

- Fiscal viability package not submitted.
- Data received insufficient to determine fiscal viability.
- Fiscal viability determination not applicable, given the service provider is a governmental entity or New York State Department of Health certified hospital (Article 28). N/A

Fiscal Viability Levels

Current Ratio Current Assets to Current Liabilities	Total Ratio Total Assets to Total Liabilities
.90 to 1.0 = 3 year Certificate	1.0 to 1.0 = 3 year Certificate
.60 to .89 = 2 year Certificate	.60 to .99 = 2 year Certificate
.40 to .59 = 1 year Conditional Certificate	.40 to .59 = 1 year Conditional Certificate
< .40 = 6 month Conditional Certificate	< .40 = 6 month Conditional Certificate

- Current Ratio Overall Ratio

CERTIFICATE TERM

The term for the enclosed Operating Certificate is two years

**NEW YORK STATE OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES
DIVISION OF QUALITY ASSURANCE AND PERFORMANCE IMPROVEMENT -- BUREAU OF CERTIFICATION**

OPERATING CERTIFICATE RENEWAL - COMPLIANCE SUMMARY SHEET

Provider Legal Name:	Crouse Health Hospital, Inc.
Active Parent Corporation:	
Certified Program/Service Reviewed:	Outpatient Rehabilitation Services

Building:	
Room/ Floor	1st, 2nd and 3rd Floors
Street Address:	410 South Crouse Avenue
City and Zip Code:	Syracuse, 13210

Provider Number:	85010
Operating Certificate Number:	1710 10567
Recertification Review Number:	AL15016
Recertification Review Conducted:	4/14/2015 to: 4/17/2015

PRU Number(s): 50244 Capacity:

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- Current Ratio Overall Ratio

CERTIFICATE TERM The term for the enclosed Operating Certificate is two years

State of New York

Office of Alcoholism and Substance Abuse Services

Pursuant to the provisions of Article 32 of the Mental Hygiene Law

Crouse Health Hospital, Inc.

is hereby granted this

CHEMICAL DEPENDENCE OPERATING CERTIFICATE

authorizing the operation of Chemical Dependence Services, in compliance with the requirements of
14 NYCRR Parts 800 and 814 and the laws and regulations of the State of New York

Site

1st, 2nd and 3rd Floors
410 South Crouse Avenue
Syracuse, New York 13210

Program Name(s)

Chemical Dependency Treatment Service
Chemical Dependency Treatment Service

Service(s)

- Part 822-4 Outpatient Services
- Part 822-4 Outpatient Rehabilitation Services

Additional Location(s) Addendum Attached
Additional Location(s) Addendum Attached



Charles W. Monson

CHARLES W. MONSON
ASSOCIATE COMMISSIONER

171010567

CERTIFICATE NUMBER
Renewed

EFFECTIVE DATE: November 01, 2015
EXPIRATION DATE: October 31, 2017

State of New York

Office of Alcoholism and Substance Abuse Services

CHEMICAL DEPENDENCE

ADDENDUM TO OPERATING CERTIFICATE NUMBER 171010567

Crouse Health Hospital, Inc.

CERTIFIED ADDITIONAL LOCATION(S)

As of November 01, 2015

Site

Service(s)

Site

Service(s)

Commonwealth Place
1st Floor
6010 East Molloy Road
Syracuse, New York 13211-2131

- Part 822-4 Outpatient Rehabilitation Services
- Part 822-4 Outpatient Services