



**Office of Alcoholism and
Substance Abuse Services**

ANDREW M. CUOMO
Governor

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

November 30, 2015

UPS GROUND

Mr. Emory X. Brooks
President and Chief Executive Officer
C.C.M.S.
1 Hoyt Street, 7th Floor
Brooklyn, New York 11201-5809

Re: Provider #19430
Conditional Operating Certificate #C160510695
PRU #7277

Dear Mr. Brooks:

Conditional Operating Certificate #C160510695 is issued by the Office of Alcoholism and Substance Abuse Services (OASAS) pursuant to the New York State Mental Hygiene Law. This *Conditional* Operating Certificate provides authorization for C.C.M.S. to operate a Part 822 chemical dependence outpatient service, at 810 Classon Avenue, Brooklyn, effective December 1, 2015.

The six month term of this *Conditional* Operating Certificate is based on the scores identified on the attached *Operating Certificate Renewal Compliance Summary Sheet*.

A standard Operating Certificate may be issued upon determination by OASAS that C.C.M.S.'s deficiencies noted on the attached compliance summary sheet have been resolved. Such determination will be based on the next scheduled review.

C.C.M.S. 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

Mr. Emory X. Brooks
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cc w/encs.: Charles W. Monson
Steven Rabinowitz
Sheila Roach
Stephanie Saporito
Jane Gifford
Cathy Shippey
John Van Horn
Lynn DeFruscio
Rate Based Provider Unit (DOH)
Hillary Kunins, MD, MPH, MS (NYC Dept. of Health and Mental Hygiene)
Gail Goldstein (NYC Dept. of Health and Mental Hygiene)
Norma Carmona-Rodriguez (NYC Dept. of Health and Mental Hygiene)
Ed Williams (Clinical Director, C.C.M.S.)

**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:	C.C.M.S.
Active Parent Corporation:	
Certified Program/Service Reviewed:	Outpatient Services

Building:	
Room/ Floor	1st Floor
Street Address:	810 Classon Avenue
City and Zip Code:	Brooklyn, 11238

Provider Number:	19430
Operating Certificate Number:	1605 10695
Recertification Review Number:	NY15073
Recertification Review Conducted:	7/14/2015 to: 7/20/2015

PRU Number(s): 7277 Capacity:

<u>RECERTIFICATION REVIEW COMPLIANCE RATING TABLE</u>		
<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	1.73	2.56		6 months
▶ Service Management	3.73	3.92		3 years
▶ Facility	3.43	3.58		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

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).

Fiscal Viability Levels

<u>Current Ratio</u>	<u>Total Ratio</u>
<u>Current Assets to Current Liabilities</u>	<u>Total Assets to Total Liabilities</u>
.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

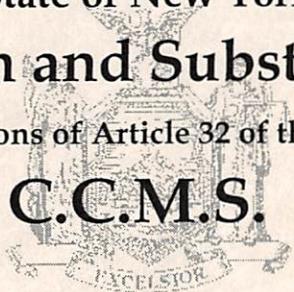
Current Ratio 2.91 Overall Ratio 4.64 3 year

CERTIFICATE TERM The term for the enclosed Operating Certificate is 6 months

State of New York
Office of Alcoholism and Substance Abuse Services

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

C.C.M.S.



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 Floor
810 Classon Avenue
Brooklyn, New York 11238

Program Name(s)

Service(s)

- Part 822 Outpatient Services



Charles W. Monson

CHARLES W. MONSON
ASSOCIATE COMMISSIONER

C160510695

CERTIFICATE NUMBER
CONDITIONAL

EFFECTIVE DATE: December 01, 2015
EXPIRATION DATE: May 31, 2016