NEW YORK STATE | Office of Alcoholism and Substance Abuse Services

ANDREW M. CUOMO
Governor

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

May 4, 2015

UPS GROUND

Mr. Mark Handelman
Executive Director
Hamilton-Madison House, Inc.
253 South Street, 2nd Floor
New York, New York 10002

Re: Provider #50370
Conditional Operating Certificate #C151010804
PRU #50049

Dear Mr. Handelman:

Conditional Operating Certificate #C151010804 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 Hamilton-Madison House, Inc. to operate a Part 822-4 chemical dependence outpatient service, at 253 South Street, New York, effective May 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 Hamilton-Madison House, Inc.'s deficiencies noted on the attached compliance summary sheet have been resolved. Such determination will be based on the next scheduled review.

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

cc w/encs.: Charles W. Monson
Steven Rabinowitz
Reginald Williams
David Herbert
Rick Olm
Sarita Wells
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)
Luke Bergmann (NYC Dept. of Health and Mental Hygiene)
Norma Carmona-Rodriguez (NYC Dept. of Health and Mental Hygiene)
Anthony Giorgio (Board President, Hamilton-Madison House, Inc.)
JJ Hung (Program Director, Hamilton-Madison House, 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:	Hamilton-Madison House, Inc.
Active Parent Corporation:	
Certified Program/Service Reviewed:	Outpatient Services

Building:	
Room/ Floor	2nd Floor
Street Address:	253 South Street
City and Zip Code:	New York, 10002

Provider Number:	50370
Operating Certificate Number:	1510 10804
Recertification Review Number:	NY14127
Recertification Review Conducted:	3/3/2015 to: 3/9/2015

PRU Number(s): 50049 Capacity:

RECERTIFICATION REVIEW COMPLIANCE RATING TABLE

Compliance Scores	Compliance Ratings	Term of Renewed Operating Certificate
---	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			
	Quality Indicator	Overall	Yes/No	Renewal Term
►Case Records	3.50	3.54		3 years
►Service Management	4.00	3.92		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
2502	2nd Floor, 253 South Street, New York 10002	ML	20198	5/14/2014	Notable	2 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).

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 0.23 Overall Ratio 0.43 6 months

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

Hamilton-Madison House, 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	Program Name(s)	Service(s)
2nd Floor 253 South Street New York, New York 10002-7827	Asian American Recovery Services	• Part 822-4 Outpatient Services

Charles W. Monson

CHARLES W. MONSON
ASSOCIATE COMMISSIONER

C151010804

CERTIFICATE NUMBER
CONDITIONAL

EFFECTIVE DATE: May 01, 2015
EXPIRATION DATE: October 31, 2015