



November 7, 2013

UPS GROUND

Ms. Anne K. Nolon
President and Chief Executive Officer
Hudson River Healthcare, Inc.
1037 Main Street
Peekskill, New York 10566

Re: Provider #34370
Operating Certificate #161110933
PRU #50979

Dear Ms. Nolon:

Operating Certificate #161110933 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 Hudson River Healthcare, Inc. to operate a Part 822-4 chemical dependence outpatient service at 1037 Main Street, Peekskill, effective December 1, 2013.

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

Hudson River Healthcare, 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
Acting Director
Bureau of Certification and Systems Management

Enclosures

Ms. Anne K. Nolon
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cc w/encs.: Charles W. Monson
Kathy Murphy
Deb Czubak
Holly Livingston
Gail Keeler
Rate Based Provider Unit (DOH)
Melissa Staats (Westchester County)
Alan L. Steiner (Chair Board of Directors, Hudson River Healthcare, Inc.)
Lorna R. Johnson (Program Director, Hudson River Healthcare, 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:	Hudson River Healthcare, Inc.
Active Parent Corporation:	
Certified Program/Service Reviewed:	Outpatient Services

Building:	Peekskill Area Health Center
Room/ Floor	Basement & 2nd Floor - Rooms 226 - 234
Street Address:	1037 Main Street
City and Zip Code:	Peekskill, 10566

Provider Number:	34370
Operating Certificate Number:	1611 10933
Recertification Review Number:	NY13081
Recertification Review Conducted:	9/11/2013 to: 9/13/2013

PRU Number(s) 50979 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	3.47	3.67		3 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
2047	Peekskill Area Health Center, Rooms 226 - 234, Basement & 2nd Floor, 1037 Main Street, Peekskill 10566	ML	19282	7/2/2013	CAP Completed	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

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OPERATING CERTIFICATE RENEWAL - COMPLIANCE SUMMARY SHEET

FISCAL VIABILITY REVIEWS

- | | |
|---|----------|
| <input type="checkbox"/> Fiscal viability package not submitted. | 6 months |
| <input type="checkbox"/> Data received insufficient to determine fiscal viability. | 6 months |
| <input type="checkbox"/> Current financial position NOT viable; however, an acceptable financial recovery plan submitted. | 2 years |
| <input type="checkbox"/> Current financial position viable; however, overall financial position NOT viable. | 2 years |
| <input checked="" type="checkbox"/> Current and overall financial positions viable. | 3 years |
| <input type="checkbox"/> 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 |

CERTIFICATE TERM

The term for the enclosed Operating Certificate is three years

State of New York

Office of Alcoholism and Substance Abuse Services

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

Hudson River Healthcare, 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

Peekskill Area Health Center
Basement & 2nd Floor
Rooms 226 - 234
1037 Main Street
Peekskill, New York 10566-2913

Program Name(s)

- Part 822-4 Outpatient Services

Service(s)

Charles W. Monson

CHARLES W. MONSON
ASSOCIATE COMMISSIONER

161110933

CERTIFICATE NUMBER

EFFECTIVE DATE: December 01, 2013

Renewed

EXPIRATION DATE: November 30, 2016

