



**Office of Alcoholism and
Substance Abuse Services**

ANDREW M. CUOMO
Governor

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

February 3, 2016

UPS GROUND

Ms. Beth Schuster
Executive Director
Twin County Recovery Services, Inc.
350 Powers Avenue
Hudson, New York 12534

Re: Provider #35010
Operating Certificate #180111087
PRU #6865

Dear Ms. Schuster:

Operating Certificate #180111087 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 Twin County Recovery Services, Inc. to operate a Part 822 chemical dependence outpatient service at 428 West Main Street, Catskill, effective February 1, 2016.

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

Twin County Recovery Services, 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. Beth Schuster
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cc w/encs.: Charles W. Monson
Tim Donovan
Deb Czubak
Cathy Shippey
Janet Rucki
Rate Based Provider Unit (DOH)
Michael Cole (Columbia County)
Thomas Luzzi (President, Board of Directors, Twin County Recovery Services, Inc.)
Jane Doris (Clinical Director, Twin County Recovery Services, 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: Twin County Recovery Services, Inc.
 Active Parent Corporation: _____
 Certified Program/Service Reviewed: Outpatient Services

Building: _____
 Room/ Floor: 1st Floor
 Street Address: 428 West Main Street
 City and Zip Code: Catskill, 12414

Provider Number: 35010
 Operating Certificate Number: 1801 11087
 Recertification Review Number: AL15062
 Recertification Review Conducted: 8/25/2015 to: 8/28/2015

PRU Number(s): 6865 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	3.00	3.18		2 years
▶ Service Management	4.00	3.92		3 years
▶ Facility	3.43	3.56		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.
- 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 2.49 Overall Ratio 11.45 3 year

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

Twin County Recovery Services, 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 Floor
428 West Main Street
Catskill, New York 12414-1657

Program Name(s)

Service(s)

- Part 822 Outpatient Services



Charles W. Monson

CHARLES W. MONSON
ASSOCIATE COMMISSIONER

180111087

CERTIFICATE NUMBER
Renewed

EFFECTIVE DATE: February 01, 2016
EXPIRATION DATE: January 31, 2018