



NEW YORK STATE  
OFFICE OF ALCOHOLISM & SUBSTANCE ABUSE SERVICES  
*Addiction Services for Prevention, Treatment, Recovery*

Governor  
Andrew M. Cuomo

Commissioner  
Arlene González-Sánchez, M.S., L.M.S.W.

UPS GROUND

January 9, 2015

Ms. Ruth M. Meyer  
Executive Director  
Ruth M. Meyer d/b/a Community Counseling Services of Ronkonkoma  
Administrative Site  
3281 Veterans Memorial Highway, Suite E-14  
Ronkonkoma, New York 11779-7675

Re: Provider #12000  
Operating Certificate #171211107  
PRU #51223

Dear Ms. Meyer:

Operating Certificate #171211107 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 Ruth M. Meyer d/b/a Community Counseling Services of Ronkonkoma to operate a Part 822-4 chemical dependence outpatient service at 3281 Veterans Memorial Highway, Ronkonkoma, effective January 1, 2015.

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

Ruth M. Meyer d/b/a Community Counseling Services of Ronkonkoma 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. Ruth Meyer  
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January 9, 2015

cc w/encs.: Charles W. Monson  
Steven Rabinowitz  
Antonette Whyte-Etere  
Sarita Wells  
Janet Rucki  
Rate Based Provider Unit (DOH)  
Arthur Flescher (Suffolk County)

**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:	Ruth M. Meyer d/b/a Community Counseling Services of Ronkonkoma
Active Parent Corporation:	
Certified Program/Service Reviewed:	Outpatient Services

Building:	
Room/ Floor	E14
Street Address:	3281 Veterans Memorial Highway
City and Zip Code:	Ronkonkoma, 11779

Provider Number:	12000
Operating Certificate Number:	1712 11107
Recertification Review Number:	NY14049
Recertification Review Conducted:	9/17/2014 to: 9/22/2014

PRU Number(s): 51223 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	3.42	3.48		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)				n/a
▶ Quality Services Review				n/a

**FACILITY INSPECTION RESULTS**

<u>Site#</u>	<u>Address</u>	<u>Site Type</u>	<u>Ins #</u>	<u>Date</u>	<u>Deficiency</u>	<u>Renewal Term</u>
6481	E14, 3281 Veterans Memorial Highway, Ronkonkoma 11779	ML	20125	5/1/2014	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

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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

**Ruth M. Meyer d/b/a Community  
Counseling Services of Ronkonkoma**

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

E14  
3281 Veterans Memorial  
Highway  
Ronkonkoma, New York 11779-  
7676

Program Name(s)

Service(s)

- Part 822-4 Outpatient Services



*Charles W. Monson*

CHARLES W. MONSON  
ASSOCIATE COMMISSIONER

171211107

CERTIFICATE NUMBER

Renewed

EFFECTIVE DATE: January 01, 2015

EXPIRATION DATE: December 31, 2017