



December 20, 2013

UPS GROUND

Mr. Ronald J. Corti
President and CEO
St. John's Riverside Hospital, Inc.
Andrus Pavillion
967 North Broadway
Yonkers, New York 10701

Re: Provider #87150
Operating Certificate #151211281
PRU #51945

Dear Mr. Corti:

Operating Certificate #151211281 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 St. John's Riverside Hospital, Inc. to operate Part 822-4 chemical dependence outpatient and outpatient rehabilitation services at 2 Park Avenue, Yonkers, effective January 1, 2014.

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

St. John's Riverside Hospital, 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

Mr. Ronald J. Corti
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December 20, 2013

cc w/encs.: Charles W. Monson
Kathy Murphy
Deborah Czubak
Holly Livingston
Gail Keeler
Rate Based Provider Unit (DOH)
Melissa Staats (Westchester County)
Thomas T. Lee, M.D. (Chair of Board of Directors, St. John's Riverside Hospital,
Inc.)
John Slotwinski (Director, St. John's Riverside Hospital, 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:	St. John's Riverside Hospital, Inc.
Active Parent Corporation:	
Certified Program/Service Reviewed:	Outpatient Rehabilitation Services

Building:	
Room/ Floor	2nd Floor
Street Address:	2 Park Avenue
City and Zip Code:	Yonkers, 10703

Provider Number:	87150
Operating Certificate Number:	1512 11281
Recertification Review Number:	NY13110
Recertification Review Conducted:	9/24/2013 to: 10/2/2013

PRU Number(s) 51945 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	2.77	3.05		2 years
▶ Service Management	3.81	3.90		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
6278	2nd Floor, 2 Park Avenue, Yonkers 10703	ML	19080	5/9/2013	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

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

- | | |
|--|----------|
| <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 type="checkbox"/> Current and overall financial positions viable. | 3 years |
| <input checked="" 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 two years

**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

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Active Parent Corporation:	
Certified Program/Service Reviewed:	Outpatient Services

Building:	
Room/ Floor	2nd Floor
Street Address:	2 Park Avenue
City and Zip Code:	Yonkers, 10703

Provider Number:	87150
Operating Certificate Number:	1512 11281
Recertification Review Number:	NY13110
Recertification Review Conducted:	9/24/2013 to: 10/2/2013

PRU Number(s) 51378 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
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State of New York

Office of Alcoholism and Substance Abuse Services

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

St. John's Riverside Hospital, 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

2nd Floor
2 Park Avenue
Yonkers, New York 10703-3402

Program Name(s)

New Focus Center
New Focus Center

Service(s)

- Part 822-4 Outpatient Services
- Part 822-4 Outpatient Rehabilitation Services



Charles W. Monson

CHARLES W. MONSON
ASSOCIATE COMMISSIONER

151211281

CERTIFICATE NUMBER

EFFECTIVE DATE: January 01, 2014

Renewed

EXPIRATION DATE: December 31, 2015