



January 29, 2015

UPS GROUND

Adrienne Marcus, Ph.D.  
Executive Director  
Lexington Center for Recovery, Inc.  
Suite 307-309  
116 Radio Circle  
Mount Kisco, New York 10549-2814

Re: Provider #34200  
Operating Certificate #180111477  
PRU #391

Dear Dr. Marcus:

Operating Certificate #180111477 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 Lexington Center for Recovery, Inc. to operate a Part 822-5 opioid treatment program at 230 North Road, Poughkeepsie, effective February 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*.

Lexington Center for Recovery, 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

Adrienne Marcus, Ph.D.

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January 29, 2015

cc w/encs.: Charles W. Monson  
Kathy Murphy  
Deborah Czubak  
Belinda Greenfield  
Gregory James  
Sarita Wells  
Gail Keeler  
Rate Based Provider Unit (DOH)  
Mike Ogborn (DOH)  
Nichole Washington (CSAT)  
Luke Braxton (DEA)  
Kenneth M. Glatt, Ph.D. (Dutchess County)  
Sherlita Amler, M.D. (Westchester County)  
Timothy Sanker (Board President, Lexington Center for Recovery, Inc.)  
Steven A. Farina (Program Director, Lexington Center for Recovery, Inc.)

**NEW YORK STATE OFFICE OF ALCOHOL AND SUBSTANCE ABUSE SERVICES  
DIVISION OF QUALITY ASSURANCE AND PERFORMANCE IMPROVEMENT -- BUREAU OF CERTIFICATION**

**OPERATING CERTIFICATE RENEWAL - COMPLIANCE SUMMARY SHEET**

Provider Legal Name:	Lexington Center for Recovery, Inc.
Active Parent Corporation:	
Certified Program/Service Reviewed:	Opioid Treatment Program

Building:	
Room/ Floor	1st Floor
Street Address:	230 North Road
City and Zip Code:	Poughkeepsie, 12601

Provider Number:	34200
Operating Certificate Number:	1801 11477
Recertification Review Number:	NY14072
Recertification Review Conducted:	9/16/2014 to: 9/18/2014

PRU Number(s): 391 Capacity: 250

**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	3.85	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
6001	1st Floor, 230 North Road, Poughkeepsie 12601	ML	20331	6/18/2014	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

## Lexington Center for Recovery, 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  
230 North Road  
Poughkeepsie, New York 12601-  
1328

Program Name(s)

● Part 822-5 Opioid Treatment Program - 250 patients

Service(s)



*Charles W. Monson*

CHARLES W. MONSON  
ASSOCIATE COMMISSIONER

180111477

CERTIFICATE NUMBER

EFFECTIVE DATE: February 01, 2015

Renewed

EXPIRATION DATE: January 31, 2018