



September 17, 2014

UPS GROUND

Ms. Jacqueline L. Nicastro
Chief Executive Officer
Buffalo Beacon Corporation d/b/a Beacon Center
3131 Sheridan Drive, Suite 106
Amherst, New York 14226-1977

Re: Provider #32812
Operating Certificate #170911631
PRU #52112

Dear Ms. Nicastro:

Operating Certificate #170911631 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 Buffalo Beacon Corporation d/b/a Beacon Center to operate a Part 822-4 chemical dependence outpatient service at 210 South Main Street, Herkimer, effective October 1, 2014.

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

Buffalo Beacon Corporation d/b/a Beacon Center 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,

Charles W. Monson
Associate Commissioner
Quality Assurance and Performance Improvement

Enclosure

Ms. Jacqueline L. Nicastro
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cc w/encs.: Charles W. Monson
Kathy Murphy
Patrick Morrison
Rochelle Cardillo
Holly Livingston
Janet Rucki
Rate Based Provider Unit (DOH)
Deborah Goldman (Erie County)
Edgar Scudder (Herkimer County)
Helen Burdick (Clinical Supervisor, Buffalo Beacon Corporation d/b/a Beacon
Center)

**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:	Buffalo Beacon Corporation d/b/a Beacon Center
Active Parent Corporation:	
Certified Program/Service Reviewed:	Outpatient Services

Building:	
Room/ Floor	
Street Address:	210 South Main Street
City and Zip Code:	Herkimer, 13350

Provider Number:	32812
Operating Certificate Number:	1709 11631
Recertification Review Number:	AL14027
Recertification Review Conducted:	5/13/2014 to: 5/16/2014

PRU Number(s) 52112 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	4.00	4.00		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

<u>Site#</u>	<u>Address</u>	<u>Site Type</u>	<u>Ins #</u>	<u>Date</u>	<u>Deficiency</u>	<u>Renewal Term</u>
6869	210 South Main Street, Herkimer 13350	ML	20569	9/9/2014	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

Buffalo Beacon Corporation d/b/a Beacon Center

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

210 South Main Street
Herkimer, New York 13350-2322

Program Name(s)

Beacon Center

Service(s)

- Part 822-4 Outpatient Services



Charles W. Monson

CHARLES W. MONSON
ASSOCIATE COMMISSIONER

170911631

CERTIFICATE NUMBER

Renewed

EFFECTIVE DATE: October 01, 2014

EXPIRATION DATE: September 30, 2017