



Office of Alcoholism and
Substance Abuse Services

ANDREW M. CUOMO
Governor

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

June 13, 2016

UPS GROUND

Mr. Peter L. Rogers
Executive Director
Transitional Services Association, Inc.
127 Union Street
Saratoga Springs, New York 12866-4411

Re: Provider #50590
Operating Certificate #190611645
PRU #51069

Dear Mr. Rogers:

Operating Certificate #190611645 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 Transitional Services Association, Inc. to operate a Part 819 chemical dependence supportive living service at the administrative site located at 994 Route 67, Ballston Spa with the certified sites listed on the Operating Certificate Addendum, effective July 1, 2016.

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

Transitional Services Association, Inc. is at the approved 6-bed capacity authorized under Operating Certificate #190611645.

Transitional Services Association, 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

Mr. Peter L. Rogers
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June 13, 2016

cc w/encs.: Charles W. Monson
Tim Donovan
Deb Czubak
Janet Rucki
Lynn DeFruscio
Michael Prezioso, Ph.D. (Saratoga County)
Barbara DiBenedetto (President of the Board, Transitional Services Association,
Inc.)
Theresa Knorr (Program Director, Transitional Services Association, 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:	Transitional Services Association, Inc.
Active Parent Corporation:	
Certified Program/Service Reviewed:	Supportive Living

Building:	
Room/ Floor	
Street Address:	994 Route 67
City and Zip Code:	Ballston Spa, 12020

Provider Number:	50590
Operating Certificate Number:	1906 11645
Recertification Review Number:	AL15154
Recertification Review Conducted:	3/30/2016 to: 4/1/2016

PRU Number(s): 51069 Capacity: 6

<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
0 - 1.75	Red Flag Deficiency(ies) Noncompliance	6 months
1.76 - 2.50	Minimal Compliance	6 months
2.51 - 3.25	Partial Compliance	1 year
3.26 - 4.00	Substantial Compliance	2 years
		3 years

RECERTIFICATION REVIEW RESULTS

COMPLIANCE STATUS

	<u>Quality Indicator</u>	<u>Overall</u>	<u>Yes/No</u>	<u>Renewal Term</u>
▶ Case Records	3.45	3.80		3 years
▶ Service Management	4.00	3.91		3 years
▶ Facility	n/a	3.43		
▶ 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	
Current Ratio Current Assets to Current Liabilities	Total Ratio Total Assets to Total Liabilities
.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 5.08 Overall Ratio 3.42 3 year

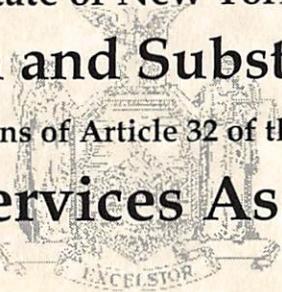
CERTIFICATE TERM The term for the enclosed Operating Certificate is three years

State of New York

Office of Alcoholism and Substance Abuse Services

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

Transitional Services Association, 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

<u>Site</u>	<u>Program Name(s)</u>	<u>Service(s)</u>	
994 Route 67 Ballston Spa, New York 12020-3603	Hedgerow House Apartment Program	● Part 819 Supportive Living - 6 beds	Supportive Living Addendum Attached



Charles W. Monson

CHARLES W. MONSON
ASSOCIATE COMMISSIONER

190611645

CERTIFICATE NUMBER
Renewed

EFFECTIVE DATE: July 01, 2016
EXPIRATION DATE: June 30, 2019