



**Office of Alcoholism and  
Substance Abuse Services**

**ANDREW M. CUOMO**  
Governor

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

December 1, 2016

UPS GROUND

Mr. Hewitt DePass  
Executive Director  
Reality House, Inc.  
8-13 Astoria Boulevard  
Astoria, New York 11102-4028

Re: Provider #19660  
Operating Certificate #190711685  
PRU #52219

Dear Mr. DePass:

Operating Certificate #190711685 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 Reality House, Inc. to operate a Part 822 chemical dependence outpatient service at 8-13 Astoria Boulevard, Astoria, effective August 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*.

Reality House, 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. Hewitt DePass  
Page 2 of 2  
December 1, 2016

cc w/encs.: Charles W. Monson  
Manuel Mosquera  
David Hui  
Healthcare Financing  
Lynn DeFrusco  
Rate Based Provider Unit (DOH)  
Hillary Kunins, MD, MPH, MS (NYC Dept. of Health and Mental Hygiene)  
Gail Goldstein (NYC Dept. of Health and Mental Hygiene)  
Norma Carmona-Rodriguez (NYC Dept. of Health and Mental Hygiene)  
Wensi Guzman (Vice Chairman, Reality House, Inc.)  
Lourdes Herrera (Clinical Program Director, Reality House, 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:	Reality House, Inc.
Active Parent Corporation:	
Certified Program/Service Reviewed:	Outpatient Services

Building:	
Room/ Floor	
Street Address:	8-13 Astoria Boulevard
City and Zip Code:	Astoria, 11102

Provider Number:	19660
Operating Certificate Number:	1907 11685
Recertification Review Number:	NY15133
Recertification Review Conducted:	7/8/2016 to: 7/14/2016

PRU Number(s): 52219 Capacity:

<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
---	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	3.46	3.66		3 years
▶ Service Management	4.00	3.92		3 years
▶ Facility	n/a	3.27		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

**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	Total Ratio
Current Assets to Current Liabilities	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 15.65 Overall Ratio 3.14 3 year

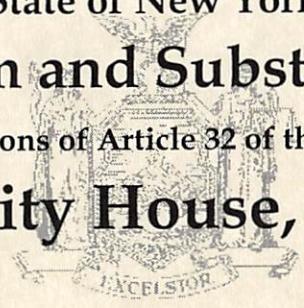
**CERTIFICATE TERM**

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

**Reality House, 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

Program Name(s)

Service(s)

8-13 Astoria Boulevard  
Astoria, New York 11102-4028

- Part 822 Outpatient Services



*Charles W. Monson*

CHARLES W. MONSON  
ASSOCIATE COMMISSIONER

190711685

CERTIFICATE NUMBER  
Renewed

EFFECTIVE DATE: August 01, 2016  
EXPIRATION DATE: July 31, 2019