



November 22, 2013

UPS GROUND

Mr. Joseph A. Stassi
Executive Director
Institute for Rational Counseling, Inc.
P.O. Box 734
30 Floyds Run
Bohemia, New York 11716

Re: Provider #47900
Operating Certificate #150811764
PRU #52615

Dear Mr. Stassi:

Operating Certificate #150811764 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 Institute for Rational Counseling, Inc. to operate a Part 822-4 chemical dependence outpatient service at 30 Floyd Run, Bohemia, effective September 1, 2013.

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

Institute for Rational Counseling, 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

cc w/encs.:

Charles W. Monson
Steven Rabinowitz
Antonette Whyte-Etere
Holly Livingston

Gail Keeler
Rate Based Provider Unit (DOH)
Arthur Flescher (Suffolk County)

**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:	Institute for Rational Counseling, Inc.
Active Parent Corporation:	
Certified Program/Service Reviewed:	Outpatient Services

Building:	
Room/ Floor	
Street Address:	30 Floyd Run
City and Zip Code:	Bohemia, 11716

Provider Number:	47900
Operating Certificate Number:	1508 11764
Recertification Review Number:	NY12042
Recertification Review Conducted:	8/6/2013 to: 8/8/2013

PRU Number(s) 52615 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	3.15	3.08		2 years
▶ Service Management	3.73	3.91		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>
7353	30 Floyd Run, Bohemia 11716	ML	18105	5/10/2012	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
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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 two years

State of New York

Office of Alcoholism and Substance Abuse Services
Pursuant to the provisions of Article 32 of the Mental Hygiene Law
Institute for Rational Counseling, 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

30 Floyd Run
Bohemia, New York 11716-2212

Program Name(s)

● Part 822-4 Outpatient Services

Service(s)



Charles W. Monson

CHARLES W. MONSON
ASSOCIATE COMMISSIONER

150811764

CERTIFICATE NUMBER

EFFECTIVE DATE: September 01, 2013

Renewed

EXPIRATION DATE: August 31, 2015