



August 19, 2013

UPS GROUND

Ms. Jen Barnett  
Executive Director  
Belvedere Health Services, LLC  
1 Van Tromp Street  
Albany, New York 12207-2213

Re: Operating Certificate #160711786

Dear Ms. Barnett:

Operating Certificate #160711786 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 Belvedere Health Services, LLC to operate a Part 822-4 chemical dependence outpatient service at 911 Old Liverpool Road, Liverpool, effective August 1, 2013.

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

Belvedere Health Services, LLC 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

Ms. Jen Barnett  
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cc w/encs.: Charles W. Monson  
Kathy Murphy  
Tim Donovan  
Holly Livingston  
Gail Keeler  
Rate Based Provider Unit (DOH)  
Sara Bollinger (Central New York HSA)  
Stephen J. Giordano, Ph.D. (Albany County)  
Robert Long (Onondaga County)  
John McCooey (Board President, Belvedere Health Services, LLC)  
Michael Loiselle (Program Director, Belvedere Health Services, LLC)

**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:	Belvedere Health Services, LLC
Active Parent Corporation:	
Certified Program/Service Reviewed:	Outpatient Services

Building:	
Room/ Floor	
Street Address:	911 Old Liverpool Road
City and Zip Code:	Liverpool, 13089

Provider Number:	45570
Operating Certificate Number:	1607 11786
Recertification Review Number:	AL13005
Recertification Review Conducted:	7/23/2013 to: 7/25/2013

PRU Number(s) 52644 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	3.67	3.68		3 years
▶ Service Management	4.00	3.90		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
6932	911 Old Liverpool Road, Liverpool 13089	ML	18090	5/8/2012	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  
DIVISION OF QUALITY ASSURANCE AND PERFORMANCE IMPROVEMENT -- BUREAU OF CERTIFICATION

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

## Belvedere Health Services, LLC



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

911 Old Liverpool Road  
Liverpool, New York 13089-1504

Program Name(s)

Sobriety Matters Addiction Recovery and  
Treatment

Service(s)

● Part 822-4 Outpatient Services

*Charles W. Monson*

CHARLES W. MONSON  
ASSOCIATE COMMISSIONER

160711786

CERTIFICATE NUMBER

Renewed

EFFECTIVE DATE: August 01, 2013

EXPIRATION DATE: July 31, 2016

