



**Office of Alcoholism and
Substance Abuse Services**

ANDREW M. CUOMO
Governor

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

UPS GROUND

February 3, 2016

Ms. Anne D. Constantino
President/CEO
Horizon Village, Inc.
3020 Bailey Avenue
Buffalo, New York 14215-2814

Re: Provider #25820
Operating Certificate #190111820
PRU #52730

Dear Ms. Constantino:

Operating Certificate #190111820 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 Horizon Village, Inc. to operate a Section 816.7 medically supervised inpatient withdrawal & stabilization service, without the use of methadone, at 291 Elm Street, Buffalo, effective February 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*.

OASAS received Horizon Village, Inc.'s letter dated January 26, 2016, indicating that no changes have been made to the currently approved Medical Detoxification Protocols. Please refer to Local Services Bulletin No. 2010-01, OASAS Policy Regarding Medical Detoxification and the Use of Medications (2/11/10), prior to making modifications in these protocols.

Horizon Village, 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

Ms. Anne D. Constantino
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cc w/encs.: Charles W. Monson
Belinda Greenfield
Gregory James
Tim Donovan
Patrick Morrison
Cathy Shippey
Janet Rucki
Rate Based Provider Unit (DOH)
Mike Ogborn (DOH)
Michael Ranney (Erie County)
Mark Mortenson (Chair, Horizon Village, Inc.)
Brandy Vandermark-Murray (Program Director, Horizon Village, 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: Horizon Village, Inc.
 Active Parent Corporation: _____
 Certified Program/Service Reviewed: Medically Supervised Inpatient Withdrawal & Stabilization Services

Building: _____
 Room/ Floor: 1st Floor
 Street Address: 291 Elm Street
 City and Zip Code: Buffalo, 14203

Provider Number: 25820
 Operating Certificate Number: 1901 11820
 Recertification Review Number: AL15070
 Recertification Review Conducted: 10/20/2015 to: 10/22/2015

PRU Number(s): 52730 Capacity: 13

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	3.89	3.96		3 years
▶ Service Management	4.00	3.95		3 years
▶ Facility	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

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	
<u>Current Ratio</u>	<u>Total Ratio</u>
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 2.85 Overall Ratio 1.02 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

Horizon Village, 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

1st Floor
291 Elm Street
Buffalo, New York 14203-1621

Program Name(s)

Terrace House

Service(s)

- Part 816.7 Medically Supervised Inpatient Withdrawal & Stabilization Services - 13 beds - without the use of methadone [up to 13 beds may be used for the provision of medically monitored withdrawal & stabilization services, as needed]



Charles W. Monson

CHARLES W. MONSON
ASSOCIATE COMMISSIONER

190111820

CERTIFICATE NUMBER
Renewed

EFFECTIVE DATE: February 01, 2016
EXPIRATION DATE: January 31, 2019