



**Office of Alcoholism and
Substance Abuse Services**

ANDREW M. CUOMO
Governor

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

November 18, 2015

UPS GROUND

Mr. Peter Scaminaci
President & Regional Director
Phoenix Houses of Long Island, Inc.
2nd Floor
50 Jay Street
Brooklyn, New York 11201

Re: Provider #50570
Operating Certificate #170911855
PRU #52782

Dear Mr. Scaminaci:

Operating Certificate #170911855 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 Phoenix Houses of Long Island, Inc. to operate a Section 816.8 medically supervised outpatient withdrawal & stabilization service at 161 Lake Shore Road, Lake Ronkonkoma, effective October 1, 2015.

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

OASAS received Phoenix Houses of Long Island, Inc.'s letter dated September 24, 2015, 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.

Phoenix Houses of Long Island, 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 Scaminaci
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cc w/encs.: Charles W. Monson
Belinda Greenfield
Gregory James
Steven Rabinowitz
Antonette Whyte-Etere
Cathy Shippey
Gail Keeler
Rate Based Provider Unit (DOH)
Mike Ogborn (DOH)
Arthur Flescher (Suffolk County)
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)
Wole Coaxum (Chairman of the Board, Phoenix Houses of Long Island, Inc.)
Steven Margolies, M.D. (Medical Director, Phoenix Houses of Long Island, Inc.)
Brian Gillam (Acting Director, Phoenix Houses of Long Island, 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:	Phoenix Houses of Long Island, Inc.
Active Parent Corporation:	
Certified Program/Service Reviewed:	Medically Supervised Outpatient Withdrawal & Stabilization

Building:	
Room/ Floor:	
Street Address:	161 Lake Shore Road
City and Zip Code:	Lake Ronkonkoma, 11779

Provider Number:	50570
Operating Certificate Number:	1709 11855
Recertification Review Number:	NY15040
Recertification Review Conducted:	9/16/2015 to: 9/18/2015

PRU Number(s): 52782 Capacity: 30

<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	3.60	3.81		3 years
▶ Service Management	3.60	3.91		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.
- Data received insufficient to determine fiscal viability.
- 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>
<u>Current Assets to Current Liabilities</u>	<u>Total Assets to Total Liabilities</u>
.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 2.07 Overall Ratio 0.98 2 year

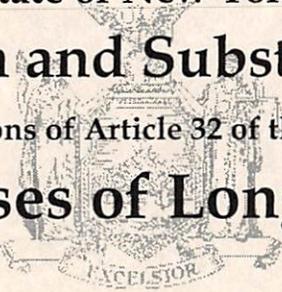
CERTIFICATE TERM The term for the enclosed Operating Certificate is two years

State of New York

Office of Alcoholism and Substance Abuse Services

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

Phoenix Houses of Long Island, 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

161 Lake Shore Road
Lake Ronkonkoma, New York
11779-3182

Program Name(s)

Ronkonkoma Campus

Service(s)

- Part 816.8 Medically Supervised Outpatient
Withdrawal & Stabilization - 30 patients



Charles W. Monson

CHARLES W. MONSON
ASSOCIATE COMMISSIONER

170911855

CERTIFICATE NUMBER
Renewed

EFFECTIVE DATE: October 01, 2015
EXPIRATION DATE: September 30, 2017