



**Office of Alcoholism and
Substance Abuse Services**

ANDREW M. CUOMO
Governor

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

January 19, 2017

UPS GROUND

Mr. Kevin M. Connally
Executive Director
Hope House, Inc.
573 Livingston Avenue
Albany, New York 12206-2408

Re: Provider #35300
Operating Certificate #191211859
PRU #52778

Dear Mr. Connally:

Operating Certificate #191211859 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 Hope House, Inc. to operate Part 817 residential rehabilitation services for youth at 577 Livingston Avenue, Albany, effective January 1, 2017.

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

Hope 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

cc w/encs.: Charles W. Monson
Tim Donovan
Deb Czubak
Healthcare Financing
Gail Keeler
Rate Based Provider Unit (DOH)

Stephen J. Giordano, Ph.D. (Albany County)
The Most Reverend Bishop Howard J. Hubbard (President of the Board of Directors, Hope House, Inc.)
Stephen Oby (Program Manager, Hope 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:	Hope House, Inc.
Active Parent Corporation:	
Certified Program/Service Reviewed:	Residential Rehabilitation Services for Youth

Building:	
Room/ Floor	
Street Address:	577 Livingston Avenue
City and Zip Code:	Albany, 12206

Provider Number:	35300
Operating Certificate Number:	1912 11859
Recertification Review Number:	AL16052
Recertification Review Conducted:	12/19/2016 to: 12/23/2016

PRU Number(s): 52778 Capacity: 20

<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	3.27	3.55		3 years
▶ Service Management	4.00	3.89		3 years
▶ Facility	n/a	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	
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 1.32 Overall Ratio 4.69 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

Hope 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

577 Livingston Avenue
Albany, New York 12206

Program Name(s)

Hope House - Hubbard Center #2

Service(s)

- Part 817 Residential Rehabilitation Services for Youth -
20 beds



Charles W. Monson

CHARLES W. MONSON
ASSOCIATE COMMISSIONER

191211859

CERTIFICATE NUMBER
Renewed

EFFECTIVE DATE: January 01, 2017
EXPIRATION DATE: December 31, 2019