

STATE OF NEW YORK
OFFICE OF ADDICTION SERVICES AND SUPPORTS
INTEROFFICE MEMORANDUM

To: Glenn Liebman, Chair
NYS Behavioral Health Services Advisory Council

From: Keith J. McCarthy, Associate Commissioner
NYS Office of Addiction Services and Supports

Date: September 5, 2022

Subject: Certification Application #2021.077 (Recovery Center of Niagara, LLC)

At the June 16, 2022 meeting of the NYS Behavioral Health Services Advisory Council (“BHSAC”), following lengthy public comment and deliberation by the Project Review Committee, BHSAC members voted to table action on the above-referenced certification application until the next meeting on September 22, 2022. Subsequently, on July 26, 2022, you shared with the Office of Addiction Services and Supports (“OASAS”) questions BHSAC members sought answers and/or clarification to for the anticipated September discussion. Below, please find OASAS’s responses to those questions:

1. *Can OASAS provide a table of locations, total count and occupancy of licensed beds in Niagara County, by bed type, currently?*

Please see attached table. The total OASAS-certified bed count for Niagara County is currently 313, including ENH’s 30 Inpatient Rehabilitation beds and 1 bed for Medically Supervised Withdrawal and Stabilization.

Breaking down Niagara County’s overall bed composition, there are currently 2 OASAS-certified Part 818 Inpatient Rehabilitation units, totaling 99 beds:

- Eastern Niagara Hospital (30 beds)
- Mt. St. Mary’s Hospital (69 beds)

In addition, Northpointe Council currently provides a 7-bed Part 816.7 Medically Supervised Withdrawal and Stabilization service, as well as a 17-bed Part 816.8 Medically Monitored Stabilization service.

There are also a total of 5 OASAS-certified Part 820/819 Residential Services, comprising 190 beds:

- Cazenovia Recovery (65 beds)
- Horizon Village (125 beds)

- 2. Is there going to be a change in the licensed OASAS bed counts in the county in the near future? It appears that Eastern Niagara Hospital (“ENH”) will close 30 OASAS beds in 2023, as per the letter from the Niagara County Community Services Board (“CSB”). There seemed to be some discussion of that, but the details were not clear. If there is, it would be helpful to confirm that there will indeed be a planned decrease, and what types of OASAS beds will close.**

During the review process, ENH communicated to OASAS that, following the planned merger of ENH and Catholic Health in Buffalo, NY (“Catholic Health”) in early 2023, ENH will close their existing OASAS-certified 30-bed Part 818 Inpatient Rehabilitation unit.

- 3. Can ENH clarify why they think the opening of Elev8’s OASAS beds would lead to a closure of ED services?**

Upon the aforementioned merger between ENH and Catholic Health, a new Catholic Health Lock Memorial 10-bed “micro-hospital” will open to preserve access to Emergency Department and Inpatient Medical/Surgical services in the area. The timeline for this to occur is currently May/June of 2023.

During the review process, ENH communicated to OASAS their concern that the opening of the Recovery Center of Niagara’s proposed 25-bed Part 818 Inpatient Rehabilitation program and a 15-bed Part 816.7 Medically Supervised Withdrawal and Stabilization service, prior to the merger and closure of ENH’s 30-bed Part 818 Inpatient Rehabilitation unit, would result in staff migration from ENH to Recovery Center of Niagara. ENH states that the fiscal impact of a premature closure of this unit would compromise the viability of the hospital’s Emergency Department, prior to the new “micro-hospital” being built.

- 4. Has the Community Services Board (CSB) taken into account the concerns that were shared with the BHSAC when making their determination? Did the CSB view these concerns as less significant than the service expansion? Did OASAS further explore the impact of the proposed program, with respect to need/capacity, and concerns expressed?**

Please see attached letter from the CSB, dated August 8, 2022. As you will note in that letter, the CSB states that it took into consideration all of the information presented to it regarding the Recovery Center of Niagara application, including information provided in person by the following community stakeholders:

- ENH – Anne McCaffrey, Ann Briody Petock, David Godfrey, and Maralyn Militello;
- Catholic Health’s Mount St. Mary Hospital – C.J. Urlaub;
- Northpointe Council – Marlon Thornton;
- Cazenovia Recovery Services – Kristin Minevini;
- Save the Michaels of the World – Avi Israel; and
- Newfane Community – Bruce Barnes.

The letter states that concerns revolved around staffing, and the CSB acknowledged the significant concerns with staffing shortages in the service sector – indicating they are

engaged locally in discussions on a range of methods to address this issue. The CSB further states that they are also aware of the continuing increase in need for addiction treatment services, and believe that to decline support for one program due to workforce would then necessitate declining support for **any** new program development or expansion – and that such action is not feasible or responsible on their part.

The CSB also notes that the proposed Recovery Center of Niagara is located in a community that has lost employers and businesses in recent years, and that the local community has expressed to the CSB optimism that the applicant will provide employment opportunities for local residents.

Other information considered by the CSB included:

- County Data: From 2019 to 2021, the County's total opioid related overdoses increased by 65%. The number of fatalities tripled.
- The Niagara County Local Services Plan for 2021 and for 2022, which for both years indicates a Priority Goal related to Inpatient Treatment. Specifically stating "Niagara County residents will have increased and timely access to OMH inpatient beds, as well as OASAS inpatient detoxification and rehabilitation beds, to meet the individual needs of consumers."
- Existing Part 818 Inpatient SUD program census (99 beds total), utilization, and bed availability data. It was noted that official utilization rates appeared lower during the COVID-19 pandemic. However, rates are based on licensed capacity and do not account for programmatic decisions to limit number of beds filled for disease prevention. According to the CSB, information presented by Catholic Health at the April 5, 2022 planning meeting stated "that demand for inpatient treatment beds consistently exceeds available beds and ...pervasive, higher than optimum utilization of beds in the region."
- Referral Data, including declined referrals. For example, forty percent (40%) of referrals to the two (2) existing Part 818 programs were declined. One program declined more than 70% of referrals received. The most common reasons for referral declination were: need for detoxification services; co-occurring medical or mental health concerns; and methadone medications;
- There is only one Part 816 Withdrawal and Stabilization (Detox) program in Niagara County, located on the other end of the county, approximately 30 miles from the proposed Recovery Center of Niagara site;
- The CSB also noted that the facility where the proposed Recovery Center of Niagara is located was sold to the Recovery Center's ownership group by the Eastern Niagara Health System and that Hospital administration was aware at the time of the sale of the new owner's intention to open a Detox and Inpatient treatment program.

If you have any questions about the information provided in this memo, or have any additional questions, please do not hesitate to contact me at (518) 485-2257.