



**New York State Office of Addiction Services and Supports
Bureau of Certification (OASAS)**

M E M O R A N D U M

TO: Dena Holmes

FROM: Jennifer Berg

DATE: April 18, 2023

SUBJECT: Application Review

Applicant: Urban Recovery House, LLC

Application #: 2022.084/ CON#224029

Purpose: Change in Ownership

County: Kings

Project Summary:

Urban Recovery House, LLC submitted a Certification Application requesting New York State Office of Addiction Services and Supports' (OASAS) approval for a Change in Ownership. This application is to remove Herman Johan Sorensen from the current ownership structure, add additional owners and redistribute the shares.

Need:

Urban Recovery House current operates Part 818 Inpatient Rehabilitation Services and Part 816.7 Medically Supervised Inpatient Withdrawal & Stabilization Services in Brooklyn, New York. Urban reported serving 1190 patients in their Part 816.7 program and 1072 patients in their Part 818 program in calendar year 2022, thus demonstrating the continued need for this service.

New York City Department of Health and Mental Hygiene continues to identify substance use disorder as a priority in their County Plan.

The applicant reached out to Community Board #6 via letter and email to inform them of their intentions and received acknowledgment on December 9, 2022. Also in November of 2022, additional community outreach was conducted in the form of letters providing updates and such intentions sent to area providers, program partners and the Brooklyn Borough President.

On April 17, 2023, OASAS received a positive recommendation from the New York City Department of Health and Mental Hygiene in support of this action.

As of the writing of this summary, a request for recommendation to OASAS Regional Office has been made, but not yet received.

Character and Competence:

Urban Recovery has been an OASAS-certified provider since 2018 and are established in their community. Upon the most recent review of their certified programs, they were found to be in substantial compliance and were issued three-year operating certificates for both programs.

With this Change of Ownership application, Calvin Nathan will remain and will add eight additional owners to create the new ownership structure as follows:

Calvin Nathan (10%) - Cal Nathan is an original managing owner of Urban Recovery and assists with the patient experience as well as digital marketing needs within the entity.

Joel Basch (16.66%) – Documentation submitted with this application demonstrates that Joel Basch meets the Substance Use Disorder experience required by OASAS. Joel is currently the Chief Operating Officer of Urban Recovery and Elev8 Center NY, which is also an OASAS-certified program. Joel has ownership stock in Elev8 NY, Recovery Center of Niagara, LLC and Surfpoint Recovery, LLC, also OASAS-certified programs which are newly established.

Yosef Rabinowitz (4.17%) has a background in real estate and has ownership stake in Elev8 NY, LLC, Recovery Center of Niagara, LLC and Surfpoint Recovery, LLC.

The remaining six owners, all have a background in real estate and also have ownership stake in Elev8 NY, LLC.

Eliezer Scheiner (20.83%)- also has known ownership in licensed Nursing Homes

David Levitan (4.17%)

Daniel Turkel (4.17%)

Issac Greenfeld (15%)

Teddy Lichtenstein (20.83%) – also has known ownership in licensed Nursing Homes

Steven Berger (4.17%)

Elev8 Center of New York, LLC is an OASAS-certified provider of Part 818 Inpatient Rehabilitation Services and Part 816.7 Medically Supervised Inpatient Withdrawal & Stabilization Services in New York City. Upon their most recent review the programs were found to be in compliance and were issued three-year and two-year operating certificates, respectively.

Overall Financial Condition of the Provider:

According to the most recent fiscal review completed by OASAS Fiscal Audit and Review Unit in August of 2022, the applicant was determined to be viable.

This action will not affect the current budget. OASAS Regional Office did not report any concerns with the existing budget.

Adequacy:

Upon their most recent reviews, the locations of these services were determined to meet regulatory compliance.

Compliance:

Urban Recovery staffing and policies and procedures have previously been reviewed for regulatory compliance and are accepted by OASAS.

Continuity of Care:

Urban Recovery is an established provider in their community. They have working relationships with local providers and have referral networks in the local community for their patients. These partnerships will not be affected by the change in ownership.

Recommendation:


OASAS recommendation is to approve the request from Urban Recovery House, LLC for a Change in Ownership.

Effective Date: Upon Issuance

Attachments: PPD-6

NEW YORK STATE OFFICE OF ADDICTION SERVICES AND SUPPORTS
LOCAL GOVERNMENTAL UNIT REVIEW REPORT
 (Addiction Disorder Services Certification Actions)

Applicant's Legal Name	Application No.
Local Governmental Unit	
<p>In conjunction with the certification action(s) submitted by the above applicant, you are requested to review and provide comments on the proposed actions relative to the provision of addiction disorder services in your jurisdiction. Your comments are important in evaluating the merits of the action(s). In completing the responses, use additional sheets as necessary. Your cooperation in providing complete and thorough responses is appreciated as incomplete replies will delay the processing of this application.</p>	
1.	<p>In the case of new providers and/or new services, is the program description and site location consistent with local/OASAS requirements: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable Provide explanation below.</p>
2.	<p>Is the operational performance of this provider satisfactory? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable Regardless of the answer, provide a description of the operational performance of the provider below.</p>
3.	<p>Is the financial plan in the proposal adequate and acceptable? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable Provide explanation below.</p> <p>Where applicable, please note any comments related to Medicaid policy and/or reimbursement practices below.</p>
4.	<p>Is the action consistent with local plans and/or does it meet community needs? <input type="checkbox"/> Yes <input type="checkbox"/> No Provide explanation below.</p>
5.	<p>Is there any known information regarding the provider's standing in the community? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable Regardless of the answer, provide all known information below or on additional sheets attached to this report.</p>

<p>6.</p> <p>Program Location</p>	<p>In answering this question, the following should be taken into consideration:</p> <ul style="list-style-type: none"> (a) the location is suitable for an Addiction Disorder Treatment Program; (b) the accessibility of public transportation and adequate parking; and (c) any other notable observations. <p>Please describe your assessment of the circumstances noted.</p>		
	<p>Please check one box.</p> <p><input type="checkbox"/> LGU has visited the proposed location. Date of Visit: _____</p> <p><input type="checkbox"/> LGU has not visited, but has sufficient personal knowledge to attest to its suitability.</p> <p><input type="checkbox"/> N/A – Please explain, for example, N/A may be appropriate in applications that involve relocation within an existing building. However, factors such as capacity increase, even in an existing building, would not be appropriate for an “N/A” response.</p>		
<p>7.</p> <p>Current Status of Existing Programs</p>	<p>Are you aware of any community issues with other programs operated by this provider, or in the case of relocation, this program’s current location? (i.e., any issues around loitering, public safety, etc.) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Please describe any issues.</p>		
<p>8.</p> <p>Community Response</p>	<p>Please describe your knowledge of the applicant’s outreach to the local community (e.g., Community Service Boards, Community Boards, Planning Boards, Neighborhood Coalitions, other local municipalities). Please summarize your knowledge of community input, including any existing or likely community concerns, as well as any recommendations.</p>		
<p>9.</p> <p>Other Comments</p>	<p>Provide additional comments.</p>		
<p>10.</p> <p>LGU Recommendation</p>	<p><input type="checkbox"/> Approve <input type="checkbox"/> Disapprove</p>	<p>Signature of Authorized LGU Official</p> 	<p>Date</p> <p>4/17/23</p>

**New York State Office of Addiction Services and Supports
Bureau of Certification (OASAS)**

MEMORANDUM

TO: Dena Holmes

FROM: Michele Woods

DATE: April 12, 2023

SUBJECT: *Application Review*

Applicant: Ocean Recovery East, LLC d/b/a Ascendant New York

Application #: 2022-083

NYSECON#: 224028

Purpose: Change in Ownership

County: New York

Project Summary:

Ocean Recovery East, LLC d/b/a Ascendant New York (Ocean Recovery) is requesting Office of Addiction Services and Supports' (OASAS) approval for a change in ownership of their Part 816 Medically Supervised Withdrawal Treatment Service, Part 818 Inpatient Rehabilitation Treatment Service and Part 822 Outpatient Treatment Service located at 113 East 60th Street, New York, NY 10022.

Current ownership consists of Paul Schwartz holding 51% of shares, Kathleen Tunney holding 17% of shares, John Crepsac holding 15% of shares and Kevin Cullen holding 17% of shares.

Kathleen Tunney will retire and step down as a shareholder, and John Crepsac has applied for ownership of another program, creating a conflict of interest. Kevin Cullen was terminated from his position with the company due to malfeasance and forfeited his share of ownership shortly after Ocean Recovery became certified as a provider of OASAS services.

In place of Kevin Cullen, Kathleen Tunny and John Crepsac, Ocean Recovery is requesting the reappropriation of their shares to the current Chief Executive Officer Tzvi Heber and Chief Compliance Officer Shari Noonan.

New ownership will be 66% Paul Schwartz, 33% Tzvi Heber, and 1% Shari Noonan.

Tzvi Heber has demonstrated that he meets the required SUD experience.

Membership Interest Redemption Agreements (MIRA) for Kathleen Tunney and John Crepsac were included with the submission as well as an Amended and Restated Company Agreement of Ocean Recovery East, LLC. A MIRA was not included for Kevin Cullen as he is lost to contact.

City of New York Community Board 8 submitted their acknowledgment of the change in ownership on November 22, 2022.

Need:

The New York City Department of Health and Mental Hygiene continues to identify substance use disorder services as a priority as evidenced in their county plan. Continued need for services was verified by the OASAS Certification Bureau.

The Certification Bureau received the New York City Department of Health and Mental Hygiene's Local Governmental Unit Review Recommendation (PPD-6) on March 3, 2023, signed by Nilova Saha, recommending approval.

OASAS New York City Regional Office submitted a recommendation to support this application on March 22, 2023.

Character and Competence:

Ocean Recovery East, LLC d/b/a Ascendant New York became established as an OASAS certified provider in July 2018.

The provider holds three operating certificates:

- **Certificate Number:** 230412220 - Outpatient Service (822) with Telehealth Designation (with ancillary withdrawal services) located at 113 East 60th Street, New York, NY 10022-1939.

Most recent recertification review in April 2022 resulted in a conditional compliance and was issued a one-year operating certificate based on their fiscal viability score.

- **Certificate Number:** 2241012243 – Inpatient Rehabilitation Services (818) located 113 East 60th Street, New York, NY 10022-1939.

Most recent recertification review in October 2021 resulted in a substantial compliance and was issued a three-year operating certificate.

- **Certificate Number:** 221212126 – Medically Supervised Inpatient Withdrawal and Stabilization Service located 113 East 60th Street, New York, NY 10022-1939.

Most recent recertification review in December 2019 resulted in a substantial compliance and was issued a three-year operating certificate.

Overall Financial Condition of the Provider:

There will be no changes in the operating budget.

The OASAS Fiscal Audit and Review Unit (FARU) has determined that Ocean Recovery East, LLC d/b/a Ascendant New York is fiscally viable through February 2024.

Adequacy:

Treatment Services will remain in currently OASAS certified space.

Compliance:

The provider acknowledges the utilization of policies and procedures which have previously been reviewed for all three levels of care and are accepted by OASAS. All current staffing positions will remain the same.

Continuity of Care:

Ocean Recovery East, LLC is an established provider in the community and will continue to utilize existing linkages to ensure a continuum of care.


Recommendation:

The OASAS recommendation is to approve Ocean Recovery East, LLC d/b/a Ascendant New York's request to change percentages in ownership from 51% Paul Schwartz, 17% Kathleen Tunney, 15%, John Crepsac and 17% Kevin Cullen to 66% Paul Schwartz, 33% Tzvi Heber, and 1% Shari Noonan.

Attachment – LGU Recommendation (PPD-6)

NEW YORK STATE OFFICE OF ADDICTION SERVICES AND SUPPORTS
LOCAL GOVERNMENTAL UNIT REVIEW REPORT
(Addiction Disorder Services Certification Actions)

Applicant's Legal Name Ocean Recovery East, LLC d/b/a Ascendant NY	Application No. NYSE CON: 224028 CA #:2022-083
Local Governmental Unit NYC Department of Health and Mental Hygiene	
In conjunction with the certification action(s) submitted by the above applicant, you are requested to review and provide comments on the proposed actions relative to the provision of addiction disorder services in your jurisdiction. Your comments are important in evaluating the merits of the action(s). In completing the responses, use additional sheets as necessary. Your cooperation in providing complete and thorough responses is appreciated as incomplete replies will delay the processing of this application.	
1. Consistency of Program Description and Site Location with Local/OASAS Requirements	In the case of new providers and/or new services, is the program description and site location consistent with local/OASAS requirements: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable Provide explanation below. Ocean Recovery East, LLC d/b/a Ascendant NY proposes to change ownership resulting in new ownership being 66% Paul Schwartz, 33% Tzvi Herber and 1 % Shari Noonan. No services or staffing would be affected by this change. The Provider meets standards of providing a full array of MAT with on-site access to buprenorphine, harm reduction education and Narcan, and has reached out to their Community Board to apprise them of this change.
2. Provider Operational Performance	Is the operational performance of this provider satisfactory? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable Regardless of the answer, provide a description of the operational performance of the provider below. Ocean Recovery East, LLC d/b/a Ascendant NY is not an allocated provider and the Department can only look at the information provided in the application which appears to be satisfactory.
3. Adequacy of Financial Plans	Is the financial plan in the proposal adequate and acceptable? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable Provide explanation below. Ocean Recovery East, LLC d/b/a Ascendant NY is not an allocated provider and the Department can only look at the information provided in the application. Where applicable, please note any comments related to Medicaid policy and/or reimbursement practices below.
4. Consistency with Local Plans and Local/Community Needs	Is the action consistent with local plans and/or does it meet community needs? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Provide explanation below. This program is located on the Upper Easts Side of Manhattan, which is in proximity to East Harlem, Central Harlem, and several neighborhoods in the Bronx with the highest overdose death rates of unintentional drug poisoning (overdose) deaths by neighborhood of residence, New York City, 2021.
5. Provider Standing in the Community	Is there any known information regarding the provider's standing in the community? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable Regardless of the answer, provide all known information below or on additional sheets attached to this report. Since 2018, Ocean Recovery East, LLC d/b/a Ascendant NY has provided safe, medically supervised detox services in an environment that is peaceful, comfortable and discreet. This has been reported frequently by participants and family members.

<p>5.</p> <p>Program Location</p>	<p>In answering this question, the following should be taken into consideration:</p> <ul style="list-style-type: none"> (a) the location is suitable for an Addiction Disorder Treatment Program; (b) the accessibility of public transportation and adequate parking; and (c) any other notable observations. <p>Please describe your assessment of the circumstances noted.</p> <hr/> <p>Please check one box.</p> <p><input type="checkbox"/> LGU has visited the proposed location. Date of Visit: _____</p> <p><input type="checkbox"/> LGU has not visited, but has sufficient personal knowledge to attest to its suitability.</p> <p><input checked="" type="checkbox"/> N/A – Please explain, for example, N/A may be appropriate in applications that involve relocation within an existing building. However, factors such as capacity increase, even in an existing building, would not be appropriate for an “N/A” response.</p> <p>This is change in ownership and no change to currently certified program location.</p>	
<p>7.</p> <p>Current Status of Existing Programs</p>	<p>Are you aware of any community issues with other programs operated by this provider, or in the case of relocation, this program’s current location? (i.e., any issues around loitering, public safety, etc.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Please describe any issues.</p> <p>There are no known issues.</p>	
<p>8.</p> <p>Community Response</p>	<p>Please describe your knowledge of the applicant’s outreach to the local community (e.g., Community Service Boards, Community Boards, Planning Boards, Neighborhood Coalitions, other local municipalities). Please summarize your knowledge of community input, including any existing or likely community concerns, as well as any recommendations.</p> <p>The Provider included in their applicaiton an email dated 11/22/22 from Community Board #8 acknowledging the change in ownership.</p>	
<p>9.</p> <p>Other Comments</p>	<p>Provide additional comments.</p> <p>N/A</p>	
<p>10.</p> <p>LGU Recommendation</p> <p><input checked="" type="checkbox"/> Approve <input type="checkbox"/> Disapprove</p>	<p>Signature of Authorized LGU Official</p> 	<p>Date</p> <p>3/3/23</p>

**New York State Office of Addiction Services and Supports
Bureau of Certification (OASAS)**

MEMORANDUM

TO: Dena Holmes

FROM: Michele Woods

DATE: April 12, 2023

SUBJECT: *Application Review*

Applicant: A.R.E.B.A. Casriel, Inc. d/b/a Addiction Care Interventions

Application #: 2022-093

NYSECON #: 224042

Purpose: Change in Ownership

County: Brooklyn

Project Summary:

A.R.E.B.A Casriel, Inc. d/b/a Addiction Care Interventions (ACI) is requesting Office of Addiction Services and Supports (OASAS) approval for a change in ownership of it's Part 816.7 Medically Supervised Inpatient Withdrawal and Stabilization Service, Part 818 Inpatient Rehabilitation Service, both located at 589 Rockaway Avenue, Brooklyn, and their Part 822 Outpatient Treatment Service located at 255 West 36th Street, New York, NY.

Current ownership consists of Aaron Wolcowitz and Joel Zupnick, each holding 45% of the shares, and Hawa Jalloh holding 10% of the shares.

Ownership composition will change to Aaron Wolcowitz and Joel Zupnick each holding 40% of the shares and Hawa Jalloh holding 10% of the shares. Yuliya Vaynrub, a LCSW-R, will obtain 10% of the shares.

Hawa Jalloh has the OASAS required substance use disorder (SUD) experience.

Yuliya Vaynrub is a mental health professional with years of experience in the field. Her addition to the governing body will bring expertise in treating individuals with co-occurring disorders to the board.

An Amended and Restated Shareholders Agreement with the addition of Yuliya Vaynrub and the redistribution of shares was included with the submission.

New York City Brooklyn Community Board #16 acknowledged notification of the change in ownership on October 25, 2022.

New York City Manhattan Community Board #4 acknowledged notification of the change in ownership on October 26, 2022.

Need:

The New York City Department of Health and Mental Hygiene continues to identify substance use disorder services as a priority as evidenced in their county plan. Continued need for services was verified by the OASAS Certification Bureau.

The New York City Department of Health and Mental Hygiene submitted a recommendation to support the change in ownership on February 15, 2023, signed by Nilova Saha, Senior Director of Substance Use Care, Bureau of Alcohol and Drug Use Prevention, Care and Treatment.

OASAS New York City Regional Office submitted a recommendation to support this application on March 15, 2023.

Character and Competence:

ACI has been established as a proprietary corporation and has been providing substance use disorder services for more than 40 years.

ACI holds three OASAS operating certificates.

Certificate Number: 221011447 – Part 818 Inpatient Rehabilitation Service with Telehealth Designation located at 589 Rockaway Avenue, Brooklyn, NY 11212.

Most recent recertification in January 2023 resulted in a partial compliance and was issued a two-year operating certificate.

Certificate Number: 230710643 - Part 822 Outpatient Service with Telehealth Designation (with ancillary withdrawal services) located at 255 West 36th Street, New York, NY 10018

Most recent recertification review in July 2022 resulted in a conditional compliance and was issued a one-year operating certificate based on their fiscal viability score.

Certificate Number: 241211439 – Part 816.7 Medically Supervised Inpatient Withdrawal and Stabilization Services with Telehealth Designation located at 589 Rockaway Avenue, Brooklyn, NY 11212

Most recent recertification review in November 2022 resulted in a partial compliance and was issued a two-year operating certificate.

Overall Financial Condition of the Provider:

The OASAS Fiscal Audit and Review Unit (FARU) has determined that ACI is fiscally viable through September 2023.

There will be no changes in the current operating budget.

Adequacy:

Treatment Services will remain in OASAS certified space.

Compliance:

ACI acknowledges the utilization of policies and procedures which have previously been reviewed for all three levels of care and are accepted by OASAS. All current staffing positions will remain the same.

Continuity of Care:

ACI is an established provider in the community and will continue to utilize existing linkages to ensure a continuum of care.

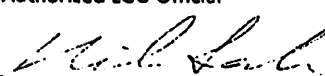
Recommendation:

The OASAS recommendation is to approve the change in ownership percentages from Aaron Wolcowitz and Joel Zupnick, each holding 45% of the shares, and Hawa Jalloh holding 10% of the shares to Aaron Wolcowitz and Joel Zupnick each holding 40% of the shares, Hawa Jalloh holding 10% of the shares, and Yuliya Vaynrub acquiring 10% of the shares.

Attachment – LGU Recommendation (PPD-6)

NEW YORK STATE OFFICE OF ADDICTION SERVICES AND SUPPORTS
LOCAL GOVERNMENTAL UNIT REVIEW REPORT
 (Addiction Disorder Services Certification Actions)

Applicant's Legal Name A.R.E.B.A Casriel, Inc. d/b/a Addiction Care Interventions (ACI)	Application No. NYSE CON: 224042 CA #:2022-093
Local Governmental Unit NYC Department of Health and Mental Hygiene	
In conjunction with the certification action(s) submitted by the above applicant, you are requested to review and provide comments on the proposed actions relative to the provision of addiction disorder services in your jurisdiction. Your comments are important in evaluating the merits of the action(s). In completing the responses, use additional sheets as necessary. Your cooperation in providing complete and thorough responses is appreciated as incomplete replies will delay the processing of this application.	
1. Consistency of Program Description and Site Location with Local/OASAS Requirements	In the case of new providers and/or new services, is the program description and site location consistent with local/OASAS requirements: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable Provide explanation below. A.R.E.B.A.-Casriel, Inc. dba Addiction Care Interventions (ACI) is applying for a change of ownership of its three OASAS licensed programs located at 589 Rockaway Ave. Brooklyn NY, 11212 by adding Yuliya Vaynrub, as a 10% owner. The other shares will continue to be held by the current owners Aron J. Wolcowitz at 40%, Joel Zupnick at 40% and Hawa Jalloh at 10%. The programs provide MAT including buprenorphine and distributes Naloxone.
2. Provider Operational Performance	Is the operational performance of this provider satisfactory? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable Regardless of the answer, provide a description of the operational performance of the provider below. This is not an allocated provider and the Department can only go by the information provided on the application. The information appears to indicate that operational performance of this provider would be satisfactory
3. Adequacy of Financial Plans	Is the financial plan in the proposal adequate and acceptable? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable Provide explanation below. This is not an allocated provider and the Department can only look at the information provided in the application. This information appears to be acceptable. Where applicable, please note any comments related to Medicaid policy and/or reimbursement practices below. No change reported by the applicant. Commercial (Managed Care) insurances will be accepted
4. Consistency with Local Plans and Local/Community Needs	Is the action consistent with local plans and/or does it meet community needs? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Provide explanation below. In 2021, there were 2,668 overdose deaths in NYC, compared with 2,103 in 2020, an increase of 565 deaths. The rate of overdose death increased to 39.4 per 100,000 NYC residents in 2021, compared with 31.6 per 100,000 in 2020. For the fifth year in a row, fentanyl was the most common substance involved in overdose deaths, present in 80% of overdose deaths in 2021. According to the NYC Epi Data Brief published in 2022, In Brooklyn, a total of unintentional drug poisoning deaths was 651, 31 % with a rate of 34%.
5. Provider Standing in the Community	Is there any known information regarding the provider's standing in the community? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable Regardless of the answer, provide all known information below or on additional sheets attached to this report. For over 40 years, the applicant has been providing substance use services. The Provider is in good standings in the community.

<p>6.</p> <p>Program Location</p>	<p>In answering this question, the following should be taken into consideration:</p> <p>(a) the location is suitable for an Addiction Disorder Treatment Program; (b) the accessibility of public transportation and adequate parking; and (c) any other notable observations.</p> <p>Please describe your assessment of the circumstances noted.</p> <p>The program is accessible by public transportation. By subway- the 3 and 4 line stops at Rockaway Ave. The bus line is B60.</p>	
	<p>Please check one box.</p> <p><input type="checkbox"/> LGU has visited the proposed location. Date of Visit: _____</p> <p><input type="checkbox"/> LGU has not visited, but has sufficient personal knowledge to attest to its suitability.</p> <p><input checked="" type="checkbox"/> N/A – Please explain, for example, N/A may be appropriate in applications that involve relocation within an existing building. However, factors such as capacity increase, even in an existing building, would not be appropriate for an “N/A” response.</p> <p>NA-change in ownership status and no change in program location</p>	
<p>7.</p> <p>Current Status of Existing Programs</p>	<p>Are you aware of any community issues with other programs operated by this provider, or in the case of relocation, this program’s current location? (i.e., any issues around loitering, public safety, etc.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Please describe any issues.</p> <p>There are no known issues to the DOHMH.</p>	
<p>8.</p> <p>Community Response</p>	<p>Please describe your knowledge of the applicant’s outreach to the local community (e.g., Community Service Boards, Community Boards, Planning Boards, Neighborhood Coalitions, other local municipalities). Please summarize your knowledge of community input, including any existing or likely community concerns, as well as any recommendations.</p> <p>Letters were sent to Ms. Viola D. Greene, District Manager, Brooklyn Community Board 16 and Mr. Jesse Bodine, District Manager, Manhattan Community Board 4, on October 24, 2022, notifying them of the intention of ACI to seek approval from OASAS to change the ownership of ACI by adding Yuliya Vaynrub, LCSW to the existing ownership. The applicant has provided documentation from Community Board# 16 and #4 acknowledging receiving notification of the applicant’s ownership change.</p>	
<p>9.</p> <p>Other Comments</p>	<p>Provide additional comments.</p> <p>N/A</p>	
<p>10.</p> <p>LGU Recommendation</p> <p><input checked="" type="checkbox"/> Approve <input type="checkbox"/> Disapprove</p>	<p>Signature of Authorized LGU Official</p> 	<p>Date</p> <p>2/15/23</p>

**New York State Office of Addiction Services and Supports
Bureau of Certification (OASAS)**

M E M O R A N D U M

TO: Dena Holmes
Director, Bureau of Certification

FROM: Jeffrey Capitemmino

DATE: March 10, 2023

SUBJECT: Application Review
Applicant: Success Counseling Services, Inc.
Application #: 2022.075 / CON# 224016
Purpose: Change in Ownership
County: Bronx County

Project Summary:

Success Counseling Services, Inc. submitted a Certification Application requesting New York State Office of Addiction Services and Supports' (OASAS) approval for a Change in Ownership affecting Operating Certificate#11032 located at 139 West 168th Street Bronx, NY, 10452. This request will remove Larry Fruit from the ownership structure, transferring his ten percent to existing owner, Yehoshua (Josh) Greenfeld.

Need:

According to the OASAS Client Data System, over the past two years, Success Counseling Services, Inc. has admitted nearly 800 individuals, thus demonstrating the continued need for this service. The NYC Department of Health and Mental Hygiene continues to cite the need for substance use disorder services (SUD) as a priority in their 2021 County Plan.

Success Counseling Services, Inc. is a Part 822 OASAS Outpatient program that serves the people of the Highbridge area of the Bronx, as well as the South Bronx. Success Counseling offers Telehealth services, direct care in Spanish, and Medication Assisted Treatment (MAT).

A formal letter informing the Bronx Community Board #4 on the proposed action was sent by CEO Josh Greenfeld on November 1, 2022, via both certified mail and email. On November 15, 2022, The Bronx Community Board #4 emailed acknowledgment of Mr. Greenfeld's correspondence.

NYC Department of Health and Mental Hygiene's recommendation in support of this application was received by OASAS Bureau of Certification on February 3, 2023

OASAS' New York City Regional Office's recommendation in support of this application was received on February 27, 2023

Character and Competence:

Success Counseling Services, Inc. was established as a for-profit corporation in 1997 to provide chemical dependence treatment services. Success Counseling holds one operating certificate in good standing with OASAS. Upon their most recent review in November 2022, they received partial compliance and were issued a 2-year certification.

Upon the approval of Success Counseling's request for change of ownership, the ownership structure, with the corresponding shares of company stock in parenthesis, will be: Josh Greenfeld (34%), Marvin Rubin (24%), Joel Landau (24%), & Zvi Klein (18%).

No other changes to the ownership structure were requested; however, Success Counseling will retain Larry Fruit as a consultant, providing continued but limited guidance on issues where his experience can be utilized. He will no longer be considered an employee or shareholder, as the Board determined the funding used for Mr. Fruit's previous salary will be utilized for clinical staffing.

Josh Greenfeld has been with Success Counseling Services since 2019. Beginning in a managerial capacity and transitioning into his current role as Success Counseling's CEO, Mr. Greenfeld has demonstrated that he meets OASAS requirements for substance use disorder (SUD) experience.

Overall Financial Condition of the Provider:

OASAS' Fiscal Audit and Review Unit completed a fiscal viability review on December 28, 2022 and determined Success Counseling Services is fiscally viable.

Adequacy:

The lease for the space this program occupies was reviewed and found to contain the required OASAS right to re-entry language.

Compliance:

There will be no changes to the location, services provided, budget, staffing, or policies & procedures as a result of this application. The existing staff meets regulatory requirements, and the policies & procedures previously reviewed are being utilized in their program.

Continuity of Care:

Success Counseling is an established community provider of SUD services, including medication assisted treatment. They have agreements with agencies who provide support to patients during their course of treatment. For example, they partner with both Vocational And Educational Services For Individuals With Disabilities (VESID) and Employment Program for Recovered Alcoholics (EPRA) to link their clientele with vocational & educational services. Success also identifies an active, strong relationship with Argus Community which has provided all patient HIV testing & follow-up for many years now.

In addition to group and individual counseling, counselors and peer advocates assist clients with maintaining health insurance coverage, establishing a primary care provider, and obtaining critical communication devices such as government-funded cell phones.

Recommendation:

OASAS recommendation is to approve the request from Success Counseling Services, Inc. for a Change in Ownership.

Attachments: PPD 6

NEW YORK STATE OFFICE OF ADDICTION SERVICES AND SUPPORTS
LOCAL GOVERNMENTAL UNIT REVIEW REPORT
 (Addiction Disorder Services Certification Actions)

Applicant's Legal Name Success Counseling Services, Inc.	Application No. 224016
Local Governmental Unit NYC Department of Health & Mental Hygiene	
In conjunction with the certification action(s) submitted by the above applicant, you are requested to review and provide comments on the proposed actions relative to the provision of addiction disorder services in your jurisdiction. Your comments are important in evaluating the merits of the action(s). In completing the responses, use additional sheets as necessary. Your cooperation in providing complete and thorough responses is appreciated as incomplete replies will delay the processing of this application.	
1. Consistency of Program Description and Site Location with Local/OASAS Requirements	In the case of new providers and/or new services, is the program description and site location consistent with local/OASAS requirements: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable Provide explanation below. This application is for a change in ownership status for Success Counseling Services, Inc. which is an existing OASAS licensed part 822 program. The program offers services to adults and offers MAT (buprenorphine and Naloxone) as part of their service delivery. Larry Fruit will transfer his remaining 10% of shares to current CEO Yehoshua Greenfeld. The shareholders will then be: Yehoshua Greenfeld - 34%, Marvin Rubin - 24%, Joel Landau - 24% and Zvi Klein - 18%.
2. Provider Operational Performance	Is the operational performance of this provider satisfactory? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable Regardless of the answer, provide a description of the operational performance of the provider below. This is not an allocated provider and the Department can only go by the information provided in the application, which appears to indicate that operational performance of this provider would be satisfactory.
3. Adequacy of Financial Plans	Is the financial plan in the proposal adequate and acceptable? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable Provide explanation below. This is not an allocated provider and the Department can only look at the information provided in the application. The provider did not indicate any changes in their operational budget. Where applicable, please note any comments related to Medicaid policy and/or reimbursement practices below. N/A
4. Consistency with Local Plans and Local/Community Needs	Is the action consistent with local plans and/or does it meet community needs? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Provide explanation below. Available NYC Epi-data indicates that 2,668 individuals died of a drug overdose in New York City in 2021, an increase of 78 percent since 2019 and 27 percent since 2020, with evident disparities by age, race, poverty level, and neighborhood of residence. Residents of the Bronx had the highest rate of overdose death in 2021 (70.6 per 100,000 residents). The neighborhoods with the highest rates of overdose death were Hunts Point-Mott Haven, Crotona-Tremont, and Highbridge-Morrisania.
5. Provider Standing in the Community	Is there any known information regarding the provider's standing in the community? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable Regardless of the answer, provide all known information below or on additional sheets attached to this report. Success Counseling Services, Inc. has provided outpatient treatment services in the Highbridge neighborhood for the past 23 years. The provider is in good standings in the community and maintains communication and a relationship with Bronx Community Board # 4.

<p>6.</p> <p>Program Location</p>	<p>In answering this question, the following should be taken into consideration:</p> <ul style="list-style-type: none"> (a) the location is suitable for an Addiction Disorder Treatment Program; (b) the accessibility of public transportation and adequate parking; and (c) any other notable observations. <p>Please describe your assessment of the circumstances noted.</p> <hr/> <p>Please check one box.</p> <p><input type="checkbox"/> LGU has visited the proposed location. Date of Visit: _____</p> <p><input type="checkbox"/> LGU has not visited, but has sufficient personal knowledge to attest to its suitability.</p> <p><input checked="" type="checkbox"/> N/A – Please explain, for example, N/A may be appropriate in applications that involve relocation within an existing building. However, factors such as capacity increase, even in an existing building, would not be appropriate for an “N/A” response.</p> <p>NA-change in ownership status and no change in program location</p>		
<p>7.</p> <p>Current Status of Existing Programs</p>	<p>Are you aware of any community issues with other programs operated by this provider, or in the case of relocation, this program’s current location? (i.e., any issues around loitering, public safety, etc.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Please describe any issues.</p> <p>There are no known issues to the DOHMH.</p>		
<p>8.</p> <p>Community Response</p>	<p>Please describe your knowledge of the applicant’s outreach to the local community (e.g., Community Service Boards, Community Boards, Planning Boards, Neighborhood Coalitions, other local municipalities). Please summarize your knowledge of community input, including any existing or likely community concerns, as well as any recommendations.</p> <p>The applicant provided documentation of acknowledgement, dated November 15, 2022, from Bronx Community Board # 4 of its intention to transfer the remaining 10% ownership to Yehoshua Greenfeld.</p>		
<p>9.</p> <p>Other Comments</p>	<p>Provide additional comments.</p> <p>N/A</p>		
<p>10.</p> <p>LGU Recommendation</p>	<p><input type="checkbox"/> Approve <input type="checkbox"/> Disapprove</p>	<p>Signature of Authorized LGU Official</p> <p><i>Neil Sah</i></p>	<p>Date</p> <p>2/2/23</p>

**New York State Office of Addiction Services and Supports
Bureau of Certification (OASAS)**

M E M O R A N D U M

TO: Dena Holmes, Director
Bureau of Certification

FROM: Jeffrey Capitulo

DATE: April 17, 2023

SUBJECT: Application Review

Applicant: Fusion Recovery Centers, LLC
Application #: 2022.094.0 / CON# 224043
Purpose: New OASAS Provider / Part 822
County: Albany

Project Summary:

Fusion Recovery Centers, LLC submitted a Certification Application requesting New York State Office of Addiction Services and Supports' (OASAS) approval to become a new OASAS Provider of Part 822 Outpatient treatment services located at 444 Broadway Menands, NY 12204.

Services will include group and individual counseling using tools such as motivational interviewing, cognitive behavioral therapy, and dialectical behavioral therapy. Client education will be focused on linkage with self-help services including Alcoholics Anonymous (AA), Narcotics Anonymous (NA), and Smart Recovery. Fusion will also offer the support of Certified Recovery Peer Advocates to assist clients with recovery goals. Supportive mental health services will include psychiatric evaluations with mental health medication management. Fusion's hours of operation will be Monday through Friday 8am to 9pm and Saturday 8am to 12pm.

Need:

The substance use disorder treatment resources in Albany County are numerous and diverse. Long-standing OASAS certified programs such as St. Peter's Addiction Recovery Center, The Addiction Care Center of Albany, Hope House, as well as the Opioid Treatment Programs (OTP's) at Whitney Young & Camino Nuevo, are attempting to satisfy the Capital Regions growing demand for quality, client-centered care. Despite this bevy of treatment resources Fusion believes what is lacking is a co-located, comprehensive outpatient continuum of care.

Fusion Recovery is seeking to become a new OASAS certified provider beginning with a Part 822 outpatient proposal and the vision of expanding their services at the new Menands

site. In this submitted application, Fusion notes its development plan with intentions to submit subsequent applications for outpatient Medically Supervised Detoxification/Outpatient, Intensive Outpatient, Day Rehabilitation, and an OTP; supporting prospective clients as they move throughout the continuum of care.

Historically, Fusion reports that treatment resources in this geographic region have been primarily targeted towards low-income clients, particularly, those utilizing Medicaid as a payor source. Fusion contends that although rare in other healthcare sectors, privately insured substance use disorder clients have limited choices in regard to treatment of their disease. This new Part 822 will provide an additional resource for a segment of the treatment population Fusion feels is underserved in the Capital Region.

In an already strained service delivery system, the COVID pandemic and the resulting strategies for preventing the spread of the virus has left more Americans in need of SUD services than ever before. The National Institute on Drug Abuse (NIDA) notes, "researchers have observed increases in substance use and drug overdoses in the United States since the COVID-19 pandemic was declared a national emergency in March 2020". The applicant reports the detrimental impact of COVID-19 on substance use in Albany County will likely require substantial SUD services that are also diverse, to adequately respond to the aftermath for years to come.

On August 18, 2022, Fusion Recovery met with the Albany County Community Service Board, including Commissioner Giordano, regarding the Menands program. Also, Fusion discussed their proposal with State Senator Michelle Hinchey on April 13, 2022; afterward, a letter in support of the project was issued. Additionally, on June 3, 2022, Fusion received a letter in support of this application from the Capital Region Chamber of Commerce, signed by Thomas J. O'Connor, Vice President of Government Relations.

The Albany County Local Government Unit's recommendation in support of this application was received on March 10, 2023.

The OASAS Hudson Regional Office submitted a recommendation to support this application on March 21, 2023.

Character and Competence:

Fusion Recovery Centers was established as a Domestic Limited Liability Company on 12/15/2021 with a Governing Authority consisting of three members (shares of stock and voting rights in parenthesis): Shlomo Weiss (75%) the CEO of Millin Associates, LLC, a revenue cycle management services and systems company helping Health & Human Services agencies achieve maximum efficiency while controlling operating costs; Adina Garber (10%) has considerable experience in acute care nursing with a strong background in detox for substance abuse clients. Mitchell Baumann (15%) President and a founding partner of Fusion Recovery Centers. Mr. Baumann has demonstrated to have the substance use disorder experience as required by OASAS. Mitchell has worked in the addiction field since 2007 and has developed extensive substance use disorder experience, having established several SUD programs in the State of Florida. Additionally, Mitchell currently holds a partial ownership interest in BriteLife Recovery, a SUD program with locations in Hanover, Pennsylvania and Hilton Head, South Carolina

Mr. Baumann also has 10% ownership stake in Windham Falls Recovery, LLC d/b/a BriteLife Recovery at Lexington, another new OASAS provider application that is pending.

Overall Financial Condition of the Provider:

The proposed annual budget identifies revenues at \$2,030,931.88 and expenses at \$615,244.75 leaving a total of \$1,415,687.13 in profit.

The OASAS Hudson Regional Office did not report concerns after review of the Fusion budget.

The applicant submitted the required documentation demonstrating available sufficient funding for the initial six-months, while the program gets underway.

Adequacy:

On January 31, 2023, The OASAS Facilities Evaluation and Inspection Unit completed a State Environmental Quality Review which determined that the proposed site, 444 Broadway Menands, NY, did not require further environmental review. Also, on that date, the completed Floor Plan Review was received which determined this site met regulatory requirements.

On February 2, 2023, The OASAS FEIU completed a Facilities Evaluation Report which found the proposed facility space to be in compliance.

An approved lease for this location was also submitted and contains the required OASAS right to re-entry language.

Compliance:

The applicant submitted a staffing plan for the proposed Menands outpatient location which meets regulatory requirements and includes:

- .25 FTE Medical Director
- .25 FTE Psychiatrist
- .25 FTE Clinical Director (LMSW)
- 1.0 FTE Registered Nurses
- 5.0 Full-time; either: CASAC(S)/LMSW(S)/LMHC Counselor(s)
- 1.0 Admin/Clerical

Policies and procedures have been reviewed for regulatory compliance and are accepted by OASAS.

Continuity of Care:

Fusion Recovery has a fully executed Memorandum of Understanding agreement with St. Peter's Addiction Recovery Center (SPARC), part of St. Peter's Healthcare Partners, for clients who present with a need for a higher level of care than outpatient substance abuse treatment. The services in their application they will be referring out to St. Peter's include detoxification, primary medical care, emergency medical care, and HIV antibody testing.

Recommendation:

OASAS recommendation is to approve the request from Fusion Recovery Centers, LLC to become a New OASAS Provider of Part 822 Outpatient Treatment Services with the following contingencies:

- Verification of the hiring of sufficient staff to meet regulatory requirements
- Copy of filing receipt from the NYS Department of State indicating that the amended Certificate of Incorporation/Articles of Organization, including the OASAS required language, have been filed.

Effective Date:

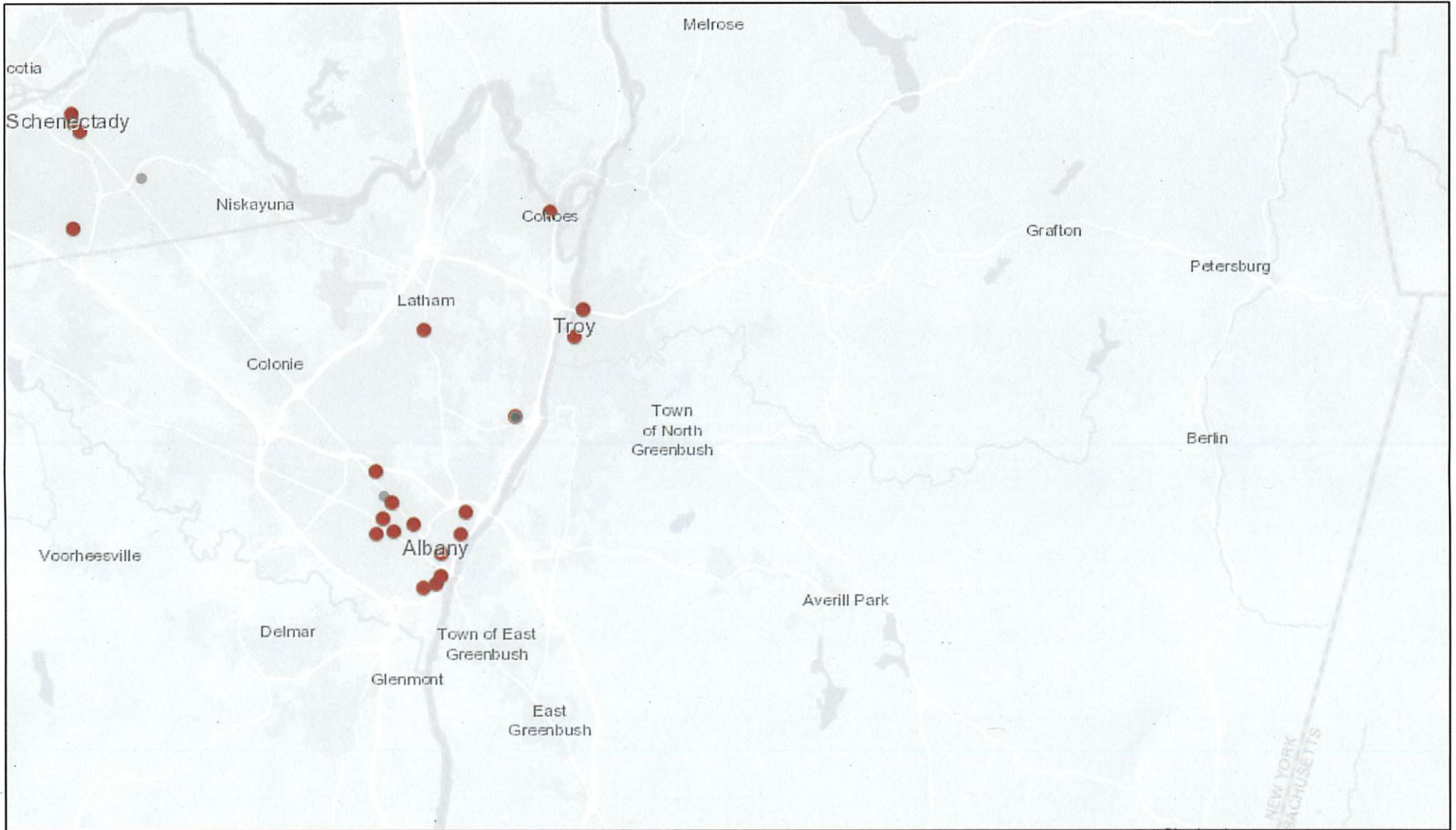
Attachments: LGU recommendation, maps

NEW YORK STATE OFFICE OF ADDICTION SERVICES AND SUPPORTS
LOCAL GOVERNMENTAL UNIT REVIEW REPORT
 (Addiction Disorder Services Certification Actions)

Applicant's Legal Name Fusion Recovery Centers, LLC	Application No. # 224043
Local Governmental Unit OASAS Upper Hudson	
In conjunction with the certification action(s) submitted by the above applicant, you are requested to review and provide comments on the proposed actions relative to the provision of addiction disorder services in your jurisdiction. Your comments are important in evaluating the merits of the action(s). In completing the responses, use additional sheets as necessary. Your cooperation in providing complete and thorough responses is appreciated as incomplete replies will delay the processing of this application.	
1. Consistency of Program Description and Site Location with Local/OASAS Requirements	<p>In the case of new providers and/or new services, is the program description and site location consistent with local/OASAS requirements: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable Provide explanation below.</p> <p>The program description submitted by Fusion Recovery Centers, LLC appears to be consistent with OASAS requirements and is generally consistent with local planning needs. The Albany County Department of Mental Health (ACDMH)/Local Governmental Unit (LGU) takes no position with regard to site location and has referred the provider back to the local jurisdiction to assess and comment upon site suitability.</p>
2. Provider Operational Performance	<p>Is the operational performance of this provider satisfactory? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable Regardless of the answer, provide a description of the operational performance of the provider below.</p> <p>As Fusion Recovery Center, LLC is a new provider in the Albany County system of behavioral health care with no previous operational performance locally the ACDMH/LGU has nothing to base an opinion upon and therefore cannot answer this question.</p>
3. Adequacy of Financial Plans	<p>Is the financial plan in the proposal adequate and acceptable? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable Provide explanation below.</p> <p>The proposed financial plan submitted by Fusion Recovery Center, LLC appears to be adequate and identifies a financial model mostly based upon on private insurance with some public assistance components.</p> <p>Where applicable, please note any comments related to Medicaid policy and/or reimbursement practices below.</p> <p>The proposed business model appears to be focused primarily upon private insurance reimbursement.</p>
4. Consistency with Local Plans and Local/Community Needs	<p>Is the action consistent with local plans and/or does it meet community needs? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Provide explanation below.</p> <p>The proposed action is generally consistent with local planning efforts and should open new pathways to currently limited care and services for Albany County residents to include Opioid Treatment Program and Outpatient Rehabilitation Level Of Care.</p>
5. Provider Standing in the Community	<p>Is there any known information regarding the provider's standing in the community? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable Regardless of the answer, provide all known information below or on additional sheets attached to this report.</p> <p>Although Fusion Recovery Center, LLC is new to Albany County without a history of standing in the community, they presented letters of support from the Village of Menands, from the NYS Senate (District 46), and from the Capital Region Chamber of Commerce.</p>

<p>6.</p> <p>Program Location</p>	<p>In answering this question, the following should be taken into consideration:</p> <ul style="list-style-type: none"> (a) the location is suitable for an Addiction Disorder Treatment Program; (b) the accessibility of public transportation and adequate parking; and (c) any other notable observations. <p>Please describe your assessment of the circumstances noted.</p> <p>The Albany County Department of Mental Health (ACDMH)/Local Governmental Unit (LGU) takes no position with regard to site location and has referred the provider back to the local jurisdiction to assess and comment upon site suitability.</p>		
	<p>Please check one box.</p> <p><input type="checkbox"/> LGU has visited the proposed location. Date of Visit: _____</p> <p><input type="checkbox"/> LGU has not visited, but has sufficient personal knowledge to attest to its suitability.</p> <p><input checked="" type="checkbox"/> N/A – Please explain, for example, N/A may be appropriate in applications that involve relocation within an existing building. However, factors such as capacity increase, even in an existing building, would not be appropriate for an “N/A” response.</p> <p>See above comment regarding site location.</p>		
<p>7.</p> <p>Current Status of Existing Programs</p>	<p>Are you aware of any community issues with other programs operated by this provider, or in the case of relocation, this program’s current location? (i.e., any issues around loitering, public safety, etc.) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Please describe any issues.</p> <p>Fusion Recovery Centers, LLC does not operate any other programs in Albany County thus an answer to this question cannot be provided.</p>		
<p>8.</p> <p>Community Response</p>	<p>Please describe your knowledge of the applicant’s outreach to the local community (e.g., Community Service Boards, Community Boards, Planning Boards, Neighborhood Coalitions, other local municipalities). Please summarize your knowledge of community input, including any existing or likely community concerns, as well as any recommendations.</p> <p>Fusion Recovery Centers, LLC maintained communication with ACDMH/LGU over an extended period of time. We believe that they did so as well with NYS OASAS. There was communication with the Addictions Sub-Committee of the Albany County Community Services Board who provided neutral comment/feedback and general support. ACDMH/LGU is not aware of any other community outreach, community input/feedback/concerns other that letters of support listed above.</p>		
<p>9.</p> <p>Other Comments</p>	<p>Provide additional comments.</p> <p>The application prepared by Fusion Recovery Centers, LLC was thorough and the applicant was responsive to all requests. Although the applicant is an out-of-state entity they demonstrated an understanding of NYS, Albany County and local community regulations, expectations and needs. The applicant’s proposal seeks to contribute to the local behavioral health system of care by expanding services, increasing options for services, and by investing in the lives and recovery of Albany County residents in need of addiction care and services.</p>		
<p>10.</p> <p>LGU Recommendation</p>	<p><input checked="" type="checkbox"/> Approve <input type="checkbox"/> Disapprove</p>	<p>Signature of Authorized LGU Official</p> <p><i>Stephen Girlando</i></p>	<p>Date</p> <p>3/10/23</p>

ArcGIS Web Map



4/5/2023, 10:38:06 AM

- 5. Outpatient: Outpatient Clinic
- 5. Outpatient: Outpatient Clinic Additional Location

