

KATHY HOCHUL Governor CHINAZO CUNNINGHAM, MD Commissioner

May 3, 2022

Mr. Brian Riley Audit Director Office of the New York State Comptroller Division of State Government Accountability 110 State Street, 11<sup>th</sup> Floor Albany, NY 12236

Re: Required 180 day response to Audit Report 2020-S-49

Dear Mr. Riley:

In complying with the required 180 day response to the OSC's Audit of Oversight of Chemical Dependence Residential Services (Report 2020-S-49 issued December 2021), OASAS offers the following update to the report recommendations:

1. Perform recertification reviews for all Programs that are overdue.

The OASAS Regional Office has completed all outstanding recertifications for all eligible Part 819 residential programs. Recertification reviews were not conducted for two upstate NY programs as both are currently non-operational. Recertification reviews were not conducted for 6 Part 819 downstate NY programs as 4 are converting to Part 820, one has closed, and one will soon be surrendering their operating certificate.

2. Implement an effective monitoring system to ensure that all recertification reviews are performed timely.

As explained during the audit, OASAS recertification review processes for Part 819 programs were not timely due to an agency initiative to convert these programs to the more effective Part 820 model, one that would provide better services to our target population, and, when implemented, increase program revenue. OASAS could not anticipate both the reluctance of programs to convert, and significant behavioral health job market shortages that hindered their ability to hire the requisite additional qualified personnel. The timing was further exacerbated with the initial and ongoing Covid-19 pandemic and the halting of all on-site site visits. The existing OASAS processes and procedures are up to date and effective. OASAS will ensure the timeliness of future recertification requirements.

3. Implement procedures to ensure that OASAS staff conduct appropriate follow-up of Programs with deficiencies identified during recertification reviews.

OASAS has an effective process in place for monitoring and ensuring appropriate follow up of any deficiencies noted during a recertification review. OASAS notes any deficiencies in its Program Reviewer's report to the provider who is then required to submit a corrective action plan to detail remedial action. An updated operating certificate will not be issued to a provider without the appropriate resolution of all noted deficiencies.

Please advise if there is anything else that you need.

Very truly yours,

Steven J. Shrager

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**Director of Audit Services** 

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