

**Crisis Stabilization Center Certification Application
Instructions for Submitting through Public Authenticated NYSE-CON**

NY.GOV ID
Secure Access to New York State Services

Username

Password

Captcha
 I'm not a robot 
reCAPTCHA
Privacy - Terms

Sign In

[Forgot Username?](#) or [Forgot Password?](#)
[Create an Account](#)
Need help? [Get Assistance](#)

1. You must have a Personal ny.gov account to use the Public Authenticated NYSE-CON. To create an account, navigate to the [NY.GOV ID](#) website click on **Create an Account**.

Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON

NEW YORK STATE

Services News Government COVID-19

NY.gov ID Online Services FAQs About NY.gov ID Help Desk Information Privacy Policy Terms of Service

Please select one of the following three account types:

PERSONAL
I want to access services for my personal use. My identity must be verified.

GOVERNMENT EMPLOYEE
Information for New York State or local government employees.

BUSINESS
I want to access services in a business capacity. My personal, business or organization's identity must be verified.

Copyright 2020 New York State Office of Information Technology Services (ITS) Build: 69/14/2020 1:05 PM

2. Choose Personal

NEW YORK STATE

Services News Government COVID-19

NY.gov ID Online Services FAQs About NY.gov ID Help Desk Information Privacy Policy Terms of Service

Obtain an NY.gov ID Personal User Account

Personal NY.gov ID - Allows you to access online services that require your verified identity where you are acting in an individual capacity (i.e. Not as a business).

Getting Started

Registering for a Personal NY.gov ID is a two part process.

1. NY.gov ID Self Registration

Online Registration consists of 3 steps. Use the 'Next' and 'Continue' buttons at the bottom of each page to move through the steps.

- Enter basic user information (along with a valid email address) and select a User ID.
- Confirm basic user information is correct.
- Finish the online registration.

2. Email Activation

Once you have finished the create steps above, please check your email and click on the link inside. Once you have clicked on the link, you will be prompted to set your password, and select 3 security questions & answers.

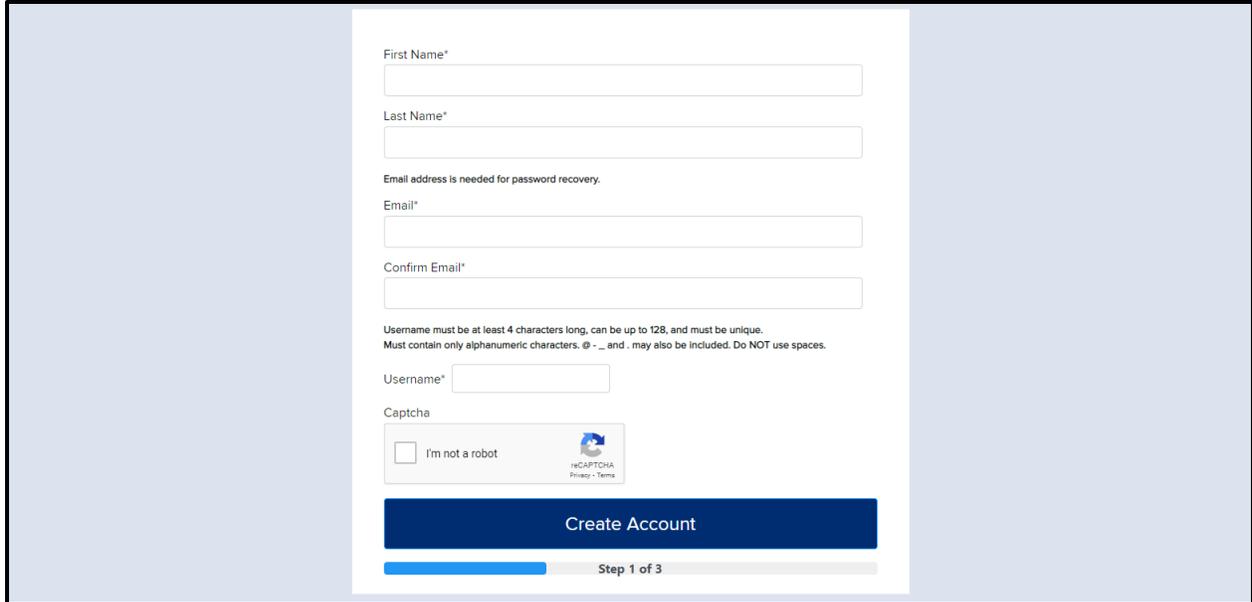
[Sign Up for a Personal NY.gov ID](#)

If you want a Personal NY.gov ID, please click the button to start the process.

Go Back

3. Choose Sign Up for a Personal NY.gov ID.

Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON



The screenshot shows a registration form with the following fields and instructions:

- First Name***: Text input field.
- Last Name***: Text input field.
- Email address is needed for password recovery.**: Instructional text.
- Email***: Text input field.
- Confirm Email***: Text input field.
- Username instructions**: Username must be at least 4 characters long, can be up to 128, and must be unique. Must contain only alphanumeric characters, @ - _ and . may also be included. Do NOT use spaces.
- Username***: Text input field.
- Captcha**: Includes an "I'm not a robot" checkbox and a reCAPTCHA widget with "Privacy" and "Terms" links.
- Create Account**: A prominent dark blue button.
- Progress bar**: A bar at the bottom showing "Step 1 of 3" with the first step highlighted in blue.

4. Enter First Name, Last Name, valid email and confirm email. Enter a Username and check the **I'm not a robot** and follow the instructions. When finished click the **Create Account** button and follow the instructions for Steps 2 and 3.

**Crisis Stabilization Center Certification Application
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NY.GOV ID
Secure Access to New York State Services

Username
paloskija

Password
.....

Captcha
 I'm not a robot
reCAPTCHA
Privacy - Terms

Sign In

[Forgot Username?](#) or [Forgot Password?](#)

[Create an Account](#)

Need help? [Get Assistance](#)

5. Once you have an **ny.gov** account, go to the [NY.GOV ID](#) website to login.

Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON

NY.gov ID Change Password Update My Account About NY.gov ID Help Desk Information Privacy Policy Terms of Service

Welcome Janet , You are logged in as - paloskja
Last login - Wed Dec 11 09:50

REGISTER TO VOTE
Sign up online or download and mail in your application.
[REGISTER NOW](#)

You have access to the following services

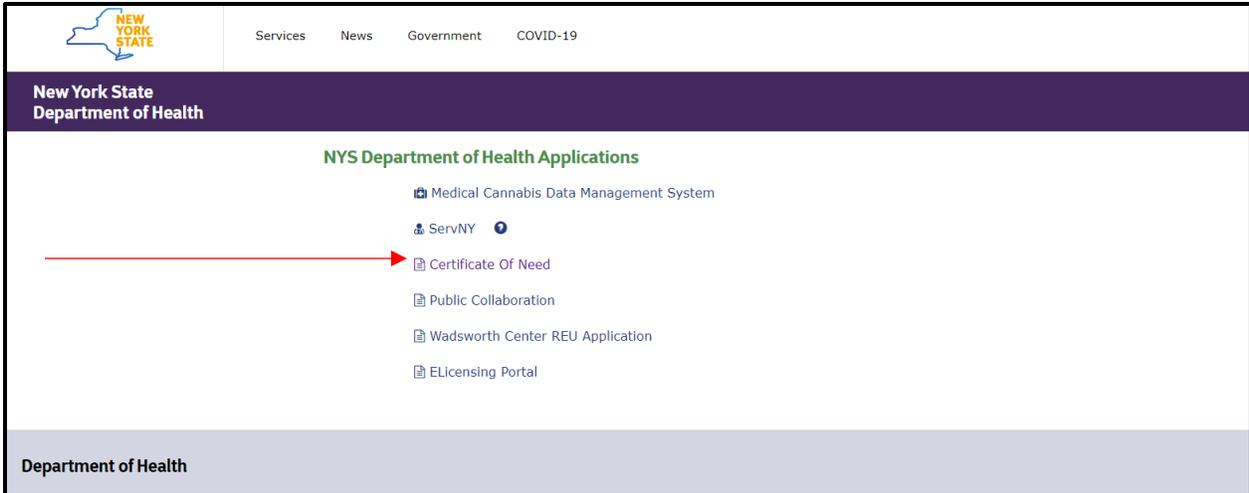
- NYS License Center**
NYS License Center
- JCOPE FDS**
JCOPE Financial Disclosure System FDS

You can sign up for the following services

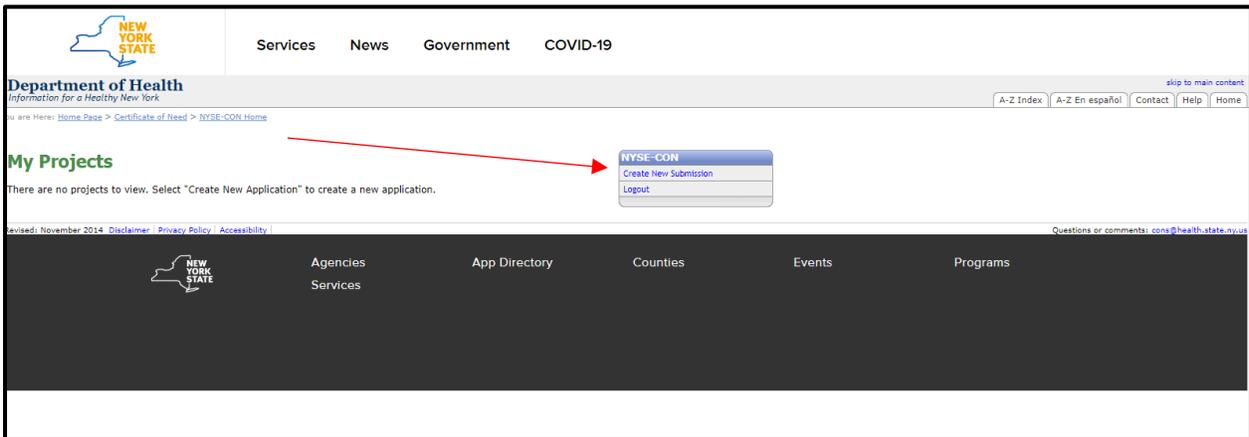
- SLMS**
Statewide Learning Management System.
- Labor Online**
Department of Labor Online Services
- MyDMV**
Motor Vehicles Online Services
- TEACH Application**
Teacher Certification
- NY State of Health**
The Official Health Plan Marketplace
- BPSS Application**
BPSS
- VSP**
Office of Victim Services
- Health Applications**
Health Applications
- NY-Alert**
Receive emergency alerts
- Department of Civil Service Public Website**
Explore Exciting Career Opportunities with New York State
- Decentralized List Management System**
My OMH Jobs
Decentralized List Management System

6. Choose Health Applications to navigate to NYSE-CON.

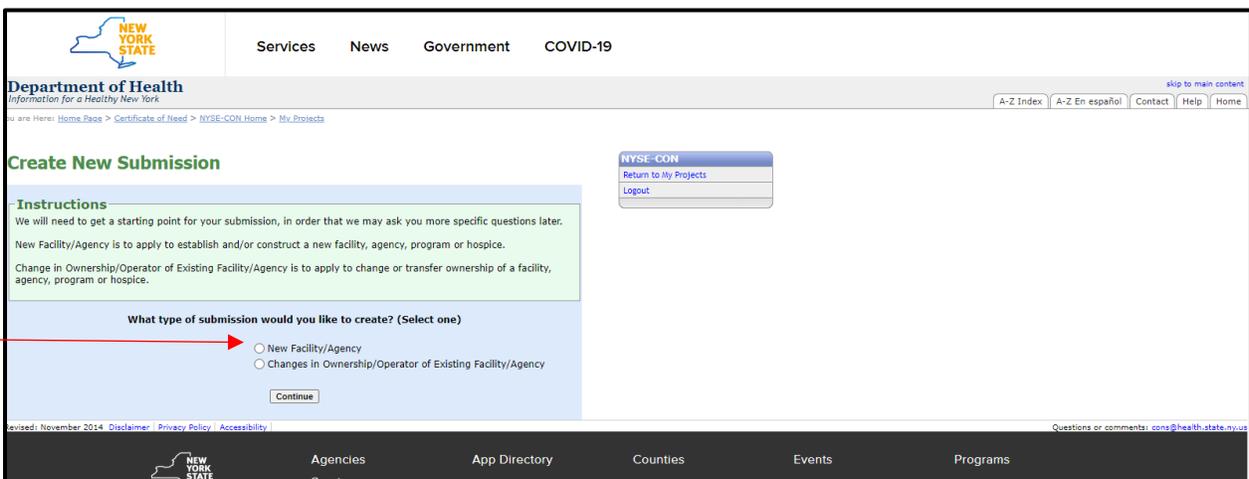
Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON



7. Choose Certificate of Need



8. Choose Create a New Submission.



9. Choose New Facility/Agency.

Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON

The screenshot shows the NYSE-CON application interface. At the top, there is a navigation bar with 'Services', 'News', 'Government', and 'COVID-19'. Below this is the 'Department of Health' logo and the text 'Information for a Healthy New York'. The main heading is 'Create New Submission - Facility/Agency Type Selection'. A green box contains instructions: 'You have selected New Facility/Agency. Choose one facility or agency type and select Continue to proceed.' Below this is a list of facility types under the heading '*Select Facility or Agency Type:'. The options are: Adult Home, Certified Home Health Agency, Diagnostic and Treatment Center, Enriched Housing Program, Hospice, Hospital, Licensed Home Care Services Agency, Long Term Home Health Care Program, Midwifery Birth Center, Office of Addiction Services and Supports, and Residential Health Care Facility. A red arrow points to the 'Office of Addiction Services and Supports' option. A 'Continue' button is at the bottom of the list. A 'NYSE-CON' menu is visible in the top right corner with 'Return to My Projects' and 'Logout' options. The footer includes 'Revised: November 2014' and various links like 'Disclaimer', 'Privacy Policy', and 'Accessibility'.

10. Choose Office of Addiction Services and Supports.

The screenshot shows the NYSE-CON application interface. At the top, there is a navigation bar with 'Services', 'News', 'Government', and 'COVID-19'. Below this is the 'Department of Health' logo and the text 'Information for a Healthy New York'. The main heading is 'Create New Submission - Select Submission Type'. A green box contains instructions: 'You have selected New Facility/Agency with a facility type of Office of Addiction Services and Supports. Select one submission type and select Continue to proceed.' Below this is a list of submission types under the heading '*Select Submission Type:'. The options are: Prior Consultation (1A) - New Facility/Agency and New Provider. A red arrow points to the 'New Provider' option. A 'Continue' button is at the bottom of the list. A 'NYSE-CON' menu is visible in the top right corner with 'Return to My Projects' and 'Logout' options. The footer includes 'Revised: November 2014' and various links like 'Disclaimer', 'Privacy Policy', and 'Accessibility'.

11. Choose **New Provider** even if you are already an existing Provider.

**Crisis Stabilization Center Certification Application
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Information for a Healthy New York

You are Here: [Home Page](#) > [Certificate of Need](#) > [NYSE-CON Home](#) > [My Projects](#)

Create New Submission

*Submission Type: New Provider
†Submission Description:

A brief description of this submission.

Main Site Information

*Facility Type: Office of Addiction Services and Supports
*Facility Name:
†Street 1:
Street 2:
†City:
State: NY
†Zip Code:
*County:

12. Fill-in a **Description** for the project and complete the **Main Site Information**.

Crisis Stabilization Center Certification Application
Instructions for Submitting through Public Authenticated NYSE-CON

Principal Applicant Member	
<p>†Title: <input type="text"/></p> <p>†First Name: <input type="text"/></p> <p>†Last Name: <input type="text"/></p> <p>User ID: <input type="text"/></p> <p>†Account Type: <input type="radio"/> NY.gov ID <input type="radio"/> HCS ID NY.gov or HCS user ID (the Principal Applicant Member must have either a NY.gov or HCS account)</p> <p>†Street 1: <input type="text"/></p> <p>Street 2: <input type="text"/></p> <p>†City: <input type="text"/></p> <p>†State: <input type="text" value="v"/></p> <p>†Zip: <input type="text"/></p> <p>†Phone Number: <input type="text"/></p> <p>Fax Number: <input type="text"/></p> <p>†Email Address: <input type="text"/></p>	<p>Principal Applicant Member - Enter the name and corresponding information for the individual representing the applicant who will act as the primary CON contact for application issues. For for-profit entities, it is recommended that the Principal Applicant Member be the majority equity shareholder. For not-for-profit entities, it is recommended that the Principal Applicant Member be someone in authority to make decisions on behalf of the to-be-established entity.</p>
Alternate Contact Information	
<p>†First Name: <input type="text"/></p> <p>†Last Name: <input type="text"/></p> <p>†Email: <input type="text"/></p>	<p>Enter the name and contact information for the alternate contact. It is recommended that the alternate contact be someone with authority to make decisions on behalf of the operator.</p>
<p><input type="button" value="Save"/> <input type="button" value="Cancel"/></p>	
<p><small>* Fields marked with an asterisk (*) are required for saving information from this screen. Fields marked with a dagger (†) will be required before the project and application can be submitted.</small></p>	

13. Fill-in the information for the main contact person. Be sure to include the type of account the contact person is using, and the email address associated with that account. If you are using these instructions, it should be an ny.gov account. Also enter information for an alternate contact.

Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON

Information for a Healthy New York

You are Here: [Home Page](#) > [Certificate of Need](#) > [NYSE-CON Home](#) > [My Projects](#)

Create New Submission

*Submission Type: New Provider
†Submission Description:

This application is to apply to open a Crisis Stabilization Center

A brief description of this submission.

[Change](#)

Main Site Information

*Facility Type: Office of Addiction Services and Supports

*Facility Name: ABC Corporation

†Street 1: 111 Main Street

Street 2:

†City: Anytown

State: NY

†Zip Code: 12205

*County: ALBANY

Crisis Stabilization Center Certification Application
Instructions for Submitting through Public Authenticated NYSE-CON

Principal Applicant Member	
†Title: <input type="text" value="Director"/>	<p>Principal Applicant Member - Enter the name and corresponding information for the individual representing the applicant who will act as the primary CON contact for application issues. For for-profit entities, it is recommended that the Principal Applicant Member be the majority equity shareholder. For not-for-profit entities, it is recommended that the Principal Applicant Member be someone in authority to make decisions on behalf of the to-be-established entity.</p>
†First Name: <input type="text" value="Mary"/>	
†Last Name: <input type="text" value="Flowers"/>	
User ID: <input type="text" value="paloskija"/>	
†Account Type: <input checked="" type="radio"/> NY.gov ID <input type="radio"/> HCS ID NY.gov or HCS user ID (the Principal Applicant Member must have either a NY.gov or HCS account)	
†Street 1: <input type="text" value="111 Main Street"/>	
Street 2: <input type="text"/>	
†City: <input type="text" value="Anytown"/>	
†State: <input type="text" value="New York"/>	
†Zip: <input type="text" value="12205"/>	
†Phone Number: <input type="text" value="(518)555-5555"/>	
Fax Number: <input type="text"/>	
†Email Address: <input type="text" value="janet.paloski@oasas.ny.gov"/>	

Alternate Contact Information	
†First Name: <input type="text" value="Rodger"/>	<p>Enter the name and contact information for the alternate contact. It is recommended that the alternate contact be someone with authority to make decisions on behalf of the operator.</p>
†Last Name: <input type="text" value="Jones"/>	
†Email: <input type="text" value="rodger.jones@gmail.com"/>	

* Fields marked with an asterisk (*) are required for saving information from this screen.
Fields marked with a dagger (†) will be required before the project and application can be submitted.

14. Once you have completed all the information. Click on **Save**.

Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON

You are Here: [Home Page](#) > [Certificate of Need](#) > [NYSE-CON Home](#) > [My Projects](#)

General Information

Information

- The application identifying information has been saved. Complete the data entry process to continue.
- The submission identifying information has been saved. Please select the Executive Summary tab to enter a project proposal summary, the Sites tab to add project sites, beds and/or services, and the Application tab to upload schedules to the system. Your submission will not be sent until you click "Submit", located at the bottom of the screen.

Application Number:

Provider Name: ABC Corporation

Project Description: This application is to apply to open a Crisis Stabilization Center

General **Executive Summary** **Sites** **Application** **Correspondence** >>

Status:

Submission Type:

Application - New
Provider

Status Date:

**Application Received
Date:**

Review Level:

Initial Review Date:

County:

Acknowledgement Date:

Region:

Total Project Cost: \$0.00

15. You will receive a message stating that the identifying information has been saved. At this point you can exit the system and return to the project at a later time to continue. If you want to continue now, select the **Executive Summary Tab**.

**Crisis Stabilization Center Certification Application
Instructions for Submitting through Public Authenticated NYSE-CON**

Main Site Information

Provider Name:	ABC Corporation	Facility Type:	Office of Addiction Services and Supports
Administration Address:	111 Main Street Anytown, NY 12205	Region:	
County:	ALBANY	Operating Certificate/License #:	
Current Operator:		Current Operator County:	
		Proposed Operator County:	

Principal Applicant Member

Name:	Mary Flowers	Title:	Director
User ID:	paloskija	Address:	111 Main Street Anytown, NY 12205
Email:	janet.paloski@oasas.ny.gov	Fax:	
Phone:	(518) 555-5555		

Alternate Contact

Name:	Rodger Jones	Email:	rodger.jones@gmail.com
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Notice

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Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON

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New Submission-Executive Summary

NYSE-CON
[Return to My Projects](#)
[Create New Submission](#)
[Logout](#)

Information

- Fields marked with a dagger (†) are required to proceed with the submission process.

Application Number:
Provider Name: ABC Corporation
Project Description: This application is to apply to open a Crisis Stabilization Center

General **Executive Summary** **Application** **Correspondence** >>

- Click "Save" to save the changes

†Executive Summary:

Save

* The Rich Text features available for the Executive Summary are dependent on browser type and browser version. If you are experiencing any adverse behavior, using another browser is recommended.

16. Enter a full description of the project. When complete, select **Save**.

Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON

Department of Health
Information for a Healthy New York

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Executive Summary

Application Number:
Provider Name: ABC Corporation
Project Description: This application is to apply to open a Crisis Stabilization Center

General **Executive Summary** **Sites** **Application** **Correspondence** >>

[Print Executive Summary](#)

†Executive Summary: Last Modified: 08/24/2022 10:28:54 AM

This project is to apply to open a Crisis Stabilization in Anytown, NY

* The Rich Text features available for the Executive Summary are dependent on browser type and browser version. If you are experiencing any adverse behavior, using another browser is recommended.

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17. If you need to make changes, select **Modify** and select **Save** again. Once complete, select the **Sites** tab.

You are Here: [Home Page](#) > [Certificate of Need](#) > [NYSE-CON Home](#) > [My Projects](#)

Create New Submission - Sites

NYSE-CON

[Return to My Projects](#)

[Create New Submission](#)

[Logout](#)

Application Number:
Provider Name: ABC Corporation
Project Description: This application is to apply to open a Crisis Stabilization Center

General **Executive Summary** **Sites** **Application** **Correspondence** >>

[Print Sites View](#)

Instructions

Select Sites associated with this project from the dropdown.

To add a site to the project, select a location from the list and click the Add button.
To certify a new site, select "Certify New Site" from the list and click Add.
To relocate an existing site, choose the site to be relocated from the list and click Add.

Project Sites Information

Make a Selection

Notice

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18. Select the Project Sites Information drop down box to select a site.

Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON

Information for a Healthy New York

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Create New Submission - Sites

NYSE-CON
[Return to My Projects](#)
[Create New Submission](#)
[Logout](#)

Application Number:
Provider Name: ABC Corporation
Project Description: This application is to apply to open a Crisis Stabilization Center

General | **Executive Summary** | **Sites** | **Application** | **Correspondence** >>

[Print Sites View](#)

Instructions
Select Sites associated with this project from the dropdown.
To add a site to the project, select a location from the list and click the Add button.
To certify a new site, select "Certify New Site" from the list and click Add.
To relocate an existing site, choose the site to be relocated from the list and click Add.

Project Sites Information
Make a Selection
Make a Selection
Certify New Site (not for relocations)
ABC Corporation (NEW) (New)

Notice
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19. Select ABC Corporation (New) (New) and click the Add button.

Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON

Application Number:
Provider Name: ABC Corporation
Project Description: This application is to apply to open a Crisis Stabilization Center

General | **Executive Summary** | **Sites** | **Application** | **Correspondence** >>

Instructions
Click Continue to add this site to the project. Click Cancel to return to the Project Sites screen without saving.

Certify New Site

Provider ID: NEW
Site Type: Office of Addiction Services and Supports
***Site Name:**
***Street 1:**
Street 2:
***City:**
State: NY
***ZipCode:**
***County:**

Instructions
In the space below, enter a brief description of the changes to be made at this site.
(Maximum of 1,000 characters.)

***Site Proposal Summary:**

20. It defaults to the address that was entered on the **General** tab. If that is not the address where services will be provided, modify the address. Enter a **Site Proposal Summary** and click **Continue**.

Crisis Stabilization Center Certification Application

Instructions for Submitting through Public Authenticated NYSE-CON

You are Here: [Home Page](#) > [Certificate of Need](#) > [NYSE-CON Home](#) > [My Projects](#)

Confirm New Site Information Changes

NYSE-CON

- [Return to My Projects](#)
- [Create New Submission](#)
- [Logout](#)

Application Number:
Provider Name: ABC Corporation
Project Description: This application is to apply to open a Crisis Stabilization Center

General **Executive Summary** **Sites** **Application** **Correspondence** >>

Instructions
Click Confirm to save your changes. Click Cancel to return to the previous screen without saving.

New Location

Provider ID:	NEW
Site Type:	Office of Addiction Services and Supports
Site Name:	ABC Corporation
Physical Address:	224 Main Street, Anytown, NY 12205
County:	ALBANY
Site Proposal Summary:	This is the site where the services will be provided.

21. Verify that the site information is now accurate and click **Confirm**.

Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON

Application Number:
Provider Name: ABC Corporation
Project Description: This application is to ~~apply~~ to open a Crisis Stabilization Center

General **Executive Summary** **Sites** **Application** **Correspondence** >>

 [Print Sites View](#)

Instructions
Select Sites associated with this project from the dropdown.

To add a site to the project, select a location from the list and click the Add button.
To certify a new site, select "Certify New Site" from the list and click Add.
To relocate an existing site, choose the site to be relocated from the list and click Add.

Project Sites Information
Make a Selection

Provider ID: NEW
Program #:
Operating Certificate:
Site Type: Office of Addiction Services and Supports
Site Name: ABC Corporation
Physical Address: 224 Main Street, Anytown, NY 12205
County: ALBANY

Instructions
In the space below, enter a brief description of the changes to be made at this site.
(Maximum of 1,000 characters.)

***Site Proposal Summary:**
This is the site where the services will be provided.

22. The site information is saved, and you have the option here, to modify, remove the site and/or edit the Site Proposal Summary. Once complete, click on the Application tab.

Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON

Application

Information

- The following schedules are required: Attachment 1A - Certification Proposal Prior Consult Form, Application Summary, Application Summary - Attachment 1 - Authorization to Represent Applicant, Application Summary - Attachment 2 - Authorization of Proposed Action, Application Summary - Attachment 2A - Description and Proof of Outreach Efforts to Local Community, Part I - Entity Information, Part I - Attachment 3 - Appropriate Establishment or Proposed Establishment Documentation, Part I - Attachment 7 - Identification of the Owners/Principals who have Prior Experience in Providing Chemical Dependence Services, Part II - Site Information, Part III - Description of Services, Part III - Attachment 14 - Assessment of Need, Part III - Attachment 15 - Description of Service Components, Part III - Attachment 16 - Planned Performance Measures, Part III - Attachment 17 - Operational Policies and Procedures, Part IV - Resource Allocation, Part IV - Attachment 21 - Budget Assumptions, Part IV - Attachment 22 - Financial Statements/Reports, Appendix I - Governing Authority Questionnaire, Appendix IV - Character and Competence Applicant Review, Appendix V - Applicant Consent Form for Fingerprinting for OASAS Criminal Background Check (CBC)
- No Documents are associated with this project.

Application Number:
Provider Name: ABC Corporation
Project Description: This application is to apply to open a Crisis Stabilization Center

[General](#)
[Executive Summary](#)
[Sites](#)
[Application](#)
[Correspondence](#)
[>>](#)

[Print Application View](#)

Submitted By:
Submitted Date:

Document Type	Filename	Description	Document	Date
<input type="button" value="Add New Application Document"/>				

* DOH cannot guarantee that documents that have been uploaded to NYSE-CON are virus free. Before documents are opened, the user should ensure that their anti-virus software is operating and is up-to-date with the latest anti-virus signature files.

NYSE-CON

[Return to My Projects](#)

[Create New Submission](#)

[Logout](#)

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23. The first bullet lists the schedules required for submission. The second bullet lists any documents that have already been uploaded.
- a. For Crisis Stabilization Centers, the following schedules will be required to be uploaded.
 - i. Prior Consultation – Crisis Stabilization
 - ii. Application Summary – Crisis Stabilization plus attachments
 - iii. Part I – Entity Information – Crisis Stabilization plus attachments – **see note below.**
 - iv. Part II – Site Information – Crisis Stabilization plus attachments
 - v. Part III – Service Description – Crisis Stabilization plus attachment
 - vi. Part IV – Resource Allocation – Crisis Stabilization plus attachments
 - b. **If the entity applying for a Crisis Stabilization Center is already certified by OASAS or OMH, then the applicant should upload the applicant’s OMH or OASAS provider number for each of the required Part I – Entity Information, Attachment 3, Attachment 7, Appendix I, Appendix IV and Appendix V schedules.**

Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON

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NYSE-CON
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Application

Information

- The following documents are required for this submission: Attachment 1A - Certification Proposal Prior Consult Form
- No Documents are associated with this project.

Application Number:
Provider Name: ABC Corporation
Project Description: This application is to apply to open a Crisis Stabilization Center

General | **Executive Summary** | **Application** | **Correspondence** >>

[Print Application View](#)

Submitted By:
Submitted Date:

Document Type	Filename	Description	Document	Date
<input type="button" value="Add New Application Document"/>				

* DOH cannot guarantee that documents that have been uploaded to NYSE-CON are virus free. Before documents are opened, the user should ensure that their anti-virus software is operating and is up-to-date with the latest anti-virus signature files.

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24. To upload the Files, click on Add New Application Document.

Department of Health
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New Application Document

Information

- The following documents are required for this submission: Attachment 1A - Certification Proposal Prior Consult Form

Application Number:
Provider Name: ABC Corporation
Project Description: This application is to apply to open a Crisis Stabilization Center

General | **Executive Summary** | **Application** | **Correspondence** >>

Document Type: Please Choose:

Date: Please Choose:

Description:

File: No file chosen

Notice

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25. Choose Attachment 1A – Certification Proposal Prior Consult Form to upload the Prior Consultation Schedule.

Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON

The screenshot shows the NYSE-CON application interface. At the top, there is a navigation bar with links for Services, News, Government, and COVID-19. Below this is the Department of Health logo and the text 'Information for a Healthy New York'. A breadcrumb trail indicates the user is on the 'My Projects' page. The main heading is 'New Application Document'. On the right, there is a 'NYSE-CON' menu with options: 'Return to My Projects', 'Create New Submission', and 'Logout'. The 'Information' section lists required documents: 'Attachment 1A - Certification Proposal Prior Consult Form'. The 'Application Number:' field is empty. The 'Provider Name:' is 'ABC Corporation'. The 'Project Description:' is 'This application is to apply to open a Crisis Stabilization Center'. Below this are tabs for 'General', 'Executive Summary', 'Application' (selected), and 'Correspondence >>'. The 'Document' section shows a dropdown menu set to 'Attachment 1A - Certification Proposal Prior Consult Form'. The 'Type:' field is empty. The 'Date:' is '06/15/2022'. The 'Description:' field is empty and highlighted with a red oval. The 'File:' section has a 'Choose File' button and 'No file chosen' text. Below the file section are 'Add Document to Application' and 'Cancel' buttons. A 'Notice' section at the bottom contains a disclaimer about public access to NYSE-CON information. A red arrow points from the 'Choose File' button to the 'Description' field.

26. The description is optional unless you are uploading multiple forms of the same type. Click on the **Choose File** button to maneuver to the location on your computer where you have saved the completed schedules.

Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON

NEW YORK STATE

Services News Government COVID-19

Department of Health
Information for a Healthy New York

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New Application Document

NYSE-CON

- [Return to My Projects](#)
- [Create New Submission](#)
- [Logout](#)

Information

- The following documents are required for this submission: Attachment 1A - Certification Proposal Prior Consult Form

Application Number:

Provider Name: ABC Corporation

Project Description: This application is to apply to open a Crisis Stabilization Center

General **Executive Summary** **Application** **Correspondence** >>

Document Attachment 1A - Certification Proposal Prior Consult Form ▼

Type:

Date: 06/15/2022

Description:

File: Choose File Prior Consult...bilization.docx

Add Document to Application Cancel

Notice

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27. Once you have chosen the saved schedule from your computer, the name will show next to the **Choose File** button. Select the **Add Document to Application** button to upload the file.

Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON



[Services](#)
[News](#)
[Government](#)
[COVID-19](#)

Department of Health
Information for a Healthy New York

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Application

Application Number:
Provider Name: ABC Corporation
Project Description: This application is to apply to open a Crisis Stabilization Center

General
Executive Summary
Application
Correspondence
>>

[Print Application View](#)

Submitted By:
Submitted Date:

Document Type	Filename	Description	Document	Date	
Attachment 1A - Certification Proposal Prior Consult Form	Prior Consultation - Crisis Stabilization.docx		🚩	06/15/2022	<input type="button" value="Update"/> <input type="button" value="Delete"/>

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28. Your uploaded file will display on the screen. To upload the next document, click on Add New Application Document.

Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON

[Create New Submission](#)
[Logout](#)

Information

- The following schedules are required: Application Summary, Application Summary - Attachment 1 - Authorization to Represent Applicant, Application Summary - Attachment 2 - Authorization of Proposed Action, Application Summary - Attachment 2A - Description and Proof of Outreach Efforts to Local Community, Part I - Entity Information, Part I - Attachment 3 - Appropriate Establishment or Proposed Establishment Documentation, Part I - Attachment 7 - Identification of the Owners/Principals who have Prior Experience in Providing Chemical Dependence Services, Part II - Site Information, Part III - Description of Services, Part III - Attachment 14 - Assessment of Need, Part III - Attachment 15 - Description of Service Components, Part III - Attachment 16 - Planned Performance Measures, Part III - Attachment 17 - Operational Policies and Procedures, Part IV - Resource Allocation, Part IV - Attachment 21 - Budget Assumptions, Part IV - Attachment 22 - Financial Statements/Reports, Appendix I - Governing Authority Questionnaire, Appendix IV - Character and Competence Applicant Review, Appendix V - Applicant Consent Form for Fingerprinting for OASAS Criminal Background Check (CBC)

Application Number: _____

Provider Name: ABC Corporation

Project Description: This application is to apply to open a Crisis Stabilization Center

General
Executive Summary
Sites
Application
Correspondence
>>

Document Please Choose

Type: Please Choose
Application Summary

Date: _____

Description: Application Summary - Attachment 1 - Authorization to Represent Applicant
Application Summary - Attachment 2 - Authorization of Proposed Action
Application Summary - Attachment 2A - Description and Proof of Outreach Efforts to Local Community
Part I - Entity Information

File: Part I - Attachment 3 - Appropriate Establishment or Proposed Establishment Documentation
Part I - Attachment 4 - Copy of Letter of Registration or Letter of Exemption received from New York State
Part I - Attachment 5 - Letter from Internal Revenue Service Documenting Tax Exempt Status
Part I - Attachment 6 - Copy of All Current Licenses, OCs, Accreditations and/or Comparable Documents
Part I - Attachment 7 - Identification of the Owners/Principals who have Prior Experience in Providing Chemical Dependence Services
Part II - Site Information
Part II - Attachment 8 - Property Acquisition Documentation
Part II - Attachment 9 - Real Property Interest of Applicant in Proposed Site/Additional Location
Part II - Attachment 10 - Capital Investment Needs of Property
Part II - Attachment 11 - Site Drawings and Photographs
Part II - Attachment 12 - Certificate of Occupancy
Part III - Description of Services
Part III - Attachment 13 - Authorization of the Arrangement to Establish a Service at an Additional Location at a Host Agency
Part III - Attachment 14 - Assessment of Need

Notice
Public access to NY... contained within NY... attempts are made... mechanical error a... and agents make r...
Revised: November

Agencies
App Directory
Counties

29. Continue on with the next required schedule. As you upload the schedules, they will disappear from the top of the screen that lists the required schedules.

Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON

Application Information

➔

- The following schedules are required: Application Summary - Attachment 1 - Authorization to Represent Applicant, Application Summary - Attachment 2 - Authorization of Proposed Action, Application Summary - Attachment 2A - Description and Proof of Outreach Efforts to Local Community, Part I - Entity Information, Part I - Attachment 3 - Appropriate Establishment or Proposed Establishment Documentation, Part I - Attachment 7 - Identification of the Owners/Principals who have Prior Experience in Providing Chemical Dependence Services, Part II - Site Information, Part III - Description of Services, Part III - Attachment 14 - Assessment of Need, Part III - Attachment 15 - Description of Service Components, Part III - Attachment 16 - Planned Performance Measures, Part III - Attachment 17 - Operational Policies and Procedures, Part IV - Resource Allocation, Part IV - Attachment 21 - Budget Assumptions, Part IV - Attachment 22 - Financial Statements/Reports, Appendix I - Governing Authority Questionnaire, Appendix IV - Character and Competence Applicant Review, Appendix V - Applicant Consent Form for Fingerprinting for OASAS Criminal Background Check (CBC)

Application Number:

Provider Name: ABC Corporation

Project Description: This application is to apply to open a Crisis Stabilization Center

[General](#) | [Executive Summary](#) | [Sites](#) | **[Application](#)** | [Correspondence](#) >>

[Print Application View](#)

Submitted By:

Submitted Date:

Document Type	Filename	Description	Document	Date		
Attachment 1A - Certification Proposal Prior Consult Form	Prior Consultation Form 1A.pdf			08/24/2022	Update	Delete
Application Summary	Application Summary.pdf			08/24/2022	Update	Delete

[Add New Application Document](#)

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30. After uploading the Application Summary, you will see it is no longer listed at the top of the screen. You should repeat these steps to upload the balance of the required schedules listed at the top of the screen.

Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON

Department of Health
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Application

Application Number: [Redacted]

Provider Name: ABC Corporation

Project Description: This application is to apply to open a Crisis Stabilization Center

General | **Executive Summary** | **Sites** | **Application** | **Correspondence** >>

[Print Application View](#)

Submitted By:
Submitted Date:

Document Type	Filename	Description	Document	Date	
Attachment 1A - Certification Proposal Prior Consult Form	Prior Consultation Form 1A.pdf		*	08/24/2022	Update Delete
Application Summary	Application Summary.pdf		*	08/24/2022	Update Delete
Application Summary - Attachment 1 - Authorization to Represent Applicant	Attachment 1.docx		*	08/24/2022	Update Delete
Application Summary - Attachment 2 - Authorization of Proposed Action	Attachment 2.docx		*	08/24/2022	Update Delete
Application Summary - Attachment 2A - Description and Proof of Outreach Efforts to Local Community		1 Active Documents			
Part I - Entity Information	Part 1 - Entity Information.pdf		*	08/24/2022	Update Delete
Part I - Attachment 3 - Appropriate Establishment or Proposed Establishment Documentation		1 Active Documents			
Part I - Attachment 7 - Identification of the Owners/Principals who have Prior Experience in Providing Chemical	Attachment 7.docx			08/24/2022	Update Delete

31. When all the required schedules have been uploaded, there will no longer be any schedules listed at the top of the screen. To submit the project, return to the **General** tab.

Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON

General Information

NYSE-CON
Return to My Projects
Create New Submission
Logout

Information

- The submission identifying information has been saved. Please select the Executive Summary tab to enter a project proposal summary, the Sites tab to add project sites, beds and/or services, and the Application tab to upload schedules to the system. Your submission will not be sent until you click "Submit", located at the bottom of the screen.

Application Number:

Provider Name: ABC Corporation

Project Description: This application is to apply to open a Crisis Stabilization Center

General | **Executive Summary** | **Sites** | **Application** | **Correspondence** | >>

Status:	Submission Type:	Application - New Provider
Status Date:	Application Received Date:	
Review Level:	Initial Review Date:	
County: ALBANY	Acknowledgement Date:	
Region:		
Total Project Cost: \$0.00		

Main Site Information

Provider Name: ABC Corporation	Facility Type: Office of Addiction Services and Supports
Administration Address: 224 Main Street Anytown, NY 12205	Region:
County: ALBANY	Operating Certificate/License #:
Current Operator:	Current Operator County:
	Proposed Operator County:

Principal Applicant Member

Name: Mary Flowers	Title: Director
User ID: paloskija	Address: 111 Main Street Anytown, NY 12205
Email: janet.paloski@oasas.ny.gov	Fax:
Phone: (518) 555-5555	

Alternate Contact

Name: Rodger Jones	Email: rodger.jones@gmail.com
---------------------------	--------------------------------------

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32. You can click modify if you need to make any changes, otherwise click the **Submit** button.

Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON

Information for a Healthy New York

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Confirm Submission

By pressing Confirm, I hereby certify under penalty of perjury that I am duly authorized to subscribe and submit this application and that the information contained herein and attached hereto is accurate, true, and complete in all material aspects. I understand that my identifying user information and the date and time of this submission will be recorded for future reference. Additionally, please confirm that the email address of the project contact is janet.paloski@oasas.ny.gov. This email address will be used for all project correspondence.

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33. You will receive a Confirm Submission statement. You must select **Confirm** to submit the project.

You are Here: [Home Page](#) > [Certificate of Need](#) > [NYSE-CON Home](#) > [My Projects](#)

General Information

Information

- NYSE-CON and the Office of Addiction Services and Supports have received your submission. A notification of receipt will be sent to the contact email address that you have provided. If the contact has not received the confirmation email within the next 24 hours, please send an email to Certification@oasas.ny.gov to report the problem.

Application Number: 224011
Provider Name: ABC Corporation
Project Description: This application is to apply to open a Crisis Stabilization Center

General
Executive Summary
Sites
Application
Correspondence
>>

Status: Received	Submission Type: Application - New Provider
Status Date: 08/24/2022	Application Received Date: 08/24/2022
Review Level:	Initial Review Date:
County: ALBANY	Acknowledgement Date:
Region: Northeast	
Total Project Cost: \$0.00	

Main Site Information

Provider Name: ABC Corporation	Facility Type: Office of Addiction Services and Supports
Administration Address: 224 Main Street Anytown, NY 12205	Region: Northeast
County: ALBANY	Operating Certificate/License #:
Current Operator:	Current Operator County:
	Proposed Operator County:

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Crisis Stabilization Center Certification Application Instructions for Submitting through Public Authenticated NYSE-CON

Main Site Information			
Provider Name:	ABC Corporation	Facility Type:	Office of Addiction Services and Supports
Administration Address:	111 Main Street Anytown, NY 12205	Region:	
County:	ALBANY	Operating Certificate/License #:	
Current Operator:		Current Operator County:	
		Proposed Operator County:	

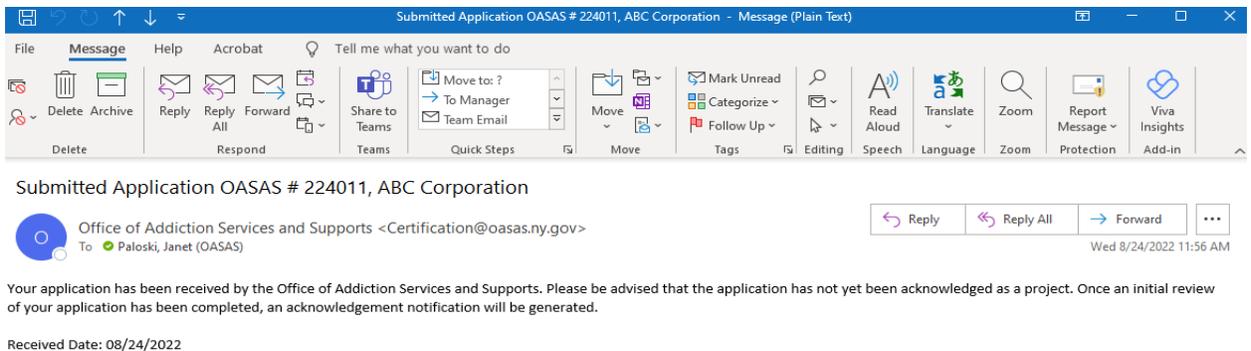
Principal Applicant Member			
Name:	Mary Flowers	Title:	Director
User ID:	paloskija	Address:	111 Main Street Anytown, NY 12205
Email:	janet.paloski@oasas.ny.gov	Fax:	
Phone:	(518) 555-5555		

Alternate Contact		
Name:	Rodger Jones	Email:
		rodger.jones@gmail.com

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34. You will receive notification at the top of the screen that the project has been submitted and the contact person will receive a notification email. An Application Number will also be issued and in the future, you can bring up your project by this number.



35. Here is an example of the email that the contact person will receive.