

**NEW YORK CITY  
DEPARTMENT OF HEALTH  
AND MENTAL HYGIENE**



**PROS IMPLEMENTATION PLAN**

**SUBMITTED TO THE NEW YORK STATE OFFICE OF MENTAL HEALTH**

**FEBRUARY 2006**

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*Special thanks to the following groups for their contributions to the PROS planning process through their ongoing participation in the New York City PROS Stakeholders Implementation Workgroup:*

Association for Community Living

Coalition of Voluntary Mental Health Agencies

Greater New York Hospital Association

National Alliance of the Mentally Ill – NYC Metro

New York City Clubhouse Coalition

New York Association of Psychiatric Rehabilitation Services

*And special thanks to our colleagues at the State Office of Mental Health whose professionalism and responsiveness throughout this two-year collaborative planning process have been greatly appreciated.*

**PERSONALIZED RECOVERY ORIENTED SERVICES  
NEW YORK CITY IMPLEMENTATION PLAN**

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## EXECUTIVE SUMMARY

In October of 2003, OMH assigned county and New York City (NYC) local mental hygiene authorities the responsibility for developing and submitting a PROS<sup>1</sup> Implementation Plan. DMH established and achieved the following goals to guide the PROS planning process in NYC:

1. Ensure all NYC programs projected to convert to PROS will be fiscally viable;
2. Preserve service capacity, including geographic spread and cultural competency; and
3. Preserve and improve access to services and consumer choice.

DMH facilitated a detailed planning process in collaboration with OMH and NYC stakeholders. Cognizant of the significant impact PROS will have in NYC, DMH involved stakeholders in the planning process through an ongoing PROS Stakeholders Implementation Workgroup, consumer forums and a public hearing. DMH and OMH elicited projections of licensure category, program capacity and utilization, expenses and revenue from programs mandated or eligible to convert to PROS, and then jointly met individually with 42 providers to evaluate their PROS projections.

A total of 131 currently operating NYC programs representing 33 different mental health providers are projected to convert to create 43 licensed PROS program (all of which are comprehensive licenses, 30 of which will include a clinic component). Of these 131 programs, 102 are mandated to convert and 29 (23 CDTP's and 6 clinics) are converting voluntarily. These programs currently represent an estimated \$65.7 million in funded services, and OMH has budgeted a maximum of \$80 million for the NYC PROS conversions. Fifty mandated programs (on-site rehabs, geriatric psychosocial clubs, and free-standing employment programs) were waived from converting at this time because they were deemed to either not fit the PROS model, or be unable to generate sufficient Medicaid revenue to support the PROS program.

NYC PROS programs will convert in three clusters, which were developed based on four considerations: 1) administrative manageability; 2) market share; 3) ensuring a diverse first cluster; and 4) optimizing success. They are:

- Cluster I – Brooklyn and Manhattan below 59<sup>th</sup> Street (18 licenses and 14 agencies)
- Cluster II – Bronx and Manhattan on/above 59<sup>th</sup> Street (16 licenses and 16 agencies)
- Cluster III – Queens and Staten Island (9 licenses and 8 agencies)

Given the magnitude of the City's PROS conversions, DMH has initiated an implementation evaluation of PROS. Based on Medicaid billing data, it aims to assess the impact of PROS in key areas such as: patterns of service delivery, access to services and program fiscal viability. This evaluation will be complemented by a pre/post survey of consumers receiving services from programs slated to convert to PROS. These locally initiated evaluation activities will supplement those being planned by OMH, and DMH looks forward to ongoing collaboration with OMH and the City's stakeholder community in ensuring a comprehensive assessment of the impact of PROS on the City's mental health services system and the individuals it is committed to serve.

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<sup>1</sup> PROS is a new licensed program category established by OMH. It was designed as a Medicaid-funded comprehensive recovery-oriented program for persons with severe and persistent mental illness. More information about PROS can be found on the OMH website at <http://www.omh.state.ny.us/omhweb/pros>.

## **Introduction**

In October of 2003, the New York State Office of Mental Health (OMH) assigned county and the New York City (NYC) local mental hygiene authorities the responsibility for developing and submitting a Personalized Recovery Oriented Services (PROS)<sup>1</sup> Implementation Plan describing how their local services system would implement PROS. Pursuant to this requirement, the Division of Mental Hygiene of the NYC Department of Health and Mental Hygiene (DMH) is formally submitting this document as the New York City PROS Implementation Plan.

## **The NYC PROS Planning Process**

DMH established the following goals to guide the PROS planning process in NYC:

1. Ensure all NYC programs projected to convert to PROS will be fiscally viable;
2. Preserve service capacity, including geographic spread and cultural competency; and
3. Preserve and improve access to services and consumer choice.

The first step of the planning process was a joint effort by DMH and OMH to review the initial list of NYC programs identified as falling into the program categories subject to mandatory conversion, and their funding. This was a detailed and lengthy process that resulted in a more limited list of programs that met the categorical and funding criteria for conversion to PROS. In addition to deleting from the list programs that did not meet the criteria for eligibility for conversion, DMH and OMH agreed that geriatric psychosocial clubs and on-site rehabilitation programs in both shelters and SROs would be waived from the requirement to convert to PROS; the former due to a lack of programmatic fit, and the latter because of the potential disruption to their housing settings. As a result, all of the City's geriatric psychosocial clubs and on-site rehabilitation programs were removed from the list of mandatory conversions.

As a next step, DMH distributed the T-2 PROS planning tool to the revised list of NYC providers mandated to convert to PROS, as well as to the City's continuing day treatment programs (CDTPs), whose conversion was optional. The T-2 tool was created by OMH to assist local government and providers in developing program-specific projections of program capacity, utilization, expenses and revenue to facilitate their PROS planning. DMH requested that providers use the tool to consider various conversion options, and then submit projections describing their optimal PROS program(s).

After receiving the providers' projections, DMH and OMH reviewed them, and over the course of the next 20 months, held 44 joint meetings with 42 individual NYC providers. At these meetings, DMH, OMH and providers discussed the T-2 projections, compared the projections to existing contracts funding these programs, and identified and discussed any significant anticipated changes in the number of consumers served and staffing pattern. Modifications were suggested, where indicated, with the goal of ensuring that projections were both achievable and would result in fiscally viable programs. The meetings also gave providers the opportunity to

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<sup>1</sup> PROS is a new licensed program category established by OMH. It was designed as a Medicaid-funded comprehensive recovery-oriented program for persons with severe and persistent mental illness. More information about PROS can be found on the OMH website at <http://www.omh.state.ny.us/omhweb/pros>

express their concerns and questions about PROS and begin discussions about implementing best practices and recovery-oriented services.

For a number of providers, their T-2 projections initially indicated that projected revenues would not be adequate to cover the PROS program's projected expenses. As the assumptions underlying the projections (such as utilization, or the number of hours per month consumers were estimated to receive billable services) were reviewed and discussed, providers made agreed-upon modifications in their assumptions, or clustered several PROS-eligible programs into one larger projected PROS program, and in many instances, the revised projections were fiscally viable.

Free-standing employment programs, however, that were unable to combine with other programs to create a larger PROS program, were not fiscally viable. Initially, it was decided that these programs would convert to a limited PROS license, and other fiscal solutions would be developed to resolve the revenue shortfall. However, after further analysis by DMH and OMH, it was decided that these programs would instead be waived from the requirement to convert to PROS.

Overall, 50 programs on the original list of programs mandated to convert to PROS were waived from the requirement to convert at this time. Most of these are geriatric psychosocial clubs, on-site rehabilitation programs and small employment programs. Moving forward, these 50 programs will continue to be eligible to receive deficit funding through a contract with DMH or OMH, although their funding models may be reviewed with the possibility of including federal (e.g., Medicaid) participation.

### ***Stakeholder Participation***

Cognizant of the significant impact PROS will have in NYC, and the many concerns expressed by both consumers and providers, DMH convened a city-wide PROS Stakeholders Implementation Workgroup in late 2003. The Workgroup was intended to serve as a forum for ongoing dialogue between representatives of each key stakeholder group affected by PROS and City and State government during the NYC PROS planning and implementation process. Membership includes: the Association for Community Living (housing providers), the Coalition of Voluntary Mental Health Agencies (community-based mental health providers), the Greater New York Hospital Association and Health and Hospitals Corporation (hospitals), the National Alliance of the Mentally Ill – NYC Metro (families), the New York City Clubhouse Coalition (consumers and staff), NYAPRS (rehabilitation providers and consumers), DMH and OMH. The Workgroup met throughout the entire planning process and will continue to meet during the implementation of PROS in NYC. Bringing together the diverse perspectives of stakeholders has greatly strengthened the City's PROS planning process.

In addition, DMH's Office of Consumer Affairs co-sponsored several consumer forums with OMH. These forums provided consumers with a chance to learn more about PROS. They also provided DMH and OMH the opportunity to hear PROS-related concerns from those who will be directly impacted. A total of four forums were held, one each for Queens, Manhattan and the Bronx, and one for both Brooklyn and Staten Island. Attendance at these forums included

consumers, staff from programs slated to convert to PROS, representatives from OMH and DMH, and other interested parties, such as City Council staff. The dialogue at these forums was useful to DMH in developing the list of issues to be addressed via the PROS consumer survey (described below).

### ***PROS Public Hearing***

DMH sought additional stakeholder input in the PROS planning process by convening a public hearing. In August 2005, a public notice was distributed in advance of a hearing that was co-sponsored by DMH and the Federation for Mental Health, Mental Retardation and Alcoholism Services. The goal of the hearing was to obtain feedback from stakeholders regarding how the projected reconfiguration of the City's rehabilitation and employment services might impact the City's service system and the consumers it is intended to serve. The hearing notice included information about the planning process, spreadsheets detailing projected conversions by borough and license type, and maps illustrating the projected reconfigured services system. DMH requested that testimony address how the local services system for adults who are seriously and persistently mentally ill might be impacted by PROS. Specifically, testimony was elicited regarding how PROS might impact access to services for particular ethnic/linguistic/cultural/geographic groups, and affect consumer choice.

Testimony was received from eleven parties. Two related concerns regarding the Implementation Plan were raised (all other concerns related to the PROS model itself). Stakeholders identified two geographic areas where there is close proximity of multiple proposed PROS programs, and providers are concerned about competition for consumers and program viability. In each of these areas, one provider is seeking to expand a free-standing employment program into a comprehensive PROS. Some stakeholders expressed the opinion that such programs should be allowed to convert only after those programs currently offering comprehensive services convert. The two identified areas were 125<sup>th</sup> Street in Manhattan and Eastern Queens.

In response to these concerns, DMH reviewed the programs projected to convert in these two areas. It determined that the employment program in the Eastern Queens cluster is categorically ineligible to convert to PROS, so that diminished the concentration of services in that area. Regarding the Manhattan cluster, DMH staff spoke to each of the affected providers, and all providers agreed that their concerns could be addressed through a discussion of client recruitment and enrollment practices, to be scheduled closer to the time when these programs are preparing to convert.

### ***Status of Planning Goals***

1. **Viability** - As a result of the afore-described waivers and careful review of the projections of those programs that are moving forward to convert, only those programs projected to be viable fiscally and programmatically as a PROS program are included in NYC's projected PROS conversions.



2. **Service Capacity** - Regarding service capacity (number of consumers served), indications are that service capacity will be preserved. No NYC program is projecting to close due to PROS, and providers based their projections on efforts to maintain their operations and continue serving their current clients.

3. **Access** - DMH sought to ensure that every consumer has a culturally competent program within reasonable geographic proximity, and to maximize consumer choice. To evaluate this, DMH developed and reviewed maps showing what the projected reconfigured service system will look like. These maps were shared with stakeholders and input on the issue of access was sought via the public hearing. All indications are that access and consumer choice will be preserved.

**Projected PROS Conversions in NYC**

*Summary of NYC PROS Projections*

With the planning process complete, DMH has finalized the list of NYC programs projected to convert to PROS. As part of the ongoing collaboration between DMH and OMH, OMH is in receipt of viable T-2 projections – which they have reviewed – for all programs included in the NYC PROS Implementation Plan. A total of 131 existing NYC programs representing 33 different mental health providers are projected to convert to create 43 licensed PROS programs:

Licensure Category <sup>2</sup>	All PROS Programs	Comprehensive with Clinic	Comprehensive without Clinic
# Programs	43	30	13

One hundred and two of the 131 programs are in program categories that are mandated to convert to PROS:

- 31 Psychosocial Clubs
- 28 Assisted Competitive Employment
- 16 Supported Employment
- 9 Intensive Psychiatric Rehab. Treatment
- 5 Enclave in Industry
- 4 Affirmative Businesses
- 4 Transitional Employment Programs
- 2 Client Worker Programs
- 1 On-site Rehabilitation Program
- 1 Supported Education Program
- 1 Special Demonstration

The remaining 29<sup>3</sup> of the 131 programs are voluntarily converting to PROS:

- 23 Continuing Day Treatment Programs
- 6 Clinic Treatment Programs

<sup>2</sup> The NYC PROS Plan does not include any Limited Licenses, per explanation on page 2.

<sup>3</sup> These continuing day treatment and clinic programs are all affiliated with agencies that operate rehabilitation programs that are converting to PROS.

***Revenue and Capacity Projections***

In total, these 131 programs currently represent an estimated \$65.7 million in funded services. OMH has budgeted a maximum of \$80 million for the NYC PROS conversions. Program-specific revenue projections in the T-2 submissions were considered preliminary, and were reviewed only to ensure that proposed PROS programs would be viable; that is, revenues could support projected program expenses. Because providers were not asked to submit information about the specific program services they plan to offer, utilization (the number of hours of billable services provided to consumers each month) was not evaluated at this time. Due to wide ranges in projected utilization among programs with similar projected capacity (number of consumers to be served by the program), program-level estimates of revenue for similarly-sized programs varied considerably, as indicated in the following table.

<b>Capacity Ranges (clients)</b>	<b>Projected Revenue Ranges</b>
100 or less	\$575,223 - \$1,205,967
101 – 150	\$865,005 - \$1,247,736
151 – 200	\$784,128 - \$2,041,535
201 – 300	\$1,151,910 - \$3,103,067
301 – 500	\$2,978,847 - \$4,698,345
501+	\$6,807,015 - \$8,920,043

More detailed information about both specific services to be provided in each PROS program and projected utilization of services will be carefully reviewed as part of the PROS licensing application (PAR) process. Through that process, each licensed PROS program’s capacity and budgeted revenue will be determined.

***Details of NYC PROS Projections - Program Lists and Maps***

Details of the NYC PROS projections for each proposed PROS program are provided in the accompanying maps and program lists. There is one map for each borough, showing the primary and additional (“secondary”) site locations of all projected PROS programs. There are two lists describing projected PROS programs:

1. New York City PROS Projections – This listing includes all NYC programs planning to convert to PROS licensure. Information provided includes: PROS program name, license type, primary program site address, projected capacity (number of clients to be served), and map coordinates to help locate each program on the corresponding borough map. A few primary site locations are listed as TBD (to be determined) because the provider intends to move to a new, as yet undetermined site.
2. New York City PROS Projections: Secondary Sites – This listing shows secondary service locations for the 12 programs that plan to offer PROS services at more than one site.<sup>4</sup> Information provided includes: PROS program name, primary site address, and secondary sites where programs plan to offer PROS services. Capacity and revenue projections

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<sup>4</sup> During the PAR process OMH will make a final determination of whether secondary sites will provide services under the same license as the primary site or will require a separate license.

corresponding to these secondary sites are included in the projections shown for the primary site.

***Differences Between Programs Initially Identified for Conversion and the Current List***

This section of the Plan provides information requested by OMH (in the County Implementation Plan Package). Following is a comparison of differences between the list of programs initially identified by OMH to convert to PROS (from the County Fiscal Profile Spreadsheet, or P-2), and the current, revised list of programs projected to convert to PROS, as presented in this plan. The reasons for these differences are as follows:

- 1. Programs mandated to convert to PROS that are not recommended for licensing as a PROS** – As a result of the planning process described on pages 1-4 of this plan, a total of 50 programs on the list of mandatory PROS conversions were deemed to either not fit the PROS program model, or be unable to generate sufficient Medicaid revenue as a PROS to support the program. Accordingly, they have been waived from the requirement to convert to PROS at this time. The attached spreadsheet, New York City Programs Not Converting to PROS, lists these programs, the providers that operate them, and the program addresses.
- 2. Optional PROS conversion programs (CDTPs and clinics) that are not recommended for licensing as a PROS** – Of the 77 CDTPs in NYC, 23 are opting to convert to PROS. In addition, 6 clinic treatment programs are opting to convert. All the converting CDTPs and clinics are operated by providers that have other programs mandated to convert to PROS. Most of the optional programs that chose not to convert to PROS were operated by providers that did not have any programs mandated to convert.
- 3. Programs that are projected to experience a major change in service capacity or revenue from existing levels** – Faced with the challenges of implementing a new service model, most providers submitted plans which sought to maintain services for those consumers currently enrolled in their programs. In addition to maintaining continuity of services, most providers were concerned that PROS might not generate sufficient revenue to cover their operating expenses. In most cases, increases in operating expenses reflected additional staff needed to meet PROS staffing and Medicaid billing requirements. There were two exceptions where providers projected substantial capacity increases. In both cases, based on existing utilization patterns and proposed program changes, the providers were able to demonstrate a need in their communities and an ability to enroll and serve the projected increase in capacity.
- 4. Programs that are expected to change organizational auspice** – There are no such programs in NYC.
- 5. Programs that are projected to change geographical location/catchment area** – Eleven of the 131 existing programs, representing 9 proposed PROS programs, are projected to discontinue providing services at their current sites, due to planned geographic consolidation. In all instances, providers are converting several programs in different locations into one consolidated PROS program which will be housed at one location. These providers determined that relocating all of the programs to one site would facilitate the provision of more integrated services, as well

as increase cost efficiency. With 10 of these 11 programs, services will be relocated to a site within the same neighborhood. The remaining program is a small vocational rehabilitation program that will be relocated to the site of a large psychosocial club in a different neighborhood. However, it is anticipated that consumers' access to vocational services will not diminish, since the majority of the vocational services are currently provided off-site. (It should also be noted that other providers indicated they plan to consider geographic consolidation of their PROS services in the future when long-term rental leases expire.) All of the projected changes in site location are identified on the attached spreadsheet, New York City PROS Projections.

### **The NYC PROS Rollout Plan**

The large number of conversions (131 current programs converting to 43 licensed PROS programs) in NYC precludes all programs converting at the same time. Therefore, the City's PROS programs will be phased in by clusters. These clusters were developed based on four considerations:

- The need to select clusters that are administratively manageable – OMH requested that each cluster be limited to approximately 15 PROS programs.
- The goal of promoting a level playing field regarding competition for consumers – This is in response to concern expressed by providers that those programs converting first will have a competitive advantage in enrolling consumers. In an effort to minimize any such advantage, DMH identified geographic clusters within which consumers are most likely to access services, where competition to serve the same consumers will more likely occur within than between clusters.
- The need to have a diverse first cluster – A diverse first cluster will facilitate the identification of implementation issues that need to be addressed before moving ahead with the second and third clusters. Diversity was defined as a mixture of projected capacity (program size), pre-conversion program types and target populations.
- The goal of optimizing success in converting the first cluster – DMH sought to include programs both ready to convert and interested in converting in the first cluster.

After careful consideration of these factors, three PROS roll-out clusters were identified:

- Cluster I – All proposed PROS programs in Brooklyn and in Manhattan below 59<sup>th</sup> Street: 18 proposed PROS programs representing 14 different providers.
- Cluster II – All proposed PROS programs in the Bronx and in Manhattan on or above 59<sup>th</sup> Street: 16 proposed PROS programs representing 16 different providers.
- Cluster III – All proposed PROS programs in Queens and Staten Island: 9 proposed PROS programs representing 8 different providers.

The attached spreadsheet, NYC Proposed PROS Roll-Out Plan, lists the PROS programs in each cluster, along with their projected capacity ranges. In addition, the attached map, New York City PROS Roll-Out Clusters, depicts the location of projected PROS programs by cluster. This roll-out plan was reviewed by the PROS Stakeholders Implementation Workgroup as part of the City's PROS planning process.

### **NYC PROS Evaluation Activities**

Given the magnitude of change that will occur with the City's PROS conversions and the associated uncertainties and expressed concerns, DMH has partnered with OMH and the Health Services Research Division at Mt. Sinai Medical Center on an implementation evaluation of PROS in NYC. Designed to be low-burden and timely, it will utilize Medicaid administrative data, and if possible, include Medicaid "shadow billing" data to track non-Medicaid clients receiving PROS services. The analyzed data will describe: demographics of those served; clinical information; amount and type of PROS services received; and payments received by providers. Consistent with its commitment to transparency, DMH has obtained input from stakeholders on the evaluation plan and intends to share data reports and entertain public discussion throughout the evaluation process.

Five key evaluation questions have been developed:

- 1) How do actual expenses and revenues compare with projections?
- 2) How has PROS impacted patterns of service delivery?
- 3) How has PROS affected access to services?
- 4) How has PROS reconfigured the service system?
- 5) How do we assess key aspects of the PROS implementation process?

In addition, DMH will conduct a consumer survey and hopes to include a provider survey and/or focus groups to complement what can be learned from billing data. The consumer survey is designed as a pre-/post-conversion evaluation of consumer perceptions and experiences of receiving services in mental health programs slated to convert (pre), and then converted (post), to PROS. DMH developed the survey instrument using input from the consumer forums, consumer focus groups facilitated by the Coalition's Center for Rehabilitation and Recovery, and a planning committee comprised of DMH staff and consumers. The primary goals of the survey are:

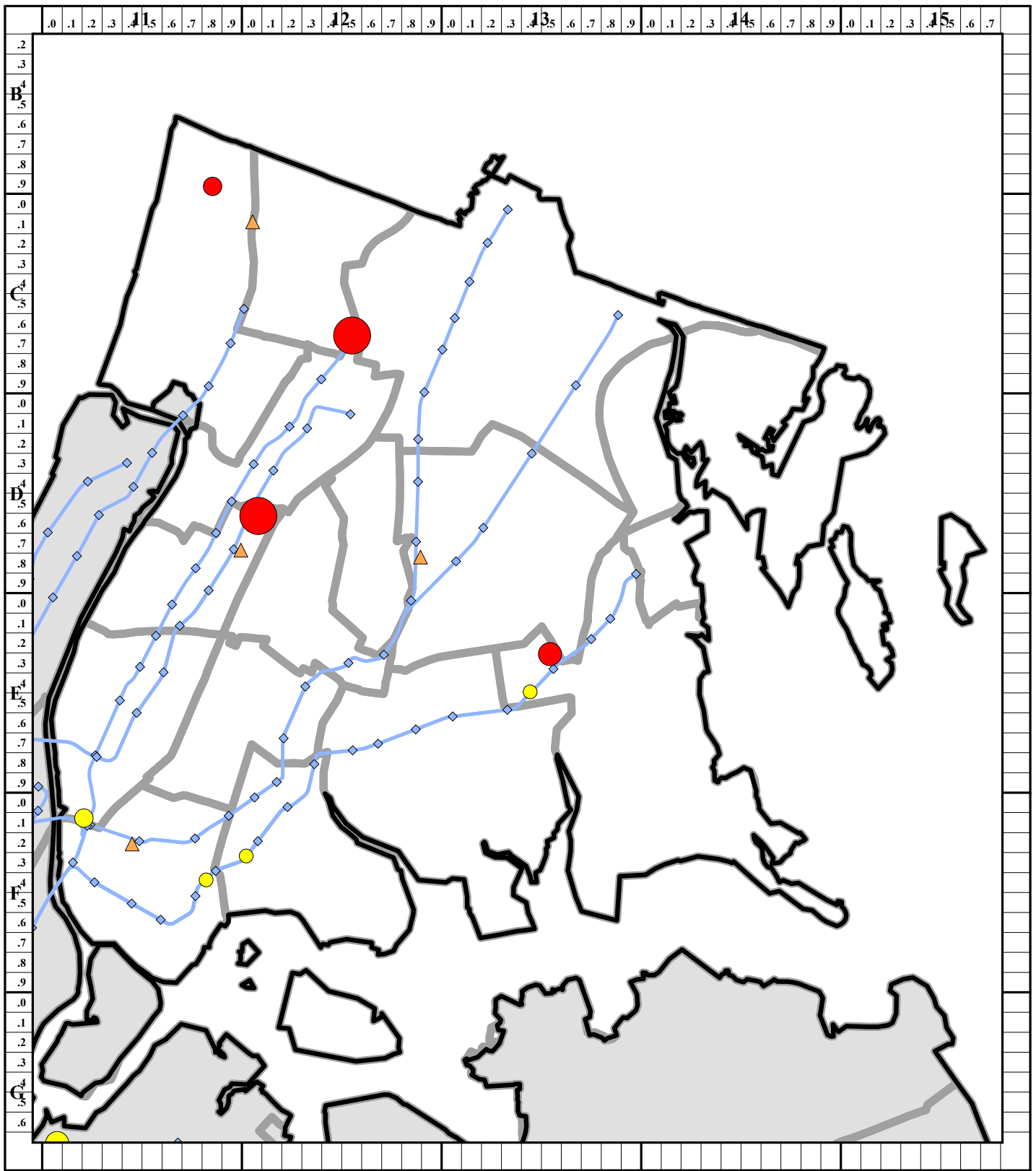
- 1) To compare dimensions of services (including type and perceived access) provided to consumers pre- and post-PROS conversion
- 2) To compare levels of consumer satisfaction with services pre- and post-PROS conversion
- 3) In addition, the pre-conversion survey intends to assess consumers' knowledge of and attitude about the impending PROS conversion

The pre-conversion, or baseline, survey was conducted during the summer of 2005. Three hundred and sixty two consumers from a stratified and randomly selected sample of 20 programs that planned to convert to PROS were surveyed. A summary of these baseline findings will be reported in a separate document.







**PERSONALIZED RECOVERY ORIENTED SERVICES (PROS) - NEW YORK CITY IMPLEMENTATION PLAN**

These locally initiated evaluation activities will supplement those being planned by OMH to assess both the implementation of PROS throughout the state, and ultimately, outcomes associated with this new licensed program category. DMH looks forward to ongoing collaboration with OMH and the City's stakeholder community in ensuring the most comprehensive assessment possible of the impact of PROS on the City's mental health services system and the individuals it is committed to serve.



# Bronx PROS Programs by Capacity and License Type



### Capacity (# clients)

- Over 500 
- 301-500 
- 201-300 
- 151-200 
- 101-150 
- 100 or less 

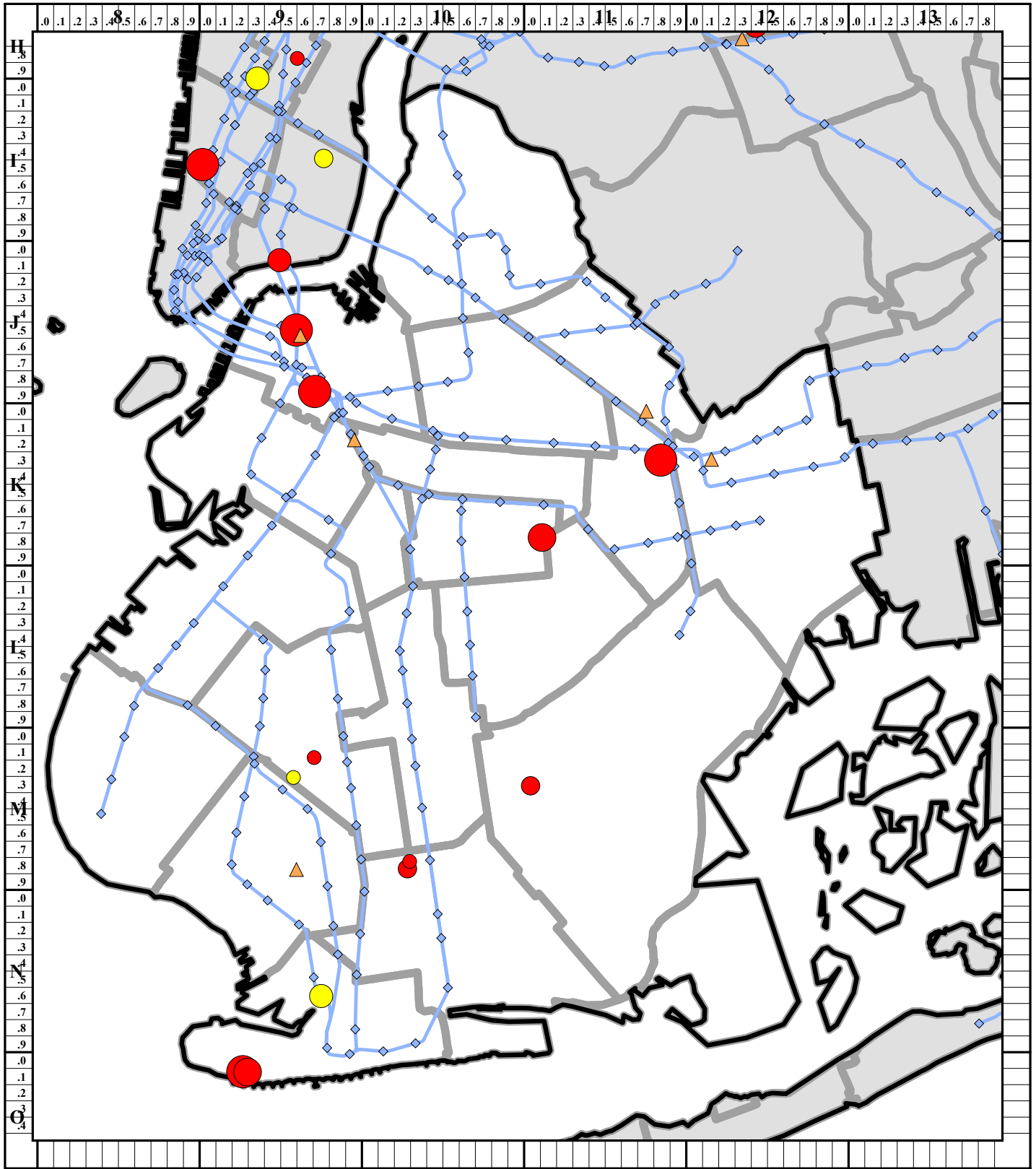
### License Types

-  Comprehensive with Clinic
-  Comprehensive without Clinic

### Symbols

-  Secondary Service Locations
-  Subway Stations

# Brooklyn PROS Programs by Capacity and License Type



### Capacity (# clients)

- |          |  |             |  |
|----------|--|-------------|--|
| Over 500 |  | 151-200     |  |
| 301-500  |  | 101-150     |  |
| 201-300  |  | 100 or less |  |

### License Types

- Comprehensive with Clinic
- Comprehensive without Clinic

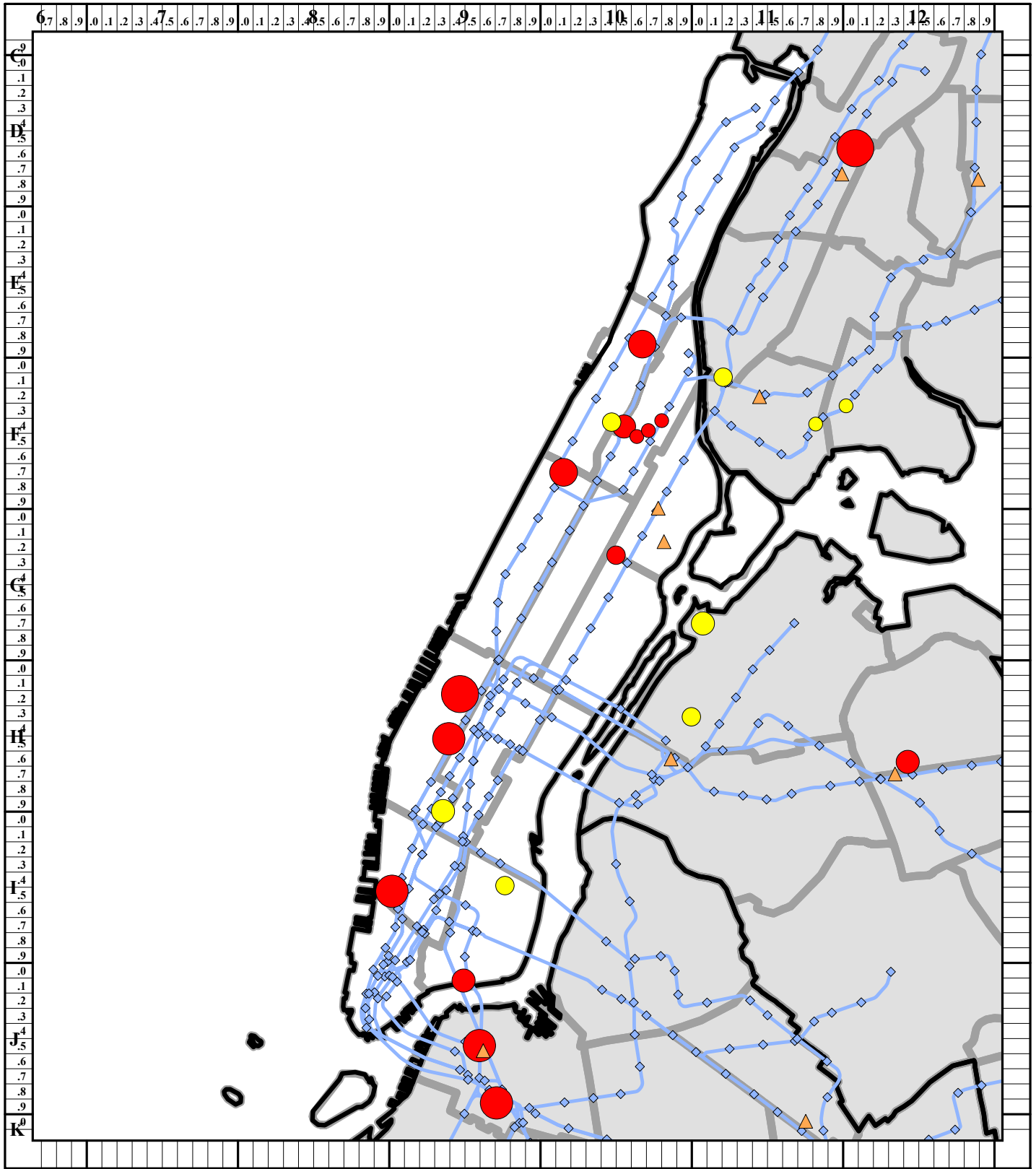
### Symbols

- Secondary Service Locations
- Subway Stations

Prepared By: NYC Department of Health and Mental Hygiene, 11/16/2005



# Manhattan PROS Programs by Capacity and License Type



### Capacity (# clients)

- |          |  |             |  |
|----------|--|-------------|--|
| Over 500 |  | 151-200     |  |
| 301-500  |  | 101-150     |  |
| 201-300  |  | 100 or less |  |

### License Types

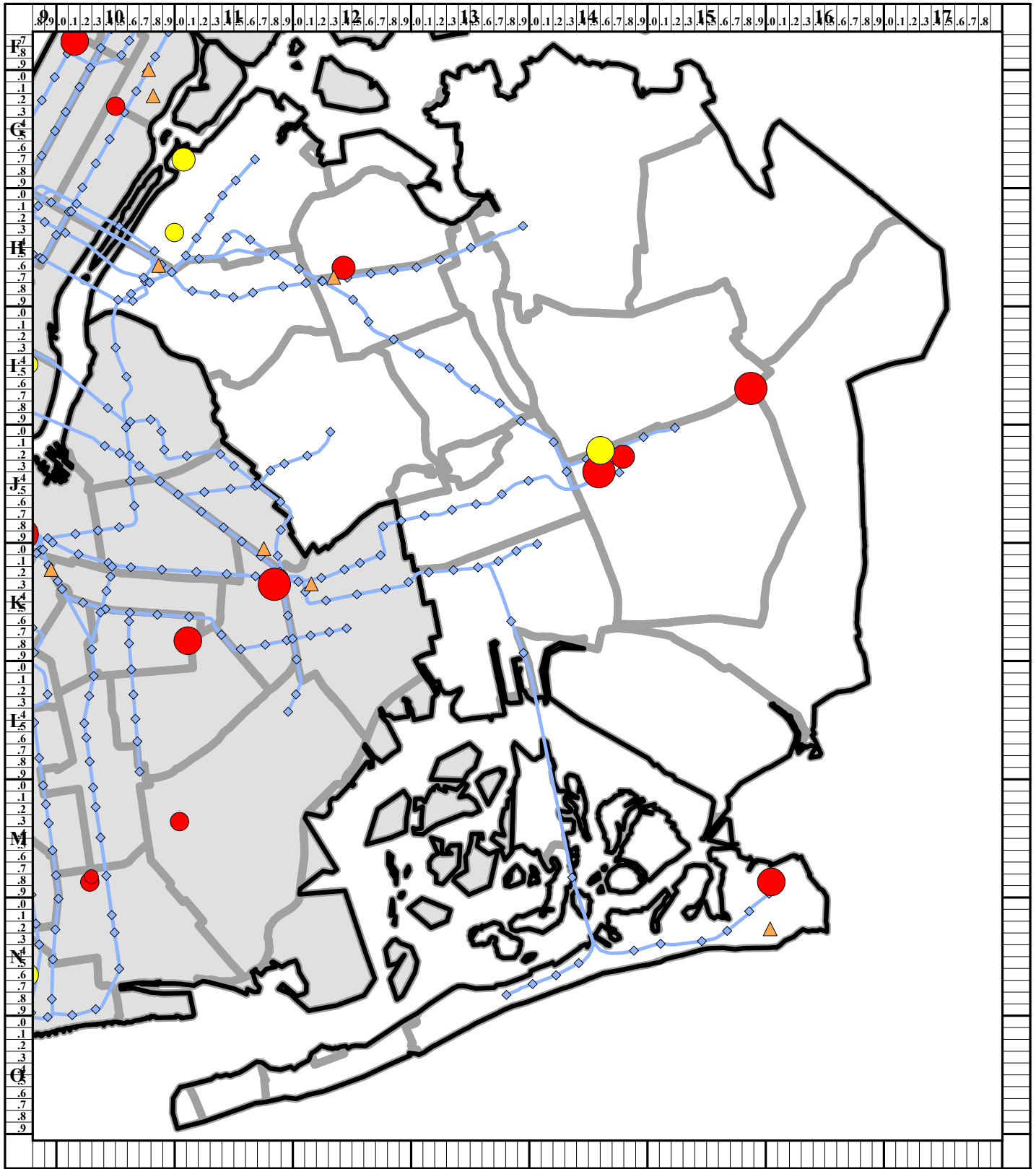
- Comprehensive with Clinic
- Comprehensive without Clinic

### Symbols

- Secondary Service Locations
- Subway Stations

Prepared By: NYC Department of Health and Mental Hygiene, 12/16/2005

# Queens PROS Programs by Capacity and License Type



### Capacity (# clients)

- |          |  |             |  |
|----------|--|-------------|--|
| Over 500 |  | 151-200     |  |
| 301-500  |  | 101-150     |  |
| 201-300  |  | 100 or less |  |

### License Types

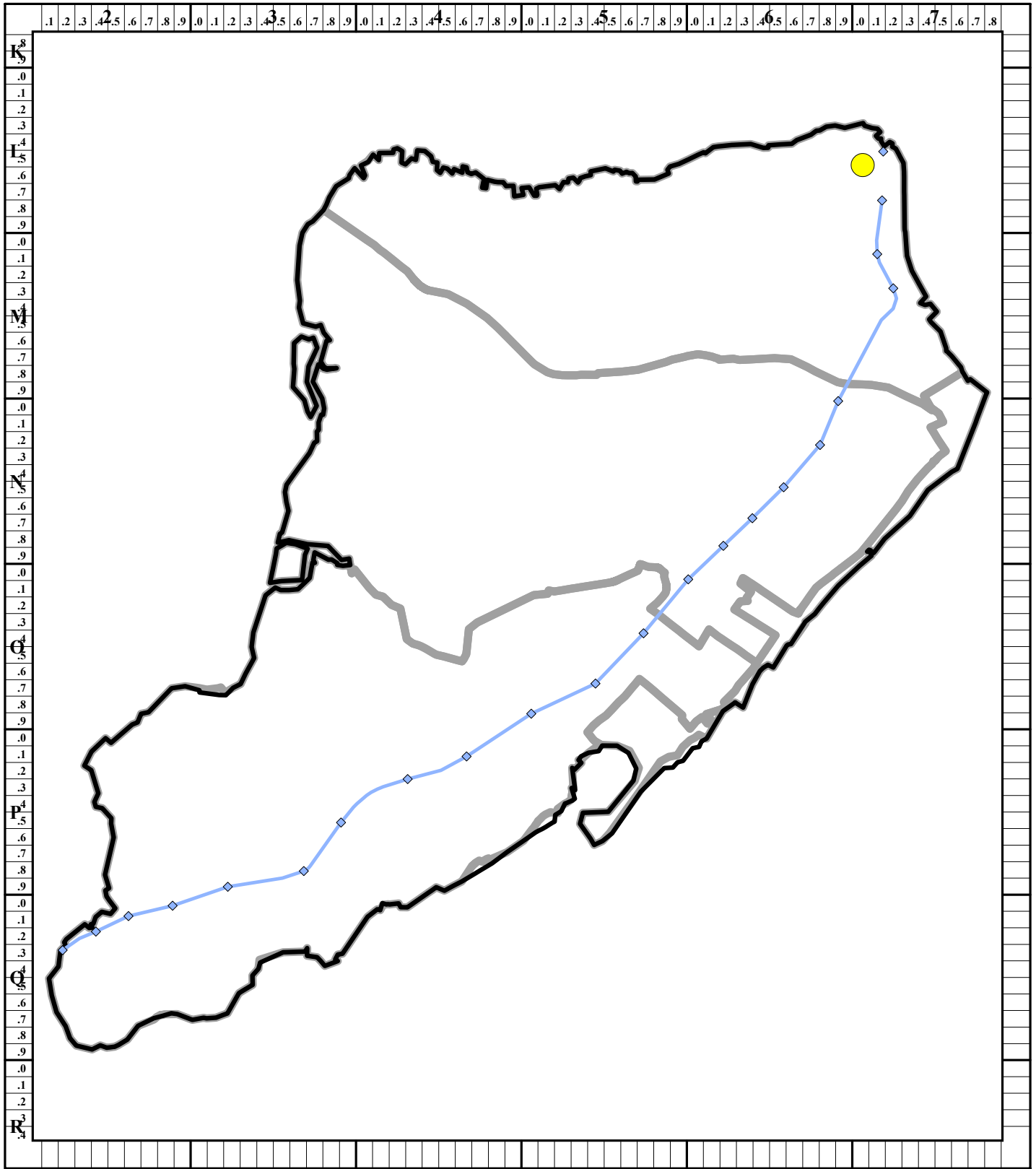
- Comprehensive with Clinic
- Comprehensive without Clinic

### Symbols

- Secondary Service Locations
- Subway Stations

Prepared By: NYC Department of Health and Mental Hygiene, 11/9/2005

# Staten Island PROS Programs by Capacity and License Type



## Capacity (# clients)

- |          |  |             |  |
|----------|--|-------------|--|
| Over 500 |  | 151-200     |  |
| 301-500  |  | 101-150     |  |
| 201-300  |  | 100 or less |  |

## License Types

- Comprehensive with Clinic
- Comprehensive without Clinic

## Symbols

- Secondary Service Locations
- Subway Stations

Prepared By: NYC Department of Health and Mental Hygiene, 11/9/2005

## New York City Personalized Recovery Oriented Services (PROS) Projections

This listing includes all New York City programs that are currently planning to convert to PROS licensure. The information listed here are projections based on T-2 forms submitted by individual providers to the New York City Division of Mental Hygiene (DMH) and jointly reviewed by DMH and the State Office of Mental Health.

<b>Bronx</b>				
PROS Programs	License Type	Primary Program Site Address	Capacity (clients)	Map Coordinates <sup>1</sup>
Catholic Charities	P	510A Southern Boulevard	A	F.4 - 11.8
FEGS - Jerome Avenue, Bronx	C	3600 Jerome Avenue	F	C.7 - 12.5
Fordham Tremont CMHC	C	260 E. 188th Street	F	D.6 - 12.0
Geel Community Services	P	564 Walton Avenue	B	F.1 - 11.2
General Development & Orientation Council	P	717 Southern Boulevard	A	F.3 - 12.0
JBFCS - Bronx Real & IPRT	C	55 Westchester Square	C	E.3 - 13.5
Riverdale Mental Health Association	C	5676 Riverdale Avenue	B	B.9 - 11.8
Young Adult Institute	P	2360 Westchester Avenue	A	E.4 - 13.4
<b>Brooklyn</b>				
PROS Programs	License Type	Primary Program Site Address	Capacity (clients)	Map Coordinates <sup>1</sup>
Brooklyn Bureau Community Services	C	285 Schermerhorn Street	E	J.9 - 9.7
Builders for Family and Youth	C	2000 Flatbush Avenue	B	M.3 - 11.0
FEGS - Jay Street, Brooklyn	C	199 Jay Street	E	J.5 - 9.5
FEGS - Resource Center, Brooklyn	C	938 Kings Highway	B	M.8 - 10.2
FEGS - Surf Avenue, Brooklyn	C	3312-30 Surf Avenue	E	O.1 - 9.2
Goodwill Industries *	P	2559-65 West 13th Street	C	N.6 - 9.7
Institute For Community Living *	C	2384 Atlantic Avenue	E	K.3 - 11.8
JBFCS - Brooklyn Real	C	2020 Coney Island Avenue	A	M.8 - 10.2
JBFCS - Coney Island *	C	3312-30 Surf Avenue	D	O.1 - 9.2
Ohel Children's Home & Family Services	C	5309 18th Avenue	A	M.1 - 9.7
Services for the Underserved *	C	921 East New York Avenue	D	K.8 - 11.1
Summit House	P	1775 60th Street	A	M.3 - 9.5

<p><b><u>License Types</u></b></p> <p>C = Comprehensive with Clinic P = Comprehensive without Clinic</p>	<p><b><u>Capacity Ranges (# clients)</u></b></p> <p>A = 100 or less B = 101 - 150 C = 151 - 200 D = 201 - 300 E = 301 - 500 F = 501+</p>
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\* PROS programs with an asterisk include one or more current programs that are projected to change geographic location in the new PROS program.

<sup>1</sup> These coordinates correspond to the program location on the Projected PROS Program Maps

<b>Manhattan</b>				
<b>PROS Programs</b>	<b>License Type</b>	<b>Primary Program Site Address</b>	<b>Capacity (clients)</b>	<b>Map Coordinates<sup>1</sup></b>
Center for Behavioral Health	C	2090 Adam Clayton Powell Jr. Boulevard	A	F.5 - 10.6
Center for Urban Community Services (CUCS) *	C	TBD	C	H.8 - 9.6
Community Access *	P	TBD	B	I.4 - 9.7
FEDCAP Rehabilitation Service	P	119 West 19th Street	C	H.9 - 9.3
FECS - Manhattan	C	315 Hudson Street	E	I.5 - 9.0
Fountain House	C	425 West 47th Street	F	H.2 - 9.4
Hamilton Madison House	C	253 South Street	C	J.1 - 9.4
Harlem Hospital Center	C	151 West 127th Street	A	F.4 - 10.7
Mental Health Association of NYC *	P	4-14 West 125th Street	B	F.4 - 10.4
Mount Sinai Medical Center	C	53-55 96th Street	B	G.3 - 10.4
Postgraduate Center for Mental Health	C	344 West 36th Street	E	H.5 - 9.3
The Bridge	C	248 West 108th Street	D	F.7 - 10.1
Upper Manhattan Mental Health Center	C	1727 Amsterdam Avenue	D	E.9 - 10.6
Weston United Community Renewal	C	321 West 125th Street	C	F.4 - 10.5
<b>Queens</b>				
<b>PROS Programs</b>	<b>License Type</b>	<b>Primary Program Site Address</b>	<b>Capacity (clients)</b>	<b>Map Coordinates<sup>1</sup></b>
Builders for Family and Youth	C	37-22 82nd Street	C	H.6 - 12.4
Builders for Family and Youth	C	1329 Beach Channel Drive	D	M.8 - 16.0
FECS - Queens *	C	90-04 161st Street	C	J.2 - 14.7
Goodwill Industries	P	4-21 27th Avenue	C	G.7 - 11.0
Professional Services Center for the Handicapped *	P	23-15 37th Avenue	B	H.3 - 10.9
Transitional Services for New York	C	147-32 Jamaica Avenue	E	J.3 - 14.5
Venture House	P	150-10 Hillside Avenue	D	J.2 - 14.6
Zucker Hillside Hospital - LIJ	C	205-07 Hillside Avenue	E	I.6 - 15.8
<b>Staten Island</b>				
<b>PROS Programs</b>	<b>License Type</b>	<b>Primary Program Site Address</b>	<b>Capacity (clients)</b>	<b>Map Coordinates<sup>1</sup></b>
Skylight Center	P	307 St. Marks Place	C	L.5 - 7.0

<p><b>License Types</b></p> <p>C = Comprehensive with Clinic  P = Comprehensive without Clinic</p>	<p><b>Capacity Ranges (# clients)</b></p> <p>A = 100 or less  B = 101 - 150  C = 151 - 200  D = 201 - 300  E = 301 - 500  F = 501+</p>
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\* PROS programs with an asterisk include one or more current programs that are projected to change geographic location in the new PROS program.

<sup>1</sup> These coordinates correspond to the program location on the Projected PROS Program Maps

## New York City Personalized Recovery Oriented Services (PROS) Projections - Secondary Sites

This listing shows all addresses at which PROS services will be provided by each planned PROS program; information is from P-3 forms submitted by individual providers to the New York City Division of Mental Hygiene. During the PAR process there will be a final determination of whether secondary sites will provide services under a license issued to the primary site or will require a separate license.

Bronx			
PROS Programs	Primary Program Site Address	Secondary Sites	Map Coordinates <sup>1</sup>
Catholic Charities	510A Southern Boulevard		
FECS - Jerome Avenue, Bronx	3600 Jerome Avenue	6355 Broadway 2151 Cruger Avenue	C.1 - 12.0 D.8 - 12.8
Fordham Tremont CMHC	260 E. 188th Street	2250 Ryer Avenue	D.7 - 11.9
Geel Community Services	564 Walton Avenue		
General Development & Orientation Council	717 Southern Boulevard		
JBFCFS - Bronx Real & IPRT	55 Westchester Square		
Riverdale Mental Health Association	5676 Riverdale Avenue		
Young Adult Institute	2360 Westchester Avenue		
Brooklyn			
PROS Programs	Primary Program Site Address	Secondary Sites	Map Coordinates <sup>1</sup>
Brooklyn Bureau Community Services	285 Schermerhorn Street	25 Chapel Street 2697 Atlantic Ave	J.5 - 9.6 K.3 - 12.1
Builders for Family and Youth	2000 Flatbush Avenue		
FECS - Jay Street, Brooklyn	199 Jay Street		
FECS - Resource Center, Brooklyn	938 Kings Highway		
FECS - Surf Avenue, Brooklyn	3312-30 Surf Avenue		
Goodwill Industries	2559-65 West 13th Street	271 Flatbush Avenue	K.2 - 9.9
Institute For Community Living	2384 Atlantic Avenue		
JBFCFS - Brooklyn Real	2020 Coney Island Avenue		
JBFCFS - Coney Island	3312-30 Surf Avenue	1608 Stillwell Avenue	M.8 - 9.5
Ohel Children's Home & Family Services	5309 18th Avenue		
Services for the Underserved	921 East New York Avenue		
Summit House	1775 60th Street		
Manhattan			
PROS Programs	Primary Program Site Address	Secondary Sites	Map Coordinates <sup>1</sup>
Center for Behavioral Health	2090 7th Avenue		
Center for Urban Community Services (CUCS)	TBD		
Community Access	TBD		
FEDCAP Rehabilitation Service	119 West 19th Street		
FECS - Manhattan	315 Hudson Street		
Fountain House	425 West 47th Street		
Hamilton Madison House	253 South Street	78-14 Roosevelt Avenue (Queens)	H.7 - 12.3
Harlem Hospital Center	151 West 127th Street		
Mental Health Association of NYC	4-14 West 125th Street	369 E 148th Street (Bronx)	F.2 - 11.4
Mount Sinai Medical Center	53-55 96th Street		
Postgraduate Center for Mental Health	344 West 36th Street		
The Bridge	248 West 108th Street	1795 Lexington Avenue	F.9 - 10.7
Upper Manhattan Mental Health Center	1727 Amsterdam Avenue		
Weston United Community Renewal	321 West 125th Street	320 East 105th Street	G.2 - 10.8

<sup>1</sup> These coordinates correspond to the secondary site location(s) on the Projected PROS Program Maps

<b>Queens</b>			
<b>PROS Programs</b>	<b>Primary Program Site Address</b>	<b>Secondary Sites</b>	<b>Map Coordinates<sup>1</sup></b>
Builders for Family and Youth	37-22 82nd Street		
Builders for Family and Youth	1329 Beach Channel Drive	20-28 Seagirt Boulevard	N.2 - 16.0
FEGS - Queens	90-04 161st Street		
Goodwill Industries	4-21 27th Avenue	42-15 Crescent Street	H.6 - 10.8
Professional Services Center for the Handicapped	23-15 37th Avenue	1420 Bushwick Avenue (Brooklyn)	K.0 - 11.7
Transitional Services for New York	147-32 Jamaica Avenue		
Venture House	150-10 Hillside Avenue		
Zucker Hillside Hospital - LIJ	205-07 Hillside Avenue		
<b>Staten Island</b>			
<b>PROS Programs</b>	<b>Primary Program Site Address</b>	<b>Secondary Sites</b>	<b>Map Coordinates<sup>1</sup></b>
Skylight Center	307 St. Marks Place		

<sup>1</sup> These coordinates correspond to the secondary site location(s) on the Projected PROS Program Maps

## New York City Programs Not Converting to Personalized Recovery Oriented Services (PROS)

All programs listed here were deemed to either not fit the PROS program model, or unable to generate sufficient Medicaid revenue under the PROS model to support the program; as such, they have been waived from the requirement to convert to PROS at this time.

<b>Bronx</b>		
<b>Agency</b>	<b>Program</b>	<b>Address</b>
Goodwill Industries	Assisted Competitive Employment	384 East 149th Street
Goodwill Industries	Assisted Competitive Employment	2488 Grand Concourse
Jewish Association for Services (JASA)	Psychosocial Club	2705 Schley Avenue
Palladia Willow Street Shelter	On-site Rehabilitation	781E 135th St.
Volunteers of America, Greater NY	On-site Rehabilitation	50 West Mount Eden Ave
<b>Brooklyn</b>		
<b>Agency</b>	<b>Program</b>	<b>Address</b>
Brooklyn Bureau of Community Service	On-site Rehabilitation	110 Williams Avenue
Brooklyn Psychiatric Centers, Inc.	On-site Rehabilitation	1310 Rockaway Parkway
Brooklyn Psychiatric Centers, Inc.	Psychosocial Club	1310 Rockaway Parkway
Builders for the Family & Youth	On-site Rehabilitation	249 Classon Avenue
CAB of Baltic Street Services	Assisted Competitive Employment	25 Flatbush Avenue
CAB of Baltic Street Services	Assisted Competitive Employment	1529 MacDonald Avenue
CAB of Baltic Street Services	Affirmative Business	141 Atlantic Avenue
CAB of Baltic Street Services	Affirmative Business	141 Atlantic Avenue
Interfaith Medical Center	Intensive Psychiatric Rehabilitation Treatment	1545 Atlantic Avenue
Lutheran Medical Center	Psychosocial Club	514 49 Street
NYSARC NYC Chapter	Psychosocial Club	57 Willoughby Street
<b>Manhattan</b>		
<b>Agency</b>	<b>Program</b>	<b>Address</b>
Center for Urban Community Services	On-site Rehabilitation	409-11 West 145th Street
Center for Urban Community Services	On-site Rehabilitation	255 West 43rd St
Center for Urban Community Services	On-site Rehabilitation	350 Lafayette St
Center for Urban Community Services	Psychosocial Club	350 Lafayette St
Community Access, Inc.	Assisted Competitive Employment	2090 Adam Clayton Powel Blvd
Community Access, Inc.	Supported Employment	2090 Adam Clayton Powel Blvd
Encore	On-site Rehabilitation	239 W. 49th Street
Goddard-Riverside Community Center	On-site Rehabilitation	131 Edgecombe Avenue
Goddard-Riverside Community Center	On-site Rehabilitation	206 West 92nd Street
Goddard-Riverside Community Center	Psychosocial Club	264 West 87th Street
Goddard-Riverside Community Center	Assisted Competitive Employment	577 Columbus Avenue
Henry Street Settlement	Affirmative Business	40 Montgomery Street
Henry Street Settlement	Supported Employment	40 Montgomery Street
Project Renewal, Inc.	On-site Rehabilitation (Ft. Washington House)	216 Ft. Washington Avenue
Project Renewal, Inc.	On-site Rehabilitation (Holland House)	216 Ft. Washington Avenue
Project Renewal, Inc.	Assisted Competitive Employment	200 Varick Street
Project Renewal, Inc.	Supported Employment	200 Varick Street
Trustees of Columbia University	On-site Rehabilitation	220 West 141st St
Urban Pathways	Assisted Competitive Employment	575 8th Avenue
Volunteers of America, Greater NY	On-site Rehabilitation	Ward's Island
Volunteers of America, Greater NY	On-site Rehabilitation (313)	305 West 97th Street
Volunteers of America, Greater NY	On-site Rehabilitation (319)	305 West 97th Street
Westside Federation	On-site Rehabilitation	109 W. 129th Street



<b>Queens</b>		
<b>Agency</b>	<b>Program</b>	<b>Address</b>
Builders for the Family & Youth	On-site Rehabilitation	95-04 Rockaway Beach
Builders for the Family & Youth	On-site Rehabilitation	1509 Central Avenue
Builders for the Family & Youth	On-site Rehabilitation	160-11 89th Avenue
Builders for the Family & Youth	On-site Rehabilitation	157 Graham Avenue
Institute for Community Living	Psychosocial Club	80-45 Winchester Boulevard
Elmhurst Hospital Center	Psychosocial Club	79-01 Broadway
Federation of Organizations	Assisted Competitive Employment	105-01 101st Street
Jamaica Service Program for Older Adults	Psychosocial Club	145-06 Farmers Blvd.
Jewish Board of Family & Children's Services	Psychosocial Club	243-02 Nothorn Blvd
Lifespire (Association for C.R.M.D.)	Assisted Competitive Employment	184-10 Jamaica Avenue
<b>Staten Island</b>		
<b>Agency</b>	<b>Program</b>	<b>Address</b>
Community Residential Treatment Services	Affirmative Business	250 Buel Avenue

## NYC PROPOSED PROS ROLL-OUT PLAN

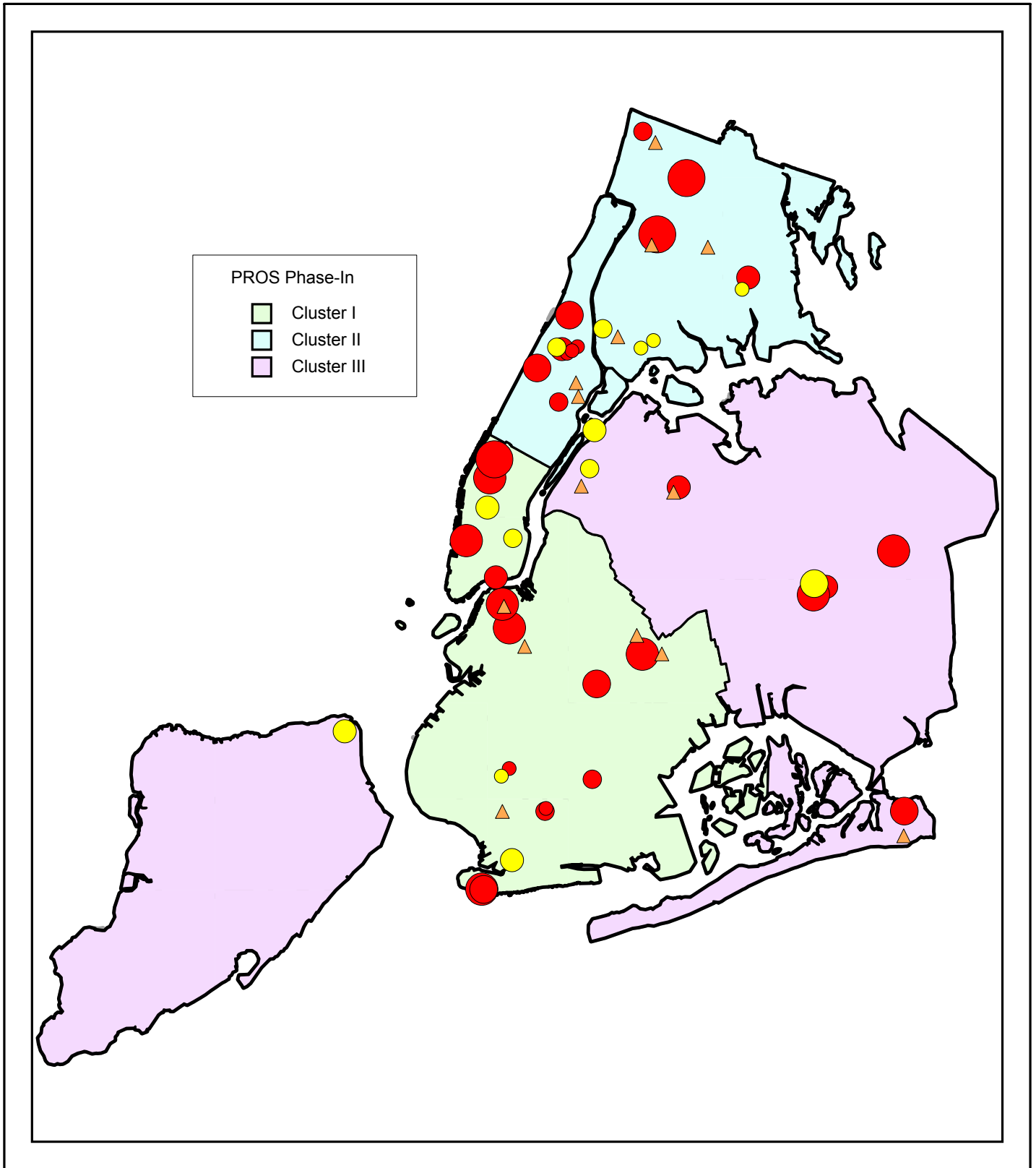
Cluster 1: Brooklyn & Manhattan Below 59th Street			
PROS Programs	Projected Capacity		
Brooklyn Bureau Community Services	E		
Builders for Family and Youth	B		
Community Access	B		
FEDCAP Rehabilitation Service	C		
FECS - Jay St., Brooklyn	E		
FECS - Manhattan	E		
FECS - Resource Center, Brooklyn	B		
FECS - Surf Ave., Brooklyn	E		
Fountain House	F		
Goodwill Industries	C		
Hamilton Madison House	C		
Institute For Community Living	E		
JBFCFS - Brooklyn Real	A		
JBFCFS - Coney Island	D		
Ohel Children's Home & Family Svcs	A		
Postgraduate Center for MH	E		
Services for the Underserved	D		
Summit House	A		
	Licenses	Agencies	Proj. Capacity
<b>Total</b>	<b>18</b>	<b>14</b>	<b>5,058</b>

Cluster 3: Queens & Staten Island			
PROS Programs	Projected Capacity		
Builders for Family and Youth - Corona	C		
Builders for Family and Youth - Far Rockaway	D		
FECS - Queens	C		
Goodwill Industries	C		
Prof. Svcs. Center for Handicap	B		
Skylight Center	C		
Transitional Services for New York	E		
Venture House	D		
Zucker Hillside Hospital - LIJ	E		
	Licenses	Agencies	Proj. Capacity
<b>Total</b>	<b>9</b>	<b>8</b>	<b>1,945</b>

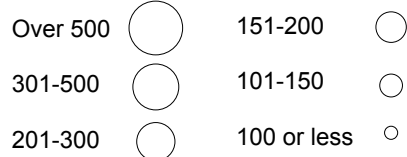
Cluster 2: Bronx & Manhattan On or Above 59th Street			
PROS Programs	Projected Capacity		
Catholic Charities	A		
Center for Behavioral Health	A		
Center for Urban Community Service (CUC)	C		
FECS - Jerome Ave, Bronx	F		
Fordham Tremont CMHC	F		
Geel Community Services	B		
General Dev. & Orientation Council	A		
Harlem Hospital Center	A		
JBFCFS - Bx Real & IPRT	C		
Mental Health Association of NYC	B		
Mount Sinai Medical Center	B		
Riverdale Mental Health Assoc.	B		
The Bridge	D		
Upper Manhattan MH Center	D		
Weston United Community Renewal	C		
Young Adult Institute	A		
	Licenses	Agencies	Proj. Capacity
<b>Total</b>	<b>16</b>	<b>16</b>	<b>3,740</b>

Capacity Ranges (# of consumers)
A = 100 or less
B = 101 - 150
C = 151 - 200
D = 201 - 300
E = 301 - 500
F = 501 or more

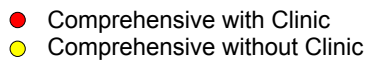
# New York City PROS Roll-Out Clusters



## Capacity (# clients)



## License Types



## Symbol



Prepared By: NYC Department of Health and Mental Hygiene, 12/16/2005