
NEW YORK STATE DEPARTMENT OF HEALTH

**NEW YORK STATE
ELECTRONIC CERTIFICATE OF NEED
APPLICANT TRAINING GUIDE
HEALTH COMMERCE SYSTEM**

SITES

REVISED OCTOBER 2018

NYSE-CON Applicant Training - Sites

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NYSE-CON Applicant Training - Sites

Revisions

October 2018

Page 15: Corrected the step numbers to complete to add or remove services, add or remove beds, and change the name of an existing facility.

Page 25: Corrected the step numbers to complete to add a site for a construction notice.

NYSE-CON Applicant Training - Sites

About the Sites Tab

The new Sites tab replaces the beds and services tables on Certificate of Need (CON) and Limited Review Application (LRA) schedules. This allows the applicant to provide detailed information, such as a request to change service delivery, for multiple sites in a single application.

A project site is required for all new LRAs, Administrative Review CONs, Full Review CONs excluding Change in Ownership *without* Construction, and Construction Notices. Projects submitted prior to the availability of the Sites tab will display the project site on record. The site cannot be modified nor can additional sites be added via the Sites tab on these projects.

These instructions do not pertain to applications for Licensed Home Care Services Agencies (LHCSA) or Transfer of Ownership Interest Notices.

Facility types that may be added to a project as a project site include Certified Home Health Agencies (CHHA), Diagnostic and Treatment Centers (D&TC), Hospices, Hospitals, Long Term Home Health Care Programs (LTHHCP), and Residential Health Care Facilities (RHCF).

About the Site Proposal Summary

Each project site has its own proposal summary. This summary is meant to be much more brief and concise than the Executive Summary and only describes the proposed changes at the site. For example, if the purpose of the project is to add a service to the site's operating certificate and perform renovations at the site, an appropriate summary would be "Certify Medical Services - Other Medical Specialties and perform renovations to create a diagnostic imaging suite."

Unlike the Executive Summary, site proposal summaries are not visible to the general public.

About Services and Beds

Services

All the above facility types provide services. Certain types of facilities are assigned Baseline Services which they are required to provide. Facilities with baseline services may provide additional services if they wish. Facilities that do not have baseline services must provide a minimum of one service.

Facility types that have baseline services include CHHAs, hospices, LTHHCPs, and RHCFs.

Beds

The following facility types may have beds: hospices, hospitals, and RHCFs. Examples of these types of facilities that *do not* have beds include off-campus emergency departments and hospital extension clinics (hospital type), and off-site adult day health care programs (ADHCP) (RHCF type).

Please refer to the table below for the types of facilities that have services, baseline services, or beds.

| Facility Type | Services | Baseline Services | Beds |
|---|----------|-------------------|------|
| Certified Home Health Agency (CHHA) | ✓ | ✓ | |
| Diagnostic and Treatment Center (D&TC) | ✓ | | |
| Hospice | * | ✓ | ✓ |
| Hospital | ✓ | | ✓ |
| Long Term Home Health Care Program (LTHHCP) | ✓ | ✓ | |
| Residential Health Care Facility (RHCF) | ✓ | ✓ | ✓ |

** Instead of selecting services, hospices indicate how each service is delivered, directly or by contract.*

NYSE-CON Applicant Training - Sites

Adding a Site to a Project

In this chapter, you will learn how to:

- Add the main site of a new facility or agency
- Add a new site to a facility
- Add an existing site to a project
- Add or remove services for a site
- Add or remove beds for a site

Click on the **Sites** tab to view the **Project Sites Information** screen.

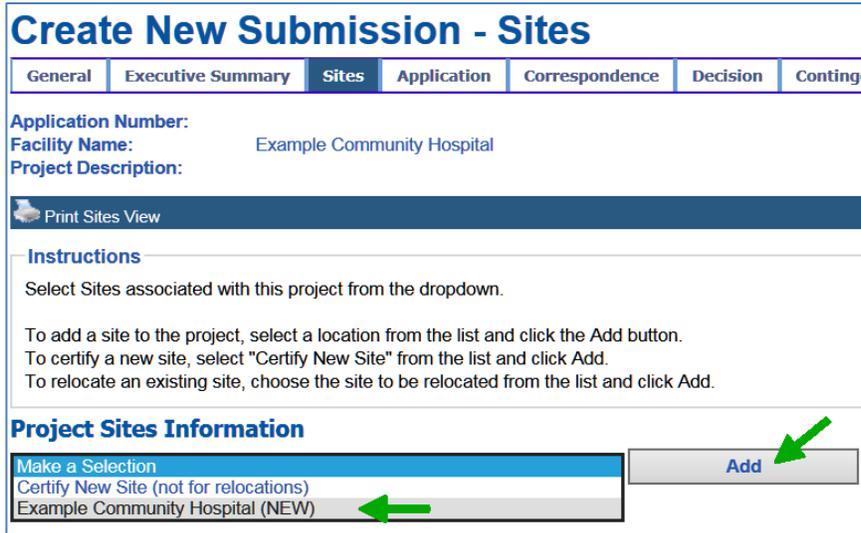


For CON and LRA Projects

Add the Main Site of a New Facility/Agency

The following instructions are for adding the *main site* of an establishment project.

1. From the drop-down list, select the **main site** that you entered when you began your submission and click the Add button.



NYSE-CON Applicant Training - Sites

- The Site Information screen will be displayed. The name and address of the main site are automatically populated with the information entered on the General Tab.

General Information

General Executive Summary Sites Application Correspondence

Application Number:
Facility Name: Example Community Hospital
Project Description:
Submission Type: Application - Full Review - Establish
Project Status:
Review Level:
Total Project Cost: \$40,000,000.00

Main Site Information

Facility Name: Example Community Hospital
Physical Address: 123 Main Street, Anytown, NY 12208
County: ALBANY

Create New Submission - Certify New Site

General Executive Summary Sites Application Correspondence

Application Number:
Facility Name: Example Community Hospital
Project Description:
Instructions:
Click Continue to enter services for this location. Click Cancel to return to the Project Sites screen without saving.
This site will NOT be saved until you have entered ALL of the site information including Services and Beds.

Certify New Site

Facility ID: NEW
Site Type: Hospital

*Site Name: Example Community Hospital
*Street 1: 123 Main Street
Street 2:
*City: Anytown
State: NY
*ZipCode: 12208
*County: ALBANY

- Any changes to the name or address of the main site will automatically update the information displayed on the General Tab.

Note: The following steps *must* be completed to save the site to your project.

- In the Site Proposal Summary field, enter a brief description of the proposal for this site. e.g. "Establish and construct a new hospital."
- Click the Continue button to proceed to the Add Services screen.

Create New Submission - Certify New Site

General Executive Summary Sites Application Correspondence Decision Contingencies Post Approval Access Summary

Application Number:
Facility Name: Example Community Hospital
Project Description:
Instructions:
Click Continue to enter services for this location. Click Cancel to return to the Project Sites screen without saving.
This site will NOT be saved until you have entered ALL of the site information including Services and Beds.

Certify New Site

Facility ID: NEW
Site Type: Hospital

*Site Name: Example Community Hospital
*Street 1: 123 Main Street
Street 2:
*City: Anytown
State: NY
*ZipCode: 12208
*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:
Establish and construct a new community hospital.

Continue Cancel

NYSE-CON Applicant Training - Sites

6. Select the services that you want to add to the site by checking the corresponding checkbox or entering a numeric value between 1 and 9999 in the Add column.

Create New Submission - Add Services

General
Executive Summary
Sites
Application
Correspondence
Decision
Contingencies
Post Approval
Access
Summa

Application Number:
Facility Name: Example Community Hospital
Project Description:

Site Information
Facility ID: NEW
Site Type: Hospital
Site Name: Example Community Hospital
Physical Address: 123 Main Street, Anytown, NY 12208
County: ALBANY

Instructions
 Click Continue to enter beds for this location. Click Cancel to return to the previous screen without saving.
 In the table below, select the services you wish to add at this site and click Save. For service types with units, enter the number of units to add. The Proposed column will be automatically calculated after you have confirmed your changes.

Services Information

| Category | Current | Add | Remove | Proposed |
|---|---------|-------------------------------------|--------|----------|
| Ambulatory Surgery - Multi Speciality | | <input checked="" type="checkbox"/> | | |
| Ambulatory Surgery - Single Speciality | | <input type="checkbox"/> | | |
| Ambulatory Surgery - Single Speciality - Gastroenterology | | <input type="checkbox"/> | | |
| Lithotripsy O/P | | <input type="checkbox"/> | | |
| Medical Services - Other Medical Specialties | | <input checked="" type="checkbox"/> | | |
| Medical Services - Primary Care | | <input checked="" type="checkbox"/> | | |
| Methodone Maintenance O/P | | <input type="checkbox"/> | | |
| Radiology-Therapeutic | | <input type="checkbox"/> | | |
| Radiology-Therapeutic O/P | | <input type="checkbox"/> | | |
| Renal Dialysis - Acute | | <input type="checkbox"/> | | |
| Renal Dialysis - Chronic O/P | | 15 | | |
| Swing Bed Program | | | | |
| Transplant - Heart - Adult | | <input type="checkbox"/> | | |
| Transplant - Heart - Pediatric | | <input type="checkbox"/> | | |
| Transplant - Kidney | | <input type="checkbox"/> | | |
| Transplant - Liver | | <input type="checkbox"/> | | |
| Traumatic Brain Injury Program | | <input type="checkbox"/> | | |

Continue
Cancel

- a. If the site will only have baseline services, check the box labeled "Baseline services only". Please see "About Services and Beds" on page 1 for more information.

BASELINE SERVICES

Audiology

Medical Social Services

Nutritional

Physician Services

Dental

Medical Supplies Equipment and Appliances

Optometry

Services Information Check this box if this location has Baseline Services Only

| Category | Current | Add |
|----------|---------|-----|
| | | |

NYSE-CON Applicant Training - Sites

Note: Hospices do not make any selections on the Add Services screen. Hospice applicants should complete Schedule 22 and upload it to the Application tab.

Create New Submission - Add Services

| | | | | | | | | | |
|---------|-------------------|--------------|-------------|----------------|----------|---------------|---------------|--------|-------|
| General | Executive Summary | Sites | Application | Correspondence | Decision | Contingencies | Post Approval | Access | Summa |
|---------|-------------------|--------------|-------------|----------------|----------|---------------|---------------|--------|-------|

Application Number:
Facility Name: Example Hospice
Project Description:

Site Information
Facility ID: NEW
Site Type: Hospice
Site Name: Example Hospice
Physical Address: 123 Main Street, Anytown, NY 12309
County: SCHENECTADY

Instructions
Please complete and upload Schedule 22 to indicate how each service below will be delivered, directly or by contract.
Click Continue to enter beds for this location. Click Cancel to return to the previous screen without saving.

BASELINE SERVICES

| | | |
|-----------------------|---|---|
| Audiology | Bereavement | Clinical Laboratory Service |
| Home Health Aide | Homemaker | Housekeeper |
| Inpatient Certified | Medical Social Services | Medical Supplies Equipment and Appliances |
| Nursing | Nutritional | Pastoral Care |
| Personal Care | Pharmaceutical Service | Physician Services |
| Psychology | Therapy - Occupational O/P | Therapy - Physical O/P |
| Therapy - Respiratory | Therapy - Speech Language Pathology O/P | |



7. If the site is a type that can have beds, click the Continue button to proceed to the Add Beds screen. Otherwise skip to step 10 of this section. You may click Cancel to return to the previous screen without saving your changes.

NYSE-CON Applicant Training - Sites

- If the Add Beds screen is displayed, enter a numeric value between 1 and 9999 in the Add column for each type of bed you want to add to the site.

Create New Submission - Add Beds

General
Executive Summary
Sites
Application
Correspondence
Decision
Contingencies
Post Approval
Access
Summary

Application Number:
Facility Name: Example Community Hospital
Project Description:

Site Information
Facility ID: NEW
Site Type: Hospital
Site Name: Example Community Hospital
Physical Address: 123 Main Street, Anytown, NY 12208
County: ALBANY

Instructions
 Click "Save" to save your changes. Click "Cancel" to return to the previous screen without saving.
 In the table below, enter the number of beds you wish to add at this site and click Save. The Proposed column will be automatically calculated after you have confirmed your changes.

Beds Information Check this box if this location does not have beds

| Category | Current | Add | Remove | Proposed |
|--------------------------------------|---------|-----|--------|----------|
| AIDS | | | | |
| Bone Marrow Transplant | | | | |
| Burns Care | | | | |
| Chemical Dependence - Rehabilitation | | | | |
| Chemical Dependence - Detoxification | | | | |
| Coma Recovery | | | | |
| Coronary Care | | | | |
| Intensive Care | | 10 | | |
| Maternity | | 25 | | |
| Medical / Surgical | | 100 | | |
| Neonatal Continuing Care | | | | |
| Neonatal Intensive Care | | | | |
| Neonatal Intermediate Care | | | | |
| Pediatric | | 10 | | |
| Pediatric ICU | | | | |
| ----- | | | | |
| Transitional Care | | | | |
| Traumatic Brain Injury | | | | |
| Total | | | | |

Save
Cancel

- If the site will not have beds, check the box labeled "This location does not have beds". Please see "About Services and Beds" on page 1 for more information.

Beds Information Check this box if this location does not have beds

| Category | Current | Add | Remove | Proposed |
|----------|---------|-----|--------|----------|
| | | | | |

- Click the Save button to proceed to the Confirm New Site Information screen.

NYSE-CON Applicant Training - Sites

- Review the information you have entered. If everything is correct, click the Confirm button. You may click Cancel to return to the previous screen without saving your changes.

Confirm New Site Information Changes

General
Executive Summary
Sites
Application
Correspondence
Decision
Contingencies
Post Approval
Access
Summary

Application Number:
 Facility Name: Example Community Hospital
 Project Description:

Instructions

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

New Location

Facility ID: NEW
 Site Type: Hospital
 Site Name: Example Community Hospital
 Physical Address: 123 Main Street, Anytown, NY 12208
 County: ALBANY
 Site Proposal Summary: Establish and construct a new community hospital

| Services Information | |
|--|-----------------|
| Service Category | Proposed Change |
| Ambulatory Surgery - Multi Speciality | Add |
| Emergency Department | Add |
| Medical Services - Other Medical Specialties | Add |
| Medical Services - Primary Care | Add |
| Renal Dialysis - Chronic O/P | Add 15 |

| Beds Information | |
|--------------------|-----------------|
| Bed Category | Proposed Change |
| Intensive Care | Add 10 |
| Maternity | Add 25 |
| Medical / Surgical | Add 100 |
| Pediatric | Add 10 |

➔

Confirm

Cancel

- Once you click Confirm, the main site will be saved and displayed on the Project Sites Information screen.

Create New Submission - Sites

General
Executive Summary
Sites
Application
Correspondence
Decision
Contingencies
Post Approval
Access
Summary

Application Number:
 Facility Name: Example Community Hospital
 Project Description:

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 Add

Facility ID: NEW
 Site Type: Hospital
 Site Name: Example Community Hospital
 Physical Address: 123 Main Street, Anytown, NY 12208
 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:

Establish and construct a new community hospital.

Edit Summary

Modify Name/Address

Beds

Services

Remove Site

To add an *additional* site to an establishment project, please see the *Add a New Site to a Project* section below.

NYSE-CON Applicant Training - Sites

Add a New Site to a Project

The following instructions are to certify a new site for a facility that is already licensed or to add an additional site to an establishment project, not to relocate an existing site. You may only add a new site for the following facility types: D&TC, Hospice, Hospital, and RHCF.

1. From the drop-down list, select "Certify New Site".

Create New Submission - Sites

General | Executive Summary | **Sites** | Application | Correspondence | Decision | Contingency

Application Number:
Facility Name: Albany Medical Center Hospital
Project Description:

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

- Certify New Site (not for relocations)
- Albany Medical Center Hospital (1)
- Albany Medical Center Hospital Extension Clinic (7122)
- Mid-Hudson HIV Care Center (4228)
- Physical Med & Rehab Center of AMCH (7583)

Add

2. Click the Add button.
3. The Certify New Site screen will be displayed.

Note: The following steps must be completed to save the site to your project.

4. Enter the site name and address in the fields provided. *Note:* fields marked with an asterisk (*) are required.
5. In the Site Proposal Summary field, enter a brief description of the proposal for this site. e.g. "Certify a new extension clinic to provide primary care services."
6. Click the Continue button to proceed to the Add Services screen. You may click Cancel to return to the Project Sites Information screen without saving the site.

Certify New Site

Facility ID: NEW

*Site Name: Example Hospital Extension Clinic

*Street 1: 123 Main Street

Street 2:

*City: Anytown

State: NY

*ZipCode: 12309

*County: SCHENECTADY

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: Certify a new extension clinic

Continue Cancel

NYSE-CON Applicant Training - Sites

- Select the services that you want to add to the site by checking the corresponding checkbox or entering a numeric value between 1 and 9999 in the Add column.

Create New Submission - Add Services

General
Executive Summary
Sites
Application
Correspondence
Decision
Contingencies
Post Approval
Summary

Application Number:
Facility Name: Albany Medical Center Hospital
Project Description:

Site Information
Facility ID: NEW
Site Type: To Be Assigned
Site Name: Example Hospital Extension Clinic
Physical Address: 123 Main Street, Anytown, NY 12309
County: SCHENECTADY

Instructions

Click Continue to enter beds for this location. Click Cancel to return to the previous screen without saving.

In the table below, select the services you wish to add at this site and click Save. For service types with units, enter the number of units to add. The Proposed column will be automatically calculated after you have confirmed your changes.

Services Information

| Category | Current | Add | Remove | Proposed |
|---|---------|-------------------------------------|--------|----------|
| Ambulatory Surgery - Multi Speciality | | <input type="checkbox"/> | | |
| Ambulatory Surgery - Single Speciality | | <input type="checkbox"/> | | |
| Home Peritoneal Dialysis Training and Support | | <input type="checkbox"/> | | |
| Integrated Services (MH) | | <input checked="" type="checkbox"/> | | |
| Integrated Services (SUD) | | <input type="checkbox"/> | | |
| Lithotripsy | | <input type="checkbox"/> | | |
| Lithotripsy O/P | | <input type="checkbox"/> | | |
| Medical Services - Other Medical Specialties | | <input checked="" type="checkbox"/> | | |
| Medical Services - Primary Care | | <input checked="" type="checkbox"/> | | |
| Methadone Maintenance O/P | | <input type="checkbox"/> | | |
| Radiology-Therapeutic | | <input type="checkbox"/> | | |
| Radiology-Therapeutic O/P | | <input type="checkbox"/> | | |
| Renal Dialysis - Acute | | <input type="checkbox"/> | | |
| Renal Dialysis - Chronic O/P | | | | |
| Swing Bed Program | | | | |
| Transplant - Heart - Adult | | <input type="checkbox"/> | | |
| Transplant - Heart - Pediatric | | <input type="checkbox"/> | | |
| Transplant - Kidney | | <input type="checkbox"/> | | |
| Transplant - Liver | | <input type="checkbox"/> | | |
| Traumatic Brain Injury Program | | <input type="checkbox"/> | | |

Continue
Cancel

- If the site will have baseline services and you do not want to add additional services, check the box labeled "Baseline Services Only" (only available for sites with baseline services).

BASELINE SERVICES

Audiology

Medical Social Services

Nutritional

Physician Services

Dental

Medical Supplies Equipment and Appliances

Optometry

Services Information Check this box if this location has Baseline Services Only

| Category | Current | Add |
|----------|---------|-----|
| | | |

NYSE-CON Applicant Training - Sites

Note: Hospices do not make any selections on the Add Services screen. Hospice applicants should complete Schedule 22 and upload it to the Application tab.

Create New Submission - Add Services

General | Executive Summary | Sites | Application | Correspondence | Decision | Contingencies | Post Approval | Summary

Application Number:
 Facility Name: The Community Hospice Inc
 Project Description:

Site Information
 Facility ID: NEW
 Site Type: To Be Assigned
 Site Name: Example Hospice Location
 Physical Address: 123 Main Street, Anytown, NY 12309
 County: SCHENECTADY

Instructions
 Click Continue to enter beds for this location. Click Cancel to return to the previous screen without saving.
 Please complete and upload Schedule 22 to indicate how each service below will be delivered, directly or by contract.

BASELINE SERVICES

| | | |
|-----------------------|---|---|
| Audiology | Bereavement | Clinical Laboratory Service |
| Home Health Aide | Homemaker | Housekeeper |
| Inpatient Certified | Medical Social Services | Medical Supplies Equipment and Appliances |
| Nursing | Nutritional | Pastoral Care |
| Personal Care | Pharmaceutical Service | Physician Services |
| Psychology | Therapy - Occupational O/P | Therapy - Physical O/P |
| Therapy - Respiratory | Therapy - Speech Language Pathology O/P | |

Continue
Cancel

8. If the site is a type that can have beds, click the Continue button to proceed to the Add Beds screen. Otherwise skip to step 14 of this section. You may click Cancel to return to the previous screen without saving your changes.
9. If the Add Beds screen is displayed, enter a numeric value between 1 and 9999 in the Add column for each type of bed you want to add to the site.

Create New Submission - Add Beds

General | Executive Summary | Sites | Application | Correspondence | Decision | Contingencies | Post Approval | Summary

Application Number:
 Facility Name: Albany Medical Center Hospital
 Project Description:

Site Information
 Facility ID: NEW
 Site Type: To Be Assigned
 Site Name: Example Hospital Extension Clinic
 Physical Address: 123 Main Street, Anytown, NY 12309
 County: SCHENECTADY

Instructions
 Click "Save" to save your changes. Click "Cancel" to return to the previous screen without saving.
 In the table below, enter the number of beds you wish to add at this site and click Save. The Proposed column will be automatically calculated after you have confirmed your changes.

Beds Information Check this box if this location does not have beds

| Category | Current | Add | Remove | Proposed |
|--------------------------------------|---------|-----|--------|----------|
| AIDS | | 10 | | |
| Bone Marrow Transplant | | | | |
| Burns Care | | | | |
| Chemical Dependence - Rehabilitation | | 10 | | |
| Chemical Dependence - Detoxification | | 10 | | |
| Coma Recovery | | | | |
| Coronary Care | | | | |
| Transitional Care | | | | |
| Traumatic Brain Injury | | | | |
| Total | | | | |

Save
Cancel

NYSE-CON Applicant Training - Sites

- a. If the site will not have beds, check the box labeled “This location does not have beds”.

| | | |
|-------------------------|-------------------------------------|--|
| Beds Information | <input checked="" type="checkbox"/> | Check this box if this location does not have beds |
| Category | | Current |

10. Click the Save button to proceed to the Confirm New Site Information screen.
11. Review the information you have entered. If everything is correct, click the Confirm button. You may click Cancel to return to the previous screen without saving your changes.

Confirm New Site Information Changes

| | | | | | | | | |
|---------|-------------------|--------------|-------------|----------------|----------|---------------|---------------|---------|
| General | Executive Summary | Sites | Application | Correspondence | Decision | Contingencies | Post Approval | Summary |
|---------|-------------------|--------------|-------------|----------------|----------|---------------|---------------|---------|

Application Number:
Facility Name: Albany Medical Center Hospital
Project Description:

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

New Location

| | |
|-------------------------------|------------------------------------|
| Facility ID: | NEW |
| Site Name: | Example Hospital Extension Clinic |
| Physical Address: | 123 Main Street, Anytown, NY 12309 |
| County: | SCHENECTADY |
| Site Proposal Summary: | Certify a new extension clinic |

| Services Information | |
|--|-----------------|
| Service Category | Proposed Change |
| Integrated Services (MH) | Add |
| Medical Services - Other Medical Specialties | Add |
| Medical Services - Primary Care | Add |

| Beds Information | |
|--------------------------|-----------------|
| Bed Category | Proposed Change |
| No beds at this location | |

→

NYSE-CON Applicant Training - Sites

12. Once you click Confirm, the new site will be saved and displayed on the Project Sites Information screen.

Create New Submission - Sites

General | Executive Summary | **Sites** | Application | Correspondence | Decision | Contingencies | Post Approval | Summary

Application Number:
Facility Name: Albany Medical Center Hospital
Project Description:

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

Facility ID: NEW
Site Type: To Be Assigned
Site Name: Example Hospital Extension Clinic
Physical Address: 123 Main Street, Anytown, NY 12309
County: SCHENECTADY

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:
Certify a new extension clinic

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NYSE-CON Applicant Training - Sites

Add an Existing Site to a Project

The following instructions are for adding an existing site to a project to perform renovations, request changes in beds/services, and/or relocate the site.

1. From the drop-down list, select the site you want to add and click the Add button. Existing sites are listed in the following order: the main site followed by any extension clinics in alphabetical order with facility IDs in parentheses. School-based clinics are excluded. **Note:** If the main site is a hospital division, the list will contain all extension clinics of all divisions of the hospital.

Create New Submission - Sites

General | Executive Summary | **Sites** | Application | Correspondence | Decision | Contingency

Application Number:
Facility Name: Albany Medical Center Hospital
Project Description:

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

- Certify New Site (not for relocations)
- Albany Medical Center Hospital (1)
- Albany Medical Center Hospital Extension Clinic (7122)
- Mid-Hudson HIV Care Center (4228)
- Physical Med & Rehab Center of AMCH (7583)

Add

2. The Site Information screen will be displayed.

NYSE-CON Applicant Training - Sites

3. In the Site Proposal Summary field, enter a brief description of the proposal for this site. e.g. "Relocate the clinic."

Create New Submission - Sites

General | Executive Summary | **Sites** | Application | Correspondence | Decision | Contingencies | Post Approval | Summary

Application Number:
Facility Name: Albany Medical Center Hospital
Project Description:

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

Site Information

Facility ID: 7122
Site Type: Hospital Extension Clinic
Site Name: Albany Medical Center Hospital Extension Clinic
Physical Address: 66 Hackett Blvd, Albany, NY 12209
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:
Relocate the clinic

Continue Cancel

4. Click the Continue button to save the site to the Project Sites Information screen.

Create New Submission - Sites

General | Executive Summary | **Sites** | Application | Correspondence | Decision | Contingencies | Post Approval | Summary

Application Number:
Facility Name: Albany Medical Center Hospital
Project Description:

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 Add

Facility ID: 7122
Site Type: Hospital Extension Clinic
Site Name: Albany Medical Center Hospital Extension Clinic
Physical Address: 66 Hackett Blvd, Albany, NY 12209
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:
Relocate the clinic

Edit Summary

Modify Name/Address Services Remove Site

NYSE-CON Applicant Training - Sites

- If the proposal for this site includes a change in *services*, complete steps 5 through 14.
- If the proposal for this site includes a change in *beds*, complete steps 15 through 24.
- If the proposal for this site includes *relocating* the site, complete steps 25 through 31.

Add or Remove Services

5. Click the Services button.

6. The Services Information screen will be displayed. This screen displays the site's currently licensed services *at the time the site was added to the project*.

| Category | Current | Add | Remove | Proposed |
|---|---------|-----|--------|----------|
| Ambulatory Surgery - Multi Speciality | | | | |
| Ambulatory Surgery - Single Speciality | | | | |
| Ambulatory Surgery - Single Speciality | | | | |
| DSRIP Integrated Services (MH) | | | | |
| DSRIP Integrated Services (SUD) | | | | |
| Dental O/P | ✓ ← | | | |
| Home Hemodialysis Dialysis Training and Support | | | | |
| Home Peritoneal Dialysis Training and Support | | | | |
| Integrated Services (MH) | | | | |
| Integrated Services (SUD) | | | | |
| Lithotripsy O/P | | | | |
| Medical Services - Other Medical Specialties | | | | |
| Medical Services - Primary Care | ✓ ← | | | |
| Methadone Maintenance O/P | | | | |
| Radiology-Therapeutic O/P | | | | |
| Renal Dialysis - Chronic O/P | | | | |

7. To propose a change in services, click the Modify button.

NYSE-CON Applicant Training - Sites

8. The Modify Services screen will be displayed.

Create New Submission - Modify Services

General
Executive Summary
Sites
Application
Correspondence
Decision
Contingencies
Post Approval
Summary

Application Number:
Facility Name: Albany Medical Center Hospital
Project Description:

Site Information
Facility ID: 7122
Site Type: Hospital Extension Clinic
Site Name: Albany Medical Center Hospital Extension Clinic
Physical Address: 66 Hackett Blvd, Albany, NY 12209
County: ALBANY

Instructions

Click "Save" to save your changes. Click "Cancel" to return to the previous screen without saving.

In the table below, select the services you wish to add or remove at this site and click Save. For service types with units, enter the number of units to add or remove.

The Current column displays services certified for this site as of the date it was added to the project and is never updated.

The Proposed column will be automatically calculated after you have confirmed your changes.

Services Information

| Category | Current | Add | Remove | Proposed |
|---|---------|---------------------------------------|---------------------------------------|----------|
| Ambulatory Surgery - Multi Speciality | | <input type="checkbox"/> | | |
| Ambulatory Surgery - Single Speciality | | <input type="checkbox"/> | | |
| Ambulatory Surgery - Single Speciality | | <input type="checkbox"/> | | |
| DSRIP Integrated Services (MH) | | <input type="checkbox"/> | | |
| DSRIP Integrated Services (SUD) | | <input type="checkbox"/> | | |
| Dental O/P | ✓ | | <input checked="" type="checkbox"/> ← | |
| Home Hemodialysis Dialysis Training and Support | | <input type="checkbox"/> | | |
| Home Peritoneal Dialysis Training and Support | | <input type="checkbox"/> | | |
| Integrated Services (MH) | | <input type="checkbox"/> | | |
| Integrated Services (SUD) | | <input type="checkbox"/> | | |
| Lithotripsy O/P | | <input type="checkbox"/> | | |
| Medical Services - Other Medical Specialties | | <input checked="" type="checkbox"/> ← | | |
| Medical Services - Primary Care | ✓ | | <input type="checkbox"/> | |
| Methadone Maintenance O/P | | <input type="checkbox"/> | | |
| Radiology-Therapeutic O/P | | <input type="checkbox"/> | | |
| Renal Dialysis - Chronic O/P | | <input type="text"/> | | |

→

9. To add a service, check the corresponding checkbox or enter a numeric value between 1 and 9999 in the Add column.
10. To remove a currently licensed service, check the corresponding checkbox or enter a numeric value between 1 and 9999 in the Remove column.

NYSE-CON Applicant Training - Sites

Add or Remove Beds

15. Click the Beds button.

Project Sites Information

Make a Selection

Facility ID: 1
Site Type: Hospital
Site Name: Albany Medical Center Hospital
Physical Address: 43 New Scotland Avenue, Albany, NY 12208
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:**

Add 5 neonatal intensive care beds

16. The Beds Information screen will be displayed. This screen displays the site's currently licensed beds *at the time the site was added to the project.*

Create New Submission - Beds Information

Application Number:
Facility Name: Albany Medical Center Hospital
Project Description:

Site Information

Facility ID: 1
Site Type: Hospital
Site Name: Albany Medical Center Hospital
Physical Address: 43 New Scotland Avenue, Albany, NY 12208
County: ALBANY

Instructions

The Current column displays beds certified for this site as of the date it was added to the project and is never updated. Click Modify to add or remove beds at this site. Click Back to Sites to return to the Project Sites screen.

Beds Information

| Category | Current | Add | Remove | Proposed |
|--------------------------------------|---------|-----|--------|----------|
| AIDS | 30 | | | |
| Bone Marrow Transplant | 6 | | | |
| Burns Care | | | | |
| Chemical Dependence - Rehabilitation | | | | |
| Chemical Dependence - Detoxification | | | | |
| Coma Recovery | | | | |
| Coronary Care | 50 | | | |
| Intensive Care | 30 | | | |
| Maternity | 39 | | | |
| Medical / Surgical | 365 | | | |
| Neonatal Continuing Care | 14 | | | |
| Neonatal Intensive Care | 7 | | | |
| Neonatal Intermediate Care | 29 | | | |
| Pediatric | 44 | | | |
| Pediatric ICU | 15 | | | |
| Physical Medicine and Rehabilitation | 21 | | | |
| Prisoner | | | | |
| Psychiatric | 26 | | | |
| Respiratory | | | | |
| Special Use | | | | |
| Transitional Care | | | | |
| Traumatic Brain Injury | | | | |
| Total | 676 | | | |

17. To propose a change in beds, click the Modify button.

18. The Modify Beds screen will be displayed.

NYSE-CON Applicant Training - Sites

19. To add beds, enter a numeric value between 1 and 9999 in the Add column for each type of bed you want to add.
20. To remove currently licensed beds, enter a numeric value between 1 and 9999 in the Remove column for each type of bed you want to remove.

Create New Submission - Modify Beds

General
Executive Summary
Sites
Application
Correspondence
Decision
Contingencies
Post Approval
Summary

Application Number:
 Facility Name: Albany Medical Center Hospital
 Project Description:

Site Information
 Facility ID: 1
 Site Type: Hospital
 Site Name: Albany Medical Center Hospital
 Physical Address: 43 New Scotland Avenue, Albany, NY 12208
 County: ALBANY

Instructions

Click "Save" to save your changes. Click "Cancel" to return to the previous screen without saving.

In the table below, enter the number of beds you wish to add or remove at this site and click the Save button.
 The Current column displays beds certified for this site as of the date it was added to the project and is never updated.
 The Proposed column will be automatically calculated after you have confirmed your changes.

Beds Information

| Category | Current | Add | Remove | Proposed |
|--------------------------------------|------------|-----|--------|----------|
| AIDS | 30 | | | |
| Bone Marrow Transplant | 6 | | | |
| Burns Care | | | | |
| Chemical Dependence - Rehabilitation | | | | |
| Chemical Dependence - Detoxification | | | | |
| Coma Recovery | | | | |
| Coronary Care | 50 | | | |
| Intensive Care | 30 | 5 | | |
| Maternity | 39 | | | |
| Medical / Surgical | 365 | | | |
| Neonatal Continuing Care | 14 | | | |
| Neonatal Intensive Care | 7 | | | |
| Neonatal Intermediate Care | 29 | | | |
| Pediatric | 44 | | | |
| Pediatric ICU | 15 | | | |
| Physical Medicine and Rehabilitation | 21 | | | |
| Prisoner | | | | |
| Psychiatric | 26 | | | |
| Respiratory | | | | |
| Special Use | | | | |
| Transitional Care | | | | |
| Traumatic Brain Injury | | | | |
| Total | 676 | | | |

Save
Cancel

NYSE-CON Applicant Training - Sites

21. Click the Save button to proceed to the Confirm Beds Information Changes screen.

Confirm Beds Information Changes

General
Executive Summary
Sites
Application
Correspondence
Decision
Contingencies

Application Number:
 Facility Name: Albany Medical Center Hospital
 Project Description:

Site Information
 Facility ID: 1
 Site Type: Hospital
 Site Name: Albany Medical Center Hospital
 Physical Address: 43 New Scotland Avenue, Albany, NY 12208
 County: ALBANY

| Beds Information | |
|------------------|-----------------|
| Bed Category | Proposed Change |
| Intensive Care | Add 5 |

22. Review the information you have entered. If everything is correct, click the Confirm button. You may click Cancel to return to the previous screen without saving your changes.

23. After you have confirmed your changes, the Beds Information screen will be displayed showing the changes proposed.

Create New Submission - Beds Information

General
Executive Summary
Sites
Application
Correspondence
Decision
Contingencies
Post Approval
Summary

Application Number:
 Facility Name: Albany Medical Center Hospital
 Project Description:

Site Information
 Facility ID: 1
 Site Type: Hospital
 Site Name: Albany Medical Center Hospital
 Physical Address: 43 New Scotland Avenue, Albany, NY 12208
 County: ALBANY

Instructions

The Current column displays beds certified for this site as of the date it was added to the project and is never updated. Click Modify to add or remove beds at this site. Click Back to Sites to return to the Project Sites screen.

Beds Information

Print Beds View

| Category | Current | Add | Remove | Proposed |
|--------------------------------------|------------|----------|--------|------------|
| AIDS | 30 | | | 30 |
| Bone Marrow Transplant | 6 | | | 6 |
| Burns Care | | | | |
| Chemical Dependence - Rehabilitation | | | | |
| Chemical Dependence - Detoxification | | | | |
| Coma Recovery | | | | |
| Coronary Care | 50 | | | 50 |
| Intensive Care | 30 | 5 | | 35 |
| Maternity | 39 | | | 39 |
| Medical / Surgical | 365 | | | 365 |
| Neonatal Continuing Care | 14 | | | 14 |
| Neonatal Intensive Care | 7 | | | 7 |
| Neonatal Intermediate Care | 29 | | | 29 |
| Pediatric | 44 | | | 44 |
| Pediatric ICU | 15 | | | 15 |
| Physical Medicine and Rehabilitation | 21 | | | 21 |
| Prisoner | | | | |
| Psychiatric | 26 | | | 26 |
| Respiratory | | | | |
| Special Use | | | | |
| Transitional Care | | | | |
| Traumatic Brain Injury | | | | |
| Total | 676 | 5 | | 681 |

24. Click the Back to Sites button to return to the Project Sites Information screen.

NYSE-CON Applicant Training - Sites

Change the Name or Location of the Site (Relocation)

25. Click the Modify Name/Address button.

Facility ID: 7122
Site Type: Hospital Extension Clinic
Site Name: Albany Medical Center Hospital Extension Clinic
Physical Address: 66 Hackett Blvd, Albany, NY 12209
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:**

Relocate the clinic

Modify Name/Address **Services** **Remove Site** **Edit Summary**

26. The Modify Name/Address screen will be displayed. The current site name and address are displayed on the top half of the screen.

Modify Name/Address

Current:

Facility ID: 7122
Site Type: Hospital Extension Clinic
Site Name: Albany Medical Center Hospital Extension Clinic
Physical Address: 66 Hackett Blvd, Albany, NY 12209
County: ALBANY

Proposed:

Facility ID: 7122
Site Type: Hospital Extension Clinic
*Site Name: Albany Medical Center Primary Care
*Street 1: 487 Delaware Avenue
Street 2:
*City: Albany
State: NY
*ZipCode: 12209
*County: ALBANY

Save **Cancel**

27. In the bottom half of the screen, enter the proposed new name and/or address in the fields provided.
Note: fields marked with an asterisk (*) are required.

NYSE-CON Applicant Training - Sites

28. Click the Save button to proceed to the Confirm Site Information Changes screen. You may click Cancel to return to the Project Sites Information screen without saving your changes.

Confirm Site Information Changes

General | Executive Summary | **Sites** | Application | Correspondence | Decision | Contingencies | Post Approval | Summary

Application Number:
Facility Name: Albany Medical Center Hospital
Project Description:

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

Proposed Site Information

Facility ID: 7122
Site Type: Hospital Extension Clinic
Site Name: Albany Medical Center Primary Care
Address: 487 Delaware Avenue
City: Albany
ZipCode: 12209
County: ALBANY

Confirm Cancel

29. Review the information you have entered. If everything is correct, click the Confirm button. You may click Cancel to return to the previous screen without saving your changes.
30. After you have confirmed your changes, the Project Sites Information screen will be displayed.

Project Sites Information

Make a Selection Add

Facility ID: 7122
Site Type: Hospital Extension Clinic

Current:
Site Name: Albany Medical Center Hospital Extension Clinic
Physical Address: 66 Hackett Blvd, Albany, NY 12209
County: ALBANY

Proposed:
Site Name: Albany Medical Center Primary Care
Physical Address: 487 Delaware Avenue, Albany, NY 12209
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:
Relocate the clinic Edit Summary

Modify Name/Address Services Remove Site

31. The proposed name/address change will be displayed to the right of the current name and address for this site.

NYSE-CON Applicant Training - Sites

For Notices of Construction

You may only add an existing site to a Notice of Construction. Please follow steps 1 through 4 for *Adding an Existing Site to a Project* (pages 13 to 14).

After Submitting

After submitting, each project site displays a Site Added timestamp. Any sites added to the project before submission will have the same timestamp, which is the date and time of submission. Any sites added after submission, will have a unique timestamp.

| | |
|-------------------|---|
| Facility ID: | 7122 |
| Site Type: | Hospital Extension Clinic |
| Current: | |
| Site Name: | Albany Medical Center Hospital Extension Clinic |
| Physical Address: | 66 Hackett Blvd, Albany, NY 12209 |
| County: | ALBANY |
| Site Added: | 06/21/2018 11:12:18 AM |

| | |
|-------------------|--------------------------------------|
| Facility ID: | 7583 |
| Site Type: | Hospital Extension Clinic |
| Site Name: | Physical Med & Rehab Center of AMCH |
| Physical Address: | 618 Central Avenue, Albany, NY 12208 |
| County: | ALBANY |
| Site Added: | 06/21/2018 12:04:36 PM |

In addition, when a site is added after submitting, an email notification is sent to the project's designated contacts and the Department reviewers notifying them of the change.

Modify a Project Site

In this chapter you will learn how to:

- Modify a Site Proposal Summary
- Modify a site name or address
- Modify proposed services
- Modify proposed beds

Modify the Site Proposal Summary

1. Click the Edit Summary button.

The screenshot shows a web form titled "Project Sites Information". At the top, there is a dropdown menu with "Make a Selection" and an "Add" button. Below this, the form displays site details: Facility ID: NEW, Site Type: Hospital, Site Name: Example Community Hospital, Physical Address: 487 Delaware Avenue, Anytown, NY 12209, and County: ALBANY. There is an "Instructions" section with a text area for describing changes. Below that is the "*Site Proposal Summary:" section with a text area containing "Establish and construct a new community hospital". At the bottom right, the "Edit Summary" button is highlighted with a green arrow. At the bottom of the form, there are four buttons: "Modify Name/Address", "Beds", "Services", and "Remove Site".

2. The Site Information screen will be displayed.

NYSE-CON Applicant Training - Sites

3. Enter your changes in the Site Proposal Summary field.
4. Click the Save button to save your changes and return to the Project Sites Information screen.

Site Information

Facility ID: NEW
Site Type: Hospital
Site Name: Example Community Hospital
Physical Address: 487 Delaware Avenue, Anytown, NY 12209
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:**

Establish and construct a new community hospital.
Lorem ipsum dolor sit amet, consectetur adipiscing elit. Vestibulum tempor condimentum ligula in interdum. Vestibulum tempus sed eros eget hendrerit. Quisque vehicula purus sed viverra ornare. Nam in leo et justo scelerisque dictum sit amet aliquam libero. Integer ultrices felis dolor, eu cursus quam viverra at. Pellentesque pulvinar dui sit amet lacus commodo varius. Curabitur condimentum non neque ac sagittis.



After Submitting

After submitting, the Site Proposal Summary displays a Summary Modified timestamp. Initially, this is the date and time the site was added to the project. When the summary is modified, the Summary Modified timestamp will change.

Facility ID: NEW
Site Type: Hospital
Site Name: Example Community Hospital
Physical Address: 487 Delaware Avenue, Anytown, NY 12209
County: ALBANY
Site Added: 06/20/2018 02:07:20 PM

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:** **Summary Modified:** 06/21/2018 04:13:26 PM

Establish and construct a new community hospital. Lorem ipsum dolor sit amet, consectetur adipiscing elit. Vestibulum tempor condimentum ligula in interdum. Vestibulum tempus sed eros eget hendrerit. Quisque vehicula purus sed viverra ornare. Nam in leo et justo scelerisque dictum sit amet aliquam libero.

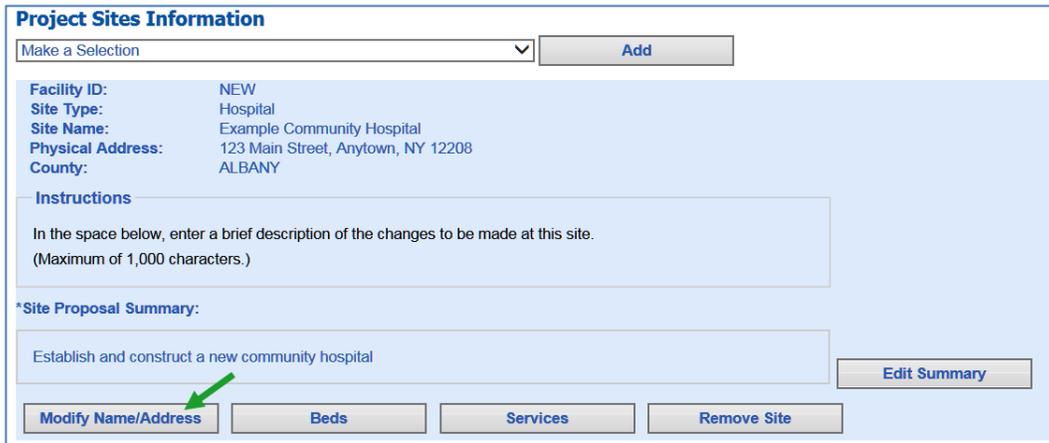
 [Print information for this site](#)

In addition, an email notification is sent to the project's designated contacts and the Department reviewers notifying them of the change. The previous site proposal summary is saved in the site's history and may be viewed by opening the site information report. (See Site Reports on page 37 for more information.)

NYSE-CON Applicant Training - Sites

Modify the Site Name or Address

1. Click the Modify Name/Address button.



Project Sites Information

Make a Selection

Facility ID: NEW
Site Type: Hospital
Site Name: Example Community Hospital
Physical Address: 123 Main Street, Anytown, NY 12208
County: ALBANY

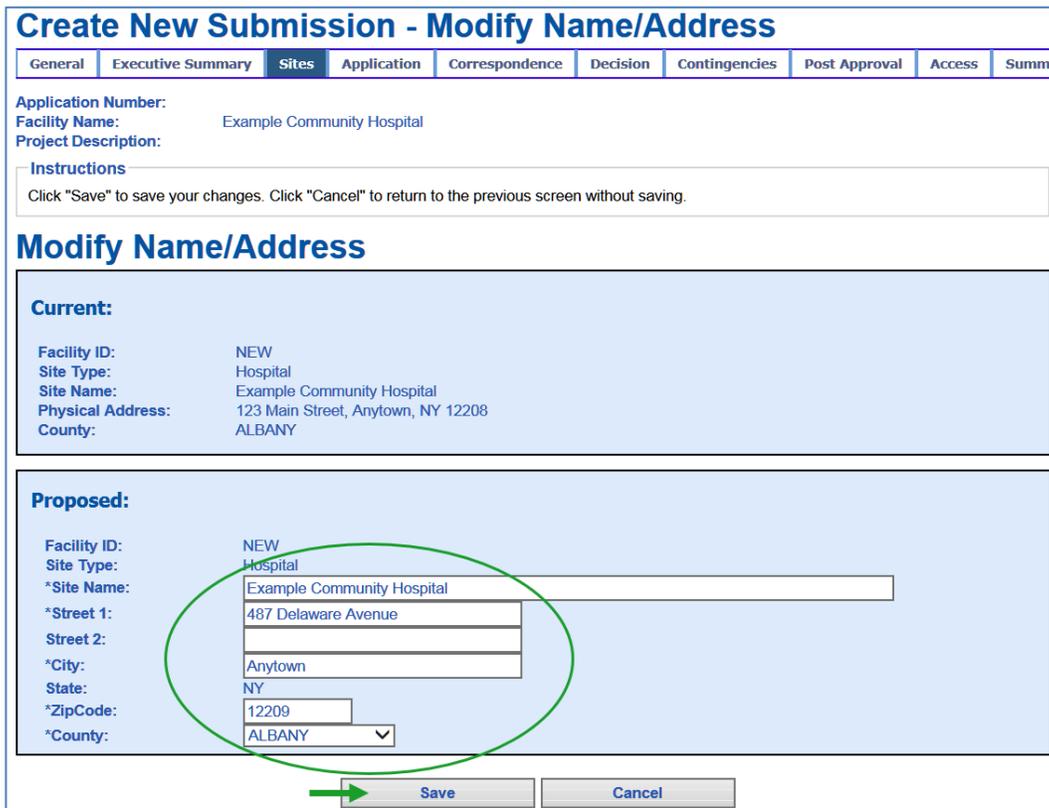
Instructions

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:**

Establish and construct a new community hospital

2. The Modify Name/Address screen will be displayed. The current site name and address are displayed on the top half of the screen.
3. In the bottom half of the screen, enter the proposed new name and/or address in the fields provided.
4. Click the Save button to proceed to the Confirm Site Information Changes screen.



Create New Submission - Modify Name/Address

General Executive Summary **Sites** Application Correspondence Decision Contingencies Post Approval Access Summa

Application Number:
Facility Name: Example Community Hospital
Project Description:

Instructions

Click "Save" to save your changes. Click "Cancel" to return to the previous screen without saving.

Modify Name/Address

Current:

Facility ID: NEW
Site Type: Hospital
Site Name: Example Community Hospital
Physical Address: 123 Main Street, Anytown, NY 12208
County: ALBANY

Proposed:

Facility ID: NEW
Site Type: Hospital
*Site Name: Example Community Hospital
*Street 1: 487 Delaware Avenue
Street 2:
*City: Anytown
State: NY
*ZipCode: 12209
*County: ALBANY

NYSE-CON Applicant Training - Sites

- Review the information you have entered. If everything is correct, click the Confirm button. You may click Cancel to return to the previous screen without saving your changes.

Confirm Site Information Changes

| | | | | | | | | | |
|---------|-------------------|--------------|-------------|----------------|----------|---------------|---------------|--------|-------|
| General | Executive Summary | Sites | Application | Correspondence | Decision | Contingencies | Post Approval | Access | Summa |
|---------|-------------------|--------------|-------------|----------------|----------|---------------|---------------|--------|-------|

Application Number:
Facility Name: Example Community Hospital
Project Description:

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

Proposed Site Information

| | |
|---------------------|----------------------------|
| Facility ID: | NEW |
| Site Type: | Hospital |
| Site Name: | Example Community Hospital |
| Address: | 487 Delaware Avenue |
| City: | Anytown |
| ZipCode: | 12209 |
| County: | ALBANY |

- After you have confirmed your changes, the Project Sites Information screen will be displayed showing the changes made.

Project Sites Information

| | |
|--------------------------|--|
| Facility ID: | NEW |
| Site Type: | Hospital |
| Site Name: | Example Community Hospital |
| Physical Address: | 487 Delaware Avenue, Anytown, NY 12209 |
| 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:**

Establish and construct a new community hospital

- If you are modifying the proposed name/address of an existing site that will be relocated, the change will be displayed to the right of the current name and address for this site.

Project Sites Information

| | | | | | | | |
|--|--|--|--|---|---------------------------------------|--------------------------|--------|
| Facility ID: | 7122 | | | | | | |
| Site Type: | Hospital Extension Clinic | | | | | | |
| Site Name: | <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Current: Albany Medical Center Hospital Extension Clinic</td> <td style="width: 50%;">Proposed: Albany Medical Center Primary Care</td> </tr> <tr> <td>Physical Address: 66 Hackett Blvd, Albany, NY 12209</td> <td>487 Delaware Avenue, Albany, NY 12209</td> </tr> <tr> <td>County: ALBANY</td> <td>ALBANY</td> </tr> </table> | Current: Albany Medical Center Hospital Extension Clinic | Proposed: Albany Medical Center Primary Care | Physical Address: 66 Hackett Blvd, Albany, NY 12209 | 487 Delaware Avenue, Albany, NY 12209 | County: ALBANY | ALBANY |
| Current: Albany Medical Center Hospital Extension Clinic | Proposed: Albany Medical Center Primary Care | | | | | | |
| Physical Address: 66 Hackett Blvd, Albany, NY 12209 | 487 Delaware Avenue, Albany, NY 12209 | | | | | | |
| County: ALBANY | 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:**

Relocate the clinic

NYSE-CON Applicant Training - Sites

After Submitting

After submitting, when the site name or address is modified, the Site Modified timestamp will be displayed under the Site Added timestamp. If you have modified the *main site* of an Establishment CON project, the changes will **not** update the information displayed on the General Tab.

| | |
|-------------------|--|
| Facility ID: | NEW |
| Site Type: | Hospital |
| Site Name: | Example Community Hospital |
| Physical Address: | 489 Delaware Avenue, Anytown, NY 12209 |
| County: | ALBANY |
| Site Added: | 06/20/2018 02:07:20 PM |
| Site Modified: | 06/21/2018 04:20:57 PM |

In addition, an email notification is sent to the project's designated contacts and the Department reviewers notifying them of the change. The previous site name and address is saved in the site's history and may be viewed by opening either the Site Report or the All Sites Report with history. (See Reports on page 36 for more information.)

Modify Services

1. Click the Services button.

| | |
|---|---|
| Facility ID: | 7122 |
| Site Type: | Hospital Extension Clinic |
| Site Name: | Albany Medical Center Hospital Extension Clinic |
| Physical Address: | 66 Hackett Blvd, Albany, NY 12209 |
| 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: | |
| Relocate the clinic | |
| <input type="button" value="Edit Summary"/> | |
| <input type="button" value="Modify Name/Address"/> <input type="button" value="Services"/> <input type="button" value="Remove Site"/> | |

NYSE-CON Applicant Training - Sites

- To add a service, check the corresponding checkbox or enter a numeric value between 1 and 9999 in the Add column.
- To remove a currently licensed service, check the corresponding checkbox or enter a numeric value between 1 and 9999 in the Remove column.
- To remove a previously proposed service change, uncheck the corresponding checkbox or enter a new numeric value in either the Add or Remove column.

In the example below, a new service has been requested and the request to remove a service has been removed.

Create New Submission - Modify Services

General
Executive Summary
Sites
Application
Correspondence
Decision
Contingencies
Post Approval
Summary

Application Number:
Facility Name: Albany Medical Center Hospital
Project Description:

Site Information
Facility ID: 7122
Site Type: Hospital Extension Clinic
Site Name: Albany Medical Center Hospital Extension Clinic
Physical Address: 66 Hackett Blvd, Albany, NY 12209
County: ALBANY

Instructions

Click "Save" to save your changes. Click "Cancel" to return to the previous screen without saving.

In the table below, select the services you wish to add or remove at this site and click Save. For service types with units, enter the number of units to add or remove.

The Current column displays services certified for this site as of the date it was added to the project and is never updated.

The Proposed column will be automatically calculated after you have confirmed your changes.

Services Information

| Category | Current | Add | Remove | Proposed |
|---|---------|-------------------------------------|--------------------------|----------|
| Ambulatory Surgery - Multi Speciality | | <input type="checkbox"/> | | |
| Ambulatory Surgery - Single Speciality | | <input type="checkbox"/> | | |
| Ambulatory Surgery - Single Speciality | | <input type="checkbox"/> | | |
| DSRIP Integrated Services (MH) | | <input type="checkbox"/> | | |
| DSRIP Integrated Services (SUD) | | <input type="checkbox"/> | | |
| Dental O/P | ✓ | | <input type="checkbox"/> | |
| Home Hemodialysis Dialysis Training and Support | | <input type="checkbox"/> | | |
| Home Peritoneal Dialysis Training and Support | | <input type="checkbox"/> | | |
| Integrated Services (MH) | | <input checked="" type="checkbox"/> | | |
| Integrated Services (SUD) | | <input type="checkbox"/> | | |
| Lithotripsy O/P | | <input type="checkbox"/> | | |
| Medical Services - Other Medical Specialties | | <input checked="" type="checkbox"/> | | ✓ |
| Medical Services - Primary Care | ✓ | | <input type="checkbox"/> | ✓ |
| Methadone Maintenance O/P | | <input type="checkbox"/> | | |
| Radiology-Therapeutic O/P | | <input type="checkbox"/> | | |
| Renal Dialysis - Chronic O/P | | | | |

Save
Cancel

- Click the Save button to proceed to the Confirm Service Information Changes screen.

NYSE-CON Applicant Training - Sites

- Review the information you have entered. If everything is correct, click the Confirm button. You may click Cancel to return to the previous screen without saving your changes.

Confirm Services Information Changes

| | | | | | | |
|---------|-------------------|--------------|-------------|----------------|----------|---------------|
| General | Executive Summary | Sites | Application | Correspondence | Decision | Contingencies |
|---------|-------------------|--------------|-------------|----------------|----------|---------------|

Application Number:
 Facility Name: Albany Medical Center Hospital
 Project Description:

Site Information
 Facility ID: 7122
 Site Type: Hospital Extension Clinic
 Site Name: Albany Medical Center Hospital Extension Clinic
 Physical Address: 66 Hackett Blvd, Albany, NY 12209
 County: ALBANY

| Services Information | |
|--|-----------------|
| Service Category | Proposed Change |
| Integrated Services (MH) | Add |
| Medical Services - Other Medical Specialties | Add |

- After you have confirmed your changes, the Services Information screen will be displayed showing the updated changes proposed.

Create New Submission - Services Information

| | | | | | | | | |
|---------|-------------------|--------------|-------------|----------------|----------|---------------|---------------|---------|
| General | Executive Summary | Sites | Application | Correspondence | Decision | Contingencies | Post Approval | Summary |
|---------|-------------------|--------------|-------------|----------------|----------|---------------|---------------|---------|

Application Number:
 Facility Name: Albany Medical Center Hospital
 Project Description:

Site Information
 Facility ID: 7122
 Site Type: Hospital Extension Clinic
 Site Name: Albany Medical Center Hospital Extension Clinic
 Physical Address: 66 Hackett Blvd, Albany, NY 12209
 County: ALBANY

Instructions

The Current column displays services certified for this site as of the date it was added to the project and is never updated. Click Modify to add or remove services at this site. Click Back to Sites to return to the Project Sites screen.

Services Information

Print Services View

| Category | Current | Add | Remove | Proposed |
|---|---------|-----|--------|----------|
| Ambulatory Surgery - Multi Speciality | | | | |
| Ambulatory Surgery - Single Speciality | | | | |
| Ambulatory Surgery - Single Speciality | | | | |
| Chemical Dependence - Withdrawal O/P | | | | |
| DSRIP Integrated Services (MH) | | | | |
| DSRIP Integrated Services (SUD) | | | | |
| Dental O/P | ✓ | ← | → | ✓ |
| Home Hemodialysis Dialysis Training and Support | | | | |
| Home Peritoneal Dialysis Training and Support | | | | |
| Integrated Services (MH) | | ✓ | ← | → |
| Integrated Services (SUD) | | | | |
| Lithotripsy O/P | | | | |
| Medical Services - Other Medical Specialties | | ✓ | ← | → |
| Medical Services - Primary Care | ✓ | ← | → | ✓ |
| Methadone Maintenance O/P | | | | |
| Radiology-Therapeutic O/P | | | | |
| Renal Dialysis - Chronic O/P | | | | |

- Click the Back to Sites button to return to the Project Sites Information screen.

NYSE-CON Applicant Training - Sites

After Submitting

After submitting, the Services Information screen displays a Last Modified timestamp. Initially, this is the date and time the site was added to the project. When services are modified, the Last Modified timestamp will change.

| Category | Current | Add | Remove | Proposed |
|---------------------------------------|---------|-----|--------|----------|
| Ambulatory Surgery - Multi Speciality | | ✓ | | ✓ |

In addition, an email notification is sent to the project's designated contacts and the Department reviewers notifying them of the change. The previously proposed services are saved in the site's history and may be viewed expanding the Services Information History section at the bottom of the screen or opening either the Site Services Report with History or the Site Report. (See Site Report on page 37 for more information.)

To view a history item in the Services Information History section, click the toggle to expand an item or click the Expand All button.

Services Information History: 06/21/2018 11:12:18 AM

Services Information

Expand All

Services Information History: 06/21/2018 11:12:18 AM

Services Information

| Service Category | Proposed Change |
|--|-----------------|
| Integrated Services (MH) | Add |
| Medical Services - Other Medical Specialties | Add |
| Medical Services - Primary Care | Add |

Expand All

The above example displays the proposed service changes immediately prior to being modified.

Modify Beds

1. Click the Beds button.

Project Sites Information

Make a Selection

Facility ID: 1
Site Type: Hospital
Site Name: Albany Medical Center Hospital
Physical Address: 43 New Scotland Avenue, Albany, NY 12208
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:

Add 5 neonatal intensive care beds

NYSE-CON Applicant Training - Sites

- The Beds Information screen will be displayed. The screen will display the site's currently licensed beds at the time the site was added to the project and any proposed changes that were entered previously.
- Click the Modify button.

Create New Submission - Beds Information

General
Executive Summary
Sites
Application
Correspondence
Decision
Contingencies
Post Approval
Summary

Application Number:
Facility Name: Albany Medical Center Hospital
Project Description:

Site Information
Facility ID: 1
Site Type: Hospital
Site Name: Albany Medical Center Hospital
Physical Address: 43 New Scotland Avenue, Albany, NY 12208
County: ALBANY

Instructions

The Current column displays beds certified for this site as of the date it was added to the project and is never updated. Click Modify to add or remove beds at this site. Click Back to Sites to return to the Project Sites screen.

Beds Information

Print Beds View

| Category | Current | Add | Remove | Proposed |
|--------------------------------------|------------|----------|--------|------------|
| AIDS | 30 | | | 30 |
| Bone Marrow Transplant | 6 | | | 6 |
| Burns Care | | | | |
| Chemical Dependence - Rehabilitation | | | | |
| Chemical Dependence - Detoxification | | | | |
| Coma Recovery | | | | |
| Coronary Care | 50 | | | 50 |
| Intensive Care | 30 | 5 | | 35 |
| Maternity | 39 | | | 39 |
| Medical / Surgical | 365 | | | 365 |
| Neonatal Continuing Care | 14 | | | 14 |
| Neonatal Intensive Care | 7 | | | 7 |
| Neonatal Intermediate Care | 29 | | | 29 |
| Pediatric | 44 | | | 44 |
| Pediatric ICU | 15 | | | 15 |
| Physical Medicine and Rehabilitation | 21 | | | 21 |
| Prisoner | | | | |
| Psychiatric | 26 | | | 26 |
| Respiratory | | | | |
| Special Use | | | | |
| Transitional Care | | | | |
| Traumatic Brain Injury | | | | |
| Total | 676 | 5 | | 681 |

➔
Modify
Back to Sites

- The Modify Beds screen will be displayed.

NYSE-CON Applicant Training - Sites

- To add beds, enter a numeric value between 1 and 9999 in the Add column for each type of bed you want to add.
- To remove currently licensed beds, enter a numeric value between 1 and 9999 in the Remove column.
- To modify a previously proposed bed change, enter a numeric value between 1 and 9999 or delete the value previously entered in either the Add or Remove column.

In the example below, a new request to add beds has been added and the request to add intensive care beds has been changed to a request to remove intensive care beds.

Create New Submission - Modify Beds

General
Executive Summary
Sites
Application
Correspondence
Decision
Contingencies
Post Approval
Summary

Application Number:
Facility Name: Albany Medical Center Hospital
Project Description:

Site Information
Facility ID: 1
Site Type: Hospital
Site Name: Albany Medical Center Hospital
Physical Address: 43 New Scotland Avenue, Albany, NY 12208
County: ALBANY

Instructions

Click "Save" to save your changes. Click "Cancel" to return to the previous screen without saving.

In the table below, enter the number of beds you wish to add or remove at this site and click the Save button.

The Current column displays beds certified for this site as of the date it was added to the project and is never updated.

The Proposed column will be automatically calculated after you have confirmed your changes.

Beds Information

| Category | Current | Add | Remove | Proposed |
|--------------------------------------|---------|-----|--------|----------|
| AIDS | 30 | | | 30 |
| Bone Marrow Transplant | 6 | | | 6 |
| Burns Care | | | | |
| Chemical Dependence - Rehabilitation | | | | |
| Chemical Dependence - Detoxification | | | | |
| Coma Recovery | | | | |
| Coronary Care | 50 | | | 50 |
| Intensive Care | 30 | | 5 | 35 |
| Maternity | 39 | | | 39 |
| Medical / Surgical | 365 | | | 365 |
| Neonatal Continuing Care | 14 | | | 14 |
| Neonatal Intensive Care | 7 | | | 7 |
| Neonatal Intermediate Care | 29 | | | 29 |
| Pediatric | 44 | | | 44 |
| Pediatric ICU | 15 | 5 | | 15 |
| Physical Medicine and Rehabilitation | 21 | | | 21 |
| Prisoner | | | | |
| Psychiatric | 26 | | | 26 |
| Respiratory | | | | |
| Special Use | | | | |
| Transitional Care | | | | |
| Traumatic Brain Injury | | | | |
| Total | 676 | | | 681 |

→

- Click the Save button to proceed to the Confirm Beds Information Changes screen.

NYSE-CON Applicant Training - Sites

- Review the information you have entered. If everything is correct, click the Confirm button. You may click Cancel to return to the previous screen without saving your changes.

Confirm Beds Information Changes

General
Executive Summary
Sites
Application
Correspondence
Decision
Contingencies

Application Number:
 Facility Name: Albany Medical Center Hospital
 Project Description:

Site Information
 Facility ID: 1
 Site Type: Hospital
 Site Name: Albany Medical Center Hospital
 Physical Address: 43 New Scotland Avenue, Albany, NY 12208
 County: ALBANY

| Beds Information | |
|------------------|-----------------|
| Bed Category | Proposed Change |
| Intensive Care | Remove 5 |
| Pediatric ICU | Add 5 |

- After you have confirmed your changes, the Beds Information screen will be displayed showing the updated changes proposed.

After Submitting

After submitting, the Beds Information screen displays a Last Modified timestamp. Initially, this is the date and time the site was added to the project. When beds are modified, the Last Modified timestamp will change.

Beds Information Check this box if this location does not have beds Last Modified Date: 06/22/2018 11:41:30 AM

Print Beds View
 Print Beds with History

| Category | Current | Add | Remove | Proposed |
|----------|---------|-----|--------|----------|
| AIDS | | | | |

In addition, an email notification is sent to the project’s designated contacts and the Department reviewers notifying them of the change. The previously proposed beds are saved in the site’s history and may be viewed expanding the Beds Information History section at the bottom of the screen or opening either the Site Beds Report with History or the Site Report. (See Site Report on page 37 for more information.)

To view a history item in the Beds Information History section, click the toggle to expand an item or click the Expand All button.

Beds Information History:

▶
Beds Information
06/21/2018 11:12:18 AM

Beds Information History:

▼
Beds Information
06/21/2018 11:12:18 AM

| Bed Category | Proposed Change |
|--------------------------|-----------------|
| No beds at this location | |

The above example displays the proposed bed changes immediately prior to being modified.

NYSE-CON Applicant Training - Sites

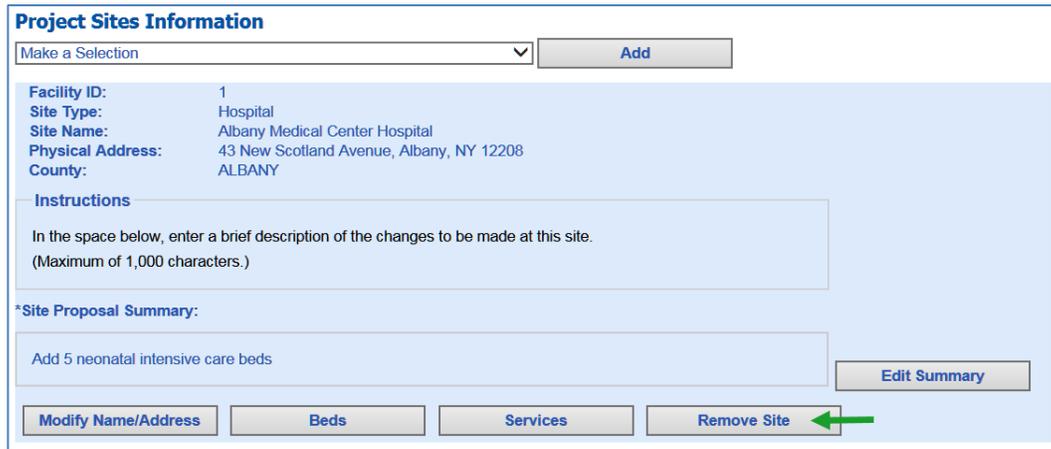
Remove a Project Site

Before Submitting

The following instructions are for removing a project site from a project before it has been submitted.

Reminder: your project *must* have at least one project site to submit it.

1. Click the Remove button on the site you wish to remove.



Project Sites Information

Make a Selection

Facility ID: 1
Site Type: Hospital
Site Name: Albany Medical Center Hospital
Physical Address: 43 New Scotland Avenue, Albany, NY 12208
County: ALBANY

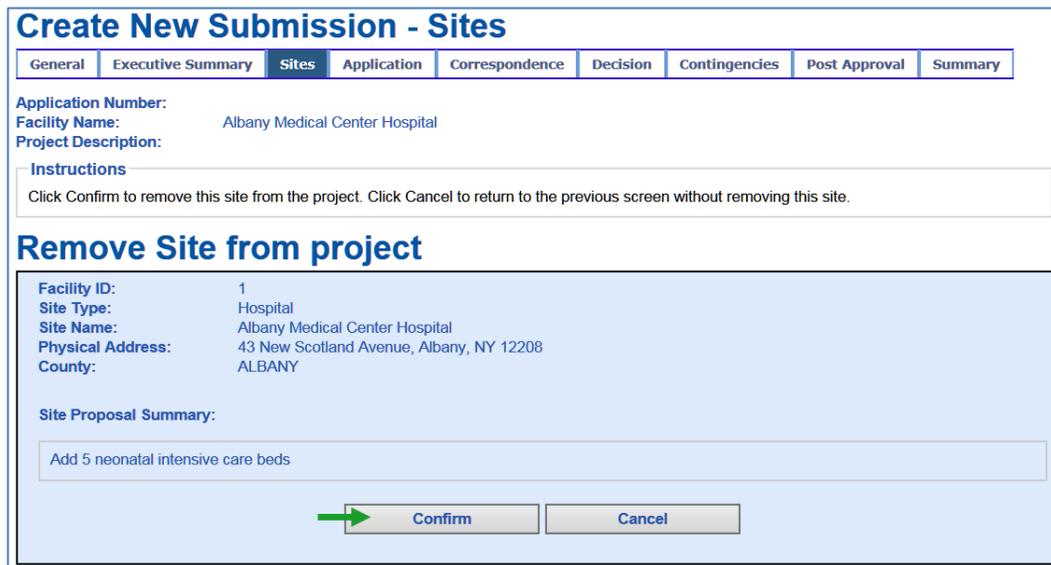
Instructions

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:

Add 5 neonatal intensive care beds

2. The Remove Site from Project screen will be displayed.
3. Click Confirm to proceed or Cancel to return to the Project Sites Information screen without removing the site.



Create New Submission - Sites

General Executive Summary **Sites** Application Correspondence Decision Contingencies Post Approval Summary

Application Number:
Facility Name: Albany Medical Center Hospital
Project Description:

Instructions

Click Confirm to remove this site from the project. Click Cancel to return to the previous screen without removing this site.

Remove Site from project

Facility ID: 1
Site Type: Hospital
Site Name: Albany Medical Center Hospital
Physical Address: 43 New Scotland Avenue, Albany, NY 12208
County: ALBANY

Site Proposal Summary:

Add 5 neonatal intensive care beds

4. Once you click Confirm, the Project Sites Information screen will be displayed.

NYSE-CON Applicant Training - Sites

After Submitting

After submitting, if there is only *one* project site, you cannot remove it until you have added another site.

When you remove a site after submission, an email notification is sent to the project's designated contacts and the Department reviewers notifying them of the change. The removed site is listed under the Cancelled Proposed Sites section at the bottom of the Project Sites Information screen.



To view sites that have been removed from the project, click the toggle on the left.



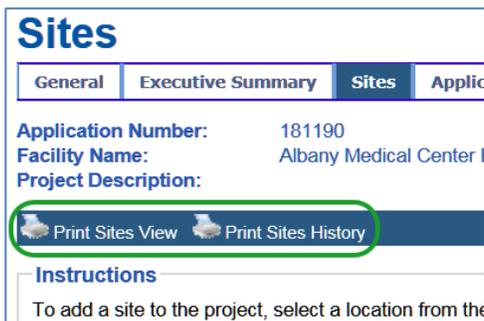
The Removed Date is displayed under the Site Added date on the removed site.

Reports

Printable reports are available in Adobe PDF format after submission for all sites with or without history, each individual site with history, and each site's beds or services with or without history.

All Sites Report

This report displays all project sites, including any requested changes to beds or services, in a single report. This report is also available with the history of changes. To access these reports, click one of the links near the top of the screen labeled "Print Sites View" or "Print Sites History".



NYSE-CON Applicant Training - Sites

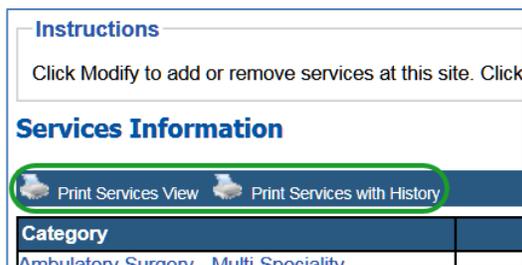
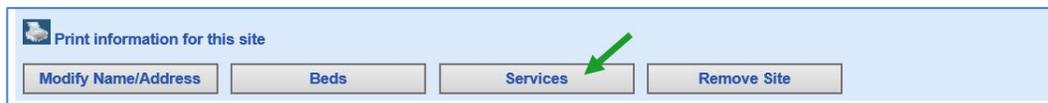
Site Report

Each site has its own report which includes any requests to change beds or services and the history of any changes made to the site after submission. To access a site report, click the link labeled “Print information for this site”.



Site Services Report

This report displays the proposed service changes for the site with or without history. To access these reports, click on the site’s Services button to open the Services Information screen and click one of the links near the top of the screen labeled “Print Services View” or “Print Services with History”.



Site Beds Report

This report displays the proposed bed changes for the site with or without history. To access these reports, click on the site’s Beds button to open the Beds Information screen and click one of the links near the top of the screen labeled “Print Beds View” or “Print Beds with History”.

