

# **2016-2017 SLP Dementia Care Setting Application**

## **Frequently Asked Questions & Answers**

### **GENERAL APPLICATION**

**Can the management company of a currently operating SLP submit an application as a “currently-certified” provider?**

Answer: Yes.

**Does “currently-certified SLP providers” mean the corporate provider or the specific SLP site/location?**

Answer: “Currently-certified SLP providers” applies to the current ownership or management. The application does not have to be for the site of the certified SLP building.

**Do existing SLP operators have an advantage over new applicants not currently owning/operating a SLP building? Does getting to submit applications earlier create an advantage for existing SLP providers other than they have longer to submit documentation?**

Answer: Currently-certified SLP providers were invited to submit applications earlier because it was anticipated some would choose to add-on to an existing building or convert a floor or wing. In most instances, an application for this type of proposal could be compiled and submitted more quickly than that of a brand new location. Additionally, some components of the Department’s review of currently-certified SLP providers are shorter, specifically criminal background checks and financial reviews.

**Is there a limit to how many sites an applicant (same ownership) can submit?**

Answer: No.

**Can currently-certified providers submit applications September 1—December 30, 2016 for existing buildings and those under construction?**

Answer: Yes.

**Can a licensed assisted living provider apply for the SLP dementia care setting?**

Answer: Yes. If approved, the entire building would have to convert to SLP.

**Can applicants submit attachments to the application after March 31, 2017 for a justified reason?**

Answer: Yes, with approval by the Department.

**When does HFS plan to announce awardees under this expansion?**

Answer: A specific date cannot be provided, however, the Department is making review of dementia care setting applications a priority.

**Can an owner or operator be awarded more than one site under this expansion?**

Answer: Yes.

**Are there a target number of approvals and/or apartments that HFS is projecting?**

Answer: No.

## **LOCATION**

**What is HFS' definition of "expansion" for the existing 5 dementia pilot sites? Can the expansion be down the street or several miles away?**

Answer: Expansion of dementia care settings for those certified for the pilot program could be additional apartments for the current dementia unit, an additional dementia unit at the current location or a dementia unit at a new location in the same county.

**Are certain geographic areas being targeted?**

Answer: No.

**Can a dementia care setting be located within a NF as long as they are separated?**

Answer: No.

**Would HFS entertain/approve applications for increasing units of existing SLP's attached to, or adjacent to, a Nursing Home?**

Answer: The Department would consider this, as long as the plans were compliant with the new HCBS rules. CMS has the final decision after the Department's Heightened Scrutiny review.

**If yes, do you believe CMS would allow such settings?**

Answer: Yes, as long as they can be verified as a community setting. CMS has the final decision after the Department's Heightened Scrutiny review.

## **PHYSICAL STRUCTURE**

**Have the building requirement rules changed?**

Answer: No.

**Can a unit have more than 20 apartments?**

Answer: No, but multiple dementia units are allowed.

**Could dementia and conventional residents be on the same floor of the building if separated physically (door/wall)?**

Answer: Yes.

**If apartments are specifically designed for double occupancy, can SLP providers have two unrelated residents in such apartments?**

Answer: Yes, as long as federal community setting rules regarding shared living arrangement are met.

**Will there be exceptions to dementia care units above the 2<sup>nd</sup> story?**

Answer: No.

## **RESIDENT CHARGES**

**Are charges for Medicaid residents sharing an apartment the same for the dementia care setting?**

Answer: Yes.

**What is the resident's financial portion in a dementia care setting?**

Answer: Resident charges in a dementia care setting are the same as in a conventional SLP. Room and board charges are the same and residents are allowed to keep a \$90 personal allowance.

**Can residents in a dementia care setting receive SNAP benefits?**

Answer: Yes.

## **MISCELLANEOUS**

**What are HFS' thoughts regarding CMS review or response to this expansion under the waiver renewal and state transition plan?**

Answer: The Department does not anticipate any problems.

**Is the minimum number of individuals who are Medicaid 25%, or some other percentage?**

Answer: If a higher rate is charged to private pay residents, twenty-five percent (25%) of apartments must be reserved for Medicaid residents.

**Does HFS consider the existing Medicaid rates for Dementia Care adequate? Will there be opportunities for increases in the model going forward.**

Answer: There are no immediate plans to review SLP rates at this time.

**Can residents without dementia be allowed to reside in the dementia unit (not a relative/friend/caregiver of resident with dementia)?**

Answer: No. Residents must meet the admission criteria for the dementia care setting and be assessed to require a safety intervention of alarmed, delayed exit doors. The rule does allow for a family member/caregiver to reside with the dementia resident in the dementia care setting, however, that

individual would need to meet the admission requirements for a conventional SLP setting, such as age. The apartment must also meet rule requirements for double occupancy.