



Department
of Health

Assisted Living Program (ALP) Public Need Methodology

November 7, 2019

Overview

New York State Social Services Law § 461-l(3)(m)(i) authorizes the Department to develop a public need methodology for the approval of Assisted Living Programs (ALPs) effective April 1, 2023.

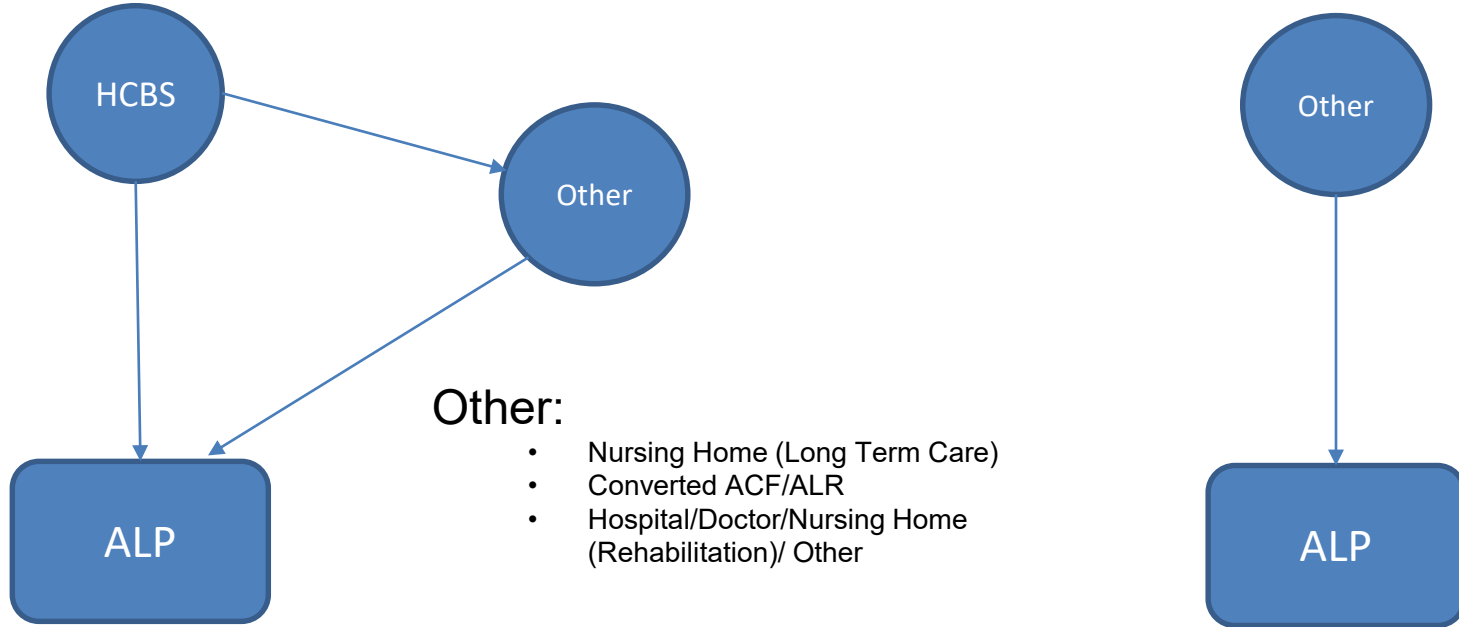
October 7th Recap

- Discussed factors for consideration of public need methodology;
- ALP planning areas;
- Applicant submitted information for a public need consideration;
- General discussion about the Assisted Living Program
 - Constraints
 - Discussed the term: Quality

November 7th Objectives

- Continued workgroup discussion about an ALP resident admission entry path and to come to a consensus on the standard entry path;
- Explore the potential measurable factors that could be used in an ALP need methodology calculation;
- Additional workgroup discussion on applicant submitted information for need consideration when the need calculation shows no need;
- Continued workgroup discussion on ALP planning areas

Resident Originating Path to an ALP Admission



Two Potential Resident Cohorts for the Public Need Methodology Calculation

Resident Cohorts	Description
HCBS (MLTC)	Residents that have enrolled in a MLTC plan for HCBS benefits
Other	Residents that have not been enrolled in MLTC plan for HCBS benefits

Potential Measurement Factors for a Public Need Methodology

Potential Measurement Factors	Description	Data Source
MLTC (HCBS) enrollment age	The average enrollment age for an individual that joins a MLTC for HCBS benefits	Visual Data Mining for Medicaid -Salient (this has not been confirmed)
MLTC (HCBS) length of utilization	The average length of benefit utilization for an individual that joins MLTC for HCBS benefits	Visual Data Mining for Medicaid - Salient (this has not been confirmed)
MLTC (HCBS) county enrollment trend	The annualized growth rate percentage by county for MLTC enrollees	Visual Data Mining for Medicaid- Salient (this has not been confirmed)
ACF admission age	The average admission age for an individual admitted to an ACF	Currently not captured
ACF spend down period	The average period for an ACF resident to spend down their assets achieve Medicaid eligibility	Currently not captured

Potential Measurement Factors for a Public Need Methodology

Potential Measurement Factors	Description	Data Source
ALP length of stay	The average length of stay for an individual admitted to an ALP	Currently not captured
ALP admission age	The average admission age for an individual admitted to an ALP	Currently not captured
ALP conversion - ACF	The percent of ALP residents that originated from an ACF.	Currently not captured
ALP conversion – Nursing Homes	The percent of ALP residents that originated from a Nursing Home (LTC).	Currently not captured



Potential Measurement Factors for a Public Need Methodology- ALP Admission Referral Source

ALP Admission Referral Source	Admission Description	Data Source
HCBS (MLTC)	Resident was enrolled in a MLTC for HCBS benefits	Not captured (potentially from UAS)
Nursing Home (LTC)	Resident was living at Nursing Home for LTC	Not captured (potentially from UAS)
ACF	Resident was living at an ACF and not enrolled in a MLTC for HCBS benefits	Not captured (potentially from UAS)
Hospital/Doctor/Nursing Home (Rehabilitation)/Other	Residents that do fall under the HCBS (MTLC), Nursing Home (LTC), ACF categories	Not captured (potentially from UAS)

Potential Static Factors for a Public Need Methodology

Potential Static Factors	Description
ACF occupancy percentage	The ideal ACF occupancy percentage. Participants identified 90% as a potential percentage.
ALP county occupancy percentage	The ideal ALP county occupancy percentage.
ALP licensed bed maximum percentage	The maximum percentage of ACF beds that can be licensed as ALP beds.

Applicant Submitted Information When the Public Need Methodology Calculation Demonstrates No Need

Applicant Submitted Information	Description
Contiguous counties	Applicant will demonstrate the public ALP need through the addition of contiguous counties.
County level geriatric planning	Applicant will establish the public ALP need through geriatric planning where county occupancy level is not at a need level.
Community quality improvement	Applicant will establish the public ALP need through information that supports establishing an ALP will improve the quality of care in the community.

ALP Planning Areas

- Discuss the impacts if congregate care is more accessible than HCBS
- New York City planning
- Contiguous counties planning pros and cons

Next Steps

- Review the PowerPoint presented today
- Please submit questions, and input to alpinitiative@health.ny.gov For the subject line, please enter ALP Need Methodology