

New York State Department of Health
Special Needs Assisted Living Voucher Program for Persons with Dementia Manual

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Table of Contents

Section 1: Program Description.....	3
1.1 Program Overview	3
1.2 Eligibility	4
1.3 Definitions.....	5
Section 2: Voucher Program Average Regional Monthly Service Cost	6
Section 3: Facility Voucher Attestation.....	7
Section 4: Contact Information	9

Section 1: Program Description

1.1 Program Overview

The 2018-19 State Budget Agreement authorized the Department of Health (Department) to establish a voucher demonstration program for individuals with Alzheimer's disease and/or dementia living in a Special Needs Assisted Living Residence (SNALR). In this demonstration program, the State will subsidize the cost of a SNALR for those individuals living with Alzheimer's disease and/or dementia who are unable to privately pay and would otherwise be discharged to a skilled nursing facility.

The goal of this demonstration program is to keep residents in the least restrictive setting. At this time, the Department has budget authority to conduct this demonstration program for two (2) years.

This law authorizes 200 vouchers to be issued through this application process. To obtain a voucher, applicants must demonstrate financial need and be living with Alzheimer's disease and/or dementia in a SNALR, along with other factors described below. The information provided in this document and in the application will be used to determine eligibility for acceptance into the demonstration program.

The Department will receive applications and issue vouchers based on an applicant's ability to meet the eligibility criteria and the order in which the applications are received. A waiting list will be established once 200 vouchers have been issued. The vouchers will be effective for one year from the time of issuance. The Department will notify recipients of the opportunity to renew the voucher for the second year of the demonstration.

The dollar amount of the voucher will depend on the applicant's ability to contribute to their monthly service fee. The law authorizes voucher amounts of up to 75 percent of the regional monthly cost of a SNALR. Please see the chart below.

Level of Applicant Contribution	Voucher Payment
If an applicant can contribute 0 – 25 percent of their monthly service fee	75 percent of the average regional monthly cost
If an applicant can contribute 26 – 50 percent of their monthly service fee	50 percent of the average regional monthly cost
If an applicant can contribute 51 percent or above of their monthly service fee	25 percent of the average regional monthly cost

The SNALRs participating in this program have agreed to accept this payment. Voucher recipients are expected to continue to contribute to their monthly payment to the facility which will be articulated in a written supplemental agreement between the resident and the facility.

Residents accepted into the program who exceed the SNALR retention standards may still be transferred to a higher level of care. This is a two-year demonstration program, not an entitlement program.

1.2 Eligibility

Eligibility Criteria

Applications will be reviewed in the order in which they are received and evaluated on the following eligibility criteria:

1. **Medical Information:**

Applicants will need to submit their most recent medical evaluation that contains a diagnosis of Alzheimer's disease and/or dementia, and demonstrates that they meet SNALR retention standards.

2. **Residency Requirement:**

Applicants must have resided at their current facility for a period of no less than 12 months.

3. **Income Standard:**

Applicants must demonstrate they have a household income that is equal to or less than the median household income in the region in which they reside. This information, included below, is based on census data.¹ The median monthly income standard by region² is the following:

Capital Region \$4,624

- Albany, Columbia, Delaware, Fulton, Greene, Montgomery, Rensselaer, Saratoga, Schenectady, and Schoharie counties.

Central NY Region \$4,260

- Broome, Cayuga, Cortland, Chenango, Herkimer, Jefferson, Lewis, Madison, Oneida, Onondaga, Oswego, Otsego, Tioga, Tompkins, and St. Lawrence counties.

Finger Lakes Region \$4,254

- Chemung, Livingston, Monroe, Ontario, Orleans, Schuyler, Seneca, Steuben, Wayne, and Yates counties.

Hudson Valley Region \$6,274

- Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, and Westchester counties.

Long Island \$8,008

- Nassau and Suffolk counties.

New York City Region* \$7,382

- Bronx, Kings, New York, Queens, and Richmond Counties.

Northeastern NY Region \$4,374

- Clinton, Essex, Franklin, Hamilton, Warren, and Washington Counties.

Western NY Region \$4,051

- Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Niagara, and Wyoming Counties.

¹ <https://www.census.gov/quickfacts/fact/map/NY/INC110216>

² * For this demonstration program, the New York City Region will have an income standard that is 150% of the median monthly income of the region.

1.3 Definitions

Definitions:

Household: Includes applicant and spouse, if applicable.

Income: Includes your wages, if any, and any social security benefits, capital gains, windfalls, and/or distributions from pensions, trusts, IRAs, or any other annuity.

Resources: Includes the value of the primary household, if any, any investment properties, vehicles, and/or life insurance policies, as well as cash-on-hand (such as a savings or checking account) or items that can be readily converted to cash, such as financial institution accounts, stocks, bonds, mutual fund shares, and promissory notes.

Section 2: Voucher Program Average Regional Monthly Service Cost

Special Needs Assisted Living Voucher Demonstration Program for Persons with Dementia Average Regional Monthly Service Cost

The Average Regional Monthly Service Cost was determined from information reported on the Cost of Care Survey submitted by 111 of the 121 (92%) of the licensed Special Needs Assisted Living Residences (SNALRs) in the State. The figure considers the cost of a private SNALR room, including any flat fees or tiers (where there were multiple tiers reported, an average figure of all tiers was used). The facility cost of care was weighted by its SNALR bed capacity, and assumed 100% occupancy. The weighted monthly service costs by facility were then combined and averaged by region to determine the Average Regional Monthly Service Cost.

Region	Average Monthly Service Cost	75% Voucher	50% Voucher	25% Voucher
Capital Albany, Columbia, Delaware, Fulton, Greene, Montgomery, Rensselaer, Saratoga, Schenectady, and Schoharie.	\$7,118	\$5,339	\$3,559	\$1,780
Central Broome, Cayuga, Cortland, Chenango, Herkimer, Jefferson, Lewis, Madison, Oneida, Onondaga, Oswego, Otsego, Tioga, Tompkins, and St. Lawrence.	\$5,939	\$4,454	\$2,970	\$1,485
Finger Lakes Chemung, Livingston, Monroe, Ontario, Orleans, Schuyler, Seneca, Steuben, Wayne, and Yates.	\$6,079	\$4,559	\$3,040	\$1,520
Hudson Valley Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, and Westchester	\$9,993	\$7,495	\$4,997	\$2,498
Long Island Nassau and Suffolk.	\$9,089	\$6,817	\$4,545	\$2,272
NYC Bronx, Kings, New York, Queens, and Richmond.	\$10,602	\$7,952	\$5,301	\$2,650
Northeast Clinton, Essex, Franklin, Hamilton, Warren, and Washington.	\$5,800	\$4,350	\$2,900	\$1,450

Section 3: Facility Voucher Attestation

Facilities licensed as a Special Needs Assisted Living Residence must complete and send a Facility Attestation form to participate in the Voucher Demonstration Program.

Please see the next page for the Attestation form, which must be completed and signed by a facility administrator by August 1, 2018. The Attestation Form must also include the State Financial System (SFS) identification number, which is a ten-digit number entered in the SFS site when a financial transaction is processed. If your organization is receiving reimbursement by the State for criminal history record checks for its employees, you have an SFS vendor identification number. Voucher payments will be made to facilities participating in this demonstration program using the SFS vendor identification number. Please check with your facility's accounting or finance department to obtain your SFS Vendor Identification.

Once the attestation form is completed and signed, please scan and email to:

ALTCteam@health.ny.gov.

**Special Needs Assisted Living Voucher Demonstration Program
for Persons with Dementia Facility Attestation**

Adults with Alzheimer's disease and/or dementia who can no longer afford to pay privately for a Special Needs Assisted Living Residence (SNALR) generally have no other option than to enroll in the Medicaid Program. This enrollment often results in a transition from private pay residence in an assisted living facility to a skilled nursing facility. In order to explore options to prevent such transitions and to keep residents in the least restrictive setting possible, the State of New York has enacted the Special Needs Assisted Living Voucher Demonstration Program for Persons with Dementia and invites the State's SNALRs to partner with the State in this initiative.

The 2018 final State Budget Agreement authorized the Department of Health to establish a voucher demonstration program to subsidize the cost of assisted living for individuals with Alzheimer's disease and/or dementia. This demonstration program has budget authority for two (2) years.

In this demonstration program, the Department may subsidize up to 75% of the average private pay rate in the region for the monthly cost of a SNALR for an approved applicant living with a diagnosis of Alzheimer's disease and/or dementia who is, to the best knowledge available, unable to privately pay and would otherwise be discharged to a skilled nursing facility. This program authorizes 200 vouchers to be issued through an application process to those applicants who demonstrate financial need and meet the necessary level of care and retention standards for a SNALR. Each approved voucher shall be authorized for twelve (12) months, with the ability of renewal.

Facilities licensed as a Special Needs Assisted Living Residence have the option of participating in the Special Needs Assisted Living Voucher Demonstration Program for Persons with Dementia. The Department will set a cap on the number of voucher residents each facility will be required to accommodate. The cap will be set once the Department knows the total number of facilities that have agreed to participate in the program.

Now, therefore, I, _____, acting as administrator of the SNALR identified here below, hereby represent and warrant, on behalf of the facility under my administration, that I have the authority to bind the facility; that the facility will actively participate in the Special Needs Assisted Living Voucher Demonstration Program for Persons with Dementia. Residents participating in the program will be expected to continue to contribute to their monthly payment to the facility, which will be articulated in a written supplemental agreement between the resident and the facility. The facility shall notify the Department of Health if and when a voucher recipient exceeds the retention standards for a SNALR or leaves the residence for any reason. I further represent and warrant that the facility will indemnify and hold the New York State Department of Health harmless from and against any and all claims, causes of action, damages, liabilities, expenses, and obligations that may arise in connection with the facility's participation in this Program.

Name of Facility: _____

Operating Certificate #: _____

County in which Facility operates: _____

SFS Vendor Identification #: _____

Name of Administrator: _____

Signed: _____ Date: _____

Section 4: Contact Information

For more information on the Special Needs Assisted Living Voucher Demonstration Program for Persons with Dementia, please email ALTCteam@health.ny.gov or visit our website at https://www.health.ny.gov/facilities/adult_care/voucher/.