Howard A. Zucker, M.D., J.D. Acting Commissioner of Health Sue Kelly Executive Deputy Commissioner

September 30, 2014

NEW YORK state department of HEALTH

> DAL: DAL 14-21 Subject: Enhancing the Quality of Adult Living (EQUAL) Program for SFY 2014-2015

Dear Operator:

The Department of Health is pleased to announce the availability of funding under the Enhancing the Quality of Adult Living (EQUAL) Program. Operators of Adult Homes and Enriched Housing Programs who provide services to individuals receiving Supplemental Security Income (SSI) and/or Safety Net benefits (SN) are eligible for these payments.

The purpose of this program is to enhance both residents' quality of care and life experience in adult care facilities. All facility operators that apply will receive a per person amount based on the number of SSI and Safety Net residents reported on their 2013 census. An additional funding allotment will be provided to facilities with a capacity of 100 beds and under. EQUAL payments shall be made for the purpose of providing quality care and services to eligible residents to better meet resident needs and improve the physical environment of a facility.

The Operator will be bound by the requirements, terms and conditions of the program as stated in statute and compliance with applicable Department of Health regulations, and other procedural requirements related to the program. This includes, but is not limited to, the timely completion of reports on the Health Commerce System (HCS), such as census reports, financial reports and all surveys applicable to Adult Care Facilities.

Funds will not be awarded to subsidize daily operational expenses such as staffing or utilities. Please refer to Section A: (6) of the instructions for a more detailed description of the acceptable use of program funds. Operators must engage the Resident Council in the proposed spending plan and certify that the Resident Council has approved the proposed spending plan.

The total payment for all facilities applying for EQUAL will be \$6,532,000.

The EQUAL SFY 2014-2015 application has been converted to an electronic application that will be posted on the Health Commerce System (HCS) effective October 1, 2014. The application can be accessed by logging onto HCS at the following link: <u>https://commerce.health.state.ny.us</u>. On the HCS Home Page, click "My Applications" \rightarrow "HCBC" \rightarrow "Data Entry" and at the "Select an Activity" drop down menu \rightarrow select "ACF EQUAL Application SFY 2014-2015." Supplementary materials only for "Schedule D: Expenditure Plan" may be emailed to the EQUAL Bureau Mail Log at <u>equal@health.ny.gov</u>. Applicants electing to participate must complete all certifications in Section E.



Applications must be electronically submitted by <u>5:00 pm on Friday, November 7, 2014</u>. After this date and time, the application will no longer be available. *Hard copies will not be accepted*.

Note: Facility operators who do not wish to participate in the EQUAL Program should complete Section A: Facility Information and Section D: Acceptance/Declination to Participate and submit their declination of participation through the HCS.

Facility operators who do not have an established Statewide Financial System (SFS) account will need to register by completing the "New York State Office of the State Comptroller Substitute Form W-9: Request for Taxpayer Identification Number and Certification." Completed forms should be emailed to <u>sfsvidr@health.ny.gov</u>. Please expedite your application to allow for additional processing. Once you submit your completed Substitute Form W-9, the Office of the State Comptroller's Vendor Management Unit will contact you directly to complete the process of establishing a vendor identification number, which is required to set up your SFS account. Additional information can be obtained at the following sites:

OSC: http://www.osc.state.ny.us/vendors/index.htm

SFS: <u>http://www.sfs.ny.gov/</u>

Questions regarding the EQUAL Program should be directed to Nancy Nowakowski or Dorothy Persico at (518) 408-1133, or by e-mail at equal@health.ny.gov. We look forward to receiving your application.

Sincerely,

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Valerie A. Deetz, Director Division of ACF and Assisted Living Surveillance

cc: D. Sheppard K. Servis J. Treacy M. Nazarko D. Persico N. Nowakowski M. Miller

Attachments