

NEW YORK
state department of
HEALTH

Nirav R. Shah, M.D., M.P.H.
Commissioner

Sue Kelly
Executive Deputy Commissioner

February 14, 2013

DAL: DAL 13-08
Subject: Enhancing the Quality of Adult
Living (EQUAL) Program for SFY 2012-
2013

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 2011 census. Additional funding will also be provided on a sliding scale to facilities with a capacity of 100 beds and under as outlined below. 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.

Funds will not be awarded to subsidize daily operational expenses such as staffing or utilities. The Department of Health will allow the use of EQUAL funds (full or partial) for emergency preparedness and restoration projects resulting from natural disasters. The Department strongly recommends facilities use their EQUAL funds for disaster and emergency preparedness items, e.g. generators. Please refer to Section A(6) of the instructions for a more detailed description of the acceptable use of program funds.

As an alternative to the two percent cut in the Medicaid rate to Assisted Living Programs (ALPs), which was agreed upon by the four major associations representing adult care facilities and ALPs, this EQUAL appropriation will be reduced by \$860,000. However, this reduction will only be applied to facilities designated as an ALP, which receives Medicaid reimbursement. Consequently, the total payment for all facilities applying for EQUAL will be \$6,916,700.

Please complete the attached application, proposed spending plan, operator certification statements, and obtain and document the resident council approval form and return it to the address below. **Note: Facility operators who do not wish to participate in the Program should complete the application heading and the *Decline to Participate* Section and return the application to the address below:**

**New York State Department of Health
Division of Adult Care Facility/Assisted Living Surveillance
875 Central Avenue
Albany, New York 12206**

Before the reduction is applied to ALPs in lieu of the 2% cut in the Medicaid rate, facility operators who participate in the EQUAL Program will receive an estimated per person payment as follows:

All facilities: \$384.77 per SSI or SN recipient

Additional Payments:

Facilities under 41 bed capacity:	\$602.50 per SSI or SN recipient
Facilities with a capacity between 41 – 60 beds:	\$340.66 per SSI or SN recipient
Facilities with a capacity between 61 – 80 beds:	\$282.85 per SSI or SN recipient
Facilities with a capacity between 81 – 100 beds:	\$218.05 per SSI or SN recipient

ALPs should expect to receive an estimated thirty three (33) percent reduction in the above EQUAL methodology in lieu of the 2% cut to the Medicaid rate.

Applications are due by 4pm on Thursday, February 28, 2013.

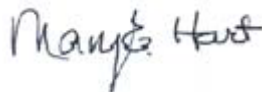
Facilities who do not have an established Statewide Financial System (SFS) account will need to register by completing Section H of this application (New York State Office of the State Comptroller Substitute Form W-9: Request for Taxpayer Identification Number and Certification). If your facility does not already have an established SFS account, please expedite your application to allow for additional processing. Once the application is received we will forward your completed Substitute Form W- to the Office of the State Comptroller's Vendor Management Unit, who 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: <http://www.sfs.ny.gov/>

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

Sincerely,



Mary E. Hart
Director
Division of Adult Care Facility/Assisted Living Surveillance

cc: Karen Westervelt
Lora Lefebvre
Keith Servis
Jennifer Treacy
Michael Nazarko
Dorothy Persico

Attachments