

State of HCBS: Impact of the State Budget on Home Care and Assisted Living Providers

OALA + Provider ALW Rate Increase Impact

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ABOUT OALA

The Ohio Assisted Living Association (OALA)

Established in 1993

Represents 618 AL Providers in Ohio

Both Private Pay + ALW

ONLY represents AL

Assisted Living is All We Do.

About Us

OALA's MISSION is to support an aging Ohio by promoting choice, accessibility, and quality in Ohio's assisted living communities. To advance this mission, OALA provides its members with first-class education, regulatory support, advocacy, and thought leadership.

OALA's VISION is a strengthened and versatile assisted living industry that innovates to meet the changing needs of a rapidly aging Ohio and the aging services workforce.

The future of the senior living industry depends, in part, on how well we tell our story to the public. OALA is committed to finding ways to promote understanding and favorability of assisted living amongst prospective residents and their families.

Assisted Living is All We Do.

OALA Legislative + Regulatory Team



Victoria Gresh, Executive Director



Andrew Minton, Lobbyist



Melissa Shanmugam, Associate Director



Mara White, Lobbyist

THE STATE BUDGET

The Budget Ask

- ► OALA worked to impact all industry-related issues in the Ohio Budget.
- ► OALA worked with the Governor's Office, ODA and ODM to ensure a significant increase in the Ohio Assisted Living Waiver (ALW) program.
- ► OALA stressed the importance of the need for a significant investment in reimbursement, the need for an enhanced memory care rate, as well as any/all measures to help address the workforce issues that are affecting our long-term-care-industry.

SFY 2023-2024 Budget Outcome: Rates

Base Rate increased from three tiers of \$54.76, \$65.73,\$76.67 to \$130/day

Critical Access Rate add \$15/day (\$145.00 daily rate)

Memory Care Add-on capped at \$155/day

Rate increases in Aging Rules

BASE RATE REQUIREMENTS

RCF qualifications:

Licensure: Only a provider who maintains a current, valid RCF license from ODH and maintains compliance with Chapter 3721. of the Revised Code and Chapters 3701-13 and 3701-16 of the Administrative Code qualifies to provide this service.

Public information: The provider shall display the following on its website:

- ▶ Whether the provider is currently certified by ODA to provide the basic service or both the basic service and memory care.
- ► Whether the provider is currently accepting individuals who are enrolling in the assisted living program or MyCare Ohio.

Resident units:

► The resident unit is a single-occupancy resident unit designated solely for the individual, except as permitted...

The provider may allow an individual to share a single-occupancy resident unit only if all of the following conditions exist:

- The individual requests to share the individual's unit.
- ► The individual shares the individual's unit with a person with whom the individual has an existing relationship.
- ► ODA's designee verifies that the conditions of this rule are met and authorizes sharing the unit in the individual's person-centered services plan.

- ► Lock: The resident unit has a lock that allows the individual to control access to the resident unit at all times unless the individual's person-centered services plan indicates otherwise.
- ▶ Bathroom: The resident unit includes a bathroom with a toilet, a sink, and a shower or bathtub, all of which are in working order.
- ► **Social space:** The resident unit includes identifiable space, separate from the sleeping area, that provides seating for the individual and one or more visitors for socialization.
- ► Common areas: The provider shall provide common areas accessible to the individual, including a dining area (or areas) and an activity center (or centers). A multi-purpose common area may serve as both a dining area and an activity center.

Staff availability: The provider shall maintain adequate staffing levels to comply with rule <u>3701-16-05</u> of the Administrative Code in a timely manner in response to individual's unpredictable care needs, supervisory needs, emotional needs, and reasonable requests for services through the resident call system twenty-four hours per day.

Minors: No staff member under eighteen years of age qualifies to do any of the following:

- Assist with medication administration.
- Provide transportation.
- ► Provide personal care **without on-site supervision**, in accordance with rule <u>3701-16-06</u> of the Administrative Code.

Initial staff qualifications/training

- Principles and philosophy of assisted living.
- The aging process.
- Cuing, prompting, and other means of effective communication.
- Common behaviors for cognitively-impaired individuals, behaviorallyimpaired individuals, or other individuals and strategies to redirect or de-escalate those behaviors.
- Confidentiality.
- ► The person-centered planning process in rule <u>5160-44-02</u> of the Administrative Code, which includes supporting individuals' full access to the greater community.
- ► The individual's right to assume responsibility for decisions related to the individual's care.

Quarterly assessments: The provider's RN or LPN shall contact the individual at least quarterly to assess, and retain a record of, all of the following:

- ► The individual's satisfaction with the individual's activity plan and whether the activity plan continues to meet the individual's needs.
- ► Whether the individual's records demonstrate that the individual is receiving activities as ODA or its designee authorized them in the individual's person-centered service plan.
- ► Whether staff are providing personal care services to the individual in a manner that complies with rule <u>3701-16-09</u>

CRITICAL ACCESS RATE

Rate Breakdown: Critical Access Rate

- Applies when more than 50% of residents are on the AL Waiver
- Add \$15/day
- Base rate (\$130) + Critical Access rate (+\$15/day) = \$145

Critical Access Rate Requirements

Effective July 1, 2024, as approved by CMS, the provider qualifies for the Critical Access Rate if they meet certain requirements, including:

- At least 50% of residents must be enrolled in the Assisted Living Waiver, MyCare Ohio Waiver, or the Program for All-Inclusive Care for the Elderly (PACE) program.
- ► The provider must intend to provide assisted living services for the duration of the state fiscal year in which they were initially certified.

The Ohio Department of Aging (ODA) + the Ohio Department of Medicaid (ODM) updated rules:

➤ ODA Rule: OAC 173-39-02.16

➤ ODM Rule: OAC 5160-1-06.5

Critical Access Rate Requirements

Providers can apply for the Critical Access Rate can contact the ODA and should review the issued Guidance.

- ▶ ODA will ask providers if they want to add the Critical Access Rate to their contract once approved.
- ► The provider must intend to provide assisted living services for the duration of the state fiscal year in which they were initially certified.
- ODA Contact: Meredith Finley mfinley@age.ohio.gov

MEMORY CARE ADD-ON

Rate Breakdown: Memory Care Add-on

- Capped at \$155/day
- \rightarrow ALW + MC = \$155/day (cap)
- Critical Access doesn't matter if Memory Care

Memory Care Requirements

The provider qualifies for certification to provide memory care only if the provider meets all of the following standards:

► The provider displays a purpose statement on its website that explains the difference between the provider's basic service and its memory care, or only a memory care purpose statement if that is the exclusive service the provider offers.

The provider designates each single-occupancy resident unit in which it plans to provide memory care as one of the following:

- ► A resident unit in a memory care section of the RCF. The provider may add a single-occupancy resident unit to an existing memory care section even if the resident unit is not next door to the existing section.
- ▶ A resident unit in an RCF that provides only memory care.

Memory Care Requirements

- ► A staff member who successfully completed the training requirements provides or arranges for at least three therapeutic, social, or recreational activities listed in rule 3701-16-11 of the Administrative Code per day with consideration given to individuals' preferences and designed to meet individuals' needs.
- The provider ensures safe access to outdoor space for individuals.
- The provider assists each individual who makes a call through the resident call system in person in fewer than ten minutes after the individual initiates the call.

Staff availability: The provider qualifies for certification to provide memory care only if the provider meets all of the following standards

- ► The provider has a sufficient number of RNs or LPNs on call or on-site at all times for individuals receiving memory care.
- The provider maintains the appropriate direct-care staff-to-resident ratio below for its memory care:
- ▶ If providing memory care and the basic service at the same time, a ratio for the provider's memory care that is at least twenty percent higher than the provider's ratio for its basic service.

Memory Care Requirements

Initial staff qualifications:

A staff member qualifies to provide memory care without in-person supervision only if the staff member successfully completes training all of the following topics in addition to the topics listed under paragraph (C)(5) of this rule: (Same as Base Rate)

- Principles and philosophy of assisted living.
- The aging process.
- Cuing, prompting, and other means of effective communication.
- Common behaviors for cognitively-impaired individuals, behaviorally-impaired individuals, or other individuals and strategies to redirect or de-escalate those behaviors.
- Confidentiality.
- ► The person-centered planning process in rule <u>5160-44-02</u> of the Administrative Code, which includes supporting individuals' full access to the greater community.
- The individual's right to assume responsibility for decisions related to the individual's care.
- In-service training: The provider shall ensure that each staff member providing this service successfully completes any training requirements in rule 3701-16-06 of the Administrative Code and makes verification of successful completion of those requirements available to ODA or its designee upon request.

PROVIDER IMPACT

AL Medicaid Waiver Provider Impact: Jan. 2024 - July 2025

Source: Ohio Department of Medicaid

	January 2024	*July 2025	% Increase
Ending Caseload: AL	3253	3611	11.01%
Contracted Providers: AL	353	373	5.67%

^{*}July data. Actual as of 10/17/2024 reflected in presentation.

State of Ohio Snapshot

- AL Providers Statewide: 804
- Accept AL Waiver: 412
- % AL Providers Accepting Waiver: 0.51%

OALA Member Mix Snapshot

- *OALA Members: 618
- Private Pay: 618
- Accept AL Waiver: 244
- ▶ % OALA Members Accepting Waiver: 0.39%

*Membership tracked annually.

Benefits to our Residents + Families

Increased access to services

Increased options of care communities

Aging in place

Benefits to Member Communities

Providing care to a diverse population

Allows communities to age in place when Medicaid

is utilized

Consistent census



WHAT'S NEXT?

Looking Forward: OALA Priorities

ALW increase codified in rules

Industry sustainability

Address workforce shortage/wage increases

Retainer payments to protect resident homes

For Our Consumers

www.ohioassistedliving.org



QUESTIONS?

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