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Temporary Certification Process for Assisted Living Residences Participation in the Medicaid Assisted Living Program

1. An Assisted Living Residence (ALR) seeking certification to provide Medicaid funded Assisted Living Services must apply using the *Assisted Living Residence Questionnaire*.
2. Application for certification at each service capacity (Tier A and Tier B) is considered separately even when made by the same licensed ALR.
3. The *Assisted Living Residence Questionnaire* should be completed by a representative of the requesting ALR and submitted to the Medicaid Office of Community Programs (OCP) at OHHS.OCP@ohhs.ri.gov. Upon submittal of the *Assisted Living Residence Questionnaire*, the OCP and Office of Healthy Aging (OHA) will review and determine the ALR certification status.
4. In determining whether to grant certification, the following are taken into consideration:
The ALR is licensed by the Department of Health (DOH) in compliance with the following conditions and a Medicaid provider in good standing with the State of Rhode Island:
 1. Residence must attain the following levels of licensure as applicable:
 - a. Fire code classification of F1 licensure specified at 216-RICR-40-10-2, section 2.6.2(C) for the provision of limited health services and /or Alzheimer Dementia Special Care Unit 216-RICR-40-10-2 section 2.5.1 as part of the enhanced level of services a provision of specialized level services.
 - b. A minimum of fire code classification of F2 licensure specified in 216-RICR-40-10-2 section 2.4.2(A 1) for provision of basic or enhanced level of services that do not include limited health services.
 - c. Medication classification of M1 licensure specified at, 216-RICR-40-10-2 section 2.4.2 (a) pertaining to the capacity to serve more than one beneficiary who requires central storage of and/or administration of medications.
 - d. Limited health care services licensure, as defined within 216-RICR-40-10-2 section 2.4 and 2.6, if seeking the ability to provide these services as part of the enhanced and/or specialized services.
 - e. Dementia care licensure, as defined within 216-RICR-40-10-2 section 2.5, if seeking certification to provide specialized services.
 2. Residence must maintain twenty-four (24) hour on-site staff to meet scheduled or unpredictable needs of residents in a way that promotes maximum dignity and independence, provide supervision and safety, at all times.

3. Residence must have a central dining room, living room or parlor, and common activity center(s) which may also serve as a living or dining room.
4. Residence must provide a placement which is appropriate to a person's needs and preferences and meet the licensure requirements of the ALR (216-RICR-40-10-2section 2.4.16 B).
5. Residence must employ or contact with a licensed registered nurse or a qualified licensed practical nurse to monitor each Medicaid funded resident's person-centered service plan every thirty (30) days. The person- centered service plan must be developed with the resident and in cooperation with the Office of Healthy Aging (OHA) case manager. The service plan should reflect whether a resident is at a basic or enhanced level of need.
6. Residence must utilize certified nursing assistants to perform appropriate hands-on personal care as specified in the Resident's Service Plan. Hours of the CNA must be adequate to meet the resident's needs as detailed in the person-centered plan service plan.
7. Residence must conduct a minimum of two hours of orientation with each new employee, (DOH ALR regulations 2.4.12) in addition to training required for a specific job classification in the ALR including those staff members (CNA, Housekeeping, Nurse, etc.) assigned to have regular contact with Medicaid member.
 - a. Documentation that the orientation and specialized training took place must be placed in the personnel files at the Residence.
 - b. Ongoing In-Service Training shall be provided to all staff on an annual basis.
 - c. Documentation that this training was completed shall be placed in the personnel files of all employees.
 - d. Residence will make available staff to meet every six (6) months, or as necessary, with the case manager responsible for the Resident' person centered service plan.
 - e. Residence will make available for review all records pertaining to Medicaid residents to the staff of OHA/DHS/OHHS.
8. If required at the discretion of EOHHS, an initial visit and survey conducted by the designated agent at OHA to review for compliance with these Certification standards is required of each ALR.
9. The ALR must also meet the HCBS Final Rule standards and have a current approval letter from OHHS.

Service Requirements:

A certified ALR must have the capacity and authority to furnish the personalized Medicaid services required to meet a beneficiary's LTSS needs in a manner that promotes self-reliance, dignity, choice, and independence.

Tier A

Each ALR must provide a minimum service package of Home and Community Based Services (HCBS) to a Medicaid funded resident, which will be considered as Tier A Services. These services include:

- Daily assistance with at least 2 ADLs
- Personal care and attendant services performed by a CNA. Hours of service must be at least 1 hour per week. The hours of the CNA must be adequate to meet the needs as determined by the ALR assessment and person- centered Service Plan.
- Housekeeping
- Chore services (washing rugs or any heavy maintenance chores)
- Companion services
- Meal preparation
- Medication administration and /or oversight

- A program of social and recreational programming that reflects a resident's interests and needs. These activities should promote integration in the ALR and the greater community. The programming may include therapeutic type activities based on the needs of the residents which may include access to, but not limited to, counseling, AA meetings, or activities which focus on maintaining /promoting life skills.
- Transportation or coordination of transportation services as specified in the person-centered service plan
- Provision of 24-hour on-site response staff to meet scheduled or unpredictable needs in a way that promotes maximum dignity and independence and provides for supervision and safety of the residents.

Tier B

For certification as a Tier B provider, the ALR must provide the Tier A service package plus, any or a combination of the following types of services to an individual.

- Additional hours of personal care beyond the Tier A services listed above, which may include:
 - Extensive assistance with at least 2 ADLs

OR

- 7 hours or more of ADL care as documented in the ALR's assessment and person-centered Service Plan and complex medication management comprising enhanced numbers of meds, more complex delivery of meds, and/ or increased time spent delivering meds.

And/OR a combination of

- Coordination of behavioral and/or dementia care including cuing, redirection, and management of behaviors, for an individual who has been diagnosed with Alzheimer's disease or other related dementia, or a behavioral health diagnosis as determined by a physician. Providing support and education to the resident about managing specific health conditions as documented in the resident's person-centered service plan. The resident requires regular staff intervention due to safety concerns related to elopement risk or other behaviors that adversely impact themselves or others. Such behaviors and interventions in place must be documented in the person-centered service plan and in nursing notes.

And/OR

- Provision of Limited Health Services as defined in Department of Health Licensing Assisted Living Residences (216-RICR-40-10-2 section 2.6) as documented in the ALR assessment and person-centered service plan. Have a LHS credential can qualify you to be a Tier B provider. It does not mean all of your residents will automatically qualify for Tier B services.

EOHHS or its contracted entity may terminate a certification with no less than thirty (30) day's notice. EOHHS and its sister agencies will work with the residents to find alternative settings which meet the needs of each individual should an ALR lose its certification. Payments may stop immediately in instances which the health, safety or general welfare of a Medicaid beneficiary is determined to be in imminent jeopardy.