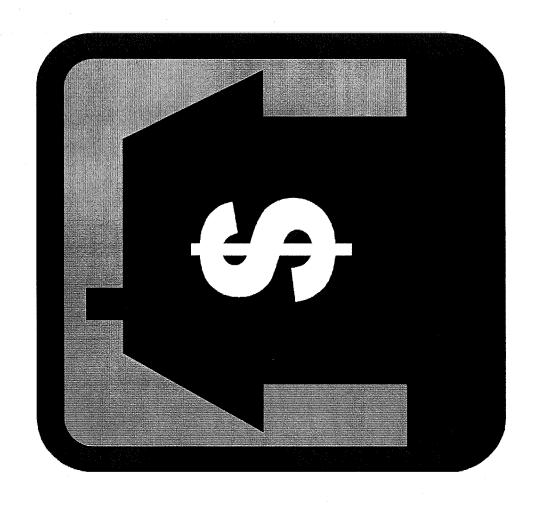
## 2012

Department of Social Services Room & Board Handout



# 2015 R&B Handouts

- Rate Setting Overview & Common R&B Disallowances
- Suggested Allowable Uses for Resident Personal Funds
- Health & Safety Request Memo & Request Form
- Amended Cost Report Memos (CLA & ICF/IID)
- Special Notice for Rated Housing Providers
- Maintenance Salary & Benefits Reminders
- Capital Repair & Improvement Guidelines

#### **Community Living Arrangement Rate-Setting Overview**

An Annual Cost Report must be submitted annually by any Facility/Agency requesting Room and Board reimbursement from the State of Connecticut. Annual Cost Year is from July 1<sup>st</sup> through June 30<sup>th</sup>. Costs submitted during this period will calculate a payment for the Rate Period of July 1<sup>st</sup> through June 30<sup>th</sup> of the following year and will be prepared in accordance with Section 17b-244 of the Connecticut General Statutes (CGS) and Section 17-313b-5 of the Regulations of Connecticut State Agencies (RCSA).

The Annual Report must be submitted to Myers and Stauffer LC no later than October 15<sup>th</sup> for the rate year July 1<sup>st</sup> through June 30<sup>th</sup>.

The CLA Desk Review season generally begins shortly thereafter. Desk Review will process Annual Reports reflective of 7/1/2014 - 6/30/2015 period ultimately generating rate for 7/1/2016 - 6/30/2017 in the spring and early summer.

#### **Rate Overview**

The State of Connecticut's payment system of per diem rates to Community Living Arrangement facilities is a cost based system. Each year an annual cost report is submitted by each agency requesting state reimbursement. Costs are submitted to and reviewed by Myers and Stauffer LC.

The Annual Report serves two objectives:

- 1) Determine prospective rates for homes which have been open for 356 consecutive days.
- 2) Replace interim rates for homes open during the costs year and report less than 365 days or were open the previous cost year.

A Desk Review is performed on Room and Board costs using agreed-upon procedures provided by the Department of Social Services. Desk Review procedures include a review of the reports completeness and accuracy, request for additional information and/or implementation of adjustments and reclassification of costs.

Once the desk review procedures are completed all adjustments and reclassifications are entered into the Rate Promulgation System (Rate System) generating a Rate Computation Report (RCR). The Rate Computation report calculates a Room & Board Rate, which is then forwarded to the State for posting and issuance.

#### **Calculated or Daily Rate**

A Per Diem Room and Board rate includes:

- Allowable Property Costs
- Depreciation on Movable Equipment
- Rental Payments on Leased Real Estate in Multi Unit Bldg. Structures
- Property & Real Estate Taxes (Excluding Motor Vehicles)
- > Interest on Moveable Equip. (Excluding Motor Vehicles)
- Interest on Working Capital
- Property Insurance and 1/3 of the General Liability Insurane
- Dietary, Food & Kitchen Supplies
- Dinning & Ordering Out (\$520 max per person, per year)
- Housekeeping Supplies
- Laundry
- Plant Maintenance, Operations & Repair
- Utilities (except telephone, cell phones, and internet services)
- Maintenance, Salaries & Benefits previously approved by DSS

#### Minimum Occupancy for Rate Setting

For purposes of computing minimum allowable resident days, utilization of a Community Living Arrangement's licensed beds, allowable costs are divided by the higher of reported total resident days for the year or facility occupancy at 90% of licensed capacity

Minimum Allowable resident days for beds designated for respite care shall be determined at a minimum of 50% capacity.

#### Common CLA Room & Board Disallowances

- Auto Expenses (mileage, gas)
- Baby Wipes
- Barber & Beauty Supplies
- Batteries
- Clothing
- Computer Equipment and Accessories
- DDS Start Up Funds
- Decoration (Holiday and Party as well as any other relative expenses)
- Delinquent Taxes Paid In Property Taxes Bill
- Diapers
- Dry Cleaning for personal clothing
- Exercise Equipment/Exercise Supplies
- ➢ Gloves, Thermometer
- > Lubriderm Cream, Vaseline, Coppertone, etc.
- Medical Supplies
- Moving Expenses
- Newspaper & Magazine Subscriptions
- Office Supplies, Office Furniture and Office Equipment
- Over the Counter Medications (Tylenol, Benadryl, Etc.)
- Pharmacy Expenses
- Postage
- Scale for Wheelchair
- > Social Club Activities/Recreation (Circus Tickets, Theater Tickets)
- > Staff Expenses (Dining out, Movie/Circus Tickets, Trip Expense)
- Swimming Pool Supplies and Maintenance
- Trip Expenses
- > Internet Expenses
- > Telephone Expenses

#### **Community Living Arrangements/Community Companion Homes**

RCSA (DMR), Sec. 19a-467-17(d)(3) — establishes that the facility's policies and procedures will ensure that all money disbursed on behalf of a resident shall be consistent with the resident's needs and desires. In most cases it will be the responsibility of the provider to determine the appropriateness of expenditures made on behalf of the clients. Accordingly, the provider must ensure that expenditures relate to the client's needs and that there is a direct benefit to the client.

#### Suggested Allowable Uses of Resident Personal Funds

- Clothing shoes, socks, pants, dresses, shirts, underwear, coats, sweaters, etc.
- Community haircut, perm, community craft class, dance lessons
- Recreational Activities movies, pizza, ice cream, vacation, sporting events
- **Personal Items** mirror, shaver, hair dryer, personal sheets, bedspreads, purse, wallet, personalized mug, perfume, eye shadow, lipstick, ring, necklace, bracelet, earrings, watch
- **Personal Luxury Items** radio, stereo, clock/radio, clock, record player, table, reading light, bike, three wheel bike, aquarium, sewing machine, television
- Toys and Games puzzles, baseball glove/ball, football, basketball, soccer ball, jump rope, recorder, drums, auto harp, paints, crayons, pencils, kids scissors, simple model to assemble
- Small Odds and Ends plants, wall hanging, posters, records/tapes, books, magazines, sewing box/supplies, bulletin board, calendar, stationery, desk organizer, mobile
- Furniture dresser, bed, desk, beanbag chair, rocking chair, bedside table, bookshelf, throw pillows

#### **Memorandum**

To: Private CLA Residential Providers

**Re:** Public Act 10-179 (Section 37) Implementation (Continued for through SFY 2016)

Capital Repairs and Improvement Requests

Section 37 of Public Act 10-179 (PA 10-179), provides for adjustments to Community Living Arrangements (CLA) rates for the July 1, 2009 through June 30, 2010 and July 1, 2010 through June 30, 2011 rate periods for capital improvements. Specifically, PA 10-179 modified rate provisions applicable to these rate periods as highlighted in bold below:

"For the fiscal years ending June 30, 2010, and June 30, 2011, rates in effect for the period ending June 30, 2009, shall remain in effect until June 30, 2011, except that (1) the rate paid to a facility may be higher than the rate paid to the facility for the period ending June 30, 2009, if a capital improvement required by the Commissioner of Developmental Services for the health or safety of the residents was made to the facility during the fiscal years ending June 30, 2010, or June 30, 2011, and (2) any facility that would have been issued a lower rate for the fiscal years ending June 30, 2010, or June 30, 2011, due to interim rate status or agreement with the department, shall be issued such lower rate."

In order to implement this change, the departments of Developmental Services (DDS) and Social Services (DSS) developed the attached form for CLA operators to complete and submit a request for a rate adjustment for a health and safety related capital project (CLA Rate Adjustment Request).

The CLA Rate Adjustment Request forms should be submitted to:

Sandra McNally, DDS Operations Center State of Connecticut – Department of Developmental Services 460 Capital Avenue Hartford, CT 06106

DDS will review requests to determine whether the project meets a health and safety requirement, and DSS will review project cost data and make associated rate adjustments.

Capital Improvement forms have been modified to include an additional DDS sign-off indicating that the project meets a health and safety requirement. The new capital improvement and CLA Rate Adjustment Request forms can be found on the DDS website, <a href="www.ct.gov/dds">www.ct.gov/dds</a>. Providers with new projects that receive a DDS health and safety sign-off must still file a CLA Rate Adjustment Request form upon project completion.

If you have any questions concerning the revised process, please contact Paula Pfistner at DSS 860-424-5666 or Sandra McNally at DDS 860-418-6025.

#### CLA Rate Adjustment Request Per Public Act 10-179

Descriden					
Provider:				Date:	7-14-
CLA Name and Address:					
Project Description:					
				······································	
				•	•
Danis of Assessed Dates					
Project Approval Date:					
Approved Amount:					****
Project Completion Date:					
Final Project Cost		Invoice			
Schedule of Attachments:	Invoice Date	Number	Vendor	Amount	Check # Date Paid
			,		
	^				
			,		
		1			
	- 1 - 1		TOTAL:		
Proposed by:					
			ow, I hereby certify that the information	n contained in this r	equest is true and
		accurate.		•	
			Private Residential Provider Signa	ature	Date
			Drint/Type Name and Title		
			Print/Type Name and Title		
Approved by:	1				
Approved by:		By signing belo	ow, I hereby certify that this capital imp	provement project i	s considered by the
		Department of	Developmental Services to be a requestailed in CGS 17b-244.	ired project for the	health or safety of the
		700,00,110,00			
					·
	•		Commissioner		Date
			Department of Developmental Ser (Or Authorized Designee)	vices	
					•



#### STATE OF CONNECTICUT

DEPARTMENT OF SOCIAL SERVICES

TO:

**CLA Providers** 

FROM:

Chris LaVigne, Director, Reimbursement & CON

DATE:

March 6, 2015

SUBJECT:

**Amended Cost Reports** 

#### Dear CLA Provider:

This notice is being sent to clarify the Department's procedures on submitting amended cost report pages. In an effort to emphasize accuracy and integrity of the timely submitted Annual Report of Residential and Day Services cost reports, the Department will no longer accept amended cost report pages in the following circumstances:

- Amended pages to the cost report year ending 6/30/2014 must be submitted by 7/1/2015. Exceptions for submissions after the due date will require prior approval from the Department of Social Services, Office of Reimbursement and CON.
- For cost reports prior to the cost year ending 6/30/2014, effective immediately, amended pages will no longer be accepted, processed, filed or reviewed by the DSS Office of Reimbursement or its current contractor, Myers and Stauffer, LLC.
- Amended pages received prior to this notice will be reviewed if received as part of a timely submitted rate appeal.
- Exceptions to this policy may be made on a case-by-case basis when amendments are related to overstated costs that require amending under the terms of the False Claims Act.



#### Connecticut Medical Assistance Program

Policy Transmittal 2014-05

PB 2014-12 March 2014

Japan S. Ang

Roderick L. Bremby, Commissioner

Effective Date: February 18, 2014 Contact: C. LaVigne @ 860-424-5719

TO: Nursing Facilities, ICF/IID (formerly ICF/MR)

RE: Amended Pages to Annual Report of Long-Term Care Facility

This notice is being sent to clarify the Department's procedures on submitting amended cost report pages. In an effort to emphasize accuracy and integrity of the timely submitted *Annual Report of Long-Term Care Facility cost reports*, the Department will apply the following policy regarding amended cost report pages:

- Amended pages to the cost report year ending 9/30/2013 must be submitted by 7/1/2014 in order for the Department to consider them. The Department may authorize exceptions to this policy for cause.
- For cost reports prior to the cost report year ending 9/30/2013, effective immediately, amended pages will no longer be accepted, processed, filed or reviewed by DSS Office of Reimbursement or its current contractor, Myers and Stauffer, LLC.
- Exceptions to this policy may be made on a case-by-case basis when amended pages are related to overstated costs that require amendment under the terms of the False Claims Act, or if such amended pages are needed to correct a material misstatement of the provider's rate.

If there are any questions, please contact Christopher LaVigne, Director Reimbursement and Certificate of Need, at 860 424-5719.

<u>Posting Instructions</u>: Policy transmittals can be downloaded from the Web site at <u>www.ctdssmap.com</u>.

<u>Distribution</u>: This policy transmittal is being distributed to providers of the Connecticut Medical Assistance Program Provider Manual by HP Enterprise Services.

**Responsible Unit:** DSS, Reimbursement and Certificate of Need.



#### Special Notice about State Supplement Applications For Rated Housing Providers

Important new information, Effective August 1, 2015

### Please MAIL new applications to one of three DSS Long-Term Services and Supports (LTSS) Application Centers

\*\*New Rated Housing Application Process at DSS\*\*

To better serve our applicants, clients and facility providers, DSS operates three Long-Term Services and Supports (LTSS) Application Processing Centers. **The centers will receive and process new applications from specific cities and towns for rated housing applicants.** Rated housing facilities include Residential Care Homes, Boarding Homes and Group Homes.

The facility LTSS and rated housing application centers are located in the DSS **Bridgeport**, **New Haven and Waterbury offices**. Please check the table in this notice for which application center to use based on your city or town.

Application packets with as much of the required documentation that is available at the time of submission should be <u>mailed directly to the appropriate LTSS Application Processing Center</u>, beginning August 1. Please discontinue mailing new applications to the DSS ConneCT Scanning Center. If you would like to apply online go to <u>www.connect.ct.gov</u> and click on the Apply Now button. Once the application is submitted online you will receive an online application ID, please continue to email that ID to the RCH email address at <u>ResidentialCareHomes.DSS@ct.gov</u>.

New applications submitted on or after August 1, 2015 to the Bridgeport, New Haven and Waterbury LTSS facility Application Processing Centers will be processed by the center as defined by the catchment area described below. Rated housing redeterminations will continue to be processed statewide through ConneCT. This means that all paperwork for redeterminations and interim changes should be sent to the DSS ConneCT Scanning Center at P.O. Box 1320, Manchester CT 06045 (not to the new LTSS facility Application Centers).

For questions specific to a pending case after an application is made, clients should call the assigned caseworker directly. Applicants will be provided a worker's contact information once the case is assigned. Rated housing providers should continue to use the RCH email address at <a href="ResidentialCareHomes.DSS@ct.gov">ResidentialCareHomes.DSS@ct.gov</a>. For all other general calls or questions, the DSS Benefits Center staff will serve you at 1-855-6-CONNECT (1-855-626-6632). For questions specific to this notice please call Eligibility Policy and Program Support at 860-424-5250.

Thank you for your participation in this process. We look forward to working with you.

--CT Department of Social Services

#### DSS Long-Term Services and Supports Application Centers

#### Waterbury Office 249 Thomaston Avenue Waterbury, CT 06702

For: Avon, Beacon Falls, Berlin, Bristol, Bloomfield, Burlington, Canton, Cheshire, East Granby, Farmington, Granby, Hartford, Middlebury, Naugatuck, Newington, New Britain, Oxford, Plainville, Plymouth, Prospect, Rocky Hill, Simsbury, Southbury, Southington, Stafford, Suffield, Waterbury, Watertown, West Hartford, Wethersfield, Windsor Locks, Windsor, Wolcott.

#### Bridgeport Office 925 Housatonic Avenue Bridgeport, CT 06606

For: Barkhamsted, Bethel, Bethlehem, Bridgeport, Bridgewater, Brookfield, Canaan, Colebrook, Cornwall, Danbury, Darien, Easton, Fairfield, Goshen, Greenwich, Hartland, Harwinton, Kent, Litchfield, Morris, Monroe, New Canaan, New Fairfield, New Hartford, New Milford, Newtown, Norfolk, North Canaan, Norwalk, Redding, Ridgefield, Roxbury, Salisbury, Sharon, Sherman, Stamford, Stratford, Thomaston, Torrington, Trumbull, Warren, Washington, Weston, Westport, Wilton, Winchester, Woodbury.

#### New Haven Office 50 Humphrey Street New Haven, CT 06513

For: Andover, Ansonia, Ashford, Bethany, Bolton, Bozrah, Branford, Brooklyn, Canterbury, Chaplin, Chester, Clinton, Colchester, Columbia, Coventry, Cromwell, Deep River, Derby, Durham, Eastford, East Haddam, East Hartford, East Hampton, East Haven, East Lyme, East Windsor, Ellington, Enfield, Essex, Franklin, Glastonbury, Griswold, Groton, Guilford, Haddam, Hamden, Hampton, Hebron, Killingly, Killingworth, Lebanon, Ledyard, Lisbon, Lyme, Madison, Manchester, Mansfield, Marlborough, Meriden, Middlefield, Middletown, Milford, Montville, New Haven, New London, North Branford, North Haven, North Stonington. Norwich, Plainfield, Pomfret, Portland, Preston, Putnam, Old Lyme, Orange, Salem, Scotland, Seymour, Shelton, Somers, South Windsor, Sprague, Stafford, Sterling, Stonington, Tolland, Thompson, Union, Vernon, Voluntown, Wallingford, Waterford, Westbrook, West Haven, Willington, Windham, Woodbridge, Woodstock.

#### **DSS Allowance of Maintenance Salary & Benefits**

- Prior approval required by DSS
- Requirements for Approval:
  - Detailed Job Descriptions and tasks that the maintenance staff currently perform
  - Detailed Schedule of Maintenance staff expenses for the past two years
  - Analysis of the cost effectiveness of having maintenance staff versus using outside repair service as needed
- Must split DSS approved maintenance salaries (Page 29 Line 15.g) from Plant Maintenance, Operations, and Repairs (Page 29 Line 15.d)

Once approved, Providers must adhere to the following guidelines when reporting these costs:

- Costs should remain cost effective in future years
- Costs should be allocated to homes based on the number of licensed beds
- The agency must maintain a schedule identifying the cost center, hours worked, salaries and benefits, and a brief description of the tasks performed for the CLA homes
- For building improvements which meet the established capitalization thresholds, salaries and benefit costs should be included with the capitalized improvement and may be excluded from the maximum total established
- Capital improvements must follow the established capitalization guidelines (i.e. effective July 1, 2005 three bids must be obtained for improvements over \$2,499 and a Capital Improvement Agreement must be obtained for improvements over \$7,499)

Reminder: These costs need to be disclosed separately on the DDS/DSS Annual Report on page 29 under line item 15G Maintenance Salaries and Benefits. The maximum allowed amount shall be increased annually by the inflation rate authorized under Section 17b-244 of the Connecticut General Statutes.

Page //

#### Capital Repair & Improvements

<u>Between</u>				<u>l</u>	Requirements	Depreciation
-	2,500 7,500	-	•	2,499 7,499 Over	No prior approval No prior approval ** Prior Approval Required **	Expense on Annual Report 5 Years Per Useful Life Chart

#### Oil Tank and Roof Repairs

	<u>Be</u>	twe	en	Requirements	<u>Depreciation</u>	
\$ \$	- 2,500		\$ 2,499 Over	No prior approval Prior Approval Required **	Expense on Annual Report 10 years - Roof 20 years - Oil Tank	

<sup>\*\* 3</sup> Bids must be obtained for ALL Capital improvements over \$2,500 All Improvements are subject to audit, 20% reduction for non-compliance

#### All Emergencies Over \$2,500

Providers can receive immediate approval to begin projects for EMERGENCY cases over the telephone (Paula Pfistner 860-424-5666) before submitting the paperwork for final approval.

#### Capital Improvement Planning

Effective 10-01-2006

- \* Repetitive annual costs, in excess of \$7,500, found during desk review, will be disallowed
- For example, large projects expanding over multiple months and expensed monthly will be treated as a "single" capital improvement and will require the normal capital improvement request process, such as

Painting a house room by room will be handled in the same manner as Painting entire house at one time

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