



**STATE HEALTH PLANNING AND DEVELOPMENT AGENCY**

100 NORTH UNION STREET, SUITE 870

MONTGOMERY, ALABAMA 36104

April 1, 2010

**NOTICE**

**TO:** Recipients of the Alabama State Health Plan 2004-2007

**FROM:** Alva M. Lambert  
Executive Director

A handwritten signature in black ink, appearing to read "amb", is written over the printed name "Alva M. Lambert".

**SUBJECT:** Adjustment for Limited Care Facilities – Specialty Care Assisted Living  
Facilities 410-2-4-.04

The Statewide Health Coordinating Council (SHCC) at the March 25, 2010 meeting approved this adjustment. Governor Bob Riley approved the adjustment on March 31, 2010. Please substitute pages 102-103 in the *Alabama State Health Plan 2004-2007*.

Attachment: as stated

AML:nh



STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

100 NORTH UNION STREET, SUITE 870

MONTGOMERY, ALABAMA 36104

March 29, 2010

Honorable Bob Riley, Governor  
State of Alabama  
State Capitol  
Montgomery, Alabama 36130

Dear Governor Riley:

At the March 25, 2010 meeting of the Statewide Health Coordinating Council (SHCC), the SHCC adopted the attached adjustment. This proposed adjustment provides for an increase in Specialty Care Assisted Living beds in Shelby County. The adjustment, upon your approval, will be added to § 410-2-4-.04 of the *2004-2007 Alabama State Health Plan*.

Section 410-2-5-.04(4)(c) of the *State Health Plan* provides that a plan adjustment shall be deemed disapproved by the Governor if not acted upon within fifteen (15) days.

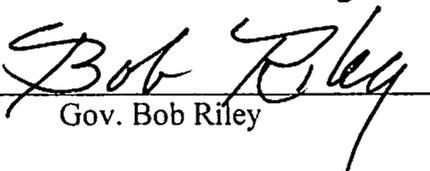
You have the approval/disapproval authority for the *State Health Plan* and all amendments/adjustments thereto. I recommend your approval.

Call me at 242-4103 if you have questions about this proposed adjustment.

Sincerely,

  
Alva M. Lambert  
Executive Director

Attachment: as stated

APPROVED:   
Gov. Bob Riley

Date 3/31/10

DISAPPROVED: \_\_\_\_\_  
Gov. Bob Riley

Date \_\_\_\_\_

#### 410-2-4-.04 Limited Care Facilities – Specialty Care Assisted Living Facilities

(1) Definition. Specialty Care Assisted Living Facilities are intermediate care facilities which provide their residents with increased care and/or supervision which is designed to address the residents' special needs due to the onset of dementia, Alzheimer's disease or similar cognitive impairment and which is in addition to assistance with normal daily activities including, but not limited to, restriction of egress for residents where appropriate and necessary to protect the resident and which require a license from the Department of Public as a Specialty Care Assisted Living Facilities pursuant to Ala. Admin. Code § 420-5-20, *et seq.*

#### (2) Specialty Care Assisted Living Facility Bed Need Methodology

(a) Purpose. The purpose of this specialty care assisted living facility bed need methodology is to identify, by county, the number of beds needed to assure the continued availability, accessibility, and affordability of quality care for residents of Alabama.

(b) General. Formulation of this bed need methodology was accomplished by a committee of the Statewide Health Coordinating Council (SHCC). The committee which provided its recommendations to the SHCC, was composed of providers and consumers of health care. Only the SHCC, with the Governor's final approval, can make changes to this methodology except that the SHPDA staff shall annually update bed need projections and inventories to reflect more current population and utilization statistics. Such updated information is available for a fee upon request. Adjustments are addressed in paragraph (E).

(c) Basic Methodology. Considering the availability of more community and home based services for the elderly in Alabama, there should be a minimum of 4 beds per 1,000 population 65 and older for each county.

The bed need formula is as follows:

$$(4 \text{ beds per thousand}) \times (\text{population 65 and older}) = \text{Projected Bed Need}$$

#### (d) Planning Policies

1. Projects to develop specialty care assisted living facilities or units in areas where there exist medically underserved, low income, or minority populations should be given priority over projects not being developed in these critical areas when the project to develop specialty care assisted living facilities in areas where there exists medically underserved, low income or minority populations is not more costly to develop than other like projects.

2. Bed need projections will be based on a three-year planning horizon.

3. Planning will be on a countywide basis.

4. Subject to SHCC adjustments, no beds will be added in any county where that county's projected ratio exceeds 4 beds per 1,000 population 65 and older.

5. When any specialty care assisted living facility relinquishes its license to operate, either voluntarily or involuntarily other than by a Certificate of Need approved transfer, or by obtaining title by a foreclosure as specified in the opinion rendered by the Alabama Attorney General, November 17, 1980, the need for the facility and its resources will automatically be eliminated from the facilities portion of the State Health Plan. The new bed need requirement in the county where the facility was located will be that number which will bring the county ratio up to 4 beds per 1,000 population 65 and older.

6. The total SCALF bed need for Shelby County shall be 164 beds (36 additional beds plus the 128 existing beds); statistical updates performed by SHPDA shall use 164 beds as the need for the county unless the 4 beds per 1,000 65+ population need methodology indicates a greater number; and before additional beds above 164 can receive CON approval, the SCALF occupancy rate for the county shall be at least 92 percent based on the most recent SHPDA SCALF twelve month reporting time period.

(e) Adjustments. The bed need, as determined by the methodology, is subject to adjustments by the SHCC. The specialty care assisted living facility bed need may need to be adjusted by the SHCC if an applicant can prove that the identified needs of a targeted population are not being met by existing specialty care assisted living facilities in the county of the targeted population.

(f) Notwithstanding the foregoing, any application for certificate of need for specialty care assisted living facility beds for which a proper letter of intent was duly filed with SHPDA prior to the adoption of the bed need methodology shall not be bound by this bed need methodology.

(g) The determination of need for specialty care assisted living facility beds shall not be linked to the number of existing assisted living beds in the county.

Author: Statewide Health Coordinating Council

Statutory Authority: § 22-21-260(4), Code of Alabama, 1975.

History: Effective: November 22, 2004; Adjusted March 31, 2010