

Supportive Living Program Dementia Care Setting Expansion Application FAQ 5/15/23

This document will be revised weekly.

Letter of Intent

1. What should be included in the letter of intent?

Response: The letter of intent should include the name of the applicant and the city and zip code of the proposed Supportive Living Program (SLP) dementia care setting (DCS). Refer to Appendix D of the SLP DCS Application, March 29, 2023.

2. Do I have to submit references with my letter of intent?

Response: The letter of intent should include the name of the applicant and the city and zip code of the proposed SLP DCS. Refer to Appendix D of the SLP DCS Application, March 29, 2023.

3. Should the applicant name be an individual or a company?

Response: The name of a company or an individual may be used.

New

4. Can an application be submitted if the deadline for the letter of intent was missed?

Response: Yes. Although a letter of intent was requested, it was not required.

Application

1. Can homecare providers apply for a SLP contract?

Response: Homecare providers may submit an application.

2. For an independent living facility, what preliminary tasks need to be completed first go get the site approved?

Response: Since the proposed DCS site would not be located on the site of current operational or approved SLP community, the application would be completed like a new provider. For example, since the proposed community is currently independent living, site control and a Phase 1 environmental study would need to be provided.

3. Can applications include apartments without DCS?

Response: Page 2 of the 4/5/23 provider notice, Criteria section, third bullet point states, "This expansion is not open to the approval of additional elderly (non-dementia) units in the SLP setting". Sites NOT currently certified or approved for the SLP may submit an application that includes both dementia and non-dementia units with emphasis on the number of dementia units.

4. If the current landowner and future operator can be co-applicants with the operator possibly leasing the facility with the option to purchase in the future and will order a Phase I now or produce a recent one, what would next steps be?

Response: The application includes questions for ownership of the site and ownership of the operation. If the current owner of the site is agreeable, the next step would be to complete the application and provide required documentation.

5. Is the Supportive Living dementia setting the only Supportive Living that Illinois is accepting at the moment?

Response: Only applications for SLP dementia care settings are being reviewed at this time. Sites NOT currently certified or approved for the SLP may submit an application that includes both dementia and non-dementia units with an emphasis on the number of dementia units.

6. Can an existing SNF apply?

Response: A skilled nursing facility may submit an application. The site would need to be compliant with 305 ILCS 5/5-5.01a (d) regarding mixed use buildings ([Illinois Public Aid Code](#)) and with federal Home & Community Based Services setting rules ([CMS Summary of HCBS Setting Requirements](#)).

7. How many SLP DCS units will be made available in Rock Island County?

Response: A specific number of apartments had not been determined for Rock Island County.

8. Can an application be submitted for a site located in a county outside of those identified for the SLP DCS expansion?

Response: No.

9. Was the expansion designed to help only low census performing SNFs?

Response: The expansion was initiated to increase the number of SLP dementia care setting apartments in the very near future. It was not planned to benefit any particular provider type.

10. Could an ALF, that is adjacent to a Nursing Home, be converted to a SLP Dementia Care Setting? What additional information would have to be in the application, to show that it is a Community Program (HCBS Settings Requirements)?

Response: An Assisted Living building that is adjacent to a nursing home may apply for the SLP dementia care setting. Page 2 of the provider notice includes a link to a summary of Home and Community Based Services (HCBS) Setting requirements. [Summary of Home and Community Based Services \(HCBS\) Setting Requirements](#)

11. Can a licensed Shared Housing Establishment apply?

Response: Yes.

12. Can an SLP DCS approval be in addition to a Shared Housing Establishment license so that services may be provided to both private pay and Medicaid residents?

Response: The Supportive Living Program serves both private pay and Medicaid residents. Page 1 of the provider notice, Criteria section and page 10 of the application include a link to the [Illinois Public Aid Code](#) (305 ILCS 5/5-5.01a (d)) regarding mixed use buildings. The entire building, or separate section would have to be designated for the Supportive Living Program.

13. Can an application for a currently licensed Assisted Living site include both dementia and non-dementia apartments?

Response: 305 ILCS 5/5-5.01a of the [Illinois Public Aid Code](#) does not allow a mixed use building with Assisted Living and SLP apartments. However, an entire Assisted Living building could be converted to SLP. If an application was submitted to convert an Assisted Living building, some of the apartments could be non-dementia units with an emphasis on the number of dementia units.

14. If submitting an application to convert a currently licensed Assisted Living site that will include both dementia and non-dementia apartments, is the same form used?

Response: The application that was included as a link in the 4/5/23 provider notice should be used. Only one application should be submitted for this scenario. When identifying the number of apartments in the Site & Building Requirements section, break out the number of apartments for dementia and non-dementia (questions 2-4). Other application question responses may be applicable to both apartment types and may not require separate answers, for example, the Transition Plan.

15. May an application be submitted for a location if a letter of intent was not sent?

Response: Yes. A letter of intent was requested, but was not required.

16. Can an operational or approved SLP site add non-dementia apartments?

Response: Not at this time.

17. If a potential applicant received an immediate jeopardy within the past year, would the application be considered for approval?

Response: Providers that have received notices of immediate jeopardy within the past year may still submit an SLP DCS application. Applicants with a compliance history within the past year that includes an immediate jeopardy, or patterns of non-compliance involving serious or extensive health or safety issues, may or may not be selected for interview.

18. Can a residential care home with four to six residents that would be in compliance with the 89 Ill. Adm. Code Subpart A and B and located within the approved counties be eligible for approval?

Response: Clarification – 89 Ill. Adm. Code Part 146 Subparts B and E pertain to the Supportive Living Program. Subpart A is related to Ambulatory Surgical Treatment Centers. The Supportive Living Program requires a minimum of 10 apartments. It is an assisted living style program. The building must be compliant with administrative rules for the program, or could become compliant with rules within 180 days, including the minimum number of apartments.

19. What does question 8 on the Application For Certification Under The Supportive Living Program Dementia Setting mean?

Response: The 89 Ill. Adm. Code 146.205 Definitions includes a definition for related parties. [Section 146 \(ilga.gov\)](#)

New

20. Does the current SLP certification for an operational SLP provider cover apartments in an attached senior apartment building?

Response: No. The SLP certification is specific to a location and designated apartments and common areas. It is not transferrable to another building/portion of a building that has not been certified for the SLP by the Department.

21. Would a senior apartment building attached to a certified SLP community need to apply for a separate SLP license in order to have a dementia unit? Can the dementia unit be within the non-licensed building.

Response: An application for the senior apartment building would need to be submitted. Please refer to 305 ILCS 5/5-5.01a of the [Illinois Public Aid Code](#) regarding mixed use buildings.

22. If applying to convert connected Assisted Living and independent living apartments, is there a specific number of units that may be requested for dementia and non-dementia apartments?

Response: If the Assisted Living and Independent Living buildings are structurally and operationally separate, please review requirements at 305 ILCS 5/5-5.01a of the [Illinois Public Aid Code](#) regarding mixed use buildings. The maximum number of apartments allowed for an SLP setting is 150 (89 Ill. Adm. Code Section 146.210(d)(5)). 89 Ill. Adm. Code Section 146.610(a)(1) identifies that each grouping of dementia apartments cannot exceed 20. These are often commonly referred to as “pods” or “neighborhoods”.

23. Are schematic plans for apartment layouts sufficient for Site & Building Requirements Question 6. regarding schematic plans for an application from an Assisted Living provider?

Response: The second paragraph in Site & Building Requirements Question 6 is applicable to Assisted Living Providers and should be answered completely.

24. How do the requirements for the Financial Strength section apply to a provider that recently took over operation of a site and is still in the turnaround phase? If there is not capital required to have a location compliant, would we really need a plan of financing?

Response:

Question 1 a. – Since you just took over the operations, you would need to provide the financial statements from a related management company or parent company, or personal financial statements.

Question 1 b. – The pro forma financial statements would be your forecasted revenue and expenses by month for a minimum of 2 years or breakeven, whichever is longer. The provider rates are available on the HFS web site.

Question 1 c. – Since you just took over the operations, you would include the purchase price that you paid to acquire the SLP community and the mortgage and/or other financing that was used to finance your acquisition. If any improvements are needed, please indicate the improvements needed and the total cost of the improvements along with an explanation of the sources used to pay for them. Also indicate the reserves and line of credit that are available to the provider to cover potential Medicaid payment delays and other cash shortfalls.

Question 1 d. – This question involves making a statement about the future financial condition of the operations. You may reference the information that you provided in questions a, b, and c for your analysis and evaluation.

25. Since we do not have SLF rates, how would we be able to project a budget?

Response: Below is a link to the SLP rates.

[Supportive Living Program Rates | HFS \(illinois.gov\)](#)

26. Which rate setting region is Lake County in?

Response: Lake County is in the Chicago rate region.

27. Does the department have a budget template like they do for SNF applications?

Response: The Department does not have a budget template.

28. For the below, do you want the pharmacy, Xray, ambulance companies etc.?

List the names and addresses of all service providers that are contracting or will be contracting with the DCS.

Response: Applicants should supply information for contractors that will be utilized for required Supportive Living Program services (See 89 Ill. Adm. Code 146.230 and 146.235). Examples would include, but are not limited to: licensed dietician, waste removal company, food service vendor or management company for the operation of the dementia care setting. Pharmacy, x-ray and ambulance companies do not need to be included in the response. Below is a link to program rules at 89 Ill. Adm. Section 146.

[Rule for Supportive Living Program | HFS \(illinois.gov\)](#)

29. Can audited financials for a SNF and shelter care on same audited P&L be submitted this way?

Response: Yes, the audited financial statements may include both the SNF and the Shelter care operations. The pro forma should be only for the provider type that you will be converting to supportive living. Regarding the building and plan of financing, please include your statement regarding the building and that there is no need for further financing. If there will be any conversion improvements needed, please indicate the cost amount, a detail of what needs to be done, and the source of the funds used to make the improvements.

30. For the program operation section question, a. concept for providing housing and services under this model, do you want us to discuss how we will be able to provide all service requirements in 2.2.4?

Response: Supportive Living Program services are included in 2.2.4 and 2.3.3 of the request for application document.

Building Structure/Schematics:

1. Does every 20 units have to be separated by a secured door or can the entirety of the facility be considered a unit.

Response: The grouping of 20 apartments does not necessarily need to be separated by a secured door from other dementia care units. However, each grouping of 20-units should have its own common area(s) and be easily identified as separate “neighborhoods”.

2. Do all units have to have a kitchenette

Response: All units must have a kitchenette (89 Ill. Adm. Code 146.610(b)(1-2).

3. Can the application include more than 20 units?

Response: Applications may include more than 20 DCS apartments, but each grouping or “neighborhood” cannot exceed 20 units. Each grouping of apartments should have its own common area(s) and should be easily identified as separate “neighborhoods”.

4. Can apartments be above the second floor?

Response: The 89 Ill. Adm. Code Section 146.610(a)(2) does not allow for DCS apartments to be located above the 2nd floor.

5. Can a multi-story building include floors for SLP and Assisted Living, if there are separate common areas?

Response: State statute does not allow for a mixed use buildings with SLP and Assisted Living (305 ILCS 5/5-5.01a (d)(1)). [Illinois Public Aid Code](#) A current Assisted Living provider may submit an application for both dementia and non-dementia apartments with an emphasis on the number of dementia units.

6. Can an existing licensed Assisted Living apply for this to put Memory Care in one section of the existing Assisted Living?

Response: State statute does not allow for a mixed use buildings with SLP and Assisted Living (305 ILCS 5/5-5.01a (d)(1)). [Illinois Public Aid Code](#) . A current Assisted Living provider may submit an application for both dementia and non-dementia apartments with an emphasis on the number of dementia units.

7. Please send the building/setting requirements from the dementia living (minimum number of units or clients).

Response: Building requirements can be found in the 89 Ill. Adm. Code Section 146.210 [PART 146 SPECIALIZED HEALTH CARE DELIVERY SYSTEMS : Sections Listing \(ilga.gov\)](#)

8. Would the conversion of an Assisted Living Facility to SLP require the entire Assisted Living to be converted, or could a wing of the building be designated as SLP?

Response: 305 ILCS 5/5-5.01a of the [Illinois Public Aid Code](#) does not allow a mixed use building with Assisted Living and SLP apartments. The entire Assisted Living building would need to be converted. A current Assisted Living provider may submit an application for both dementia and non-dementia apartments with an emphasis on the number of dementia units.

9. Do the “Rehabilitated Nursing Facilities” living space requirements also apply to a rehab for a stand alone SLP DCS?

Response: Currently, [89 Illinois Administrative Code Rule 146.210 \(d\) and \(e\)](#) is as follows in the attached link. Though there is a rulemaking in the Joint Committee on Administrative Rules to amend the current language, those amendments are still under review by the Committee and are subject to comment or change. As a courtesy, we attached a copy of the Illinois Register with the proposed rule. We cannot comment on the likelihood or timeliness of adoption of this rulemaking, or answer any substantive questions on the rulemaking per [5 ILCS 100/5-165](#).

10. Can a SLP have both supportive living dementia and regular supportive living in one building?

Response: An SLP setting may have both dementia and non-dementia apartments.

New

11. In section 146.210 it states rehabilitated nursing facilities can be 160 sq ft for single occupancy and 300 sq feet for double occupancy. Is that also for a current licensed shelter care facility.

Response: The 89 IL Adm Code Section 146.210 (e) does not apply to licensed shelter care.

12. Can non-dementia apartments be above the second floor.

Response: Yes.

13. Does closet space apply to a current licensed shelter care buildings? If so, can we have 2 separate closets that equal the total needed. And does it need to be a built in closet or can we use a wardrobe closet to complete the needed space?

Response: Yes closet space applies to licensed shelter care facilities. The minimum required sized may be met with 2 separate closets. A wardrobe may be used.

14. On structure requirements for DCS it mentions the delayed lock release. Is that for all resident rooms or just exits?

Response: Delayed egress/lock release is not allowed on individual apartment doors.

Program Services

1. Are all SLP patients homebound?

Response: No. Please refer to the links in to the Illinois Administrative Code included in the provider notice to learn more about the SLP.

2. How is a secure DCS unit able to meet CMS HCBS requirements for access to the community, access to employment, etc.?

Response: Below are links the current 1915(c) Home & Community Based Services (HCBS) waiver for the Supportive Living Program and Illinois' statewide transition plan for community setting requirements that were approved by Center for Medicare & Medicaid Services (CMS).

[Application for 1915\(c\) HCBS Waiver: IL.0326.R05.00 - Oct 01, 2022 \(illinois.gov\)](#)

[Transition Plan | HFS \(illinois.gov\)](#)

Reimbursement

1. Can you explain the reimbursement model and how it works for homecare agencies?

Response: Homecare agencies are not reimbursed for SLP services. If an application from homecare agency was approved, it could become an enrolled SLP provider. Please refer to the link in the provider notice that shows current daily rates for the SLP.