# *Request for Information*

# Enhanced Services Facilities

Or

Skilled Nursing Facilities with Expanded Community Services Plus and Respite

# January 2017

STATE OF WASHINGTON

## DEPARTMENT OF SOCIAL AND HEALTH SERVICES

## AGING AND LONG TERM SUPPORT ADMINISTRATION (ALTSA)

## DIVISION OF HOME AND COMMUNITY SERVICES (HCS)

### Blake Office Park West, 4450 10th Avenue SE • PO Box 45405 • Lacey WA 98503

# **PURPOSE**

The purpose of this Request for Information (RFI) is to solicit information regarding interest, availability and geographic locations from skilled nursing, residential or other providers potentially interested in serving clients moving or diverting from state hospitals through one of the two following options:

## Development of a licensed Enhanced Services Facility; or

## Adding an Expanded Community Services (ECS) Plus and Respite addendum to their current SNF contract.

Specifically, this RFI seeks to gain the following information from the skilled nursing facility, residential and/or behavioral health provider community:

## What areas of the state have providers interested in developing an Enhanced Services Facility.

## Which interested providers have the capacity to meet the qualifications of licensing for an Enhanced Services Facility.

## Which interested skilled nursing facility providers that have a current ECS contract have the capacity to include an addendum for the skilled nursing facility ECS Plus and Respite to their Medicaid skilled nursing services ECS contract.

# **BACKGROUND**

Washington State has a continued need to develop an array of supports and services that provide options for people with complicated personal care and behavioral challenges. ESFs and ECS Plus/ECS Respite in SNFs are two of the resource options that ALTSA will build upon in its support of successful and sustainable transitions from state hospitals into the community.

## Information and links about the requirements of an Enhanced Services Facility can be found in the 2017 Enhanced Services Facility Fact Sheet which is included as Attachment B.

## Information about the scope of services in an ECS Plus or Respite SNF contract addendum can be found in Attachment C.

# **PROJECT SCOPE**

ALTSA aims to develop an array of resources across the state.

# **DEFINITION AND PROGRAM ELEMENTS OF ENHANCED SERVICES FACILITIES AND ECS PLUS/RESPITE CONTRACTS**

## Definitions

### “Enhanced Services Facility (ESF)” means a facility that is licensed by DSHS Aging and Long-Term Support Administration to provide personal care and behavior support services to persons for whom acute inpatient treatment is not medically necessary and who have been determined by the department to be inappropriate for placement in other licensed facilities due to the complex needs that result in behavioral and security issues. Note that an enhanced services facility is not an evaluation and treatment facility certified under Chapter 71.05 RCW.

### “ECS Plus” means a level of behavior support services that includes dedicated staffing and availability of daily behavior support, consultation and training in a skilled nursing environment.

### “ECS Respite” means a short-term medically based NF placement as an intervention for ECS or Specialized Behavior Supports (SBS) residential clients experiencing an escalation in behavioral challenges that does not fit the definition for mental health voluntary or involuntary detention but that jeopardizes the ECS/SBS client’s residential placement as determined by HCS.

#### ECS Respite services are intended to be available to ECS/SBS residential clients on a short-term basis. The length of stay in the ECS Respite bed will be 20 days or less for any particular episode of service for any particular ECS/SBS residential client unless an exception is provided by the HCS Field Services Administrator or his/her designee.

#### Preadmission Screening and Resident Review (PASRR) means: a federal requirement to help ensure that individuals are not inappropriately placed in nursing homes for long term care.

### “Specialized Behavior Support (SBS) client” means an individual who is enrolled in the Residential Supports Waiver and who is residing in an SBS contracted Adult Family Home (AFH) or transitioning into an SBS contracted AFH.

## Pertinent Elements of the ECS Plus or Respite service include:

### Behavior support provided to ECS Plus or ECS Respite clients through the contract

### Caregiving staff dedicated to ECS Plus clients

### Training specific to behavior support needs required of ECS Plus dedicated staff

### An add-on rate to bring total Medicaid rate to $425/day per SNF Plus or Respite client

### Limit of 4 slots available to any ECS contracted SNF unless otherwise approved by DSHS

### Serving clients moving from or diverting from state hospitals or individuals currently served in residential settings who need short term SNF and behavior support services in order to maintain their community living situation

## Pertinent Elements of an Enhanced Services Facility include:

### Facility specifications as found in the Licensing WACs

### Single occupancy rooms

### Not attached to a SNF or another facility considered by Centers for Medicare and Medicaid to be an institution

### Staffing Requirements that include:

#### Nursing coverage 24 hours per day

#### Mental Health Professional on duty 8 hours day

#### Staffing ratio of 1 staff to 4 residents, with additional staffing requirements if the Enhanced Services Facility serves residents who are deemed to be medically fragile

#### 2 staff in facility at all times

##### Services that include both personal care and behavior support provided by Enhanced Services Facility staff

##### No more than 16 residents served in the facility

##### Additional hours of training required of Enhanced Services Facility staff

##### A rate of $350/day with an exception to rate add-on of $75/day to meet staffing requirements related to nursing

# **ABOUT ALTSA**

The Aging and Long-Term Support Administration (ALTSA) provides supports to people with functional impairments due to age, physical or cognitive limitations and their families to obtain quality services and maximize independence, choice and quality of life.  ALTSA is responsible for protecting the rights, security and well-being of individuals living in licensed or certified care settings and the protection of vulnerable adults from abuse, neglect, abandonment and exploitation.

# **ADMINISTRATIVE REQUIREMENTS**

This RFI serves as a notice of potential provider opportunity and is the first step in a multi-step process in the development of Enhanced Services Facilities. Participation in this RFI is voluntary and will not result in the award of a contract. ALTSA also reserves the right not to issue a formal solicitation for services as the result of this RFI.

# **PROVIDER RESPONSE**

Interested parties should respond by sending a completed Provider Response form as an attachment in an email to the RFI Coordinator at the email address indicated in the RFI Coordinator section, below, by **February 28, 2017**. Please see ***Attachment A: Provider Response***.

Questions related to this RFI should be submitted by email to the RFI Coordinator using the contact information indicated in the RFI Coordinator section below by **February 19, 2017**. Answer to the questions will be emailed to all RFI responders no later than **February 24, 2017**.

# **RFI COORDINATOR**

RFI questions and submittal of the Provider Response are to be emailed to:

Traci Adair, Resource Support and Development Unit Manager

Aging and Long Term Supports Administration

Home and Community Services Email: adairt@dshs.wa.gov Phone: 206-341-7653

# **COST OF RESPONSE PREPARATION**

ALTSA will not reimburse providers for any costs associated with preparing a response to this RFI.

# **AMENDMENTS**

ALTSA reserves the right to change the RFI timeline or other portions of this RFI at any time.

# **ELECTRONIC AVAILABILITY**

The contents of this RFI and any amendments, notices, and other announcements concerning this RFI will be available of the DSHS, Central Contracts web site at: <http://www.dshs.wa.gov/ccs/>.

This document will be available in Microsoft Word format.

Attachment A

**PROVIDER RESPONSE**

**Please provide a brief answer to each of the following questions and then send as an attachment to an email to:** **adairt@dshs.wa.gov** **by close of business on February 28, 2017.**

**For those interested in ESF development:**

**Name of Agency or Entity interested in developing an Enhanced Services Facility, including name, email and phone number the most appropriate person to contact.**

**In what county are you interested in developing an Enhanced Services Facility?**

**Do you currently own or lease a building you are considering using to house the Enhanced Services Facility? If not, do you have a building identified to house the Enhanced Services Facility?**

**Briefly describe how you plan to support the capital costs associated with developing an Enhanced Services Facility. For example, does your interest in an Enhanced Services Facility depend upon availability of grant funding, loans, or other sources of support?**

**If you currently have a facility licensed by Department of Social and Health Services or the Department of Health that you intend to convert to an Enhanced Services Facility, please address the following:**

**What license does the facility currently operate under?**

**Please briefly explain how the facility meets the specifications outlined in the DRAFT Licensing WACs.**

**If the facility does not meet the licensing WAC considerations, please provide a brief explanation of what prohibits the facility from meeting the requirements.**

**Briefly describe the experience the entity that will operate the proposed Enhanced Services Facility has in providing personal care to individuals with highly complex personal care and behavioral challenges.**

**Please share anything else you want us to consider in terms of your interest and/or capacity for developing an Enhanced Services Facility.**

**For SNFs with a current ECS Contract interested in the ECS Plus and ECS Respite addendum to the SNF ECS Contract:**

1. **Name of skilled nursing facility interested in adding the Expanded Community Service Plus and Expanded Community Service Respite addendum to their Medicaid contract, including name, title, email and phone number for the most appropriate person to contact.**
2. **Is your skilled nursing facility owned by a parent company? If so, please provide the name. Also, please provide the names and locations of your partner SNFs in Washington.**
3. **Please briefly describe your capacity to meet the ECS Plus and ECS Respite service elements as outlined in this RFI.**

Attachment A

1. **Please share anything else you want us to consider in terms of your interest and/or capacity for adding ECS Plus and ECS Respite services in your skilled nursing facility.**

For Questions, please contact:

Traci Adair, Resource Support and Development Unit Manager, Aging and Long Term Support Administration/Home and Community Service, Email: adairt@dshs.wa.gov, Phone: 206-341-7653

Attachment B

Fact Sheet: Programs and Initiatives

Enhanced Services Facilities

|  |  |
| --- | --- |
| **Overview** *
 | The Washington State Legislature developed Enhanced Services Facilities (ESF) in order to provide a community placement option for individuals whose complicated personal care and behavioral challenges do not rise to a level that requires an institutional setting. Rather than extended and unnecessary stays in State Hospitals for residents who are not eligible for inpatient psychiatric treatment, residents who have been assessed as discharge-ready can be placed in an ESF. The Legislature authorized the Aging and Long-Term Support Administration to develop this new category of licensed residential facilities under Chapter 70.97 RCW. ESFs will support moves from state hospitals for people who are ready for discharge but would not otherwise have a community placement without this level of service. Enhanced Services Facilities use staffing ratios and behavioral and environmental interventions to serve individuals who are no longer receiving active treatment at a state psychiatric hospital. These facilities offer behavioral health, personal care services and nursing, a combination that is not generally provided in other licensed long-term care settings. |
| **Eligibility Requirements** | The general eligibility requirements for ESF residents are individuals who are at least eighteen years old and require daily care by, or under the supervision of, a mental health professional, chemical dependency professional, or nurse; or assistance with three or more activities of daily living. In addition to the requirements above, the individual must have a mental disorder and/or chemical dependency disorder, organic or traumatic brain injury, or cognitive impairment that results in symptoms or behaviors requiring supervision and facility services.Eligible individuals are those who do not meet the requirements for active treatment at a state hospital, but have not found appropriate placement in other community settings due to: self-endangering behaviors that are frequent or difficult to manage; intrusive behaviors that put residents or staff at risk; complex medication needs which include psychotropic medications; a history of, or likelihood of, unsuccessful placements in other licensed facilities; a history of frequent or protracted mental health hospitalizations; and/or a history of offenses against a person or felony offenses that created substantial damage to property.  |
| **Authority**  | Facilities are regulated by Residential Care Services under [RCW 70.97](http://apps.leg.wa.gov/rcw/default.aspx?cite=70.97), [Chapter 388-107](http://apps.leg.wa.gov/wac/default.aspx?cite=388-107) and [Chapter 388-113 WAC](http://apps.leg.wa.gov/wac/default.aspx?cite=388-113). Parts of Chapters [70.96A](http://apps.leg.wa.gov/rcw/default.aspx?cite=70.96A), [71.05](http://apps.leg.wa.gov/rcw/default.aspx?cite=71.05), [10.77](http://apps.leg.wa.gov/rcw/default.aspx?cite=10.77), [11.88](http://apps.leg.wa.gov/rcw/default.aspx?cite=11.88) RCW and [Chapter 388-112 WAC](http://apps.leg.wa.gov/wac/default.aspx?cite=388-112) also apply to ESFs.  |
| **Budget** | Regulation of this program is supported by state funds as well as facility licensing fees. ESF residents can be either Medicaid-supported or private pay. FY17 Allotment: $3.76 million |
| **Rates** | The Department is authorized to establish license fees sufficient to cover the cost of licensing and enforcement of ESFs.  |
| **Partners** | Western State HospitalEastern State HospitalDepartment of Health Construction Review ServicesState Fire Marshal’s OfficeLong-Term Care Ombuds Program |
| **Oversight**  | Residential Care Services is authorized to license and regulate ESFs in accordance with Chapter 70.97 WAC and other applicable WAC.Department of Health Construction Review Services reviews facilities for compliance with rules as they relate to structural safety prior to licensing and when providers make changes to the building. The State Fire Marshal’s Office inspects each facility on an annual basis in accordance with the fire life safety code.  |

Attachment B

Attachment C

**AMENDMENT ADDING EXPANDED COMMUNITY SERVICES (ECS) PLUS AND ECS RESPITE**

The following ECS Plus and ECS Respite Terms and Conditions are added to this Nursing Facility Services Contract:

# **Definitions**:

## ECS Plus means: A level of behavior support services that includes dedicated staffing and availability of daily behavior support, consultation and training in a skilled nursing environment.

## ECS Program Staff means: A staff position or contracted provider available to give behavior support to residents designated as ECS, ECS Plus or ECS Respite who provides training and consultation to Contractor’s staff and develops and implements individualized behavior support plans for residents designated as ECS, ECS Plus, or ECS Respite

## ECS Respite means: A short-term medically based NF placement as an intervention for ECS or SBS residential clients experiencing an escalation in behavioral challenges that does not fit the definition for mental health voluntary or involuntary detention but that jeopardizes the ECS client’s residential placement as determined by HCS.

### ECS Respite services are intended to be available to ECS/SBS residential clients on a short-term basis. The length of stay in the ECS Respite bed will be 20 days or less for any particular episode of service for any particular ECS residential client unless an exception is provided by the HCS Field Services Administrator or his/her designee.

## Preadmission Screening and Resident Review (PASRR) means: a federal requirement to help ensure that individuals are not inappropriately placed in nursing homes for long term care.

# **ECS Respite**:

## The purpose of this level of care is to provide a short-term medically based intervention for individuals experiencing escalation in behavioral challenges. These behavioral challenges do not fit the definition for mental health voluntary or involuntary detention but the intensity of which may jeopardize the safety of the individual or the other residents as determined by HCS.

## Unless otherwise approved by Home and Community Services, in order to be authorized by Aging and Long-Term Support Administration (ALTSA), Home and Community Services (HCS) to receive services in a short-term ECS Respite bed, an individual must meet the following criteria:

### living in an ALTSA contracted residential setting, and that placement is in imminent jeopardy due to an escalation of behaviors;

### has been authorized for and received at least one episode of behavior support services under the DSHS Contract for waiver ECS Behavior Support/Client Support Training contract and the ECS Behavior Support Team has explored all

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### options and made good faith attempts to support the provider and the individual in maintaining the community placement;

### the current residential provider has stated a good-faith willingness to the HCS Field Services Administrator or designee to accept the individual back into the facility after the stay at the ECS Respite bed;

### approved for ECS Respite by Home and Community Services prior to placement in the ECS Respite bed.

## During the Respite stay, the Contractor will provide the following services to the individual designated as an ECS Respite client:

### Facilitate the Pre-Admission Screening and Resident Review (PASRR) process as needed based on the following information:

#### In accordance with WAC 388-97-1910-2000 and 42 CFR 483.100-138, if the Level 1 PASRR indicates the individual will be completing a respite stay and meets criteria for a categorical determination, the Division of Developmental Disabilities Administration or Behavioral Health Administration PASRR assessor/contractor will be notified by the entity completing the PASRR Level l. The assessor/contractor will approve the categorical determination and monitor the individuals stay. If it is later determined the individual will be remaining in the nursing facility beyond the respite period, the assessor/contractor will complete a full Level II assessment.

### Review and reconcile all medications by or in coordination with the ECS appointed prescriber within the first days after admitting an individual as an ECS Respite client and continue management of psychiatric medications through the ECS respite stay;

### Provide a medical exam within the first three days after admitting an individual as an ECS Respite client to determine whether there are physiological contributors to the behavioral issues;

### Coordinate psychiatric services with a local community mental health agency and schedule an intake as needed;

### Daily behavior support provided to the individual during the respite stay following the client’s ECS Behavior Support Plan;

### Development of Community Integration Plan to support the individual’s return to the community placement to include:

#### Coordination of the Comprehensive Assessment Reporting Evaluation (CARE) assessment and discharge planning with the local HCS office;

#### Collaboration with other local resources to support the individual’s return to the community placement; and

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#### Behavior consultation, training, and technical assistance related to the behaviors that precipitated the need for the ECS Respite services provided to the residential staff prior to the individual returning to the community placement.

### If the current residential or community provider is not able to accept the client back to the community placement, the Contractor must work with HCS to establish an alternate discharge option in order to support the client returning to a less restrictive alternative as soon as possible, unless HCS determines that nursing facility level of care is the most appropriate option for the client at the time that the ECS Respite period has ended.

# **ECS Plus**:

## The purpose of the ECS Plus component of this Contract is to provide capacity for serving individuals who need a level of behavior support that exceeds that available through the ECS services funded in the original contract.

## In addition to the services provided through the ECS NF Contract to which this amendment is attached, the Contractor will provide ECS Plus level of care to residents who are identified by ALTSA as ECS Plus.

## ECS Plus Staff Requirements: The individual or individuals designated as fulfilling this requirement must meet the following professional qualifications:

### Be certified as Geriatric Mental Health Specialists, psychiatric nurses, or mental health professionals or board certified behavior analysts with at least two (2) years’ experience in working with adults who have exceptional long-term care needs due to a combination of medical and behavioral issues.

#### Program staff with at least a bachelor’s degree in a related field who are working toward becoming mental health professionals may provide services under supervision of a mental health professional.

#### An exception to the qualifications may be approved by the HCS program staff after review.

## Through this ECS Plus contract amendment, the Contractor will provide the following:

### The services and supports provided through the ECS Contract; and

### Upon the admission of the first resident authorized by HCS as ECS Plus:

#### a position on staff or by contract that provides access on a daily basis to on-site consultation, behavior intervention and supports at times appropriate to ECS Plus and ECS clients’ needs, with access seven days per week to on-call support as needed. The position will be a part of the ECS Team and can serve as the ECS program staff indicated in the body of this Contract;

#### One Certified Nurse Assistant (CNA) or more per shift based on client need,

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#### seven days per week dedicated to the ECS and ECS Plus group of residents;

### A crisis prevention and intervention protocol established by the ECS Team or as coordinated through local agreements with crisis responders that ensures the capacity for 24/7 on-site response and support with the intention of de-escalating any ECS or ECS Plus resident who is experiencing a behavioral crisis so that his/her placement is maintained.

## The CNA staff dedicated to the ECS Plus program must participate in focused training related to the behavioral support issues. A minimum of 10 of the 12 hours of continuing education that are required in Chapter 388-112 WAC must be relevant to the needs of the ECS and ECS Plus clients. The training can be provided through in-service or other methods. Training content, calendar, and staff participation must be documented.

## The facility’s designated ECS Team must meet to review each ECS Plus resident’s individualized behavior support plans and facility care plans at least twice a month and make adjustments to these plans as needed to ensure the stability and to review the individual’s need for the level of services expected through this Contract.

### HCS reserves the right to change the authorization of any client from ECS Respite to ECS or ECS Plus and any ECS Plus resident to the ECS level of care.

# **Payment**:

## The number of beds available for ECS Plus and ECS Respite will be limited to four (4) at any given time unless otherwise approved by a Home and Community Services headquarters program staff.

## When an individual who is referred to the Contractor moves into the bed designated as ECS Respite, the Contractor will receive the ECS Plus daily add-on rate for the days the bed is filled by the ECS Respite client for up to 20 days.

## ECS Plus and ECS Respite clients receive a rate add-on to the daily nursing home Medicaid direct care component rate. Payment of the add-on is made through the Medicaid Management Information System (MMIS) under Class Code designations that will be provided to the facility.

### ECS Respite services can be authorized for up to 20 days;

### If an individual on ECS Respite does not leave the facility by the 15th day and there is not a clear plan of discharge, the Contractor must notify the HCS Field Services Administrator or designee. The HCS office has authority to approve up to 20 additional days. There will be no additional days of authorization after the second round of approval.

### If the individual does not discharge after the allowed number of days on ECS Respite, the HCS Field Services Administrator or designee will indicate into which Class Code the facility should transfer the client.

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### Payment for those clients designated ECS Plus will be authorized for each ECS Plus client until the HCS Field Services Administrator or designee closes the authorization.

## Contractor shall receive a separate payment for each eligible ECS Plus or ECS Respite client. The Contractor shall expend the additional funds for ECS Plus or ECS Respite clients solely on staff or programs that enhance the provision of care to ECS clients as outlined in this Contract. All services and supports provided through this Contract amendment will be supported by the ECS Plus or ECS Respite add-on.

# All other terms and conditions of this Contract remain in full force and effect.