

ARKANSAS REGISTER

Proposed Rule Cover Sheet



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Name of Department Arkansas Department of Health

Agency or Division Name Health Services Permit Agency

Other Subdivision or Department, If Applicable Health Services Permit Agency

Previous Agency Name, If Applicable _____

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Name of Rule HSC Rule 500M Assisted Living Methodology

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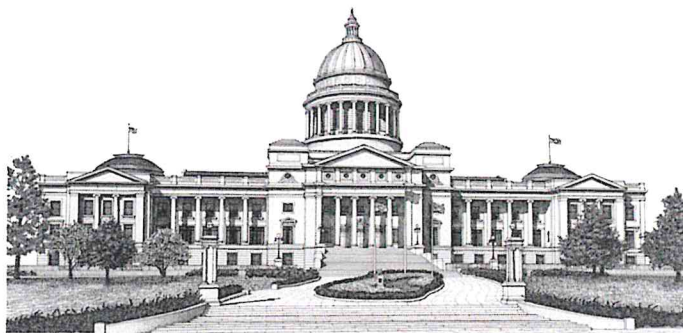
Final Date for Public Comment December 14, 2006

Location and Time of Public Meeting Freeway Medical Building/10am

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Transmittal Sheet

Use only for **FINAL** and **EMERGENCY RULES**



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For Office

Use Only:

Effective Date _____ Code Number _____

Name of Agency Health Services Permit Agency

Department Arkansas Department of Health

Contact Traci Harris E-mail traci.harris@arkansas.gov Phone 501-661-2197

Statutory Authority for Promulgating Rules Arkansas Code Annotated 20-8-103

Rule Title: HSC Rule 500M Assisted Living Methodology

Intended Effective Date

(Check One)

Date

☐ Emergency (ACA 25-15-204)

Legal Notice Published 10/1/2006

☒ 10 Days After Filing (ACA 25-15-204)

Final Date for Public Comment 12/14/2006

☐ Other _____
(Must be more than 10 days after filing date.)

Reviewed by Legislative Council 05/31/2007

Adopted by State Agency 12/14/2006

Electronic Copy of Rule e-mailed from: (Required under ACA 25-15-218)

Traci Harris

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June 20, 2024

Contact Person

E-mail Address

Date

CERTIFICATION OF AUTHORIZED OFFICER

I Hereby Certify That The Attached Rules Were Adopted
In Compliance with the Arkansas Administrative Act. (ACA 25-15-201 et. seq.)

(501) 661-2509

Signature

tracy.steele@arkansas.gov

Phone Number

E-mail Address

Director

Title

June 20, 2024

Date

HSC REGULATION 500M. Assisted Living Methodology (03/07)

SECTION I - DEFINITION

- A. **ASSISTED LIVING FACILITY** means any building or buildings, section or distinct part of a building, whether operated for profit or not, which undertakes through its ownership or management to provide assisted living services for a period exceeding twenty-four (24) hours to more than three (3) adult residents of the facility who are not relatives of the owner or administrator. Assisted living facility includes those facilities, which provide assisted living services either directly or through contractual arrangements or which facilitate contracting in the name of residents.
- B. **ABANDONMENT** means the act of an owner/operator to discontinue the operation of a long-term care facility without the sale of that facility to a responsible purchaser, or without ensuring the placement of all facility residents in appropriate long-term care facilities prior to discontinuing operations of the facility.

SECTION II- SERVICE AREA

The term "Service Area" as used herein means the county in which the beds or facility is located or is to be located.

SECTION III- NEED

POPULATION BASED NEED

This methodology projects the need for Assisted Living beds at 30 beds per 1000 persons who are 65 years old and older. Need will consider the number of proposed and existing ALF beds and the number of proposed and existing RCF beds in a county. Need will be projected five years forward using the most recent census data available from the UALR Institute for Economic Advancement.

An exception to the population based formula exists when occupied beds in all facilities in a county are 75% occupied by residents who are documented to be under the age of 65 years old. In this instance, beds in those facilities will not be counted in the county bed need.

SECTION IV- SIZE

Maximum Size

A maximum of 75 beds will be awarded to any one applicant per service area, per cycle under the population based methodology

SECTION V- UNFAVORABLE REVIEW

A. Existing long-term care facilities will have an unfavorable review if the following quality of care standards are not met:

1. No Nursing Home will be awarded a permit of approval for Assisted Living if the existing facility has had:
 - a. Two Class A violations as found in Ark. Code Ann. § 20-10-205 according to the Office of Long Term Care in any inspection within the last 12 months preceding the date the application is filed with the Health Services Permit Agency; or,
 - b. Two Class B violations as found in Ark. Code Ann. § 20-10-205 according to the Office of Long Term Care in any inspection within the last 12 months preceding the date the application is filed with the Health Services Permit Agency; or,
 - c. A Class A and a Class B violation as found in Ark. Code Ann. § 20-10-205 according to the Office of Long Term Care in any inspection within the last 12 months preceding the date the application is filed with the Health Services Permit Agency; or,
 - d. An H level or higher deficiency, according to the Office of Long Term Care in any inspection within the last 12 months preceding the date the application is filed with the Health Services Permit Agency; or,
 - e. The facility's Medicaid or Medicare provider agreements terminated within twelve (12) months preceding the date the application is filed with the Health Services Permit Agency.
2. No Assisted Living or Residential Care Facility will be awarded a permit of approval for Assisted Living if the existing facility has had:
 - a. Two Class A violations as found in Ark. Code Ann. § 20-10-205 according to the Office of Long Term Care in any inspection within

the last 12 months preceding the date the application is filed with the Health Services Permit Agency; or,

b. Two Class B violations as found in Ark. Code Ann. § 20-10-205 according to the Office of Long Term Care in any inspection within the last 12 months preceding the date the application is filed with the Health Services Permit Agency; or,

c. A Class A and a Class B violation as found in Ark. Code Ann. § 20-10-205 according to the Office of Long Term Care in any inspection within the last 12 months preceding the date the application is filed with the Health Services Permit Agency.

B. An application will be denied if the owner/operator applying for a Permit of Approval has abandoned one or more long-term care facilities in Arkansas or in another state.

C. The Agency may consider an out-of-state applicant's compliance or enforcement history in determining whether to grant a Permit of Approval

D. No application for beds will be approved that:

1. will cause a facility to exceed 100 beds. Any deviation will require special consideration by the Commission.

SECTION VI - REVIEW CRITERIA

The Agency and the Commission will utilize the following criteria in the review process.

A. Whether the proposed project is needed or projected as necessary to meet the needs of the population. Criteria includes review of a detailed business plan that includes a narrative description with supporting data and analysis that illustrates the need for an Assisted Living Facility in the proposed service area. Data and analysis must also include the following:

- Population characteristics of the market or service area by age, gender, income, morbidity, functional impairments. There must also be a narrative description of the relationship between this demographic data and the population expected to enter the proposed Assisted Living Facility.
- Market and Payor mix for intended facility.

- Proximity to other facilities including, Nursing Homes, Hospitals, or clinics.
 - Current local conditions that favor the occupancy or sustainability of the proposed facility.
 - Local support for the project
 - Transportation access to the facility
 - Resident access to other local health, recreational, or other services.
 - Special needs of this community.
 - Special features of this facility.
- B. Whether the project can be adequately staffed and operated when completed. Criteria include projected sources of staffing.
- C. Whether the proposed project is economically feasible.
- D. Whether the project will foster cost containment.