

BOOK B

STATE OF NEW YORK
PUBLIC HEALTH AND HEALTH PLANNING COUNCIL
ESTABLISHMENT AND PROJECT REVIEW COMMITTEE

July 26, 2012
10:15 a.m.

Century House
997 New Loudon Road (Route 9)
Main Ball Room
Latham, New York 12110

AGENDA

On January 25, 2012, the Department issued a request for applications (RFA) to establish new certified home health agencies or expand existing certified home health agencies throughout the State. Because of the large number of responses received, applications are being presented to the PHHPC in two stages, with proposals from the Downstate area (New York City, Nassau, Suffolk, and Westchester Counties) scheduled for review at the July/August PHHPC meetings and those from the Upstate region scheduled for the September/October meetings.

A. Applications for Construction of Health Care Facilities

Certified Home Health Agency – Construction

Exhibit #1

	<u>Number</u>	<u>Applicant/Facility</u>
1.	121210 C	HHC Health and Home Care (New York County)
2.	121226 C	Nursing Sisters Home Care, Inc. d/b/a Catholic Home Care (Suffolk County)
3.	121249 C	Visiting Nurse Services in Westchester, Inc. (Westchester County)
4.	121212 C	Dominican Sisters Family Health Service, Inc. (Westchester County)
5.	121203 C	Personal Touch Home Aides of New York Inc. (Kings County)
6.	121243 C	United Odd Fellow and Rebekah Home LTHHCP (Bronx County)

- 7. 121216 C Visiting Nurse Association of Long Island, Inc.
(Nassau County)
- 8. 121291 C The Wartburg Home
(Westchester County)

B. Applications for Establishment and Construction of Health Care Facilities/Agencies

Certified Home Health Agency – Establish

Exhibit #2

<u>Number</u>	<u>Applicant/Facility</u>
1. 121286 E	Lott Community Home Health Care, Inc. (New York County)
2. 121309 E	Center Light Certified Home Health Care Agency (Kings County)
3. 121256 E	Isabella Care at Home, Inc. (New York County)
4. 121252 E	Jewish Home Lifecare, Community Services (New York County)
5. 121222 E	Lutheran CHHA, Inc. (Kings County)
6. 121247 E	Queens Long Island Certified Home Health Agency, LLC (Queens County)

C. Applications for Construction of Health Care Facilities

Certified Home Health Agency – Construction

Exhibit #3

<u>Number</u>	<u>Applicant/Facility</u>
1. 121262 C	A & T Certified Home Care, LLC (Rockland County)
2. 121201 C	Alpine Home Health Care, LLC (Bronx County)
3. 121259 C	Americare Certified Special Services, Inc. (Kings County)
4. 121217 C	Bethel Nursing Home Co Inc

- (Westchester County)
5. 121229 C Calvary Hospital
(Bronx County)
 6. 121248 C Elderserve Long Term Health Care
(Westchester County)
 7. 121223 C Excellent Home Care Services, LLC
(Kings County)
 8. 121299 C Gentiva Health Services
(Kings County)
 9. 121312 C Good Samaritan Hospital Home Care Department
(Rockland County)
 10. 121287 C Gurwin Jewish Nursing and Rehabilitation Center LTHHCP
(Suffolk County)
 11. 121327 C Hebrew Hospital Home LTHHCP
(Bronx County)
 12. 121322 C Lutheran Long Term Home Health Care Program
(Suffolk County)
 13. 121214 C New York Congregational Nursing Center LTHHCP
(Kings County)
 14. 121231 C Parker Jewish Institute for Health Care and Rehabilitation
(Nassau County)
 15. 121241 C Prime Home Health Services, LLC
(Kings County)
 16. 121221 C Revival Home Health Care
(Kings County)
 17. 121242 C Shining Star Home Care, LLC
(Kings County)
 18. 121323 C St Cabrini Nursing Home
(New York County)
 19. 121271 C St. Johnland Nursing Home Inc.

(Suffolk County)

- 20. 121269 C VIP Certified Health Services, LLC
(Kings County)
- 21. 121187 C VillageCare Certified Home Health Agency
(New York County)
- 22. 121313 C Visiting Nurse Service of New York Home Care
(New York County)
- 23. 121289 C Winthrop-University Hospital Home Health Agency
(Nassau County)

D. Applications for Establishment and Construction of Health Care Facilities/Agencies

Certified Home Health Agency – Establish

Exhibit #4

<u>Number</u>	<u>Applicant/Facility</u>
1. 121246 E	Adar Home Care (Queens County)
2. 121251 E	Aging in America CHHA (Bronx County)
3. 121300 E	Aleta B. Health Care Services, LLC (Kings County)
4. 121326 E	Allhealth Certified Services (Kings County)
5. 121302 E	AlphaCare at Home, LLC (New York County)
6. 121278 E	Alternate Staffing CHHA, LLC (Kings County)
7. 121232 E	Amber Court at Home, LLC (Nassau County)
8. 121308 E	American Care of NY, Inc. (Kings County)

9. 121329 E Angels of Healing Inc
(New York County)
10. 121056 E Balm of Gilead Certified Home Health Agency, Inc.
(Bronx County)
11. 121202 E Best Home Care of NY, Inc.
(Dutchess County)
12. 121283 E Bronxwood Home for the Aged Inc.
(Bronx County)
13. 121292 E CarePoint Home Health, LLC
(Kings County)
14. 121250 E Caring Professionals CHHA, LLC
(Queens County)
15. 121285 E Center for Independence of the Disabled, New York (CIDNY) Certified
Services
(Kings County)
16. 121316 E Community Assistance Resources and Extended Services Inc.
(New York County)
17. 121293 E Community Care Home Health, LLC
(Suffolk County)
18. 121172 E Comprehensive Home Care Services, Inc.
(Kings County)
19. 121260 E Constellation Home Care
(Nassau County)
20. 121234 E Continental Certified Services, Inc.
(Queens County)
21. 121297 E Distinctive Care, Incorporated
(New York County)
22. 121282 E Family Nurse, Inc.
(Westchester County)
23. 121305 E Family Services Network of New York Certified Home Health Agency
(Kings County)

24. 121236 E Golden Age Caregivers, Inc.
(Richmond County)
25. 121276 E Good Help At Home CHHA Inc.
(Bronx County)
26. 121218 E Hamaspik Certified Home Health Care, Inc.
(Rockland County)
27. 121336 E Hope in Home Care
(Erie County)
28. 121310 E Hudson Valley Home Care Services, LLC
(Orange County)
29. 121295 E JOPALS CHHA, LLC d/b/a Perfect Choice Home Care
(Nassau County)
30. 121334 E KPMG USA INC
(Queens County)
31. 121284 E Liberty Home Care of New York, Inc.
(Kings County)
32. 121335 E MMM Care Corp.
(Nassau County)
33. 121207 E Magnolia Home Care, Inc.
(Kings County)
34. 121339 E Metro Community Home Health
(New York County)
35. 121189 E NYC Homecare, Inc.
(Kings County)
36. 121294 E New Century Certified Home Care
(Kings County)
37. 121279 E New Frontiers at Home
(Erie County)
38. 121337 E Prince of Peace Care Group Corp.
(Kings County)

39. 121331 E Rehoboth Home Care Services
(Queens County)
40. 121264 E Rockaway Manor Home Care
(Nassau County)
41. 121263 E Selfhelp Family Home Care, Inc.
(New York County)
42. 121277 E SuCasa Care, Inc.
(Kings County)
43. 121254 E Summit Cares, Inc.
(Kings County)
44. 121368 E Tri-Borough Certified Health Systems of New York, LLC
(Nassau County)
45. 121369 E Tri-Borough Certified Health Systems of the Hudson Valley, LLC
(Westchester County)
46. 121233 E United Hebrew of New Rochelle Certified Home Health Agency, Inc.
(Westchester County)
47. 121272 E WIHD CHHA
(Westchester County)
48. 121301 E WINIS
(Queens County)
49. 121253 E West Brighton Home Care Services Agency Inc.
(Richmond County)
50. 121240 E Your Choice At Home, Inc.
(Kings County)

E. Applications for Construction of Health Care Facilities

Certified Home Health Agency – Construction

Exhibit #5

1. 121448 C Cold Spring Hills Center for Nursing & Rehabilitation
(Nassau County)
2. 121446 C South Nassau Communities Hospital
(Nassau County)
3. 121424 C VillageCare Long Term Home Health Care Program
(New York County)
4. 121442 C Bethel Nursing Home Co Inc.
(Westchester County)
5. 121456 C Fort Tryon Center for Rehabilitation and Nursing
(New York County)
6. 121421 C Four Seasons Nursing and Rehabilitation Center LTHHCP
(Kings County)
7. 121440 C Hillside Manor Nursing Center
(Queens County)
8. 121450 C Kingsbridge Heights Rehabilitation and Care Center
(Bronx County)
9. 121452 C Lutheran Augustana Center for Extended Care and Rehab LTHHP
(Kings County)
10. 121441 C New York Congregational Nursing Center Long Term Home Health Care
Program
(Kings County)
11. 121290 C Park Gardens Rehabilitation and Nursing Center, LLC
(Bronx County)
12. 121436 C PTS of Manhattan LTHHCP
(Kings County)
13. 121457 C Split Rock Rehabilitation and Health Care Center
(Bronx County)

**New York State Department of Health
Public Health and Health Planning Council**

July 26, 2012

APPLICATIONS for CERTIFIED HOME HEALTH AGENCY-CONSTRUCTION

Certified Home Health Agency – Construction

Exhibit #1

	<u>Number</u>	<u>Applicant/Facility</u>
1.	121210 C	HHC Health and Home Care (New York County)
2.	121226 C	Nursing Sisters Home Care, Inc. d/b/a Catholic Home Care (Suffolk County)
3.	121249 C	Visiting Nurse Services in Westchester, Inc. (Westchester County)
4.	121212 C	Dominican Sisters Family Health Service, Inc. (Westchester County)
5.	121203 C	Personal Touch Home Aides of New York Inc. (Kings County)
6.	121243 C	United Odd Fellow and Rebekah Home LTHHCP (Bronx County)
7.	121216 C	Visiting Nurse Association of Long Island, Inc. (Nassau County)
8.	121291 C	The Wartburg Home (Westchester County)



Public Health and Health Planning Council

Project # 121210-C HHC Health and Home Care

County: New York (New York)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 13, 2012

Executive Summary

Description

The Health and Home Care (H&HC) Division of New York City Health and Hospitals Corporation (HHC), an existing public municipality, is requesting approval to expand their existing certified home health agency (CHHA) services into Kings County. HHC Health and Home Care currently serves Bronx, Queens and New York counties.

The applicant proposes to expand the service area of the existing CHHA into Kings County. The applicant plans to establish a new branch office to be located at 160 Water Street, New York, NY 10038 to serve the residents of Kings County.

On December 8, 2011, the Public Health and Health Planning Council adopted an amendment to section 760.5 of Title 10, NYCRR. This emergency regulation authorized the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand the approved geographic service areas and/or approved population of existing CHHA's. HHC Health and Home Care submitted an application in response to the competitive RFA, and was awarded RFA approval. This CON application is in response to the RFA approval.

Effective May 1, 2012, a new Episodic Payment System (EPS) reimbursement methodology to reimburse CHHA providers for services provided to Medicaid patients receiving home care services took effect. The EPS is based on a price for 60-day episodes of care, which will be adjusted by patient acuity and regional wage differences. The EPS was recommended by the Medicaid Redesign Team (MRT proposal # 5) and authorized in the 2011-12 enacted budget. The EPS is designed to address the issue of rapid growth in Medicaid costs per patient by better

aligning payments with needed services, and is part of a broad effort to promote the development of care management arrangements for Medicaid recipients.

For a conservative approach, revenues were calculated in which the lower of incremental cost to episodic payment was projected for year one and year three, and budgets were sensitized.

DOH Recommendation
Approval.

Need Summary
NYC HHC Health & Home Care Division's proposal clearly describes and adequately addresses each of the review criteria used to make determinations for this competitive review.

Program Summary
NYC HHC is currently in compliance with all applicable codes, rules and regulations.

Financial Summary
There are no project costs associated with this application.

Incremental Budget:	<i>Revenues:</i>	\$ 18,142,525
	<i>Expenses:</i>	<u>17,969,226</u>
	<i>Gain/(Loss):</i>	\$ 173,299

It appears that the applicant has demonstrated the capability to proceed in a financially feasible manner.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Approval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

NYC HHC Health & Home Care Division's proposal clearly describes and adequately addresses each of the review criteria used to make determinations for this competitive review. This proposal demonstrates the applicant has the

organizational capacity to successfully implement the MRT initiatives and supports the goals of the Department in advancing these initiatives. The applicant demonstrates public need based on 709.1(a) and provides a description of community need and the health needs of the community supported by data. The applicant has the requisite knowledge and experience in the provision of home health services and demonstrates the potential to produce efficiencies in the delivery of home care services. Finally, the application provides a description how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measureable and sustained improvement in performance.

Recommendation

From a need perspective, approval is recommended.

Programmatic Analysis

Background

New York City Health and Hospitals Corporation (NYC HHC) currently operates a certified home health agency with approval to serve Bronx, New York and Queens counties.

The applicant proposes to expand the service area of the existing CHHA into Kings County. The applicant plans to establish a new branch office to be located at 160 Water Street, New York, NY 10038 to serve the residents of Kings County.

NYC HHC proposes to offer the following health care services: nursing, home health aide, medical supply, equipment and appliances, audiology, homemaker, housekeeper, medical social services, nutritional, personal care, physician services, occupational therapy, physical therapy, respiratory therapy and speech language pathology.

NYC HHC is currently in compliance with all applicable codes, rules and regulations.

Recommendation

From a programmatic perspective, approval is recommended.

Financial Analysis

Operating Budget

The applicant has submitted an incremental operating budget for the first and third years, in 2012 dollars, which is summarized below:

	<u>Year One</u>	<u>Year Three</u>
<u>Revenues:</u>		
Medicaid	\$764,013	\$ 4,021,120
Medicare	637,337	3,354,405
Commercial	355,195	1,892,973
Commercial-Managed Care*	507,843	2,716,047
Private Pay/Other**	<u>1,182,692</u>	<u>6,157,980</u>
Total Revenues	\$3,447,080	\$18,142,525
Expenses	<u>4,328,283</u>	<u>17,969,226</u>
Net Gain(Loss)	\$ (881,203)	\$ 173,299

Utilization by payor source in the first and third years is as follows:

<u>Payor</u>	<u>Years One and Three</u>
Commercial Managed Care*	36.8%
Commercial Fee-For-Service	23.2%
Medicare Fee-For-Service	5.3%
Medicaid Fee-For-Service	7.7%
Private Pay/Other**	25.0%
Charity Care	2.0%

* Represents Fedilis, Health First, and Metro Plus.

**Other represents the personal assistance program and home attendant program to be converted to managed care.

Expense and utilization assumptions are based on the existing CHHA Program's historical experience. Revenues are reflective of current payment rates as well as the recent implementation of the Medicaid Episodic Payment system.

Capability and Feasibility

There are no project costs associated with this application.

Working capital requirements, estimated at \$2,994,871, appear reasonable based on two months of third year expenses and will be provided through the existing operation.

The submitted budget indicates that the applicant will achieve a net loss of \$881,203 and a net gain of \$173,299 incremental net revenue in the first and third years of operations, respectively. Revenue is based on current payment rates for Certified Home Health Agencies. The submitted budget appears reasonable.

Presented as BFA Attachment A is the audited financial summary of New York City Health and Hospitals Corporation in which HHC Health and Home Care is a Division within the system. As shown on BFA Attachment A, the June 30, 2011 financials shows the applicant has maintained positive working capital and experienced deficit net assets and a net loss of \$442,534,000 from operations for 2011. HHC relies on supplemental Medicaid Disproportionate Share Hospital and Upper Payment Limit funds to support its operations, which are estimated at \$1,722,000,000 for fiscal year 2012. HHC has implemented the following management initiatives as of May 2010 into 2014 to increase income from operations:

- Phase I-\$300 million in benefits resulting in a hiring freeze, a reduction in supply costs, improved utilization management, and enhanced collection through improved documentation and coding.
- Phase II-\$300 million in savings through a restructuring program and the implementation of future initiatives to be in place by 2014. These initiatives include this application.

Based on the preceding, it appears that the applicant has demonstrated the financial capability to proceed in a financially feasible manner.

Recommendation

From a financial perspective, approval is recommended.

Attachments

BFA Attachment A	Financial Summary for New York City Health and Hospitals Corporation, June 30, 2011
BFA Attachment B	Financial Summary for New York City Health and Hospitals Corporation, Home and Health Care Division, draft 2012 projected



Public Health and Health Planning Council

Project # 121226-C
Nursing Sisters Home Care, Inc.
d/b/a Catholic Home Care

County: Suffolk (Holtsville)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 17, 2012

Executive Summary

Description

Nursing Sisters Home Care, Inc. d/b/a Catholic Home Care, an existing voluntary, not-for-profit, Certified Home Health Agency (CHHA), is requesting to expand their existing CHHA into Queens County. Catholic Home Care currently serves Nassau and Suffolk counties.

On December 8, 2011, the Public Health and Health Planning Council adopted an amendment to section 760.5 of Title 10, NYCRR. This emergency regulation authorized the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies, or expand the approved geographic service areas and/or approved population of existing CHHA's. Nursing Sisters Home Care, Inc. d/b/a Catholic Home Care submitted an application in response to the competitive RFA, and was awarded RFA approval. This CON application is in response to the RFA approval.

Effective May 1, 2012, a new Episodic Payment System (EPS) reimbursement methodology to reimburse CHHA providers for services provided to Medicaid patients receiving home care services took effect. The EPS is based on a price for 60-day episodes of care, which will be adjusted by patient acuity and regional wage differences. The EPS was recommended by the Medicaid Redesign Team (MRT proposal # 5) and authorized in the 2011-12 enacted budget. The EPS is designed to address the issue of rapid growth in Medicaid costs per patient by better aligning payments with needed services, and is part of a broad effort to promote the development of care management arrangements for Medicaid recipients.

For a conservative approach, revenues were calculated in which the lower of incremental cost to episodic payment was projected for year one and year three, budgets were sensitized.

DOH Recommendation
Approval.

Need Summary

Nursing Sisters Home Care, Inc. d/b/a Catholic Home Care's proposal clearly describes and adequately addresses each of the review criteria used to make determinations for this competitive review.

Program Summary

Nursing Sisters Home Care, Inc. d/b/a Catholic Home Care is currently in compliance with all applicable codes, rules and regulations.

Financial Summary

There are no project costs associated with this application.

Incremental Budget:	<i>Revenues:</i>	\$ 5,544,283
	<i>Expenses:</i>	<u>4,738,474</u>
	<i>Gain/(Loss):</i>	\$ 805,809

It appears that the applicant has demonstrated the capability to proceed in a financially feasible manner.

Recommendations

Health Systems Agency

There is no HSA recommendation for this application.

Office of Health Systems Management

Approval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

Nursing Sisters Home Care, Inc. d/b/a Catholic Home Care's proposal clearly describes and adequately addresses each of the review criteria used to make determinations for this competitive review. This proposal demonstrates the applicant has the organizational capacity to successfully implement the MRT initiatives and supports the goals of the Department in advancing these initiatives. The applicant demonstrates public need based on 709.1(a) and provides a description of community need and the health needs of the community supported by data. The applicant has the requisite knowledge and experience in the provision of home health services and demonstrates the potential to

produce efficiencies in the delivery of home care services. Finally, the application provides a description how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measureable and sustained improvement in performance.

Recommendation

From a need perspective, approval is recommended.

Programmatic Analysis

Background

Nursing Sisters Home Care Inc. dba Catholic Home Care is an existing not-for-profit corporation that operates a certified home health agency (CHHA) with approval to provide services in Nassau and Suffolk Counties.

The applicant proposes to expand the service area of their CHHA into Queens County and will serve the residents of Queens County from their existing branch office located in Rockville Centre.

Catholic Home Care proposes to provide the following home health services to residents of Queens County: home health aide, medical social services, medical supply, equipment and appliances, nursing, nutritional, occupational therapy, physical therapy and speech language pathology.

Nursing Sisters Home Care, Inc. d/b/a Catholic Home Care is currently in compliance with all applicable codes, rules and regulations.

Recommendation

From a programmatic perspective, approval is recommended.

Financial Analysis

Operating Budget

The applicant has submitted an incremental operating budget for the first and third years, in 2012 dollars, which is summarized below:

	<u>Year One</u>	<u>Year Three</u>
<u>Revenues:</u>		
Medicaid	\$ 303,109	\$1,151,894
Medicare	754,555	3,129,185
Commercial	<u>304,603</u>	<u>1,263,204</u>
Total Revenues	\$1,362,266	\$5,544,283
Expenses	<u>1,208,181</u>	<u>4,738,474</u>
Net Gain(Loss)	\$ 154,085	\$ 805,809

Utilization by payor source in the first and third years is as follows:

	<u>Years One and Three</u>
Commercial Managed Care	25.0%
Medicare Fee-for-Service	48.0%
Medicaid Managed Care	25.0%
Charity Care	2.0%

Expense and utilization assumptions are based on the existing CHHA Program's historical experience. Revenues are reflective of current payment rates as well as the recent implementation of the Medicaid Episodic Payment system, in which the lower of incremental cost to episodic payment was projected for year one and year three for a conservative approach.

Capability and Feasibility

There are no project costs associated with this application.

Working capital requirements, estimated at \$789,746, appear reasonable based on two months of third year expenses and will be provided through the existing operation.

The submitted budget indicates that the applicant will achieve a \$154,085 and \$805,809 incremental net revenue in the first and third years of operations, respectively.

Revenue is based on current payment rates for Certified Home Health Agencies. DOH staff has sensitized the budgets to reflect the effect of the EPS payments. Presented on BFA Attachment C is the sensitivity analysis. The submitted budget appears reasonable.

Presented as BFA Attachment B is the draft financial summary of Catholic Home Care which shows the applicant has experienced negative working capital and net deficit and achieved net loss of \$18,543,000 from operations for 2011. The applicant experienced negative working capital, net deficit and net operating loss in 2011. Catholic Home Care has set up a task force and monitoring team to take corrective action to increase revenues by enhancing reporting mechanisms and focusing on a new Medicaid episodic payment system, and by decreasing expenses through staff reductions and making changes to self-insured employee medical benefits.

Based on the preceding, it appears that the applicant has demonstrated the financial capability to proceed in a financially feasible manner.

Recommendation

From a financial perspective, approval is recommended.

Attachments

BFA Attachment A	Organizational Chart of Catholic Health Services of Long Island
BFA Attachment B	Financial Summary for Catholic Home Care, draft 2011
BFA Attachment C	Financial Summary for Catholic Home Care, May 31, 2012 internals
BFA Attachment D	Sensitivity Analysis for Episodic Payment System



Public Health and Health Planning Council

Project # 121249-C Visiting Nurse Services in Westchester, Inc.

County: Westchester (White Plains)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 18, 2012

Executive Summary

Description

Visiting Nurse Services in Westchester, Inc., an existing not-for-profit corporation, requests approval to expand its CHHA services to residents in Dutchess, Rockland and Bronx Counties. The CHHA will offer the following services: nursing, physical therapy, speech therapy, occupational therapy, medical social services and home health aide. The applicant's parent corporation is Westchester Visiting Nurse Services Group, Inc.

The applicant also requested approval to serve the following upstate counties: Dutchess and Rockland. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting. Therefore, this application has been amended by the Department to remove the request for the upstate counties.

On December 8, 2011, the Public Health and Planning Council adopted an amendment to Section 760.5 of Title 10, NYCRR. This emergency regulation authorized the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies, or expand the approved geographic service areas and/or approved population of existing CHHA's. Visiting Nurse Services in Westchester, Inc. submitted an application in response to the competitive RFA and was awarded RFA approval. This CON application is in response to the RFA approval.

Effective May 1, 2012, a new Episodic Payment System (EPS) reimbursement methodology to reimburse CHHA providers for services provided to Medicaid patients receiving home care services took effect. The EPS is based on a price for 60 day episodes of care, which will be adjusted by patient acuity and regional wage differences. The EPS was recommended by the Medicaid Redesign Team (MAT proposal #5) and

authorized in the 2011-2012 enacted budget. The EPS is designed to address the issue of rapid growth in Medicaid costs per patient by better aligning payments with needed service and is part to a broad effort to promote the development of care management arrangements for Medicaid recipients.

For a conservative approach, revenues were calculated in which the lower of incremental cost to episodic payment was projected for year one and year three, and budgets were sensitized.

DOH Recommendation

Disapproval as proposed. Contingent approval as amended by the Department, to serve Bronx county.

Need Summary

Visiting Nurse Services in Westchester, Inc.'s (VNSW) proposal clearly describes and adequately addresses each of the review criteria used to make determinations for this competitive review.

Program Summary

Visiting Nurse Services in Westchester, Inc. is currently in compliance with all applicable codes, rules and regulations.

Financial Summary

There are no project costs associated with this application.

Budget:	Revenues:	\$ 1,809,196
	Expenses:	<u>1,741,574</u>
	Gain/(Loss):	\$ 67,622

The applicant has demonstrated the capability to proceed in a financially feasible manner, and approval is recommended.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Approval contingent upon:

1. Submission of new incremental budgets to be re-evaluated for financial feasibility for all counties approved for establishment or expansion that are acceptable to the Department of Health. [BFA]

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

Visiting Nurse Services in Westchester, Inc.'s (VNSW) proposal clearly describes and adequately addresses each of the review criteria used to make determinations for this competitive review. This proposal demonstrates the applicant

has the organizational capacity to successfully implement the MRT initiatives and supports the goals of the Department in advancing these initiatives. The applicant demonstrates public need based on 709.1(a) and provides a description of community need and the health needs of the community supported by data. The applicant has the requisite knowledge and experience in the provision of home health services and demonstrates the potential to produce efficiencies in the delivery of home care services. Finally, the application provides a description how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measureable and sustained improvement in performance.

The applicant also requested approval to serve the following upstate counties: Dutchess and Rockland. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting. Therefore, this application has been amended by the Department to remove the request for the upstate counties.

Recommendation

From a need perspective, disapproval as proposed. Approval as amended by the Department is recommended.

Programmatic Analysis

Background

Visiting Nurse Services in Westchester, Inc., an existing not-for-profit corporation which operates a certified home health agency with approval to serve Westchester and Putnam counties.

The applicant proposes to expand their service area of the existing CHHA into Bronx, Dutchess, and Rockland counties. Visiting Nurse Services in Westchester, Inc. proposes to serve these counties from their existing offices and does not contemplate opening any additional branch offices to serve the expanded service area at this time.

Visiting Nurse Services in Westchester, Inc. proposes to provide the following home health services to Dutchess, Rockland and Bronx Counties: nursing, home health aide, physical therapy, occupational therapy, speech language pathology, medical social services and medical supply, equipment and appliances.

The applicant also requested approval to serve the following upstate counties: Dutchess and Rockland. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting. Therefore, this application has been amended by the Department to remove the request for the upstate counties.

Visiting Nurse Services in Westchester, Inc. is currently in compliance with all applicable codes, rules and regulations.

Recommendation

From a programmatic perspective, disapproval as proposed. Approval as amended by the Department is recommended.

Financial Analysis

Operating Budget

The applicant has submitted an incremental operating budget, in 2012 dollars, for the first and third years, summarized below:

	<u>Year One</u>	<u>Year Three</u>
Revenues:		
Medicaid Fee-For-Service	\$464,080	\$584,957
Medicare Fee-For-Service	690,702	1,021,037

Commercial Fee-For-Service	19,738	26,696
Private Pay	710	1,136
Other	<u>116,724</u>	<u>175,370</u>
Total Revenues	\$1,291,954	\$1,809,196
Expenses	<u>1,345,069</u>	<u>1,741,574</u>
Excess of Revenues over Expenses	<u>(\$53,115)</u>	<u>\$67,622</u>

Utilization by payor source for the first and third years is as follows:

	<u>Year One</u>	<u>Year Three</u>
Medicaid Fee-For-Service	55.12%	51.53%
Medicare Fee-For-Service	38.33%	42.13%
Commercial Fee-For-Service	.70%	.59%
Private Pay	.02%	.02%
Other	3.83%	3.73%
Charity Care	2.00%	2.00%

Expense and utilization assumptions are based on the existing CHHA Program's historical experience. Revenues are reflective of current payment rates as well as the recent implementation of the Medicaid Episodic Payment System.

Capability and Feasibility

There are no project costs associated with this application.

Working capital requirements, estimated at \$290,262, appear reasonable based on two months of third year expenses and will be provided through the existing operation. Presented as BFA Attachment A are the 2011 certified financial statements of the parent, Westchester Visiting Nurse Services Group, Inc. and subsidiaries, which indicates the availability of sufficient funds to meet the working capital contribution.

The submitted budget indicates an excess of revenues over expenses of (\$53,115) and \$67,622 during the first and third years, respectively. Revenues are reflective of current payment rates as well as the recent implementation of the Medicaid Episodic Payment System. The submitted budget appears reasonable.

As shown on Attachment A, the entity had a positive working capital position and a positive net asset position in 2011. The entity incurred an operating loss of \$1,552,490 during 2011. Westchester Visiting Nurse Services Group, Inc. also includes Westchester Care at Home, a licensed home care agency. The applicant has indicated that the losses were the result of the losses attributed to Visiting Nurse Services in Westchester, Inc., which will be discussed further in a subsequent section. The losses were also the result of losses by Westchester Care at Home (WCAH), the licensed home care agency, due to the following: the licensed home care agency was required to refund a total of \$649,000 as part of the Medicaid recoupment/elimination of the trend factor, and during 2010, the State of New York Office of the Medicaid Inspector General (OMIG) conducted an audit of WCAH and found overpayments made to the facility of \$469,341.

Presented as BFA Attachment B is the 2011 certified financial statements of Visiting Nurse Services in Westchester, Inc. As shown on Attachment B, the facility had a negative working capital position and a positive net asset position in 2011. The facility incurred an operating excess of revenues over expenses of (\$1,085,379) in 2011. The applicant has indicated that the reason for the loss is the facility incurred a one-time and non-recurring severances for former key management personnel totaling \$507,000; incurred approximately \$784,000 relating to marketing and promotional materials, of which \$559,000 are one-time non-recurring costs related to media advertising. In 2012, the facility has taken steps to improve operations by maximizing productivity of service delivery staff.

Presented as BFA Attachment C are the May 31, 2012 internal financial statements of Visiting Nurse Services in Westchester, Inc. As shown on Attachment C, the facility had a negative working capital position and a positive net asset position through May 31, 2012. The applicant incurred an operating loss of \$133,700 through May 31, 2012.

The applicant has demonstrated the capability to proceed in a financially feasible manner, and contingent approval is recommended.

Recommendation

From a financial perspective, contingent approval is recommended.

Attachments

BFA Attachment A	2011 Certified financial statements of Westchester Visiting Nurse Services Group, Inc.
BFA Attachment B	2011 Certified financial statements of Visiting Nurse Services in Westchester, Inc.
BFA Attachment C	May 31, 2012 internal financial statements of Visiting Nurse Services in Westchester, Inc.



Public Health and Health Planning Council

Project # 121212-C
Dominican Sisters Family Health Service, Inc.

County: Westchester (Ossining)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 16, 2012

Executive Summary

Description

Dominican Sisters Family Health Services, Inc. (DSFHS), an existing not-for profit corporation, which operates a full service Certified Home Health Agency (CHHA), Long Term Home Health Care Program (LTHHCP) and an AIDS Home Care Program (AHCP), is requesting to expand their existing certified home health agency (CHHA) into Kings, Nassau, New York, Orange, Putnam, Queens, Rockland and Richmond counties.

The applicant also requested approval to serve the following upstate counties: Orange, Putnam and Rockland. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting. Therefore, this application has been amended by the Department to remove the request for the upstate counties.

On December 8, 2011, the Public Health and Health Planning Council adopted an amendment to section 760.5 of Title 10, NYCRR. This emergency regulation authorized the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies, or expand the approved geographic service areas and/or approved population of existing CHHA's. DSFHS submitted an application in response to the competitive RFA, and was awarded RFA approval. This CON application is in response to the RFA approval.

Effective May 1, 2012, a new Episodic Payment System (EPS) reimbursement methodology to reimburse CHHA providers for services provided to Medicaid patients receiving home care services took effect. The EPS is based on a price for 60-day episodes of care, which will be adjusted by patient acuity and regional wage differences. The EPS was recommended by the Medicaid Redesign Team (MRT proposal # 5) and authorized in the 2011-12 enacted budget. The EPS is

designed to address the issue of rapid growth in Medicaid costs per patient by better aligning payments with needed services and is part of a broad effort to promote the development of care management arrangements for Medicaid recipients.

For a conservative approach, revenues were calculated in which the lower of incremental cost to episodic payment was projected for year one and year three, and budgets were sensitized.

DOH Recommendation

Disapproval as proposed. Contingent approval as amended by the Department, to serve Kings, Nassau, New York, Queens, and Richmond counties.

Need Summary

DSFHS's proposal clearly describes and adequately addresses each of the review criteria used to make determinations for this competitive review.

Program Summary

DSFHS is currently in compliance with all applicable codes, rules and regulations.

Financial Summary

There are no project costs associated with this application.

Incremental Budget:	Revenues:	\$ 7,473,806
	Expenses:	<u>5,972,321</u>
	Gain/(Loss):	\$ 1,501,485

It appears that the applicant has demonstrated the capability to proceed in a financially feasible manner.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Approval contingent upon:

1. Submission of new incremental budgets to be re-evaluated for financial feasibility for all counties approved for establishment or expansion that are acceptable to the Department of Health. [BFA]

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

Dominican Sisters Family Health Service, Inc.'s proposal clearly describes and adequately addresses each of the review criteria used to make determinations for this competitive review. This proposal demonstrates the applicant has

the organizational capacity to successfully implement the MRT initiatives and supports the goals of the Department in advancing these initiatives. The applicant demonstrates public need based on 709.1(a) and provides a description of community need and the health needs of the community supported by data. The applicant has the requisite knowledge and experience in the provision of home health services and demonstrates the potential to produce efficiencies in the delivery of home care services. Finally, the application provides a description how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measureable and sustained improvement in performance.

The applicant also requested approval to serve the following upstate counties: Orange, Putnam and Rockland. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting. Therefore, this application has been amended by the Department to remove the request for the upstate counties.

Recommendation

From a need perspective, disapproval as proposed. Approval as amended by the Department is recommended.

Programmatic Analysis

Background

Dominican Sisters Family Health Service, Inc. is an existing not-for-profit corporation which operates a certified home health agency (CHHA), long term home health care program (LTHHCP) and an AIDS home care program (AHCP). Dominican Sisters Family Health Service, Inc.'s CHHA is currently authorized to serve patients in Westchester, Bronx and Suffolk counties and their LTHHCP and AIDS home care program is currently authorized to serve patients in Bronx, Kings, New York, Queens, Suffolk and Westchester counties.

The applicant proposes to expand service area of the existing CHHA into Kings, Nassau, New York, Queens, Richmond, Orange, Putnam, and Rockland counties. Dominican Sisters Family Health Service, Inc. will serve these counties from their existing offices and does not contemplate opening any additional branch offices to serve the expanded service area at this time.

Dominican Sisters Family Health Service, Inc. proposes to provide the following health care services: home health aide, medical social services, medical supply, equipment and appliances, nursing, nutritional, occupational therapy, physical therapy and speech language pathology.

Dominican Sisters Family Health Service, Inc. is currently in compliance with all applicable codes, rules and regulations.

The applicant also requested approval to serve the following upstate counties: Orange, Putnam and Rockland. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting. Therefore, this application has been amended by the Department to remove the request for the upstate counties.

Recommendation

From a programmatic perspective, disapproval as proposed. Approval as amended by the Department is recommended.

Financial Analysis

Operating Budget

The applicant has submitted an incremental operating budget for the first and third years, in 2012 dollars, which is summarized below:

	<u>Year One</u>	<u>Year Three</u>
Revenues:		
Medicaid	\$575,456	\$1,461,529
Medicare	1,575,688	4,283,210
Commercial	<u>636,081</u>	<u>1,729,066</u>
Total Revenues	\$2,787,226	\$7,473,806
Expenses	<u>\$2,293,872</u>	<u>\$5,972,321</u>
Net Gain(Loss)	\$493,354	\$1,501,485

Utilization by payor source for combined programs in the first and third years is as follows:

	<u>Year One</u>	<u>Year Three</u>
Commercial Managed Care	24.70%	24.68%
Medicare Fee-for-service	48.70%	48.67%
Medicaid Managed Care	24.60%	24.65%
Charity Care	2.00%	2.00%

Expense and utilization assumptions are based on the existing CHHA Program's historical experience. Revenues are reflective of current payment rates as well as the recent implementation of the Medicaid Episodic Payment system in which the lower of incremental cost to episodic payment was projected for year one and year three for a conservative approach.

Capability and Feasibility

There are no project costs associated with this application.

Working capital requirements, estimated at \$995,387, which appears reasonable based on two months of third year expenses and will be provided through the existing operation.

The submitted budget indicates that the applicant will achieve incremental net revenue in the first and third years of operations of \$493,354 and 1,501,485, respectively. Revenue is based on current payment rates for Certified Home Health Agencies. DOH staff has sensitized the budgets to reflect the effect of the EPS payments. Presented on BFA Attachment C is the sensitivity analysis. The submitted budget appears reasonable.

Presented as BFA Attachment A is the audited financial summary of Dominican Sisters Family Health Services, Inc., which shows the applicant has maintained a negative working capital position and a positive net asset position and achieved an average net loss of \$164,330 from operations for the period 2010 through 2011. The loss in 2011 was \$746,500 and it is attributable to a 6% decrease in the Medicare Episodic rates and the 2% decrease in the Medicaid rates, which both went into effect in 2011. The facility has made adjustments to its operating expenses and has increased its Medicare case mix in order to maintain a positive operating margin. BFA Attachment B shows the internal 2012 financial summary ending May 31, 2012. The applicant continues to maintain a negative working capital position and a positive net asset position as well as a negative net income position. The reason for the negative net income is due to a retroactive adjustment to the agency's 2011 Medicaid rate, which was posted in May 2012, and the other loss through May that caused a negative net income was due to the acquisition of Elizabeth Seton Pediatric LTHHCP. The loss is due to the facility having a lower than anticipated census caused by the delays in closing the Elizabeth Seton program and transferring the patients to Dominican Sisters. Once the program has come back up to full capacity, the applicant projects that they will again be operating at a positive net income.

Based on the preceding, it appears that the applicant has demonstrated the financial capability to proceed in a financially feasible manner, and contingent approval is recommended.

Recommendation

From a financial perspective, contingent approval is recommended.

Attachments

- BFA Attachment A Financial Summary for Dominican Sisters Family Health Services, Inc (2011 and 2010)
- BFA Attachment B Financial Summary for Dominican Sisters Family Health Services, Inc , May 31, 2012
- BFA Attachment C Sensitivity Analysis for Episodic Payment System



Public Health and Health Planning Council

Project # 121203-C
Personal Touch Home Aides of New York, Inc.

County: Kings (Brooklyn)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 12, 2012

Executive Summary

Description

Personal Touch Home Aides of New York, Inc., an existing Article 36 proprietary corporation, located at 2701 Emmons Avenue in Brooklyn, currently operating a certified home health agency (CHHA) servicing Kings County, requests approval to expand its CHHA to provide services in Bronx, New York, Queens, Richmond, Nassau and Suffolk Counties. The applicant will lease additional office space in West Hempstead and Bronx.

On December 8, 2011, the Public Health and Health Planning Council adopted an amendment to section 760.5 of Title 10, NYCRR. This emergency regulation authorized the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies, or expand the approved geographic service areas and/or approved population of existing CHHAs. Personal Touch Aides of New York, Inc. submitted an application in response to the competitive RFA, and was awarded RFA approval. This CON application is in response to the RFA approval.

Effective May 1, 2012, a new Episodic Payment System (EPS) reimbursement methodology to reimburse CHHA providers for services provided to Medicaid patients receiving home care services took effect. The EPS is based on a price for 60-day episodes of care, which will be adjusted by patient acuity and regional wage differences. The EPS was recommended by the Medicaid Redesign Team (MRT proposal #5) and authorized in the 2011-12 enacted budget. The EPS is designed to address the issue of rapid growth in Medicaid costs per patient by better aligning payments with needed services and is part of a broad effort to promote the development of care management arrangements for Medicaid recipients.

For a conservative approach, revenues were calculated in which the lower of incremental cost to episodic payment was projected for year one and year three, and budgets were sensitized.

DOH Recommendation
Contingent approval.

Need Summary
Personal Touch Home Aides of NY, Inc.'s proposal clearly describes and adequately addresses each of the review criteria used to make determinations for this competitive review.

Program Summary
Personal Touch Home Aides of New York, Inc. is currently in compliance with all applicable codes, rules and regulations.

Financial Summary
There are no project costs associated with this application.

Incremental Budget:	<i>Revenues:</i>	\$ 6,272,578
	<i>Expenses:</i>	<u>5,902,592</u>
	<i>Gain/Loss:</i>	\$ 369,986

It appears that the applicant has demonstrated the capability to proceed in a financially feasible manner.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Approval contingent upon:

1. Submission of executed building leases acceptable to the Department of Health. [BFA]
2. Submission of new incremental budgets to be re-evaluated for financial feasibility for all counties approved for establishment or expansion that are acceptable to the Department. [BFA]

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

Personal Touch Home Aides of NY, Inc.'s proposal clearly describes and adequately addresses each of the review criteria used to make determinations for this competitive review. This proposal demonstrates the applicant has the organizational capacity to successfully implement the MRT initiatives and supports the goals of the Department in

advancing these initiatives. The applicant demonstrates public need based on 709.1(a) and provides a description of community need and the health needs of the community supported by data. The applicant has the requisite knowledge and experience in the provision of home health services and demonstrates the potential to produce efficiencies in the delivery of home care services. Finally, the application provides a description how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measureable and sustained improvement in performance.

Recommendation

From a need perspective, approval is recommended.

Programmatic Analysis

Background

Personal Touch Home Aides of New York, Inc. is an existing proprietary corporation which operates a certified home health agency with approval to serve Kings County.

The applicant proposes to expand the service area of the existing CHHA into Bronx, New York, Queens, Richmond, Nassau and Suffolk counties. Personal Touch Home Aides of New York, Inc. proposes to serve the residents of these counties from their existing office located at 2701 Emmons Avenue, Brooklyn, NY 11235 and proposes to open a new branch offices which will be located at 509 Willis Avenue, Bronx, New York 10455 and 60 Hempstead Avenue, West Hempstead, NY 11552..

Personal Touch proposes to offer the following health care services: home health aide, medical social services, medical supply, equipment and appliances, nursing, occupational therapy, physical therapy and speech language pathology.

Personal Touch Home Aides of New York, Inc. is currently in compliance with all applicable codes, rules and regulations.

Recommendation

From a programmatic perspective, approval is recommended.

Financial Analysis

Lease Agreements

The applicant has submitted proposed lease agreements, the terms of which are summarized below:

Landlord: Personal Touch Home Care of LI, Inc.
Tenant: Personal Touch Homes Aides of New York, Inc.
Premises: Approximately 1,000 sq. ft. located at 60 Hempstead Ave., West Hempstead
Rental: \$20,000/year (\$20/sq. ft.)
Term: 5 year term with the option to renew for an additional 5 years.
Provisions: Tenant is responsible for maintenance and utilities

Landlord: Personal Home Care of NY, Inc.
Tenant: Personal Touch Home Aides of New York, Inc.
Premises: Approximately 1,000 sq. ft. located at 509 Willis Ave., Bronx.
Rental: \$20,000/year (\$20/sq. ft.)
Term: 5 year term with the option to renew for an additional 5 years
Provisions: Tenant is responsible for maintenance and utilities.

The applicant has indicated that the leases will be non-arm's length lease agreements, and letters of opinion from Licenses Commercial Real Estate Brokers have been submitted indicating rent reasonableness.

Operating Budget

The applicant has submitted an incremental operating budget for the first and third years, in 2012 dollars, which are summarized below:

	<u>Year One</u>	<u>Year Three</u>
Revenues:		
Medicaid	\$1,889,040	\$4,662,013
Medicare	514,443	1,406,146
Commercial	<u>74,788</u>	<u>204,419</u>
Total Revenue:	\$2,478,271	\$6,272,578
Expenses:	<u>\$2,323,457</u>	<u>\$5,902,592</u>
Net Income:	\$154,814	\$369,986

Utilization by payor source in the first and third years is as follows:

	<u>Years One and Three</u>
Commercial Managed Care	2%
Medicare Fee for Service	15%
Medicaid Managed Care	81%
Charity Care	2%

Expenses and utilization assumptions are based on existing CHHA Program's historical experience.

Revenues are reflective of current payment rates as well as the recent implementation of the Medicaid Episodic Payment system in which the lower of incremental cost to episodic payment was projected for year one and year three for a conservative approach.

Capability and Feasibility

There are no project costs associated with this application.

Working capital requirements are estimated at \$983,765 based on two months of third year expenses and will be provided through the existing operation. Presented as BFA Attachment A, is the financial summary of Personal Touch Home aides of New York, Inc., which indicates the availability of sufficient funds.

The submitted budget indicates a net income of \$154,814 and \$369,986 for the first and third years, respectively. Revenue is based on current payment rates for Certified Home Health Agencies. DOH staff has sensitized the budgets to reflect the effect of the EPS payments. Presented as BFA Attachment B is the sensitivity analysis. The budget appears reasonable.

As shown on BFA Attachment A, a financial summary of Personal Touch Home Aides of New York, Inc. indicates that the facility has experienced negative working capital and negative stockholder's equity and generated an operating income of \$30,523,000 and \$18,969,000 for 2010 and 2011, respectively. As shown on BFA Attachment B, a financial summary of Personal Touch Home Aides of New York, Inc. as of March 31, 2012 indicates that the facility has experienced negative working capital and negative stockholder's equity and generated a net income of \$3,053,000.

The applicant has indicated the reason for the negative working capital is due to an increase in Due to Third Party Payer. The liability is recorded as current, although it is a long term liability, because of GAAP requirements. The negative stockholder's equity is due to the applicant establishing an Employee Stock Ownership Plan (ESOP) in December 2010. The unearned ESOP shares are included as a reduction of stockholder's equity as required by GAAP.

Based on the preceding, it appears that the applicant has demonstrated the capability to proceed in a financially feasible manner, and contingent approval is recommended.

Recommendation

From a financial perspective, contingent approval is recommended.

Attachments

BFA Attachment A	Financial Summary, Personal Touch Home Aides of New York, Inc.
BFA Attachment B	Financial Summary as of March 31, 2012, Personal Touch Home Aides of New York, Inc.
BFA Attachment C	Sensitivity Analysis for Episodic Payment System



Public Health and Health Planning Council

Project # 121243-C United Odd Fellow and Rebekah Home LTHHCP

County: Bronx (Bronx)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 18, 2012

Executive Summary

Description

Rebekah Rehabilitation and Extended Care Center, a 215-bed not-for-profit skilled nursing facility located in Bronx County, requests approval to expand the long term home health care program (LTHHCP) by establishing a certified home health care agency (CHHA) to serve the residents of Bronx County. The CHHA would provide the following services: Nursing, physical therapy, speech therapy, occupational therapy, medical social services, home health aides and nutrition services. The applicant operates a LTHHCP that is called United Odd Fellow and Rebekah Home LTHHCP.

On December 8, 2011, the Public Health and Health Planning Council adopted an amendment to section 760.5 of Title 10, NYCRR. This emergency regulation authorized the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies, or expand the approved geographic service areas and/or approved population of existing CHHA's. United Odd Fellow and Rebekah Home submitted an application in response to the competitive RFA, and was awarded RFA approval. This CON application is in response to the RFA approval.

Effective May 1, 2012, a new Episodic Payment System (EPS) reimbursement methodology to reimburse CHHA providers for services provided to Medicaid patients receiving home care services took effect. The EPS is based on a price for 60 day episodes, which will be adjusted by patient acuity and regional wage differences. The EPS was recommended by the Medicaid Redesign Team (MRT proposal #5) and authorized in the 2011-2012 enacted budget. The EPS is designed to address the issue of rapid growth in Medicaid costs per patient by better

aligning payments with needed services and is part of a broad effort to promote the development of care management arrangements for Medicaid recipients.

For a conservative approach, revenues were calculated in which the lower of incremental cost to episodic payment was projected for year one and year three, and budgets were sensitized.

DOH Recommendation
Approval.

Need Summary
Rebekah Rehab Certified Home Health Agency's proposal clearly describes and adequately addresses each of the review criteria used to make determinations for this competitive review.

Program Summary
United Odd Fellow and Rebekah Home, Inc. is currently in compliance with all applicable codes, rules and regulations.

Financial Summary
There are no project costs associated with this application.

Incremental Budget:	<i>Revenues:</i>	\$ 11,042,912
	<i>Expenses:</i>	<u>10,772,977</u>
	<i>Gain/(Loss):</i>	\$ 269,935

It appears that the applicant has demonstrated the capability to proceed in a financially feasible manner.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Approval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

Rebekah Rehab Certified Home Health Agency's proposal clearly describes and adequately addresses each of the review criteria used to make determinations for this competitive review. This proposal demonstrates the applicant has the organizational capacity to successfully implement the MRT initiatives and supports the goals of the Department in

advancing these initiatives. The applicant demonstrates public need based on 709.1(a) and provides a description of community need and the health needs of the community supported by data. The applicant has the requisite knowledge and experience in the provision of home health services and demonstrates the potential to produce efficiencies in the delivery of home care services. Finally, the application provides a description how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measureable and sustained improvement in performance.

Recommendation

From a need perspective, approval is recommended.

Programmatic Analysis

Background

United Odd Fellow and Rebekah Home, Inc, is an existing not-for-profit corporation that operates an Article 28 residential health care facility and an Article 36 long term home health care program with approval to provide services in Bronx County.

The applicant proposes to establish an Article 36 certified home health agency to serve the residents of Bronx County and will continue to operate the long term home health care program. The CHHA will be operated out of the offices that currently house the LTHHCP which are located at 1040 Havemeyer Avenue, Bronx, NY 10462..

The applicant proposes to provide the following home health services: home health aide, medical social services, medical supply, equipment and appliances, nursing, nutritional, occupational therapy, physical therapy and speech language pathology.

United Odd Fellow and Rebekah Home, Inc. is currently in compliance with all applicable codes, rules and regulations.

Recommendation

From a programmatic perspective, approval is recommended.

Financial Analysis

Operating Budget

The applicant has submitted an incremental operating budget in 2012 dollars, during the first and third years, which are summarized below:

	<u>Year One</u>	<u>Year Three</u>
Medicaid Fee-for-Service	\$1,773,754	\$1,650,440
Medicaid Managed Care	1,705,625	6,349,410
Medicare Fee-for-Service	1,107,940	2,693,862
Medicare Managed Care	131,330	316,800
Other	<u>13,500</u>	<u>32,400</u>
Total Revenues	\$4,732,149	\$11,042,912
 Expenses	 4,691,227	 10,772,977
 Net Gain (Loss)	 <u>\$40,922</u>	 <u>\$269,935</u>

Utilization by payor source during the first and third years is as follows:

	<u>Year One</u>	<u>Year Three</u>
Medicaid Fee-for-Service	36%	16%
Medicaid Managed Care	36%	57%
Medicare Fee-for-Service	22%	22%
Medicare Managed Care	3%	2%
Charity Care	3%	3%

Revenues are reflective of current payment rates as well as the recent implementation of the Medicaid Episodic Payment System. Expense assumptions are based on salaries in the area for CHHA services. Utilization assumptions are based on the applicant's discussions with former nurses currently employed by the applicant's long term home health team.

There are no project costs associated with this application.

Working capital requirements, estimated at \$1,795,496, appear reasonable based on two months of third year expenses. Presented as BFA Attachment B is the draft financial statements of United Odd Fellow and Rebekah Home d/b/a Rebekah Rehab and Extended Care Center, which indicates the availability of sufficient funds for the equity contribution to meet the working capital requirements.

The submitted budget indicates that the applicant will achieve an excess of revenues over expenses of \$40,922 and \$269,935 during the first and third years, respectively. Revenues are based on current payment rates as well as recent implementation of the Medicaid Episodic Payment System. The submitted budget appears reasonable. Presented as BFA Attachment A are the 2010 and 2011 financial statements. Year 2010 is certified and 2011 is a year end draft financial statement of United Odd Fellow and Rebekah Home LTHHCP. As shown on Attachment A, the entity had an average positive working capital position and an average positive net asset position. Also, the applicant has indicated an excess of revenues over expenses of \$601,049 in 2011 and an operating loss of \$486,728 in 2010. The reason for the loss was a prior year positive rate adjustment of \$733,709, which was received in 2011. Upon pending re-statement of the 2010 financial statements, they would now reflect an excess of revenues over expenses of \$246,981. Attached are March 2012 year to date internals, which indicate a positive working capital position and positive net asset position. Also, the applicant indicates an excess of revenues over expenses of \$56,000.

The applicant has demonstrated the capability to proceed in a financially feasible manner, and approval is recommended.

Recommendation

From a financial perspective, approval is recommended.

Attachments

BFA Attachment A	Financial Summary- United Odd Fellow and Rebekah Home LTHHCP
BFA Attachment B	Internal Financial Summary – United Odd Fellow and Rebekah Home



Public Health and Health Planning Council

Project # 121216-C
Visiting Nurse Association of Long Island, Inc.

County: Nassau (Garden City)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 16, 2012

Executive Summary

Description

Visiting Nursing Association of Long Island, Inc. (VNA of Long Island), an existing not-for profit Certified Home Health Agency (CHHA) and Long Term Home Health Care Program (LTHHC) provider, requests approval to expand their existing certified home health agency (CHHA) into Suffolk and Kings Counties.

On December 8, 2011, the Public Health and Health Planning Council adopted an amendment to section 760.5 of Title 10, NYCRR. This emergency regulation authorized the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies, or expand the approved geographic service areas and/or approved population of existing CHHA's. VNA of Long Island submitted an application in response to the competitive RFA, and was awarded RFA approval. This CON application is in response to the RFA approval.

Effective May 1, 2012, a new Episodic Payment System (EPS) reimbursement methodology to reimburse CHHA providers for services provided to Medicaid patients receiving home care services took effect. The EPS is based on a price for 60-day episodes of care, which will be adjusted by patient acuity and regional wage differences. The EPS was recommended by the Medicaid Redesign Team (MRT proposal # 5) and authorized in the 2011-12 enacted budget. The EPS is designed to address the issue of rapid growth in Medicaid costs per patient by better aligning payments with needed services and is part of a broad effort to promote the development of care management arrangements for Medicaid recipients.

For a conservative approach, revenues were calculated in which the lower of incremental cost to

episodic payment was projected for year one and year three, and budgets were sensitized.

DOH Recommendation
Contingent approval.

Need Summary

Visiting Nurse Association of Long Island, Inc.'s proposal clearly describes and adequately addresses each of the review criteria used to make determinations for this competitive review.

Program Summary

Visiting Nurse Association of Long Island, Inc. is currently in compliance with all applicable codes, rules and regulations.

Financial Summary

There are no project costs associated with this application.

Incremental Budget:	<i>Revenues:</i>	\$ 673,875
	<i>Expenses:</i>	<u>650,639</u>
	<i>Gain/(Loss):</i>	\$ 23,236

It appears that the applicant has demonstrated the capability to proceed in a financially feasible manner.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Approval contingent upon:

1. Submission of new incremental budgets to be re-evaluated for financial feasibility for all counties approved for establishment or expansion acceptable to the Department of Health. [BFA]

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

Visiting Nurse Association of Long Island, Inc.'s (VNALI) proposal clearly describes and adequately addresses each of the review criteria used to make determinations for this competitive review. This proposal demonstrates the applicant

has the organizational capacity to successfully implement the MRT initiatives and supports the goals of the Department in advancing these initiatives. The applicant demonstrates public need based on 709.1(a) and provides a description of community need and the health needs of the community supported by data. The applicant has the requisite knowledge and experience in the provision of home health services and demonstrates the potential to produce efficiencies in the delivery of home care services. Finally, the application provides a description how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measureable and sustained improvement in performance.

Recommendation

From a need perspective, approval is recommended.

Programmatic Analysis

Background

Visiting Nurse Association of Long Island, Inc. is an existing not-for-profit corporation which operates a certified home health agency (CHHA) and long term home health care program (LTHHCP) provider. The CHHA operated by Visiting Nurse Association of Long Island, Inc. is approved to provide services in Nassau and Queens counties and the LTHHCP is approved to provide services in Nassau, Suffolk and Queens counties.

Visiting Nurse Association of Long Island, Inc. proposes to expand the service area of their CHHA into Kings and Suffolk Counties. Visiting Nurse Association of Long Island, Inc. proposes to serve these counties from their existing offices.

Visiting Nurse Association of Long Island, Inc. plans to offer the following home health services in Kings and Suffolk Counties: nursing, home health aide, physical therapy, occupational therapy, speech language pathology, medical social services, nutrition and medical supply, equipment and appliances.

Visiting Nurse Association of Long Island, Inc. is currently in compliance with all applicable codes, rules and regulations.

Recommendation

From a programmatic perspective, approval is recommended.

Financial Analysis

Operating Budget

The applicant has submitted an incremental operating budget for the first and third years, in 2012 dollars, which is summarized below:

	<u>Year One</u>	<u>Year Three</u>
Revenues:		
Medicaid	\$43,900	\$117,460
Medicare	158,797	438,375
Commercial-FFS	7,980	31,180
Commercial- Managed Care	<u>25,415</u>	<u>86,860</u>
Total Revenues	\$236,092	\$673,875
Expenses	245,388	650,639
Net Gain (Loss)	(\$9,296)	\$23,236

Utilization by payor source in the first and third years is as follows:

<u>Payor</u>	<u>Year One</u>	<u>Year Three</u>
Medicare	55.54%	55.65%
Medicaid	19.92%	19.87%
Commercial-FFS	4.39%	4.38%
Commercial- Managed Care	18.15%	18.10%
Charity Care	2.00%	2.00%

Expense and utilization assumptions are based on the existing CHHA Program's historical experience. Revenues are reflective of current payment rates as well as the recent implementation of the Medicaid Episodic Payment system.

Capability and Feasibility

There are no project costs associated with this application.

Working capital requirements, estimated at \$108,440, appear reasonable based on two months of third year expenses and will be provided through the existing operation.

The submitted budget indicates that the applicant will achieve a (\$9,296) and \$23,236 incremental net revenue in the first and third years of operations, respectively.

First year loss will be funded through applicants' existing operations. Revenue is based on current payment rates for Certified Home Health Agencies. The submitted budget appears reasonable.

Presented as BFA Attachment A is the audited financial summary of Visiting Nurse Association of Long Island, Inc. for 2011 and 2010, which shows that the applicant has maintained positive working capital and net assets and generated average net operating revenue of (\$1,975,163). BFA Attachment B is the internal 2012 financial summary ending May 31, 2012. The applicant continues to maintain positive working capital, net assets and generated net operating revenue of (\$610,142). The applicant indicates that the primary reason for recent losses is due to declining referral volume. To increase referral volume, VNA of Long Island has become a preferred home care provider for Winthrop University Hospital, and has begun a clinical affiliation with Catholic Health Services of Long Island, as well as now working closely with St. Francis Hospital and Mercy Medical Center. VNA of Long Island indicates that they also continue to enhance their relationships with MLTCs.

Based on the proceeding, it appears that the applicant has demonstrated the financial capability to proceed in a financially feasible manner, and approval is recommended.

Recommendation

From a financial perspective, contingent approval is recommended.

Attachments

BFA Attachment A Financial Summary for Visiting Nursing Association of Long Island, Inc. (2011 and 2010)

BFA Attachment B Financial Summary for Visiting Nursing Association of Long Island, Inc., April 30, 2012 (Internal)



Public Health and Health Planning Council

Project # 121291-C
The Wartburg CHHA, Inc.

County: Westchester (New Rochelle)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

The Wartburg Home of the Evangelical Lutheran Church d/b/a The Wartburg Home is a not-for-profit corporation approved to operate as a long-term home health care program (LTHHCP) serving Westchester County. The Wartburg Home is requesting approval to expand the services of the LTHHCP by establishing a new certified home health agency (CHHA), The Wartburg CHHA, Inc., to serve Westchester and Bronx counties.

On December 8, 2011, the Public Health and Health Planning Council adopted an amendment to section 760.5 of Title 10, NYCRR. This emergency regulation authorized the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies, or expand the approved geographic service areas and/or approved population of existing CHHA's. The Wartburg Home of the Evangelical Lutheran Church submitted an application in response to the competitive RFA, and was awarded RFA approval. This CON application is in response to the RFA approval.

Effective May 1, 2012, a new Episodic Payment System (EPS) reimbursement methodology to reimburse CHHA providers for services provided to Medicaid patients receiving home care services took effect. The EPS is based on a price for 60-day episodes of care which will be adjusted by patient acuity and regional wage differences. The EPS was recommended by the Medicaid Redesign Team (MRT proposal # 5) and authorized in the 2011-12 enacted budget. The EPS is designed to address the issue of rapid growth in Medicaid costs per patient by better aligning payments with needed services and is part of a broad effort to promote the development of care management arrangements for Medicaid recipients.

For a conservative approach, revenues were calculated in which the lower of incremental cost to episodic payment was projected for year one and year three, and budgets were sensitized.

DOH Recommendation
Contingent approval.

Need Summary
The Wartburg CHHA, Inc.'s proposal clearly describes and adequately addresses each of the review criteria used to make determinations for this competitive review.

Program Summary
The Wartburg Home is currently in compliance with all applicable codes, rules and regulations.

Financial Summary
There are no project costs associated with this proposal.

Budget:	<i>Revenues:</i>	\$ 3,383,413
	<i>Expenses</i>	<u>3,284,512</u>
	<i>Gain/(Loss):</i>	\$ 98,901

Subject to the noted contingencies, it appears that the applicant has demonstrated the capability to proceed in a financially feasible manner.

Recommendations

Health Systems Agency

There is no HSA recommendation for this application.

Office of Health Systems Management

Approval contingent upon:

1. Submission of new incremental budgets to be re-evaluated for financial feasibility for all counties approved for establishment or expansion acceptable to the Department of Health. [BFA]
2. Submission of an executed building sublease that is acceptable to the Department of Health. [BFA]

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

The Wartburg CHHA, Inc.'s proposal clearly describes and adequately addresses each of the review criteria used to make determinations for this competitive review. This proposal demonstrates the applicant has the organizational

capacity to successfully implement the MRT initiatives and supports the goals of the Department in advancing these initiatives. The applicant demonstrates public need based on 709.1(a) and provides a description of community need and the health needs of the community supported by data. The applicant has the requisite knowledge and experience in the provision of home health services and demonstrates the potential to produce efficiencies in the delivery of home care services. Finally, the application provides a description how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measureable and sustained improvement in performance.

Recommendation

From a need perspective, approval is recommended.

Programmatic Analysis

Background

The Wartburg Home of the Evangelical Lutheran Church dba The Wartburg Home is an existing not-for-profit corporation which operates an Article 28 residential health care facility and an Article 36 long term home health care program with approval to serve Westchester County.

The applicant proposes to establish a certified home health agency to serve Westchester and Bronx counties. The Wartburg Home proposes to serve the residents of these counties from their existing office located at 56 Harrison Street, New Rochelle, New York 10801.

The Wartburg Home proposes to offer the following health care services: home health aide, medical supply, equipment and appliances, nursing, nutritional, occupational therapy, physical therapy and speech language pathology.

The Wartburg Home is currently in compliance with all applicable codes, rules and regulations.

Recommendation

From a programmatic perspective, approval is recommended.

Financial Analysis

Background

The Wartburg Home of the Evangelical Lutheran Church operates the following:

- a 240-bed residential health care facility (RHCF) in Mount Vernon;
- a medical model adult day care program for 80 registrants (ADCP) and also a social model adult day care program (ADCP);
- a long term home health care program (LTHHCP) for 299 registrants, which includes 100 non standard limited life slots in Westchester County; and
- a Licensed Home Care Service Agency (LHCSA).

The Wartburg Home of the Evangelical Lutheran Church's sole member is Wartburg-Mt. Vernon., which is also the sole member of The Wartburg Residential Community, Inc. and Wartburg Senior Housing Inc.

Total Project Cost and Financing

There are no project costs associated with this application.

Lease Rental Agreement

The applicant has submitted a letter of interest to sublease the proposed site, the terms of which are summarized below:

Premises: 1,091 gross square feet located at 56 Harrison Street – Suite 503, New Rochelle, NY
Landlord : Hoffman Investors Corporation
Lessee/Sub-lessor: The Wartburg Resident Community, Inc.
Sub-lessee: The Wartburg Home of the Evangelical Lutheran Church
Term: 5 years at \$20,000 per year (\$18.33 per sq ft) Renewal option one 5-year term
Provisions: Taxes and Utilities

The applicant states that the lease is an arm’s length arrangement between the Landlord (Hoffman Investors Corp) and the Lessee/Sub-lessor (The Wartburg Residential Community Inc.), but it is a non-arm’s length arrangement between the (sub-lessor) and the sub-lessee.

Operating Budget

The applicant has submitted the first and third year incremental operating budgets, in 2012 dollars, as summarized below:

	<u>First Year</u>	<u>Third Year</u>
Revenues:		
Medicaid	\$2,467,844	\$2,869,943
Medicare	354,304	402,601
Commercial	89,153	110,869
Total Revenues	\$2,911,301	\$3,383,413
Total Expenses	\$2,901,188	\$3,284,512
Net Income or (Loss)	\$10,113	\$98,901

Utilization by payor source for the first & third year is anticipated as follows:

Medicaid-Fee for Service	5.0%
Medicaid-Managed Care	80.0%
Medicare-Managed Care	10.0%
Commercial-Fee-for Service	1.5%
Commercial-Managed Care	1.5%
Charity Care	2.0%

Expense projections are based on the applicants’ experience in operating a LTHHCP along with analysis of the 2010 cost reports from CHHAs operating in the proposed service area. Utilization projections take into consideration service area projections and utilization experienced by other CHHAs serving Westchester and Bronx counties, as reported in their 2010 cost reports.

Medicaid average episodic payment is expected to be \$6,003.48 in the first year with a 1.085415 local wage index factor, and by the third year the applicant projects a slight decline to \$5,974.36, based on a 1.078702 local wage index factor. The budgeted is based upon the case mix of one.

The reason for the difference in the local wage factor between year 1 and 3 is due to the fact that the facility used a weighted average to determine the overall factor between the 2 counties. In year 1, 70% of the cases are budgeted to Westchester county, which has a local wage factor of 1.125693 (.70*1.125693=.7879851) and the other 30% of the cases are budgeted to Bronx county with a local wage factor of .991433 (.30*.991433=.2974299) which added together totals (.7879851 +.2974299=1.085415). In Year 3 the percentages for the cases budgeted to the counties changed. Westchester was budgeted 65% of the cases, and Bronx was budgeted 35% of the cases with the same

above noted local wage factors (.65*1.125693=.73170045) and (.35*.991433=.34700155), which added together totals (.73170045+.34700155=1.078702)

The projected payor mix is based on the experience of the applicant as a provider of home care services, a review of the proposed service area existing CHHAs' 2010 cost reports, as well as the projected impact of mandatory enrollment into Medicaid Managed Care.

Capability and Feasibility

There are no project costs associated with this application.

Working capital requirements are estimated at \$547,419, which appear reasonable based on two months of third year expenses. Presented as BFA Attachment A is The Wartburg Home of the Evangelical Lutheran Church 2010 and 2011 certified financial summary, which indicates the availability of sufficient resources for the project.

The budget projects an operating surplus of \$10,113 and \$98,901 in the first and third years, respectively. Revenues are based upon current methodology, the impact of mandatory enrollment into Medicaid Manage Care, and experience in providing home care services. The budget appears reasonable.

A review of BFA Attachment A, shows that The Wartburg Home of the Evangelical Lutheran Church had a 2011 operating loss of \$3,184,111, which was offset by a \$4,366,184 non-operating revenues. Working capital was \$8,816,727 at the end of 2011, an increase of \$1,388,078 from the previous year. For 2011 net assets totaled \$13,880,078, an increase of \$1,303,385 from 2010.

The applicant states that while Wartburg Home of the Evangelical Lutheran Church (WHELC) operates at a budgeted operating loss, they generate positive cash flow after adding back non-cash expenses, such as depreciation. They also point out that they have a 145-year history of receiving annual bequests, which go directly to help fund operations, and they also receive grants from the Wartburg Foundation, whose 2011 unrestricted assets totaled \$22,346,842 as seen on BFA Attachment B.

It appears that the applicant has demonstrated the capability to proceed in a financially feasible manner, and contingent approval is recommended.

Recommendation

From a financial perspective, contingent approval is recommended.

Attachments

BFA Attachment A	Financial Summary for 2010 and 2011, The Wartburg Home of the Evangelical Lutheran Church
BFA Attachment B	Financial Summary for 2010 and 2011, The Wartburg Foundation, Inc.

**New York State Department of Health
Public Health and Health Planning Council**

July 26, 2012

Certified Home Health Agency – Establish

Exhibit #2

	<u>Number</u>	<u>Applicant/Facility</u>
1.	121286 E	Lott Community Home Health Care, Inc. (New York County)
2.	121309 E	Center Light Certified Home Health Care Agency (Kings County)
3.	121256 E	Isabella Care at Home, Inc. (New York County)
4.	121252 E	Jewish Home Lifecare, Community Services (New York County)
5.	121222 E	Lutheran CHHA, Inc. (Kings County)
6.	121247 E	Queens Long Island Certified Home Health Agency, LLC (Queens County)

The following Exhibits will be distributed under separate cover:

	<u>Number</u>	<u>Applicant/Facility</u>
1.	121286 E	Lott Community Home Health Care, Inc. (New York County)
2.	121309 E	Center Light Certified Home Health Care Agency (Kings County)
3.	121256 E	Isabella Care at Home, Inc. (New York County)
4.	121252 E	Jewish Home Lifecare, Community Services (New York County)
5.	121222 E	Lutheran CHHA, Inc. (Kings County)
6.	121247 E	Queens Long Island Certified Home Health Agency, LLC (Queens County)

**New York State Department of Health
Public Health and Health Planning Council**

July 26, 2012

Certified Home Health Agency – Construction

Exhibit #3

<u>Number</u>	<u>Applicant/Facility</u>
1. 121262 C	A & T Certified Home Care, LLC (Rockland County)
2. 121201 C	Alpine Home Health Care, LLC (Bronx County)
3. 121259 C	Americare Certified Special Services, Inc. (Kings County)
4. 121217 C	Bethel Nursing Home Co Inc (Westchester County)
5. 121229 C	Calvary Hospital (Bronx County)
6. 121248 C	Elderserve Long Term Health Care (Westchester County)
7. 121223 C	Excellent Home Care Services, LLC (Kings County)
8. 121299 C	Gentiva Health Services (Kings County)
9. 121312 C	Good Samaritan Hospital Home Care Department (Rockland County)
10. 121287 C	Gurwin Jewish Nursing and Rehabilitation Center LTHHCP (Suffolk County)
11. 121327 C	Hebrew Hospital Home LTHHCP (Bronx County)

12. 121322 C Lutheran Long Term Home Health Care Program
(Suffolk County)
13. 121214 C New York Congregational Nursing Center LTHHCP
(Kings County)
14. 121231 C Parker Jewish Institute for Health Care and Rehabilitation
(Nassau County)
15. 121241 C Prime Home Health Services, LLC
(Kings County)
16. 121221 C Revival Home Health Care
(Kings County)
17. 121242 C Shining Star Home Care, LLC
(Kings County)
18. 121323 C St Cabrini Nursing Home
(New York County)
19. 121271 C St. Johnland Nursing Home Inc.
(Suffolk County)
20. 121269 C VIP Certified Health Services, LLC
(Kings County)
21. 121187 C VillageCare Certified Home Health Agency
(New York County)
22. 121313 C Visiting Nurse Service of New York Home Care
(New York County)
23. 121289 C Winthrop-University Hospital Home Health Agency
(Nassau County)



Public Health and Health Planning Council

Project # 121262-C

A & T Certified Home Care, LLC

County: Rockland (New City)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 19, 2012

Executive Summary

Description

A&T Certified Home Care, LLC, an existing Certified Home Health Agency (CHHA) serving Rockland County, requests approval to expand into Bronx, Kings, New York, Queens, Richmond, Westchester, Nassau, Suffolk, and 21 Upstate counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies, and is only being considered at the present time for the Downstate counties requested (Bronx, Kings, New York, Queens, Richmond, Westchester, Nassau and Suffolk). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York,

Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the PHHPC with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide an adequate comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The applicant also requested approval to serve the following upstate counties: Putnam, Dutchess, Orange, Sullivan, Ulster, Nassau, Suffolk, Albany, Schenectady, Saratoga, Rensselaer, Warren, Washington, Essex, Columbia, Greene, Schoharie, Otsego, Delaware, Fulton, Montgomery, Hamilton and Herkimer. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121201-C
Alpine Home Health Care, LLC

County: Bronx (Bronx)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 11, 2012

Executive Summary

Description

Alpine Home Health Care, LLC, an existing Article 36 Certified Home Health Agency (CHHA) serving Bronx County, requests approval to expand into Kings, New York, Queens, Richmond, Nassau, Suffolk, Rockland, Erie and Niagara counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies, and is only being considered at the present time for the Downstate counties requested (Kings, New York, Richmond, Queens, Nassau, and Suffolk). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester.

Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the PHHPC with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR. The application failed to provide an adequate comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The applicant also requested approval to serve the following upstate counties: Rockland, Erie and Niagara. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121259-C
Americare Certified Special Services, Inc.

County: Kings (Brooklyn)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 19, 2012

Executive Summary

Description

Americare Certified Special Services Inc., an existing Special Needs Certified Home Health Agency (CHHA) serving Bronx, Kings, New York, Richmond, Queens, Dutchess, Nassau, Suffolk, Orange, Putnam, Rockland, Sullivan, Ulster, Westchester counties, requests approval to become a General Purpose CHHA to serve the same counties. This request is in response to a January 25, 2012 request for applications to establish new CHHAs or expand existing CHHAs, and is only being considered at the present time for the Downstate counties requested (Bronx, Kings, New York, Richmond, Queens, Nassau, Suffolk and Westchester). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York,

Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the PHHPC with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequately knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The applicant also requested approval to serve the following upstate counties: Dutchess, Orange, Putnam, Rockland, Sullivan and Ulster. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121217-C
Bethel Nursing Home Co., Inc.

County: Westchester (Ossining)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 16, 2012

Executive Summary

Description

Bethel Nursing Home Co. Inc., an existing LTHHCP, requests approval to become an Article 36 Certified Home Health Agency (CHHA) to serve Westchester, Bronx, New York, Putnam, Queens and counties. This request is in response to a January 25, 2012 request for applications to establish new CHHAs or expand existing CHHAs, and is only being considered at the present time for the Downstate counties requested (Bronx, New York, Queens, and Westchester). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester.

Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the PHHPC with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The applicant also requested approval to serve Putnam County. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121229-C

Calvary Hospital

County: Bronx (Bronx)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 17, 2012

Executive Summary

Description

Calvary Certified Home Health Agency, an existing Special Needs Certified Home Health Agency (CHHA) serving Westchester and New York counties, requests approval to become a General Purpose CHHA to serve Westchester and New York counties and expand service into Richmond, Kings, Rockland and Putnam counties. This is in response to a January 25, 2012 request for applications to establish new CHHAs or expand existing CHHAs, and is only being considered at the present time for the Downstate counties requested (Westchester, New York, Richmond, and Kings). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester.

Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the PHHPC with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data.

The applicant also requested approval to serve the following upstate counties: Rockland and Putnam. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121248-C

Elderserve Long Term Health Care

County: Westchester (Yonkers)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 18, 2012

Executive Summary

Description

Elderserve Long Term Health Care, an existing LTHHCP serving Bronx, New York and Westchester counties, requests approval to become an Article 36 Certified Home Health Agency (CHHA) serving Westchester, Rockland, Nassau, Suffolk, Kings, Queens and Richmond counties. This request is in response to a January 25, 2012 request for applications to establish new CHHAs or expand existing CHHAs, and is only being considered at the present time for the Downstate counties requested (Westchester, Nassau, Suffolk, Kings, Queens and Richmond). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

DOH Recommendation Disapproval.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester.

Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the PHHPC with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes.

The applicant also requested approval to serve the following upstate county: Rockland. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121223-C

Excellent Home Care Services

County: Kings (Brooklyn)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 16, 2012

Executive Summary

Description

Excellent Home Care Services, LLC, an existing Article 36 Special Needs Certified Home Health Agency (CHHA) serving Bronx, Kings, New York, Queens and Nassau counties, requests approval to become a General Purpose CHHA to serve Bronx, Kings, New York, Queens, and Nassau counties and expand service into Richmond County. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties.

All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to adequately describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121299-C

Gentiva Health Services

County: Kings (Brooklyn)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

Gentiva Health Services operates a Certified Home Health Agency (CHHA) serving Kings Queens and New York counties. Gentiva Health Services is requesting approval to expand their service area to Bronx, Richmond, Westchester, Nassau and Suffolk counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New

York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they

will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121312-C Good Samaritan Hospital Home Care Department

County: Rockland (West Nyack)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

Good Samaritan Hospital d/b/a Good Samaritan Hospital Certified Home Care Agency is approved as an Article 36 Certified Home Health Agency (CHHA) serving Rockland and Orange counties and LTHHCP serving Suffolk County. Good Samaritan Hospital d/b/a Good Samaritan Hospital Certified Home Care Agency is requesting approval expand their CHHA into New York, Bronx and Westchester counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they

will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide an adequate comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121287-C Gurwin Jewish Nursing and Rehabilitation Center LTHHCP

County: Suffolk (Commack)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

Gurwin Jewish Nursing and Rehabilitation Center is a not-for-profit corporation approved to operate as a LTHHCP sponsored by the Residential Health Care Facility: Gurwin Jewish Nursing and Rehabilitation Center serving Nassau and Suffolk counties. Gurwin Jewish Nursing and Rehabilitation Center is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Nassau and Suffolk counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New

York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to adequately describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121327-C

Hebrew Hospital Home LTHHCP

County: Bronx (Valhalla)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

Hebrew Hospital Home LTHHCP, an existing LTHHCP serving Bronx and Queens counties, requests approval to become an Article 36 Certified Home Health Agency (CHHA) to serve Bronx and Queens, Kings, New York, Westchester, Rockland, Orange, Putnam and Dutchess counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies, and is only being considered at the present time for the Downstate counties requested (Bronx, Queens, Kings, New York, and Westchester). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New

York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the PHHPC with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide an adequate comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The applicant also requested approval to serve the following upstate counties: Dutchess, Orange, Putnam, and Rockland. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121322-C Lutheran Long Term Home Health Care Program

County: Suffolk (Hauppauge)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

The Lutheran Care Network is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Suffolk, Nassau, Dutchess and Albany counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies, and is only being considered at the present time for the Downstate counties requested (Suffolk and Nassau). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other

applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The applicant also requested approval to serve the following upstate counties: Dutchess and Albany. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121214-C New York Congregational Nursing Center LTHHCP

County: Kings (Brooklyn)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 16, 2012

Executive Summary

Description

New York Congregational Nursing Center Inc., a not-for-profit LTHHCP serving Kings County, requests approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Kings County. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If

applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121231-C Parker Jewish Institute for Health Care and Rehabilitation

County: Nassau (Lake Success)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 17, 2012

Executive Summary

Description

The Parker Jewish Institute for Health Care and Rehabilitation, a not-for-profit corporation LTHHCP serving Kings, Queens and Nassau counties, requests approval to establish new Article 36 Certified Home Health Agency (CHHA) to serve Kings, Queens, Nassau, New York, Bronx, Suffolk and Westchester counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other

applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to adequately describe how their proposal has the potentials to support the goals of the department in advancing Medicaid Redesign Initiatives. The application failed to adequately describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121241-C

Prime Home Health Services, LLC

County: Kings (Brooklyn)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 18, 2012

Executive Summary

Description

Prime Home Health Services, LLC is approved as a Certified Home Health Agency serving Kings and Queens counties. Prime Home Health Services, LLC is requesting approval to expand into Bronx, Nassau, New York, Richmond and Westchester counties. This request is response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other

applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to adequately provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121221-C
Gazmel, NY, Inc. d/b/a Revival Home Health Care

County: Kings (Brooklyn)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 16, 2012

Executive Summary

Description

Gazmel NY, Inc. d/b/a Revival Home Health Care, an existing Article 36 Special Needs CHHA serving Bronx, Kings, Nassau, New York, Orange, Queens, Rockland, Sullivan and Westchester counties, requests approval to become a General Purpose CHHA to serve the same counties and expand service into Richmond and Suffolk counties. This request is in response to a January 25, 2012 request for applications to establish new CHHAs or expand existing CHHAs, and is only being considered at the present time for the Downstate counties requested (Bronx, Kings, New York, Queens, Nassau, Suffolk and Westchester). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester.

Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the PHHPC with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to describe adequately strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide an adequate comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The applicant also requested approval to serve the following upstate counties: Orange, Rockland and Sullivan. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121242-C

Shining Star Home Care, LLC

County: Kings (Brooklyn)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 18, 2012

Executive Summary

Description

Shining Star Home Care, LLC is an existing Special Needs Certified Home Health Agency (CHHA) serving Bronx, Kings, Queens and New York counties. Shining Star Home Care is requesting approval to convert from a Special Needs CHHA to a General Purpose CHHA serving Bronx, Kings, Queens, New York, Richmond, Nassau, Suffolk and Westchester counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties.

All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR.. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121323-C

St. Cabrini Nursing Home

County: New York (New York)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

St. Cabrini Nursing Home is a not-for-profit corporation approved to operate as a LTHHCP sponsored by the Residential Health Care Facility: Cabrini Center for Nursing & Rehab serving Westchester County. St. Cabrini Nursing Home is requesting approval to convert their LTHHCP to an Article 36 Certified Home Health Agency (CHHA) to serve Westchester, Bronx, Kings, Queens, and New York counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If

applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121271-C

St. Johnland Nursing Home, Inc.

County: Suffolk (Kings Park)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 19, 2012

Executive Summary

Description

St. Johnland Nursing Home Inc. is a not-for-profit corporation approved to operate as a LTHHCP sponsored by the Residential Health Care Facility: St. Johnland Nursing Home Inc. serving Suffolk County. St. Johnland Nursing Home Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Nassau and Suffolk counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New

York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequately knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide a description of community need and the health needs of the community supported by data. The application failed to provide an adequate comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121269-C

VIP Certified Health Services, LLC

County: Kings (Brooklyn)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 19, 2012

Executive Summary

Description

VIP Certified Health Services, LLC is approved as an Article 36 Certified Home Health Agency serving Nassau, Kings and Queens counties. VIP Certified Health Services, LLC is requesting approval to expand into New York and Bronx counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties.

All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121187-C

VillageCare Certified Home Health Agency

County: New York (New York)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 4, 2012

Executive Summary

Description

Village Center for Care is an existing Special Needs Certified Home Health Agency (CHHA) serving individuals diagnosed with HIV/AIDS serving New York, Brooklyn, Queens and Bronx counties. Village Center for Care is requesting approval to convert from a Special Needs CHHA to a General Purpose CHHA to serve New York, Brooklyn, Queens and Bronx counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties.

All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to demonstrate and provide an adequate description of community need and the health needs of the community supported by data.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121313-C Visiting Nurse Service of New York Home Care

County: New York (New York)
Purpose: Construction

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

Visiting Nurse Service of New York Home Care, an existing Article 36 Certified Home Health Agency (CHHA) serving Bronx, Kings, New York, Queens, Richmond, Nassau, Rockland and Westchester counties, requests approval to expand into fifty-three Upstate counties and Suffolk county. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies, and is only being considered at the present time for the Downstate county requested (Suffolk). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties.

All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the PHHPC with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR. The application failed to adequately demonstrate how the proposal supports the goals of the Department in advancing Medicaid Redesign initiatives. The application failed to adequately describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes.

The applicant also requested approval to serve the following upstate counties: Dutchess, Orange, Putnam, Sullivan, Ulster, Allegany, Cattaraugus, Chemung, Erie, Genesee, Livingston, Monroe, Niagara, Ontario, Orleans, Schuyler, Seneca, Steuben, Wayne, Wyoming, Yates, Broome, Cayuga, Chenango, Cortland, Herkimer, Jefferson, Lewis, Madison, Oneida, Onondaga, Oswego, St. Lawrence, Tioga, Tompkins, Albany, Clinton, Columbia, Delaware, Essex, Franklin, Fulton, Greene, Hamilton, Montgomery, Otsego, Rensselaer, Saratoga, Schenectady, Schoharie, Warren and Washington. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121289-C

Winthrop-University Hospital Home Health Agency

County: Nassau (Mineola)

Purpose: Construction

Program: Certified Home Health Agency

Submitted: April 20, 2012

Executive Summary

Description

Winthrop University Hospital Home Health Agency, an existing Article 36 not-for-profit hospital-based Certified Home Health Agency (CHHA) and Long Term Home Health Care Program serving Nassau County, requests approval to expand into Queens and Suffolk counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties.

All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes.

Recommendation

From a need perspective, disapproval is recommended.

**New York State Department of Health
Public Health and Health Planning Council**

July 26, 2012

Certified Home Health Agency – Establish

Exhibit #4

	<u>Number</u>	<u>Applicant/Facility</u>
1.	121246 E	Adar Home Care (Queens County)
2.	121251 E	Aging in America CHHA (Bronx County)
3.	121300 E	Aleta B. Health Care Services, LLC (Kings County)
4.	121326 E	Allhealth Certified Services (Kings County)
5.	121302 E	AlphaCare at Home, LLC (New York County)
6.	121278 E	Alternate Staffing CHHA, LLC (Kings County)
7.	121232 E	Amber Court at Home, LLC (Nassau County)
8.	121308 E	American Care of NY, Inc. (Kings County)

9. 121329 E Angels of Healing Inc
(New York County)
10. 121056 E Balm of Gilead Certified Home Health Agency, Inc.
(Bronx County)
11. 121202 E Best Home Care of NY, Inc.
(Dutchess County)
12. 121283 E Bronxwood Home for the Aged Inc.
(Bronx County)
13. 121292 E CarePoint Home Health, LLC
(Kings County)
14. 121250 E Caring Professionals CHHA, LLC
(Queens County)
15. 121285 E Center for Independence of the Disabled, New York (CIDNY) Certified
Services
(Kings County)
16. 121316 E Community Assistance Resources and Extended Services Inc.
(New York County)
17. 121293 E Community Care Home Health, LLC
(Suffolk County)
18. 121172 E Comprehensive Home Care Services, Inc.
(Kings County)
19. 121260 E Constellation Home Care
(Nassau County)
20. 121234 E Continental Certified Services, Inc.
(Queens County)
21. 121297 E Distinctive Care, Incorporated
(New York County)
22. 121282 E Family Nurse, Inc.
(Westchester County)
23. 121305 E Family Services Network of New York Certified Home Health Agency
(Kings County)

24. 121236 E Golden Age Caregivers, Inc.
(Richmond County)
25. 121276 E Good Help At Home CHHA Inc.
(Bronx County)
26. 121218 E Hamaspik Certified Home Health Care, Inc.
(Rockland County)
27. 121336 E Hope in Home Care
(Erie County)
28. 121310 E Hudson Valley Home Care Services, LLC
(Orange County)
29. 121295 E JOPALS CHHA, LLC d/b/a Perfect Choice Home Care
(Nassau County)
30. 121334 E KPMG USA INC
(Queens County)
31. 121284 E Liberty Home Care of New York, Inc.
(Kings County)
32. 121335 E MMM Care Corp.
(Nassau County)
33. 121207 E Magnolia Home Care, Inc.
(Kings County)
34. 121339 E Metro Community Home Health
(New York County)
35. 121189 E NYC Homecare, Inc.
(Kings County)
36. 121294 E New Century Certified Home Care
(Kings County)
37. 121279 E New Frontiers at Home
(Erie County)
38. 121337 E Prince of Peace Care Group Corp.
(Kings County)

39. 121331 E Rehoboth Home Care Services
(Queens County)
40. 121264 E Rockaway Manor Home Care
(Nassau County)
41. 121263 E Selfhelp Family Home Care, Inc.
(New York County)
42. 121277 E SuCasa Care, Inc.
(Kings County)
43. 121254 E Summit Cares, Inc.
(Kings County)
44. 121368 E Tri-Borough Certified Health Systems of New York, LLC
(Nassau County)
45. 121369 E Tri-Borough Certified Health Systems of the Hudson Valley, LLC
(Westchester County)
46. 121233 E United Hebrew of New Rochelle Certified Home Health Agency, Inc.
(Westchester County)
47. 121272 E WIHD CHHA
(Westchester County)
48. 121301 E WINIS
(Queens County)
49. 121253 E West Brighton Home Care Services Agency Inc.
(Richmond County)
50. 121240 E Your Choice At Home, Inc.
(Kings County)



Public Health and Health Planning Council

Project # 121246-E

Adar Home Care

County: Queens (East Elmhurst)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 18, 2012

Executive Summary

Description

Adar Home Care is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve New York, Bronx, Queens, Richmond, Kings, Nassau, Suffolk and Westchester counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If

applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide an adequate comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121251-E
Aging in America CHHA

County: Bronx (Bronx)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 18, 2012

Executive Summary

Description

Aging in America Community Services, Inc is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Bronx, Kings, New York and Queens counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other

applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives. The application failed to provide an adequate comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121300-E
Aleta B. Health Care Services, LLC

County: Kings (Brooklyn)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

Aleta B. Health Care Services, LLC is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Kings, Queens and New York counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties.

All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they

will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121326-E
Allhealth Certified Services

County: Kings (Brooklyn)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

Allhealth Home Care LLC, a limited liability company approved as an Article 36 licensed home care services agency (LHCSA) serving Bronx, Kings, New York, Queens, Richmond, and Westchester counties. The applicant is requesting approval to establish a new Article 36 certified home health agency (CHHA) to serve Bronx, Kings, New York, Queens, Richmond and Westchester counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they

will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121302-E

AlphaCare at Home, LLC

County: New York (New York)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

AlphaCare at Home, LLC is proposing to establish a new Article 36 certified home health agency (CHHA) to serve Bronx, New York, Kings, Queens and Westchester counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning

Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121278-E
Alternate Staffing CHHA, LLC

County: Kings (Brooklyn)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 19, 2012

Executive Summary

Description

Alternate Staffing CHHA, LLC is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Bronx, Kings, New York and Queens counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other

applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequately knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide a description of community need and the health needs of the community supported by data. The application failed to provide an adequate comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121232-E

Amber Court at Home, LLC

County: Nassau (Westbury)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 17, 2012

Executive Summary

Description

Amber Court at Home, LLC is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Bronx, Kings, New York, Queens, Richmond, Nassau and Suffolk counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If

applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide an adequate comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121308-E

American Care of NY, Inc.

County: Kings (Brooklyn)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

American Care of NY, Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Queens, Kings, New York, Bronx, Richmond, Nassau and Westchester counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties.

All applications were reviewed and ranked against other applicants for each county they proposed to serve. If

applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121329-E

Angels Of Healing, Inc.

County: Bronx (Bronx)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

Angels of Healing, Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Queens, Kings, New York, Richmond and Westchester counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties.

All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121056-E
Balm of Gilead Certified Home Health Agency, Inc.

County: Bronx (Bronx)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: January 30, 2012

Executive Summary

Description

Balm of Gilead Certified Home Health Agency, Inc., requests approval to establish a Certified Home Health Agency (CHHA) to serve Bronx, Queens, New York, Kings, Richmond, Westchester and Rockland counties. This request is in response to a January 25, 2012 request for applications to establish new CHHAs or expand existing CHHAs, and is only being considered at the present time for the Downstate counties requested (Bronx, Queens, New York, Kings, Richmond and Westchester). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester.

Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the PHHPC with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequately knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The applicant also requested approval to serve the following upstate county: Rockland. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121202-E

Best Home Care of NY, Inc.

County: Fishkill (Dutchess)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 12, 2012

Executive Summary

Description

Best Home Care, NY, Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency to serve Dutchess, Putnam, Orange, Rockland, Ulster and Westchester counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies, and is only being considered at the present time for the Downstate county requested (Westchester). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester.

Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide a description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The applicant also requested approval to serve the following upstate counties: Dutchess, Putnam, Orange, Rockland and Ulster. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121283-E
Bronxwood Home for the Aged, Inc.

County: Bronx (Bronx)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 19, 2012

Executive Summary

Description

Bronxwood Home for the Aged Inc. a not-for-profit corporation is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Bronx, Kings, Queens, New York and Nassau counties. The applicant operates a Licensed Home Care Services Agency (LHCSA) Bronxwood Home for the Aged, Inc. that serves Bronx, Kings, New York, Queens and Nassau. The applicant also operates an Article 7 facility Bronxwood Home for the Aged, Inc. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester.

Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to describe adequately strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121292-E
CarePoint Home Health, LLC

County: Kings (Brooklyn)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

CarePoint Home Health, LLC is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Bronx, Kings, Queens, New York, Richmond, Nassau and Suffolk counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties.

All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning

Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121250-E Caring Professionals CHHA, LLC

County: Queens (Forest Hills)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 18, 2012

Executive Summary

Description

Caring Professional CHHA, LLC is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Queens and Kings counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other

applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121285-E

Center for Independence of the Disabled, New York (CIDNY) Certified Services

County: Kings (Brooklyn)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

Center for Independence of Disabled for New York Certified Services, a proposed limited liability company is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Kings, Queens, Bronx, Richmond, New York, Nassau and Suffolk counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties.

All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121316-E

Community Assistance Resources and Extended Services, Inc.

County: New York (New York)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

Community Assistance Resources & Extended Services (C.A.R.E.S) a proposed not-for-profit company is requesting approval to establish a new Special Needs Certified Home Health Agency (CHHA) to serve New York, Kings, Queens, Bronx, Richmond, Nassau, Suffolk, Westchester, Rockland and Orange counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies, and is only being considered at the present time for the Downstate counties requested (New York, Kings, Queens, Bronx, Richmond, Nassau, Suffolk and Westchester). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester.

Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the PHHPC with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The applicant also requested approval to serve the following upstate counties: Rockland and Orange. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121293-E Community Care Home Health, LLC

County: Suffolk (Bohemia)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

Community Care Home Health Care, LLC is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Kings, New York, Queens, Richmond, Bronx, Nassau, and Suffolk counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties.

All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning

Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121172-E Comprehensive Home Care Services, Inc.

County: Kings (Brooklyn)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: March 30, 2012

Executive Summary

Description

Comprehensive Home Care Service, Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Kings County. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If

applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121260-E

Constellation Home Care

County: Nassau (Lynbrook)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 19, 2012

Executive Summary

Description

Constellation Home Care, Inc. requests approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Bronx, Queens, New York, Nassau, Suffolk, Westchester, Rockland, Putnam and Dutchess counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies, and is only being considered at the present time for the Downstate counties requested (Bronx, Queens, New York, Nassau, Suffolk and Westchester). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York,

Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the PHHPC with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The applicant also requested approval to serve the following upstate counties: Rockland, Putnam and Dutchess. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121234-E
Continental Certified Services, Inc.

County: Queens (Forest Hills)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 17, 2012

Executive Summary

Description

Continental Certified Services, Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Kings, Queens, Bronx, Richmond, New York and Westchester counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If

applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121297-E

Distinctive Care, Incorporated

County: New York (New York)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

Distinctive Care Incorporated is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Kings, Queens, Bronx, Richmond, New York and Westchester counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties.

All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning

Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121282-E

Family Nurse, Inc.

County: Westchester (Chappaqua)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 19, 2012

Executive Summary

Description

Family Nurse, Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Kings, Queens, New York, Bronx, Westchester and Putnam counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies, and is only being considered at the present time for the Downstate counties requested (Kings, Queens, New York, Bronx and Westchester). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York,

Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the PHHPC with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The applicant also requested approval to serve the following upstate county: Putnam. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121305-E

Family Services Network of New York Certified Home Health Agency

County: Kings (Brooklyn)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

Family Service Network of New York Certified Home Health Agency is requesting approval to establish a certified home health agency (CHHA) to serve Kings and Queens County. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121236-E
Golden Age Caregivers, Inc.

County: Richmond (Staten Island)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 18, 2012

Executive Summary

Description

Golden Age Caregivers, Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Bronx, Kings, Queens, New York, Richmond and Nassau counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If

applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121276-E
Good Help At Home CHHA, Inc.

County: Bronx (Riverdale)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 19, 2012

Executive Summary

Description

Good Help At Home CHHA, Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Bronx, New York, and Westchester counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If

applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to provide an adequate comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121218-E
Hamaspik Certified Home Health Care, Inc.

County: Rockland (Monsey)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 16, 2012

Executive Summary

Description

Hamaspik Certified Home Health Care, Inc. requests approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Bronx, Kings, Queens, New York, Richmond, Westchester, Rockland, Orange, Sullivan and Ulster counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies, and is only being considered at the present time for the Downstate counties requested (Bronx, Kings, Queens, New York, Richmond and Westchester). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester.

Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the PHHPC with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to demonstrate adequately knowledge and experience in the provision of home health services. The application failed to adequately describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide an adequate comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The applicant also requested approval to serve the following upstate counties: Rockland, Orange Sullivan and Ulster. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121336-E

Hope in Home Care

County: Erie (Buffalo)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

Hope in Home Care is requesting approval to establish a new Article 36 CHHA to serve Bronx, Nassau, Suffolk, Westchester, Rockland, Orange, Putnam, Erie, and Niagara counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies, and is only being considered at the present time for the Downstate counties requested (Westchester, Nassau, Suffolk, and Bronx). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester.

Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the PHHPC with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The applicant also requested approval to serve the following upstate counties: Rockland, Orange, Putnam, Erie, and Niagara. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121310-E
Hudson Valley Home Care Services, LLC

County: Orange (Monroe)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

Hudson Valley Home Care Services, LLC is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Westchester, Orange, Dutchess, Rockland, Sullivan, and Ulster counties. This is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies, and is only being considered at the present time for the Downstate county requested (Westchester). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties.

All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the PHHPC with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The applicant also requested approval to serve the following upstate counties: Dutchess, Orange, Rockland, Sullivan and Ulster. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121295-E

JOPALS CHHA, LLC
d/b/a Perfect Choice Home Care

County: Nassau (Woodbury)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

JOPALS CHHA, LLC d/b/a Perfect Choice Home Care is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve New York, Kings, Queens, Bronx, Richmond, Nassau, Suffolk and Westchester counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If

applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR supported by data. The application also failed to adequately demonstrate the potential to support the goals of the Department in advancing MRT initiatives.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121334-E

KPMG USA, Inc.

County: Queens (Woodside)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

KPMG USA, Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve New York, Kings, Queens, Bronx, Richmond, Nassau, Suffolk and Westchester counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other

applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide a description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommended

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121284-E

Liberty Home Care of New York, Inc.

County: Kings (Brooklyn)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

Liberty Home Care of New York, Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve New York, Kings, Queens, Bronx and Richmond counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other

applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121335-E

MMM Care Corp.

County: Nassau (Manhasset Hills)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

MMM Care Corp. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Nassau and Suffolk counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If

applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121207-E

Magnolia Home Care, Inc.

County: Kings (Brooklyn)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 13, 2012

Executive Summary

Description

Magnolia Home Care, Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve New York, Bronx, Kings, Queens, Richmond and Westchester counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If

applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121339-E

Metro Community Home Health

County: New York (New York)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 23, 2012

Executive Summary

Description

Metro Community Home Health is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Richmond, New York, Bronx, Kings and Queens counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If

applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121189-E

NYC Homecare, Inc.

County: Kings (Brooklyn)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 5, 2012

Executive Summary

Description

NYC Homecare, Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Bronx, Kings, Queens, New York, Richmond and Westchester counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If

applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121294-E

New Century Certified Home Care

County: Kings (Brooklyn)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

New Century Certified Home Care, Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Kings, Queens, New York, Bronx and Richmond and Nassau counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning

Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives. The application failed to demonstrate adequately knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121279-E

New Frontiers at Home

County: Erie (Buffalo)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 19, 2012

Executive Summary

Description

New Frontiers at Home, Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Kings, Queens, New York, Bronx, Richmond, Erie, Niagara, and Cattaraugus counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies, and is only being considered at the present time for the Downstate counties requested (Kings, Queens, New York, Bronx, and Richmond). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester.

Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the PHHPC with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes.

The applicant also requested approval to serve the following upstate counties: Erie, Niagara, and Cattaraugus. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121337-E

Prince of Peace Care Group Corp.

County: Queens (Jamaica Estates)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

Prince of Peace Care Group Corp. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Bronx, Kings, Queens, New York, and Richmond counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If

applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how

the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121331-E

Rehoboth Home Care Services

County: Queens (Queens Village)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

Rehoboth Home Care Services, Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Bronx, Kings, Queens, New York, Richmond and Nassau counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If

applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide a description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use

data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121264-E Rockaway Manor Home Care

County: Nassau (Inwood)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 19, 2012

Executive Summary

Description

Rockaway Manor Home Care is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Queens and Nassau counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other

applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121263-E

Selfhelp Family Home Care, Inc.

County: New York (New York)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 19, 2012

Executive Summary

Description

Selfhelp Family Home Care, Inc. is approved as a Special Needs Certified Home Health Agency serving Bronx, Kings, New York and Queens counties. Selfhelp Family Home Care, Inc. is requesting approval to convert from a Special Needs CHHA to a General Purpose CHHA to serve Bronx, Kings, New York, Queens, Nassau, Suffolk and Westchester counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New

York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121277-E

SuCasa Care, Inc.

County: Kings (Brooklyn)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 19, 2012

Executive Summary

Description

SuCasa Care, Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Bronx, Kings, Queens, Richmond and New York counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other

applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate community need and the health needs of the community supported by data. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121254-E

Summit Cares, Inc.

County: Kings (Brooklyn)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 18, 2012

Executive Summary

Description

Summit Cares, Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Bronx, Kings, Queens, New York, Richmond and Nassau counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other

applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121368-E
Tri-Borough Certified Health Systems of New York, LLC

County: Nassau (Hicksville)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: May 4, 2012

Executive Summary

Description

Tri-Borough Certified Health Systems, Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Nassau, Suffolk, Queens, Bronx, New York, Kings and Richmond counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they

will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or an adequate plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121369-E Tri-Borough Certified Health Systems of Hudson Valley, LLC

County: Westchester (Mt. Kisco)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: May 4, 2012

Executive Summary

Description

Tri-Borough Certified Health Systems, Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Westchester, Dutchess, Putnam, Ulster, Sullivan, Orange and Rockland counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies, and is only being considered at the present time for the Downstate counties requested (Westchester). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester.

Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the PHHPC with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There is no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

- The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:
- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or an adequate plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes.

The applicant also requested approval to serve the following upstate counties: Dutchess, Putnam, Ulster, Sullivan and Rockland. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121233-E

United Hebrew Home of New Rochelle Certified Home Health Agency, Inc.

County: Westchester (New Rochelle)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 17, 2012

Executive Summary

Description

United Hebrew of New Rochelle Certified Home Health Agency is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Westchester County. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other

applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequately knowledge and experience in the provision of home health services provided by a certified home health agency. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide an adequate comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121272-E

WIHD CHHA

County: Westchester (Valhalla)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 19, 2012

Executive Summary

Description

Westchester Institute for Human Development is requesting approval to establish a new Special Needs Certified Home Health Agency (CHHA) to serve individuals with intellectual and developmental disabilities in Westchester, Putnam and Rockland counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies, and is only being considered at the present time for the Downstate county requested (Westchester). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester.

Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the PHHPC with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The applicant also requested approval to serve the following upstate counties: Putnam and Rockland. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121301-E

World Network Institutional Services, LLP

County: Queens (Long Island City)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 20, 2012

Executive Summary

Description

World Network Institutional Services, LLP is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Westchester, Rockland, Richmond, New York, Bronx, Kings and Queens counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies, and is only being considered at the present time for the Downstate counties requested (Westchester, Richmond, New York, Bronx, Kings and Queens). The request relative to Upstate counties will be presented to the Public Health and Health Planning Council (PHHPC) with other applicants who have applied to serve the same county or counties, on a subsequent agenda.

Need Summary

On December 8, 2011 the PHHPC adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties.

All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the PHHPC with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The applicant also requested approval to serve the following upstate county: Rockland. A determination regarding the recommendation for approval or disapproval for the establishment of a CHHA to serve the upstate counties will be presented to the council at a future meeting.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121253-E
West Brighton Home Care Services Agency, Inc.

County: Richmond (Staten Island)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 18, 2012

Executive Summary

Description

West Brighton Home Care Services is a licensed home care services agency serving Richmond County. They are requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Richmond County. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other

applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new CHHAs or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to adequately demonstrate the organizational capacity to successfully implement the MRT initiatives and the potential to support the goals of the Department in advancing MRT initiatives. The application failed to demonstrate adequate knowledge and experience in the provision of home health services. The application failed to demonstrate public need based on criteria specified in Section 709.1(a) of Title 10 NYCRR as well as provide an adequate description of community need and the health needs of the community supported by data. The application failed to describe strategies or a plan to produce efficiencies in the delivery of home care services to the home care population to reduce operating costs and inappropriate utilization while improving outcomes. The application failed to provide a comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.



Public Health and Health Planning Council

Project # 121240-E
Your Choice At Home, Inc.

County: Kings (Brooklyn)
Purpose: Establishment

Program: Certified Home Health Agency
Submitted: April 18, 2012

Executive Summary

Description

Your Choice At Home, Inc. is requesting approval to establish a new Article 36 Certified Home Health Agency (CHHA) to serve Bronx, Kings, New York, Queens and Richmond counties. This request is in response to a January 25, 2012 request for applications to establish new certified home health agencies or expand existing certified home health agencies.

DOH Recommendation
Disapproval.

Need Summary

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If

applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval

Recommendations

Health Systems Agency

There will be no HSA recommendation for this application.

Office of Health Systems Management

Disapproval.

Council Action Date

August 9, 2012.

Need Analysis

Background

On December 8, 2011 the Public Health and Health Planning Council adopted an amendment to Section 750.5 of Title 10, NYCRR authorizing the Commissioner of Health to issue a request for applications (RFA) to establish new certified home health agencies (CHHAs) or expand existing CHHAs. Public need was based on established criteria in section 709.1(a) of Title 10 and that approval of the application will facilitate implementation of Medicaid Redesign Initiatives to shift Medicaid beneficiaries from traditional fee-for-service programs to managed care, managed long term care systems, integrated health systems or similar care coordination models or that approval will ensure access to CHHA services in counties with less than 2 existing CHHAs.

Solicitation

The RFA for the establishment of new or expansion of existing CHHAs was released on January 25, 2012 with RFA applications due on March 9, 2012 and CON applications due on April 20, 2012.

Applicants were further permitted to submit questions to the Department to seek additional clarification regarding this process. The Department's answers were provided to all applicants prior to the submission deadline, to ensure consistent information was shared regarding the process.

Competitive Review

The applications were reviewed competitively by the Department and recommendations are being made separately for Downstate and Upstate counties. Downstate counties consist of the counties Kings, Queens, New York, Richmond, Bronx, Nassau, Suffolk, and Westchester. Upstate counties consist of the remaining counties in New York State not listed in the preceding Downstate counties. All applications were reviewed and ranked against other applicants for each county they proposed to serve. If applicants requested Upstate and Downstate counties, they will be presented to the Public Health and Health Planning Council with other applicants who have requested the same county or counties.

The CON determination of need was based on the applicant's response to the RFA. The applications were reviewed competitively on criteria that included, but were not limited to:

- Organizational capacity to successfully implement the MRT initiatives and potential of the proposal to support the goals of the Department in advancing MRT initiatives;
- Knowledge and experience in the provision of home health services;
- Demonstration of public need based on 709.1(a) as well as a description of community need and the health needs of the community supported by data;
- Potential of the approved application to produce efficiencies in the delivery of home care services to the home care population;
- Comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

From this review, applicants were ranked in each county proposed against other applicants for that county based on how well their proposal addressed each of the aforementioned criteria. The top ranked applications were then selected for recommendation for approval within each county. Ultimately, fourteen of eighty-seven applications were recommended for approval to expand or establish a new general purpose CHHA in one or more of the eight Downstate counties.

This CON is one of seventy-three applicants that did not address the review criteria well enough to merit approval to expand or establish a new general purpose CHHA in the geographic area, and is therefore recommended for disapproval.

The application failed to provide an adequate description of community need and the health needs of the community supported by data. The application failed to provide an adequate comprehensive and effective quality assurance plan which described how the agency will use data to implement an ongoing quality assessment and performance improvement program that leads to measurable and sustained improvement in performance.

Recommendation

From a need perspective, disapproval is recommended.

**New York State Department of Health
Public Health and Health Planning Council**

July 26, 2012

Certified Home Health Agency – Construction

Exhibit #5

1. 121448 C Cold Spring Hills Center for Nursing & Rehabilitation
(Nassau County)
2. 121446 C South Nassau Communities Hospital
(Nassau County)
3. 121424 C VillageCare Long Term Home Health Care Program
(New York County)
4. 121442 C Bethel Nursing Home Co Inc.
(Westchester County)
5. 121456 C Fort Tryon Center for Rehabilitation and Nursing
(New York County)
6. 121421 C Four Seasons Nursing and Rehabilitation Center LTHHCP
(Kings County)
7. 121440 C Hillside Manor Nursing Center
(Queens County)
8. 121450 C Kingsbridge Heights Rehabilitation and Care Center
(Bronx County)
9. 121452 C Lutheran Augustana Center for Extended Care and Rehab LTHHP
(Kings County)
10. 121441 C New York Congregational Nursing Center Long Term Home Health
Care Program
(Kings County)
11. 121290 C Park Gardens Rehabilitation and Nursing Center, LLC
(Bronx County)

12. 121436 C PTS of Manhattan LTHHCP
 (Kings County)

13. 121457 C Split Rock Rehabilitation and Health Care Center
 (Bronx County)

The following Exhibits will be distributed under separate cover:

Certified Home Health Agency – Construction

Exhibit #5

1. 121448 C Cold Spring Hills Center for Nursing & Rehabilitation
(Nassau County)
2. 121446 C South Nassau Communities Hospital
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