

**Medicaid Waiver Underfunding of Assisted Living Facilities
Nebraska Assisted Living Association 2010 Survey**

Please complete this survey for each assisted living facility you operate -

- 1 Facility name [Yellow Box]
- 2 Facility address [Yellow Box]
- 3 Facility phone number [Yellow Box]
- 4 Facility contact person [Yellow Box]
- 5 Facility fiscal year-end [Yellow Box]
- 6 Describe your facility as (a) freestanding or (b) combined with a nursing facility, independent living, and/or other type of housing. [Yellow Box]
- 7 Identify number of licensed assisted living units. [Yellow Box]
- 8 For your last fiscal year, identify total assisted living resident days. [Yellow Box]
- 9 Does your facility receive waiver payment at the "standard" or "trust fund" amount? [Yellow Box]
- 10 For your last fiscal year, identify total waiver assisted living resident days. [Yellow Box]
- 12 For your last fiscal year, identify total **FULL MONTHS** paid for assisted living waiver residents by payment category. I.e., on this line, do not include daily payments for partial months for admission or discharge.
(For example, 5 full-year residents and one 7 month resident would equal 67 [5x12+7]).
 - a Single Occupancy: [Yellow Box]
 - b Multiple Occupancy: [Yellow Box]
- 13 For your last fiscal year, identify total partial month **DAYS** by payment category:
(This pertains to admission and discharge months.)
 - a Single Occupancy: [Yellow Box]
 - b Multiple Occupancy: [Yellow Box]
- 14 Please provide fiscal year-end expenses to provide assisted living services. I.e., do not include services reimbursed under a separate waiver or other government program.
 - Remember, for ALFs combined with other facility types (nursing home, independent living, etc.), only include the percentage of cost allocated to assisted living.
 - Include expenditures for the following types of activities (the following list is not all-inclusive):

-Activities	-Equipment
-General & administrative	-Rent
-Dietary/food	-Interest expense
-Nursing	-Plant
-Marketing	-Property and real estate taxes
-Laundry	-Depreciation & amortization expense
-Housekeeping	
 - If you are uncertain whether expenditures for certain activities should be included in your reported total expenditures, please identify them separately and/or contact Brendon Polt for further guidance (402)435-3551.