What methodology does the department use to determine statewide or county specific nursing home comparable home and community-based long-term services availability? The department uses the following methodology to determine the statewide or county specific nursing home comparable home and community-based long-term services availability.

(1) The department selects a recent, one-year time period from which to use MDS assessment data.
(2) The "typical RUG-III ADL score" is determined as follows. From the MDS data, two activity of daily living (ADL) RUG-III score values are calculated: (1) the mean RUG-III ADL score, rounded to the nearest whole number, and (2) the modal RUG-III ADL score that occurs most commonly in the nursing home population in the selected time period. The "typical RUG-III ADL score" is the lower of the mean and modal values.
(3) Using the most recent month that both payment and assessment data are considered to be complete, persons receiving medicaid paid in-home personal care or community residential services are identified, and the MDS-equivalent ADL score from each home and community-based client's current CARE assessment is constructed.
(4) Using data from the month selected in subsection (3), count the number of in-home personal care clients being served by either the aging and long-term support or developmental disabilities administrations who have an MDS-equivalent score at or above the typical RUG-III ADL nursing home score that was calculated in subsection (2).
(5) Using data from the month selected in subsection (3), calculate the proportion of medicaid-paid community residential clients with an MDS-equivalent score that is at or above the typical RUG-III ADL nursing home score calculated in subsection (2).
   (a) When determining county level measures of nursing home comparable home and community based capacity, the statewide average for medicaid paid community residential clients is used.
(6) Calculate the overall statewide licensed capacity of community residential facilities.
(7) The proportion calculated in subsection (5) and the community residential capacity determined in subsection (6) are multiplied to estimate the community residential capacity that is nursing home comparable.
(8) Add the numbers calculated in subsections (4) and (7) to determine the total countable nursing-home-comparable home and community-based long-term capacity to be used in reporting to the department of health the availability of other services in the community as required in RCW 70.38.115.

[Statutory Authority: RCW 74.08.090 and 74.09.520. WSR 14-05-061, § 000-106-1620 (codified as WAC 388-106-1620), filed 2/18/14, effective 3/21/14.]