



## STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

100 NORTH UNION STREET, SUITE 870  
MONTGOMERY, ALABAMA 36104

February 27, 2017

Dear Administrator or Representative:

Links to the 2017 Annual Report for Specialty Care Assisted Living Facilities (Form SCALF-1) for the 12-month period ending February 28, 2017, as well as needed Instructions (INSSCALF-1), are being provided. This is the same reporting form utilized for the 2016 annual report.

The annual reporting form has interactive features to make completion faster and easier. Adobe Acrobat is not a requirement in completing the form. When initially accessing the annual reporting form, the form should be saved directly to a location on your computer. This will allow the interactive report to be saved while in the process of completion with Adobe Reader v. 6 or higher. You will note the form has a "Print" button as a reminder to print a copy for your records; and a "Submit Report" button on the form for direct transmittal with use of Outlook or other desktop e-mail program. Should your e-mail provider be internet-based (Gmail, Yahoo, etc.) the report can be directly saved to your computer and then e-mailed as an attachment without the need for scanning. Electronic signatures are preferred. If the facility does not have the capability of electronic signatures, the report may be printed, manually signed, scanned in PDF format, and filed as an e-mail attachment.

The report must be returned no later than April 17, 2017. Effective May 2, 2016, new administrative rules became effective requiring that this report be filed electronically. (ALA. ADMIN. CODE r. 410-1-3-.09, **Electronic Filing**). To comply with this rule change, this report must be submitted via e-mail to [data.submit@shpda.alabama.gov](mailto:data.submit@shpda.alabama.gov) in PDF format. The Submit Report button referenced above will assist with submission to the correct e-mail address in the correct format. If printed for manual signature, the report must be e-mailed to the address referenced above. This report cannot be accepted via fax or mail delivery. If the facility is unable to e-mail this report as an attachment, please contact the Agency for alternative submission methods.

Should you have any issues accessing the information via the links, all information is located on our website, [www.shpda.alabama.gov](http://www.shpda.alabama.gov). From the navigation box on the left, choose Health Care Data, then Report Forms. Scroll down to Specialty Care Assisted Living Facility (Form SCALF-1) and choose 2017-1. The form performs automatic calculations which assists with accuracy in reporting. Should you be unfamiliar with use of an interactive form, you may contact me or my assistant as outlined below, and one of us will be happy to assist you.

Signatures are required from two separate individuals, the signature of the person preparing the report and a signature from another member of administration/corporate verifying the accuracy of the information provided in the report. ***This report will not be deemed substantially complete without both required signatures.***

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Distribution of Form SCALF-1  
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If you have any questions, if we may provide any assistance, or should you have any suggestions on how we may better improve our data services to you, do not hesitate to contact me at [bradford.williams@shpda.alabama.gov](mailto:bradford.williams@shpda.alabama.gov), (334) 242-4103, or my assistant, Karen McGuire, at [karen.mcquire@shpda.alabama](mailto:karen.mcquire@shpda.alabama), (334) 353-7585.

Sincerely,

A handwritten signature in black ink, appearing to read 'Bradford L. Williams', written in a cursive style.

Bradford L. Williams  
Data/Planning Director

BLW: kwm