



# **DSHS: Long Term Care**

## **Service Overview**

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# Adult Family Homes

## Service Overview

Joint Legislative  
Executive  
Committee on  
Planning for  
Aging &  
Disability Issues

### Service Summary

- ▶ A residential home where *no more than six adults* receive personal care, special care, room, and board. Service providers may not be related by blood or marriage to any clients in the home.
- ▶ 2013-15 Budget: about \$280 million total (\$140 Near GF-S) to serve about 5,900 clients.
- ▶ About 2,900 licensed facilities in FY13.
- ▶ About 17,000 beds in FY13 – about 40% Medicaid.

### Service Overview

- ▶ Rate methodology established in contract and in WAC.
- ▶ Rates are client specific.
- ▶ Rates are dependent on location (King, MSA, non-MSA).
- ▶ Rates are dependent on client acuity (17 levels of care).
- ▶ Client acuity is determined by a CARE assessment.
- ▶ Daily payment rate; range from about \$50/day to about \$165/day.
- ▶ Wages and benefits for AFH are collectively bargained.
- ▶ Licensure and oversight provided by Residential Care Services (RCS) within DSHS.
- ▶ Annual license fee of \$225/bed starting in FY14.
- ▶ Providers are reimbursed for annual license fees paid on Medicaid beds.
- ▶ Processing fee for new applicants of \$2,750 in FY13; non-refundable and non-reimbursed.
- ▶ AFH serves both LTC & DD clients...about 80% LTC and 20% DD.



# Adult Residential Care

## Service Overview

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### Service Summary

- ▶ A residential home where *more than six adults* receive personal care, special care, room, and board. Service providers may not be related by blood or marriage to any clients in the home.
- ▶ 2013-15 Budget: about \$64 million total (\$32 Near GF-S) to serve about 2,200 clients.

### Service Overview

- ▶ Rate methodology established in WAC.
- ▶ Rates are client specific.
- ▶ Rates are dependent on location (King, MSA, non-MSA).
- ▶ Rates are dependent on client acuity (17 levels of care).
- ▶ Client acuity is determined by a CARE assessment.
- ▶ Daily payment rate; range from about \$45/day to about \$160/day.
- ▶ Licensure and oversight provided by Residential Care Services (RCS) within DSHS.
- ▶ Annual license fee increased from \$79/bed to \$106/bed in 2010 Supplemental Budget.
- ▶ Providers are reimbursed for annual license fees paid on Medicaid beds.
- ▶ ARC serves both LTC & DD clients...about 95% LTC and 5% DD.



# Assisted Living

## Service Overview

### Service Summary

- ▶ A residential home where *more than six adults* receive personal care, special care, room, and board. Most clients live in an apartment, or a room similar to an apartment. Service providers may not be related by blood or marriage to any clients in the home.
- ▶ 2013-15 Budget: about \$115 million total (\$59 Near GF-S) to serve about 4,700 clients

### Service Overview

- ▶ Rate methodology established in WAC.
- ▶ Rates are client specific.
- ▶ Rates are dependent on location (King, MSA, non-MSA).
- ▶ Rates are dependent on client acuity (17 levels of care - from low (A-low) to high (E-high)).
- ▶ Facilities with at least 60% Medicaid clients qualify for a rate add-on (the capital add-on).
- ▶ About 20% of facilities qualify for the capital add-on.
- ▶ Client acuity is determined by a CARE assessment.
- ▶ Daily payment rate; range from about \$45/day to about \$160/day.
- ▶ Licensure and oversight provided by Residential Care Services (RCS) within DSHS.
- ▶ Annual license fee increased from \$79/bed to current \$106/bed in 2010 Supplemental Budget.
- ▶ Providers are reimbursed for annual license fees paid on Medicaid beds.
- ▶ Unlike other settings...assisted living serves LTC clients...no DD clients.



# Personal Care: In Home

## Service Overview

### Service Summary

- ▶ An *individual provider* is a person working under contract with DSHS, who acts at the direction of a DSHS client living in his or her own home and provides that client with personal care and/or respite care (for DD clients). *Agency provider* refers to a licensed home care agency, or a licensed home health agency, having a contract to provide personal care services to a client in his, or her, own home.
- ▶ 2013-15 Budget (IP) = about \$1 billion total (\$500 Near GF-S) to serve about 27,000 clients
- ▶ 2013-15 Budget (AP) = about \$600 million total (\$300 Near GF-S) to serve about 11,900 clients

### Service Overview

- ▶ IP...client manages employer functions (i.e. hiring, reporting, scheduling).
- ▶ AP...agency manages employer functions.
- ▶ Wages and benefits for IP are collectively bargained.
- ▶ Wages for IP are based on seniority - from \$10.03/hr to \$11.07/hr in FY13.
- ▶ Change to IP are automatically applied to vendor rate for AP.
- ▶ Providers caring for a family member must be an IP.
- ▶ Total hourly payment rate; roughly \$15/hr for IP and \$20/hr for AP.
- ▶ Total hourly payment rate is fully-loaded...including \$2.21/hr for health benefits in FY13.
- ▶ Rate methodology established in the IP contract and in RCW 74.39A.310 (for AP parity)
- ▶ CARE assessment used to determine hours of service.
- ▶ Service hour authorization depends on client acuity and presence of informal support.
- ▶ Service hours range from less than 20/month to about 400/month.
- ▶ Average service hours in FY12 were just over 100/month.
- ▶ Clients are segmented by acuity (17 levels of care – from low (A-low) to high (E-high))
- ▶ IP serves both LTC & DD clients...about 75% LTC and 25% DD.
- ▶ AP serves both LTC & DD clients...about 85% LTC and 15% DD.



# Nursing Homes

## *Service Overview*

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### Service Summary

- ▶ Facilities certified to provide skilled nursing services; may be a nursing home, hospital, veterans home, or residential habilitation center
- ▶ 2013-15 Budget: about \$1.1 billion total (\$500 million Near GF-S) to serve about 10,000 clients
- ▶ About 220 licensed nursing facilities in FY13
- ▶ About 17,000 licensed beds in FY13; about 60% of beds are Medicaid

### Service Overview

- ▶ Rate methodology established in statute – RCW 74.46
- ▶ Rates are facility specific; each facility has one unique rate.
- ▶ Rates dependent on case mix, minimum occupancy requirements, lids on allowable costs.
- ▶ Rates components are rebased; capital every year, and non-capital every other year.
- ▶ Some rate components are recalculated every six months and settled.
- ▶ The “budget dial” is the statewide weighted average daily rate; approximately \$170/day in FY13.
- ▶ There is a proportionate rate reduction to all facilities if budget dial exceeded.
- ▶ 2011 Legislature created skilled nursing facility safety net assessment (SNA) and trust fund.
- ▶ Some providers exempt from SNA, some pay \$1/bed/day, others pay about \$13/bed/day
- ▶ Providers are reimbursed for SNA paid on Medicaid beds.
- ▶ Methodology for the SNA established in statute – RCW 74.48
- ▶ Licensure and oversight provided by Residential Care Services (RCS) within DSHS.
- ▶ Annual license fee raised from \$275/bed to \$327/bed in the 2010 Supplemental Budget.
- ▶ Providers are reimbursed for annual license fees paid on Medicaid beds.



# PACE

## Service Overview

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### Service Summary

- ▶ Program of All-inclusive Care for the Elderly (PACE) providers develop an individualized plan of care integrating long-term care, medical services, mental health services, and alcohol and substance abuse treatment services.
- ▶ 2013-15 Budget: about \$21 million total (\$10 Near GF-S) to serve about 500 clients

### Service Overview

- Providence Health System operates the PACE program in WA, called ElderPlace.
- PACE clients must visit the ElderPlace Center, located in Seattle, on a regular basis to meet with a team of specialists (from the medical and social services fields).
- Eligibility Criteria
  - ▶ To enroll in PACE, you must either:
    - *be 55 years-old (or older) and be either blind, or disabled*
    - *be 65 years-old, or older*
  - ▶ You must require nursing facility level of care.
  - ▶ You must live within the designated service area of the PACE provider.
    - *The service area for ElderPlace includes most of King County.*
  - ▶ You must meet financial eligibility requirements.
  - ▶ You must not be enrolled in any other Medicare, or Medicaid, prepayment plan.
  - ▶ You must agree to receive services exclusively through the PACE provider (and the PACE provider's network of contracted providers).



# WMIP

## Service Overview

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### Service Summary

- ▶ Washington Medicaid Integration Partnership (WMIP) develops an individualized plan of care integrating long-term care, medical services, mental health services, and alcohol and substance abuse treatment services. Common long term care services include care coordination, personal care, adult day services, environmental modification, and home delivered meals.
- ▶ 2013-15 Budget: about \$20 million total (\$10 Near GF-S) to serve about 400 clients

### Service Overview

- WMIP is a managed care program; currently only available within Snohomish County
- Clients may receive one (or more) of the following long-term care services:
- To enroll in WMIP, you must:
  - ▶ be aged, blind, or disabled
  - ▶ be 21 years-old, or older
  - ▶ receive, or be eligible to receive, categorically needy medical assistance
  - ▶ not be enrolled in a comparable insurance plan
- To receive long-term care services, you must:
  - ▶ meet functional eligibility (as described in 388-106-0210, 388-106-0310, or 388-106-0355)
  - ▶ meet financial eligibility (as described in 388-513 and 388-515-1505)
- Eligibility for long-term care services will be determined at least annually.
- Clients ineligible for long-term care services may continue to receive medical, mental health, and/or chemical dependency services through WMIP.



# Adult Day Health

## Service Overview

### Service Summary

- ▶ 2013-15 Budget: about \$21 million total (\$10 Near GF-S) to serve about 1,100 clients

### Service Overview

- Clients receive services , on average about 10 days per month, within an adult day health center
- An adult day health center must offer and provide on site the following services:
  - (1) *All core services offered under WAC 388-71-0706 - including (a) assistance with activities of daily living, (b) social services on a consultation basis, (c) routine health monitoring, (d) general therapeutic activities, (e) general health education, (f) a nutritional meal and snacks every four hours, (g) supervision and/or protection if needed for client safety; (h) assistance with arranging transportation to and from the program; and (i) first aid and provisions for obtaining or providing care in an emergency.*
  - (2) *Skilled nursing services other than routine health monitoring with nurse consultation;*
  - (3) *At least one of the following skilled therapy services: physical therapy, occupational therapy, or speech-language pathology or audiology.*
  - (4) *Psychological or counseling services, including assessing for psycho-social therapy need, dementia, abuse or neglect, and alcohol or drug abuse; making appropriate referrals; and providing brief, intermittent supportive counseling.*
- Rates are paid on a daily basis and are dependent on location
  - ▶ Just over \$70/day for King County
  - ▶ Just less than \$70/day for MSA
  - ▶ Just less than \$65/day for non-MSA



# Private Duty Nursing

## Service Overview

### Service Summary

- ▶ Skilled nursing care for individuals living in community settings whose medical needs cannot be met through other community services. PDN is an alternative to institutional care in a hospital, or nursing facility. Clients receive at least four continuous hours of skilled nursing care on a daily basis.
- ▶ 2013-15 Budget: about \$32 million total (\$16 Near GF-S) to serve about 120 clients

### Service Overview

- Rates are paid on an hourly basis.
  - ▶ *The hourly rate varies based on provider type (RN, LPN, or IP)*
  - ▶ *The range is between about \$27/hr and \$35/hr, as of July 2012*
  - ▶ *Workers may receive holiday pay, ranging from about \$10/hr to \$12/hr*
- Clients can receive PDN and personal care services.
  - ▶ *However, PDN hours are deducted from personal care hours (i.e., one hour from the available hours for each hour of PDN, authorized per WAC [388-106-1030](#)).*
  - ▶ *PDN hours may not be scheduled during the same time that personal care hours are being provided by an individual provider, or home care agency provider.*
- The PDN provider is responsible for providing assistance with activities of daily living (ADL) and instrumental activities of daily living (IADL), unless there is an informal support providing or assisting at the same time.



# Family Caregiver Support Program

## Service Overview

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### Service Summary

- ▶ Helps unpaid caregivers sustain ongoing caregiving activities, as well as maintain their own mental and physical health.
- ▶ 2013-15 Budget: about \$26 million GF-S total to serve about 8,000 families per year

### Service Overview

#### Step 1: Information & Assistance

- Caregivers receive information, community referrals, up to \$250/year for services

#### Step 2: Screening (using Tailored Caregiver Assessment and Referral (TCARE) intervention)

- Caregivers receive information, community referrals, up to \$500/year for services
- Classified as high, medium, or low for following areas:
  - *Depression* – caregiving creates irritability, persistent sadness, worthlessness, etc.
  - *Relationship burden* – care receiver behavior perceived as demanding, manipulative, etc.
  - *Objective burden* – caregiving forces a change in life patterns (i.e. less time for yourself)
  - *Stress burden* – measure of extent that caregiving created nervousness, hopelessness, etc.
  - *Identity discrepancy* – caregiving creates disconnect between old and new identity

#### Step 3: Assessment (using TCARE intervention)

- Caregivers receive information, community referrals, average of \$2,000/year for services
- Eligibility for assessment is based on screening:
  - *Prior to FY12...qualify with at least four "high" scores*
  - *After FY12 expansion...qualify with one "high" and at least three "medium" scores*
- Recommends evidence-based support unique to each caregiver's situation...such as: support groups, caregiver training and education (increasing skill building and self-care), counseling, respite care services, and supplemental services (such as bath bars and incontinent supplies)



# SCSA & Volunteer Services

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### Service Summary

- ▶ 2013-15 Budget (SCSA) = about \$17 million GF-State
- ▶ 2013-15 Budget (Volunteer Services) = about \$4 million GF-State

### Service Overview

- **Senior Citizens Services Act (SCSA)** provides state only community based services for people who need, but are not eligible for paid services. Common services include information/assistance, transportation, counseling, personal care, and nutritional assistance. Some services, such as nutritional services and health screening, are provided at no cost (regardless of client income). Clients may be required to contribute toward the cost of other services depending on a financial assessment.
- **Volunteer Services** is a state-funded program which assists people who need but are not eligible for paid services. Includes assistance with housework, laundry, shopping, cooking, moving, minor home repair, yard care, limited personal care, monitoring and transportation. About 30,000 older adults receive about 288,000 hours of services each year. There are two volunteer service areas in Washington offered through Catholic Community Services and Northwest Regional Council Area Agency on Aging.



# Kinship Programs

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### Service Summary

- ▶ 2013-15 Budget (Kinship Caregivers): about \$2 million GF-State
- ▶ 2013-15 Budget (Kinship Navigator): about \$1 million GF-State

### Service Overview

- The Kinship Caregivers Support Program supports for families who are not involved with the child welfare system. Provides about \$300 per child to relatives who are at risk of not being able to continue caregiving without additional financial support. Most common use of funding are basic needs like clothing and food (82%), school and youth activities (5%), transportation (5%), legal services (4%). In FY11, the program served about 3,300 children and 2,100 grandparents (and other caregivers).
- The Kinship Navigator Program provides resources, information, and assistance to caregivers who are often overwhelmed and do not know where to turn or how to apply for benefits and services. In FY11, the program provided about 13,400 navigation and assistance services to about 2,000 grandparents (and other caregivers) raising about 3,100 children.



# Area Agencies on Aging

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### Service Summary

- ▶ 2013-15 Budget (AAA Case Management) = about \$118 million total (\$58 million Near GF-S)
- ▶ 2013-15 Budget (AAA Coordinated Services) = about \$93 million total (\$47 million Near GF-S)

### Service Overview

- AAAs were established under the Older Americans Act
  - ▶ Created to help older adults (60 or older) remain in their home
  - ▶ AAAs are located throughout the United States
  - ▶ AAAs are available to residents within every county of Washington State
  - ▶ There are 13 AAAs in Washington.
- AAA's help older adults plan and find care, services, or programs. AAAs also provide support and services to the family or friends caring for older adults.
- Staff at the AAA may help an individual:
  - ▶ find services or programs (e.g. transportation, meals, housekeeping, personal care);
  - ▶ explore options for paying for long term care and review eligibility for benefits;
  - ▶ figure out health care insurance and prescription drug options;
  - ▶ find a listing of local adult housing and assisted living; and
  - ▶ review legal issues (e.g. advance directives, wills) or make referrals for legal advice.
- AAAs provide ongoing case management for clients receiving in home personal care.
- AAAs coordinate services provided through the Family Caregiver Support Program, Kinship Programs, Senior Citizens Services Act, and Older Americans Act.