

General Assistance-Unemployable (GA-U) and related programs

Prepared by Senate Ways and Means Committee Staff

February 11th, 2009



Agenda

- ▶ **Overview**

- ▶ GA-U, GA-X, and ADATSA program descriptions
- ▶ Client demographics, incapacities, & county comparisons

- ▶ **Medical Assistance Caseloads and Expenditures**

- ▶ Comparison of per person medical costs
- ▶ Caseload trends and policy changes
- ▶ Length of stay on various programs

- ▶ **GA-U programs across the states**

- ▶ **The Governor's budget proposal and alternatives**

Program Descriptions

General Assistance – Unemployable (GA-U)

- ▶ State-funded program providing cash and medical benefits for adults who are physically or mentally incapacitated and expected to be unemployable for more than 90 days
- ▶ Primary incapacity cannot be chemical dependency

General Assistance – Expedited SSI (GA-X)

- ▶ Federally matched program for those presumptively eligible for federal Supplemental Security Income (SSI) cash and medical benefits



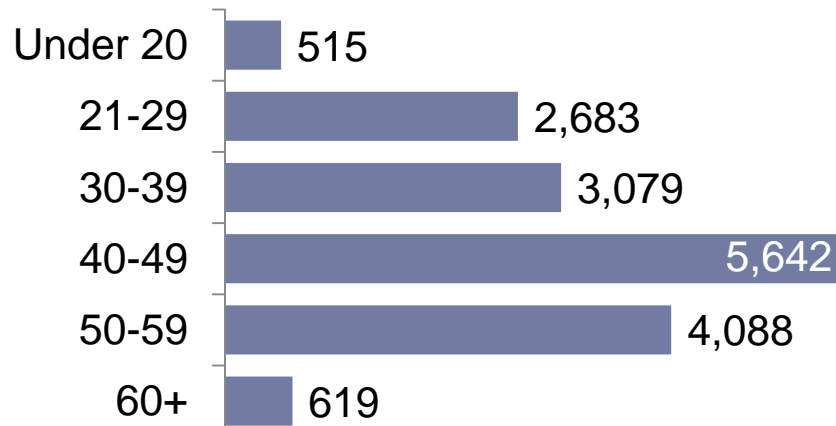
Program Descriptions

Alcohol and Drug Addiction Treatment and Support Act (ADATSA)

- ▶ Established in 1987, a state-funded program providing cash and medical benefits for adults whose primary incapacity is chemical dependency
- ▶ Must be unemployable and willing and capable of benefiting from chemical dependency treatment

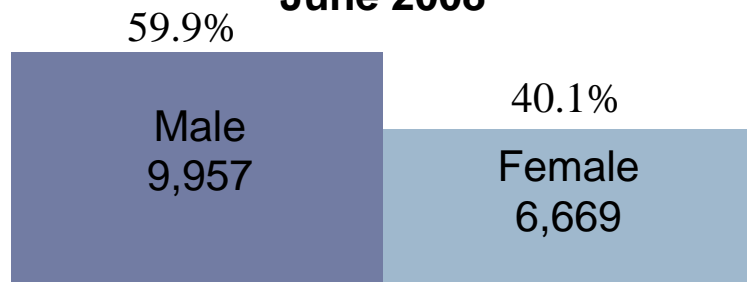
The GA-U clients are primarily white males, with an average age of 42 years old

**Age Distribution
June 2008**

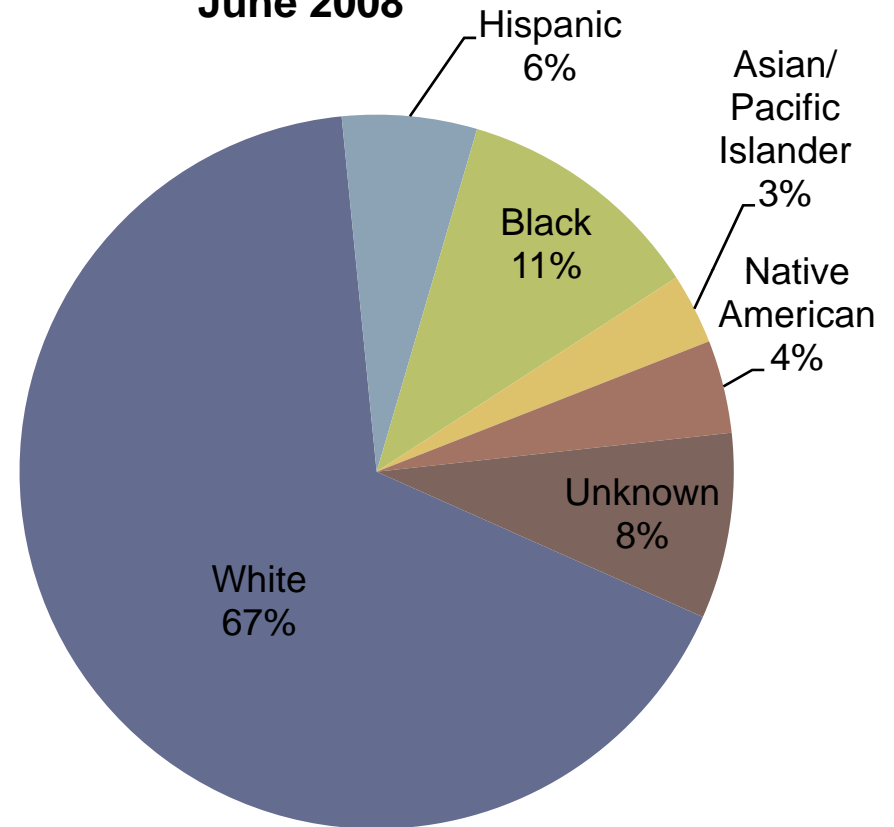


The average age is 42.3 years old

**Gender
June 2008**



**Race | Ethnicity
June 2008**



Counties with urban areas have more clients but rural counties have higher use

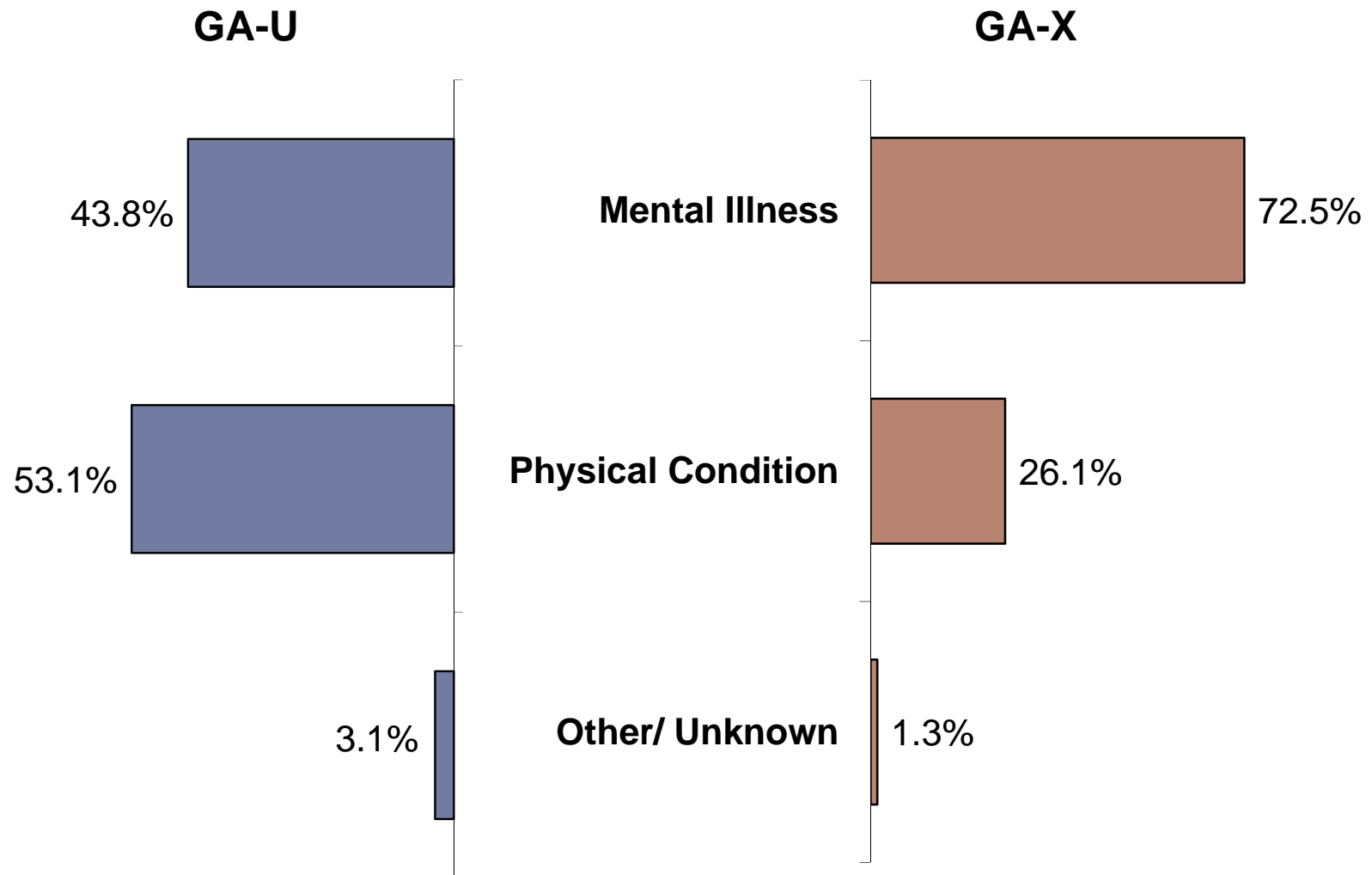
Top Ten Counties By Caseload

County	Clients	Percent of Caseload
King	10,288	29%
Pierce	4,054	11%
Snohomish	3,576	10%
Spokane	3,102	9%
Yakima	1,446	4%
Kitsap	1,219	3%
Clark	1,195	3%
Thurston	1,170	3%
Whatcom	1,164	3%
Benton	905	3%

Top Ten Counties By Use Rate

County	Population	Percent of Population
Pend Oreille	12,600	1.0%
Okanogan	39,800	1.0%
Mason	54,600	0.9%
Grays Harbor	70,800	0.9%
Clallam	68,500	0.8%
Ferry	7,550	0.8%
Lewis	74,100	0.8%
Pacific	21,600	0.8%
Chelan	71,200	0.8%
Stevens	43,000	0.7%

GA-U and GA-X primary incapacities reflect different primary conditions

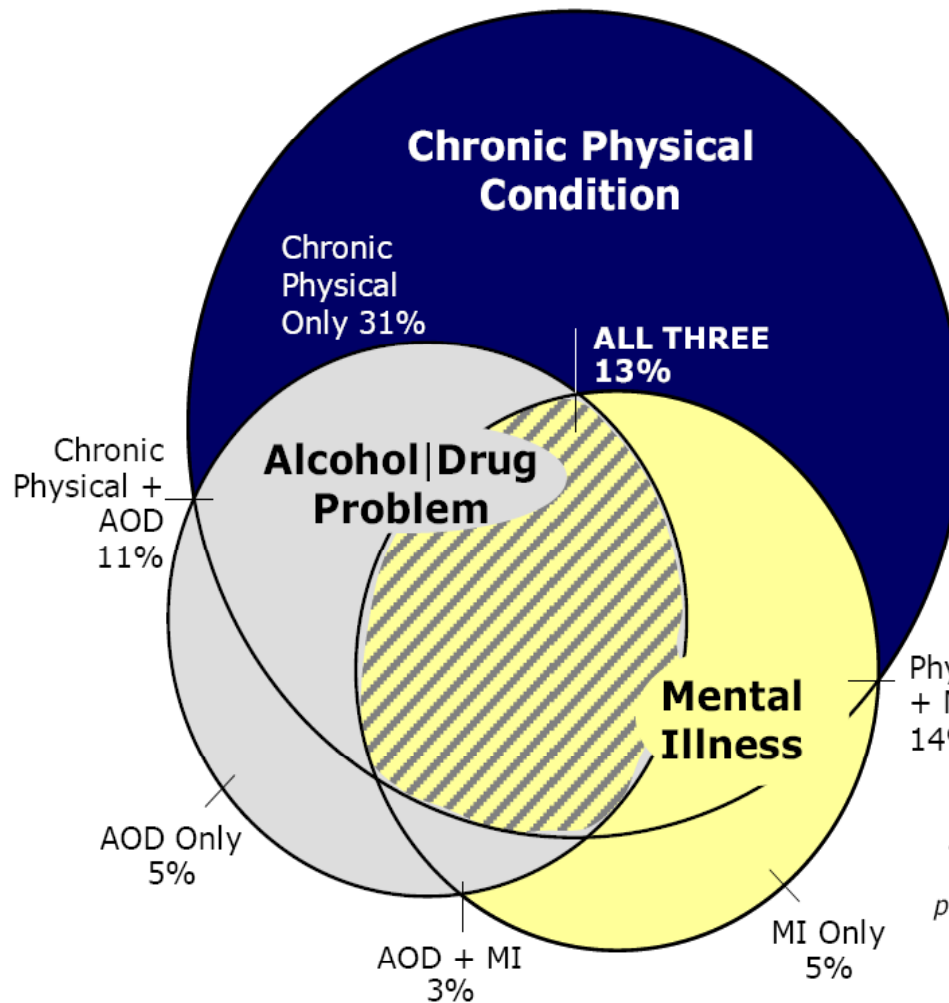


A 2006 report shows GA-U clients have co-occurring diagnoses

Co-occurring Diagnoses and the GA-U Population

52 percent had substance abuse or mental illness identified

31 percent had a chronic physical condition only



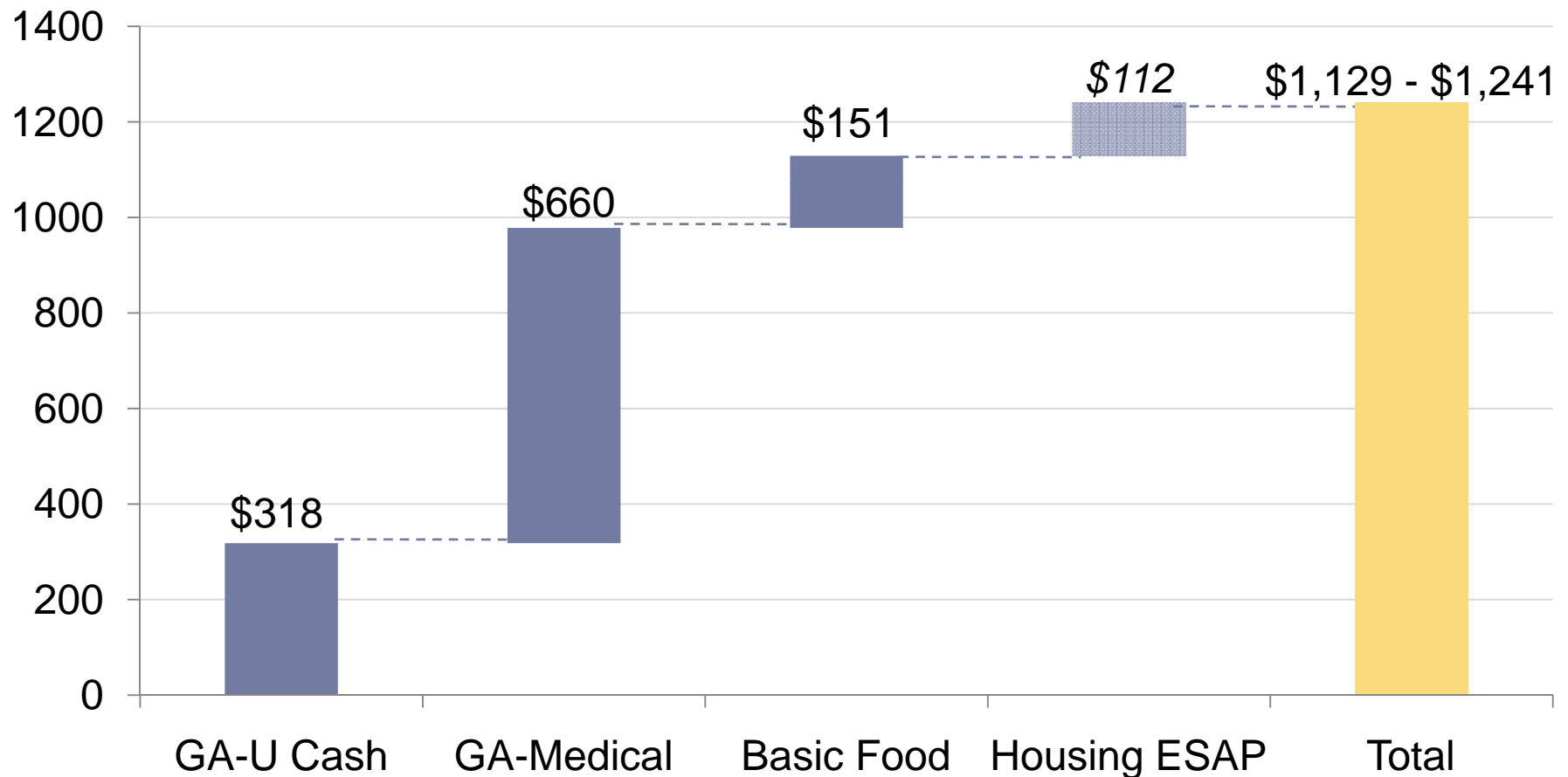
DISEASE CONDITIONS

Chronic Physical	69%
Mental Illness	36%
Substance Abuse	32%

SOURCES: MMIS claims, TARGET service encounters, and WSP arrest records, FY 2003-04. Chronic physical and mental illness diagnosis groups derived from CDPS grouper

GA-U makes up the bulk of the state and federal support

Average monthly assistance amounts
(does not include local support)



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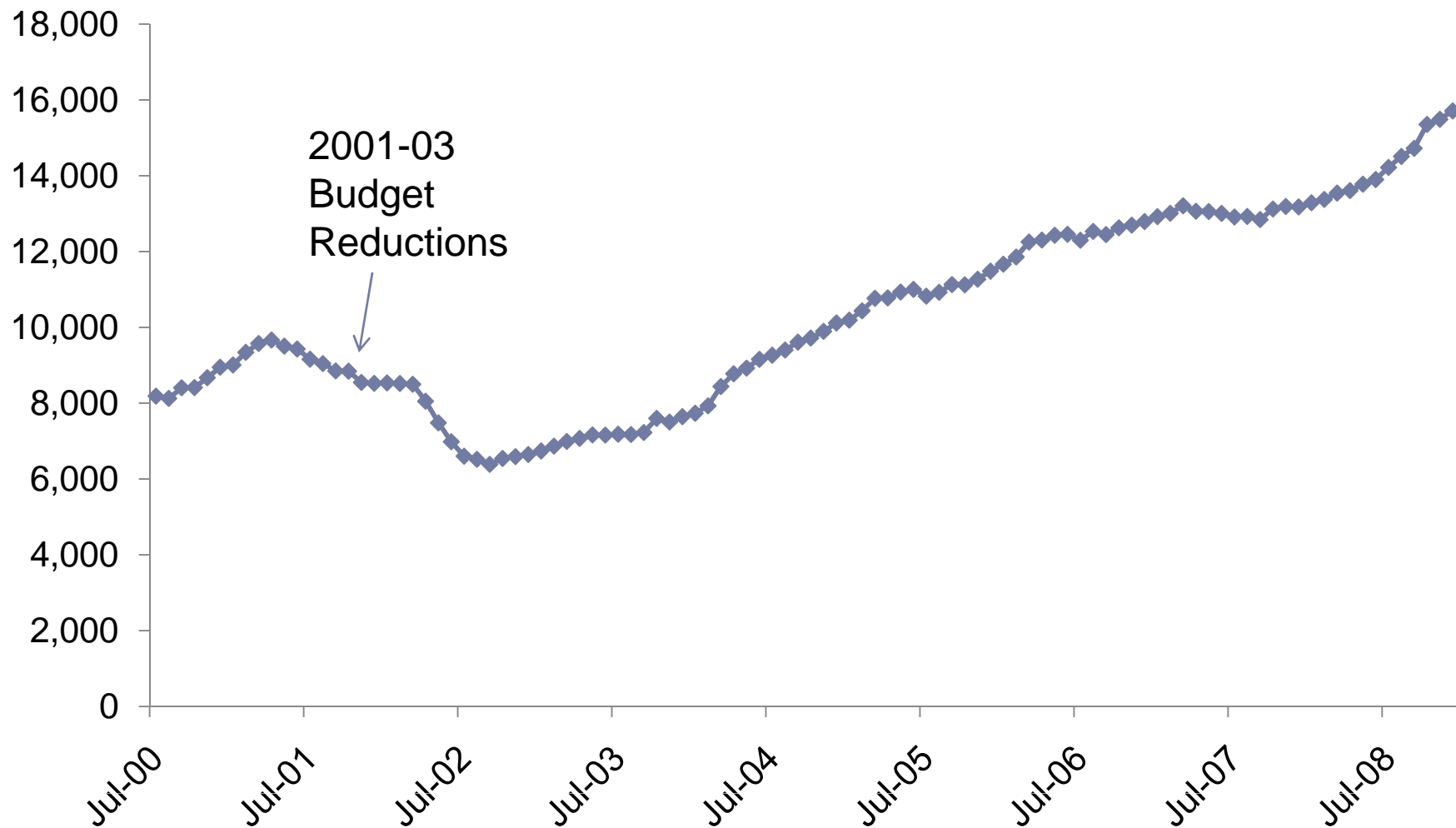
GA-U medical program expenditures are among the fastest growing of DSHS medical programs

*Average caseload and expenditures for 2007-09 biennium
and projected growth for 2009-11 biennium*

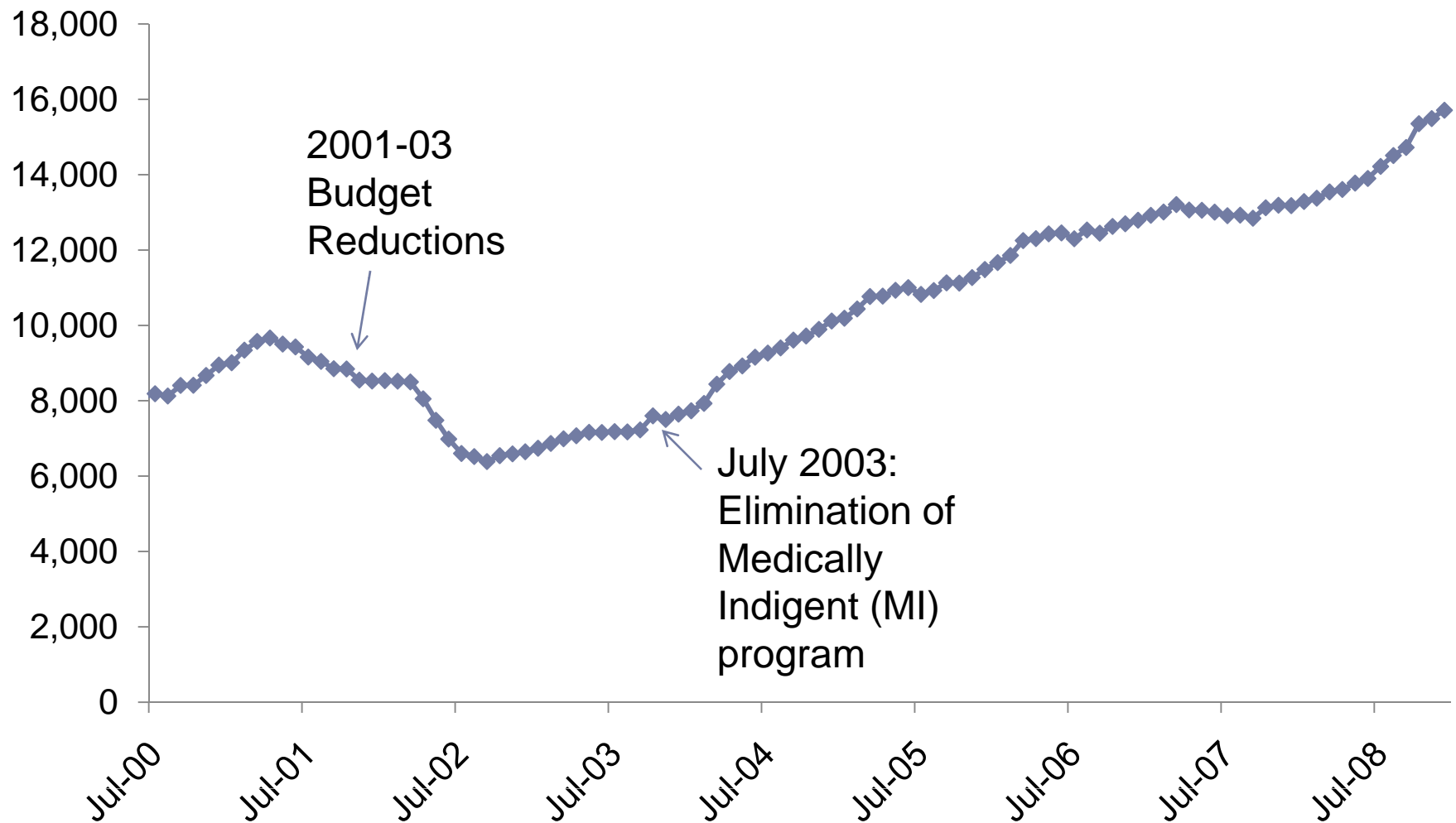
	07-09 Caseload	09-11 Growth Rate	07-09 Per Capita	09-11 Growth Rate	07-09 Total Expenditures	09-11 Growth Rate
ADATSA	4,600	3%	\$210	5%	\$23 million	8%
GA-X / SSI	138,000	6%	\$672	10%	\$2.2 billion	17%
GA-U	13,800	16%	\$624	11%	\$207 million	28%
Medical Assistance – All Other	790,000	9%	\$278	4%	\$5.3 billion	13%



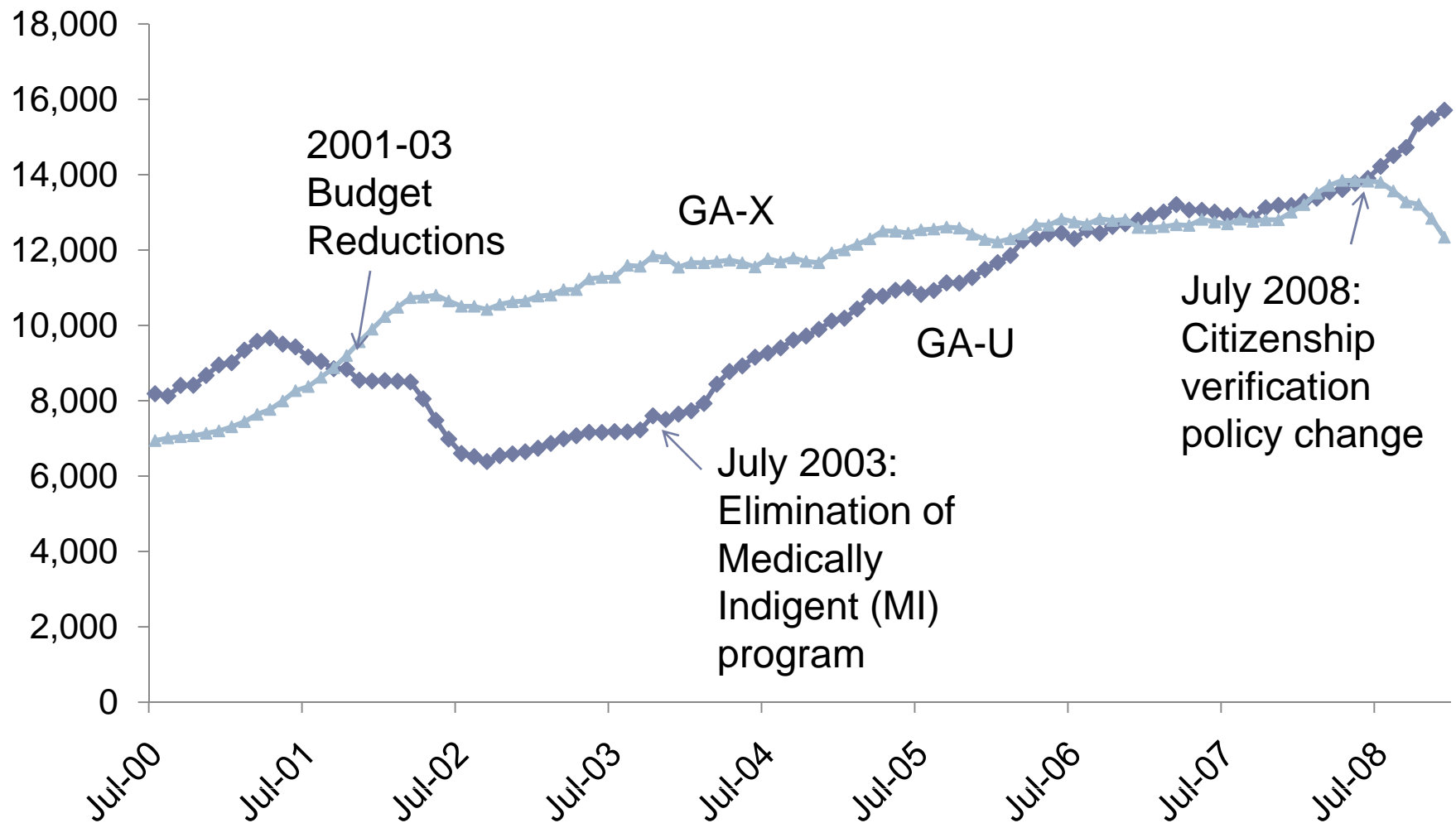
The GA-U caseload is impacted directly and indirectly by policy changes and other programs



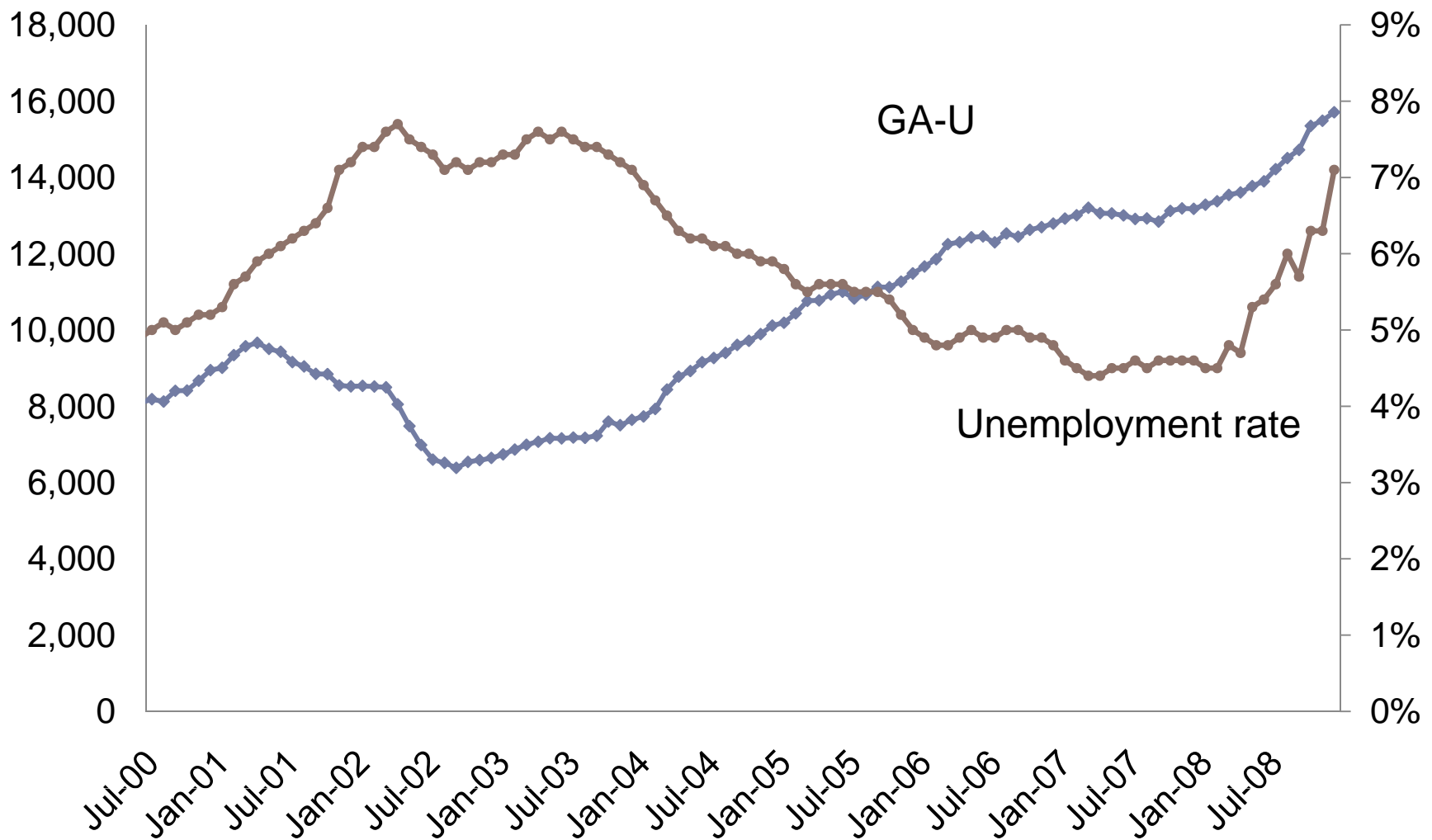
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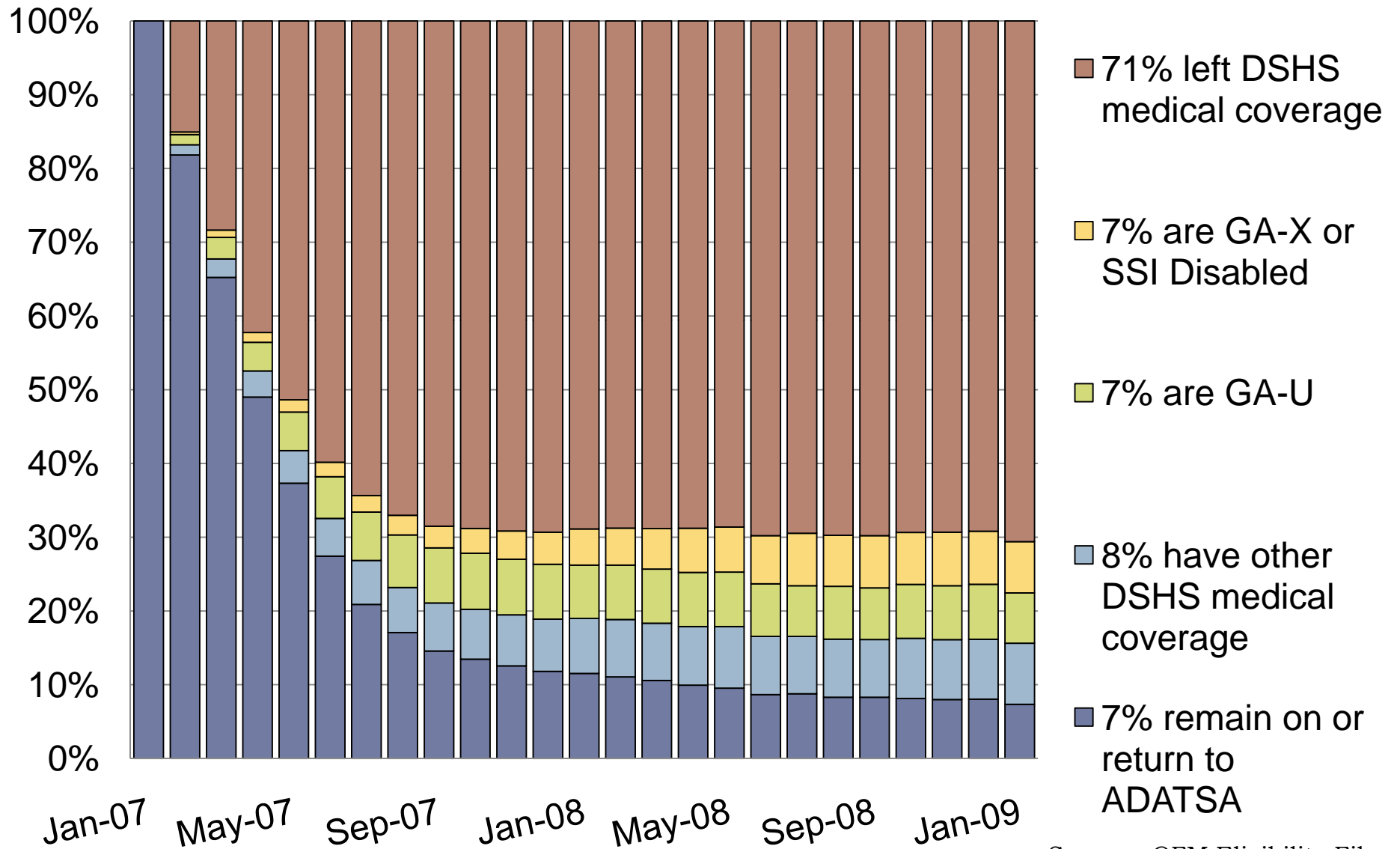
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... Rather than the economy

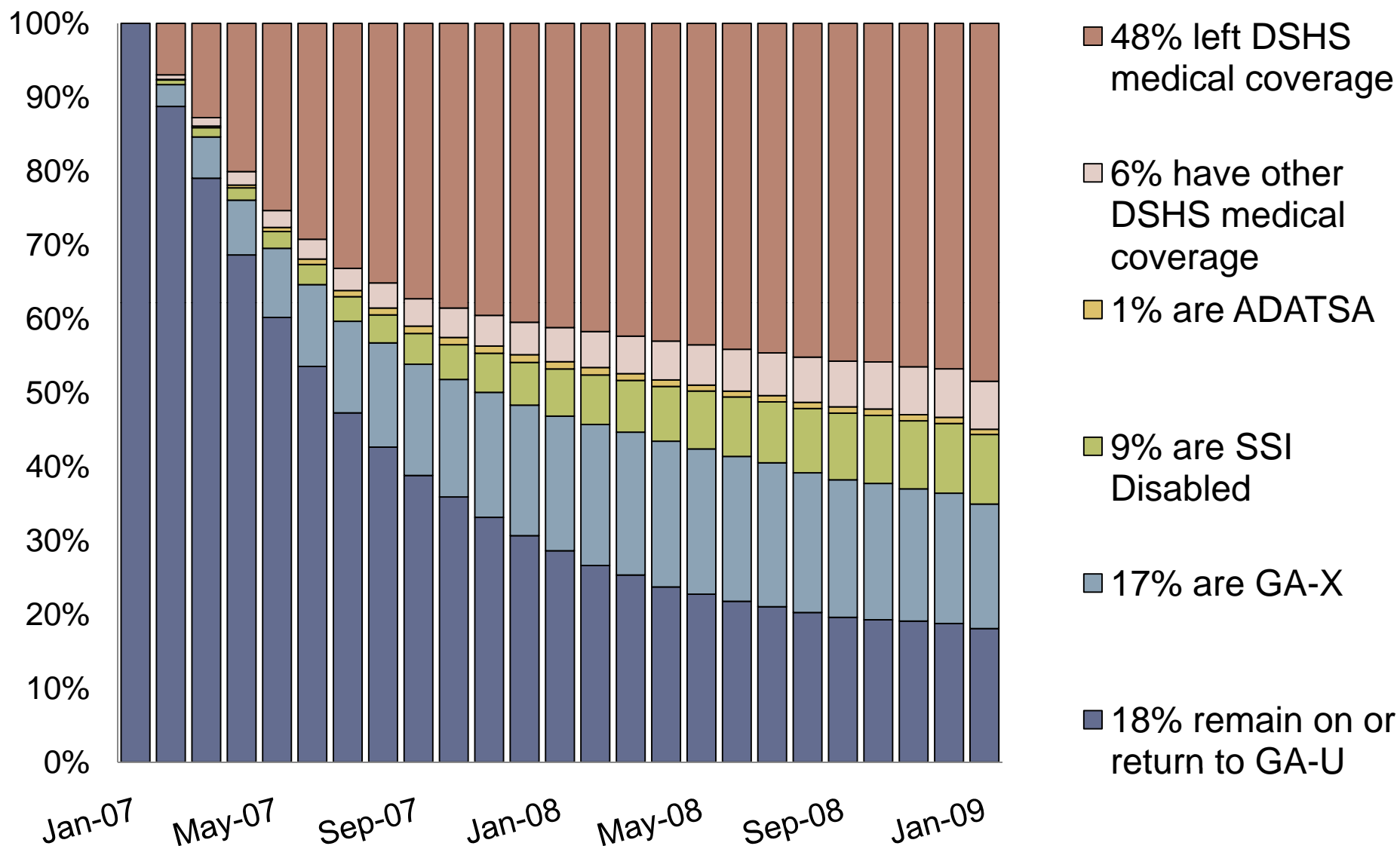


Where are ADATSA clients two years after entering the program?

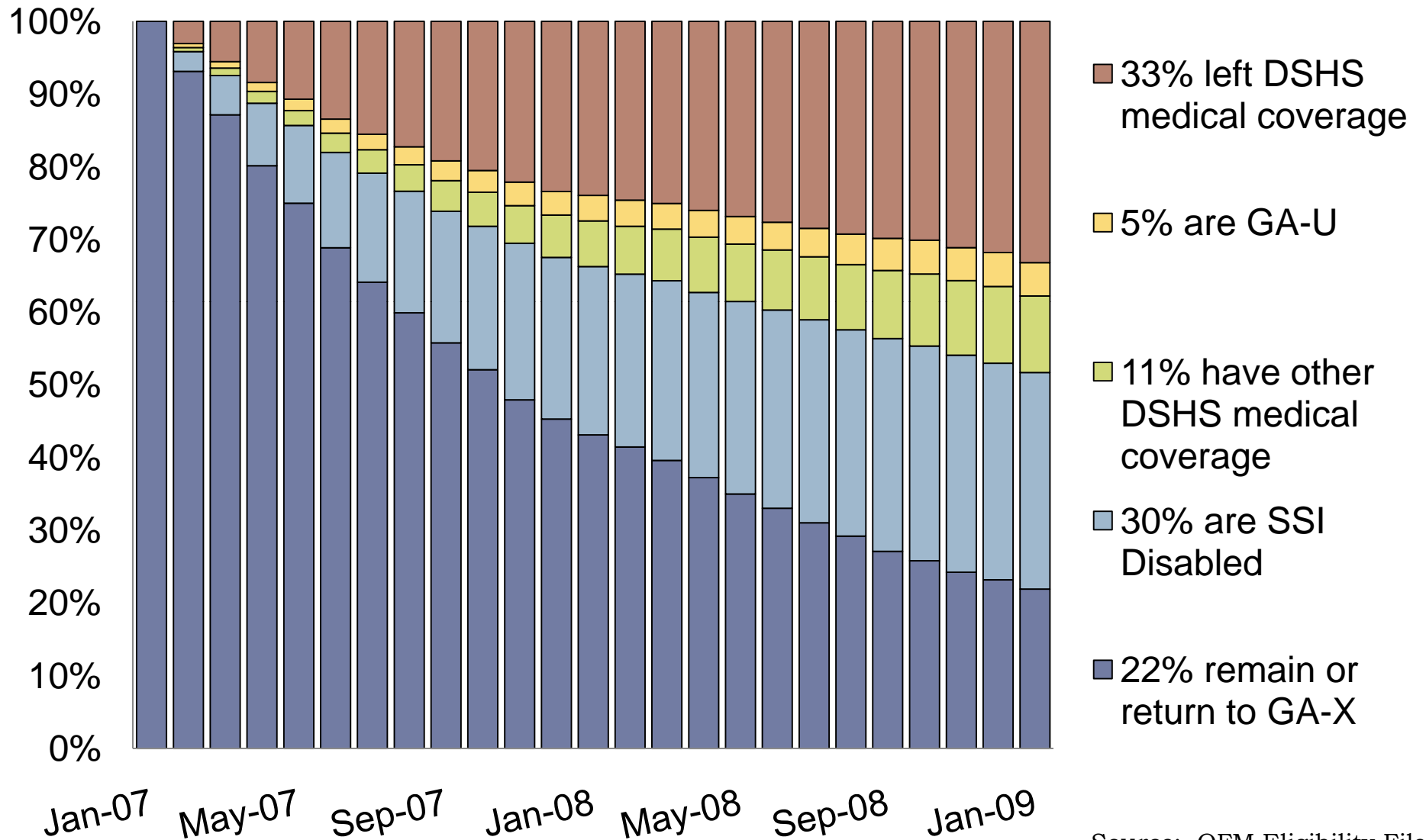


Source: OFM Eligibility File

Where are GA-U medical clients two years after entering the program?



Where are GA-X clients two years after entering the program?



Source: OFM Eligibility File

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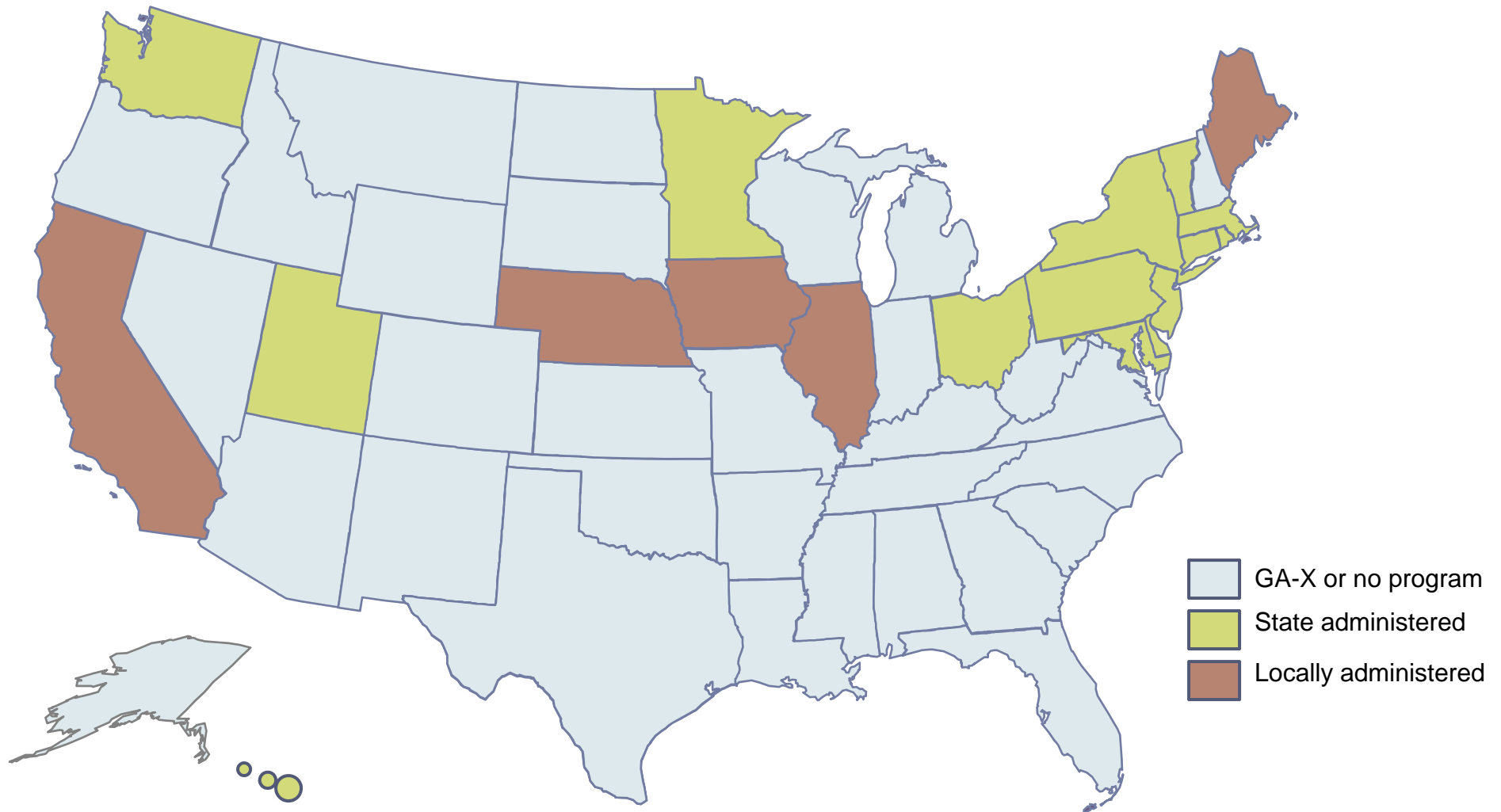
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GA-U programs across the U.S.



Summary of GA-U program options from other states and programs

- ▶ Governor Proposal: Eliminate GA-U cash and medical
- ▶ Keep as state administered cash and medical
- ▶ Eliminate either cash or medical
- ▶ Time limit participation
- ▶ Employ other eligibility changes and/or participation requirements
- ▶ Block grant program to local governments

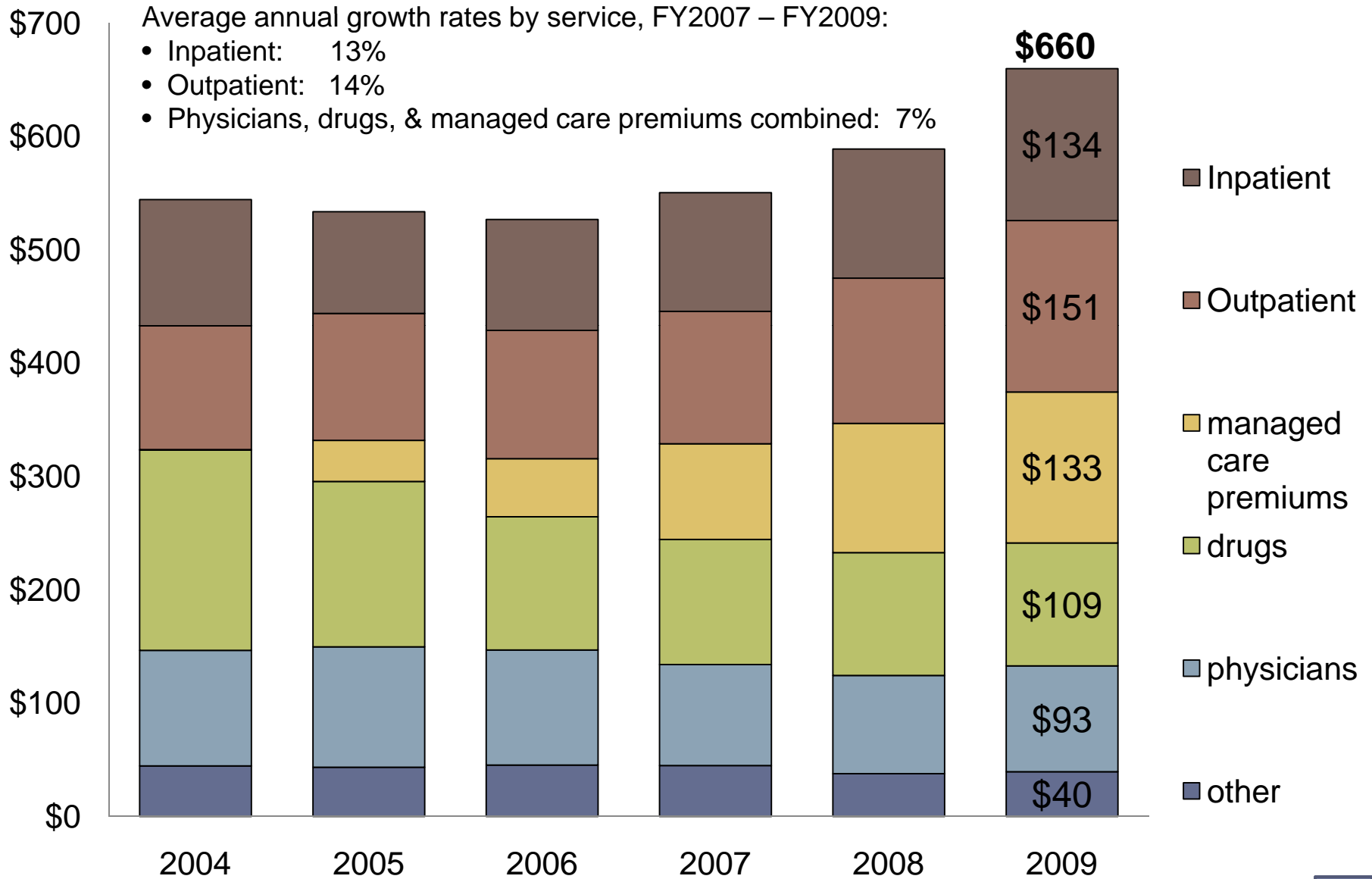
The Governor's 2009-11 budget proposal eliminates GA-U and ADATSA cash and medical*

Program	2009-11 Estimated Savings, in Millions			TOTAL
	Cash - State	Medical - State	Medical - Federal	
GA-U	(\$156)	(\$232)	(\$36)	(\$424)
ADATSA	(\$4)	(\$22)	(\$3)	(\$29)
	2009-11 Program Additions, in Millions			TOTAL
Community Clinic Grants	\$40			\$40
Housing	\$20			\$20
	Total Savings net of program additions			(\$393)

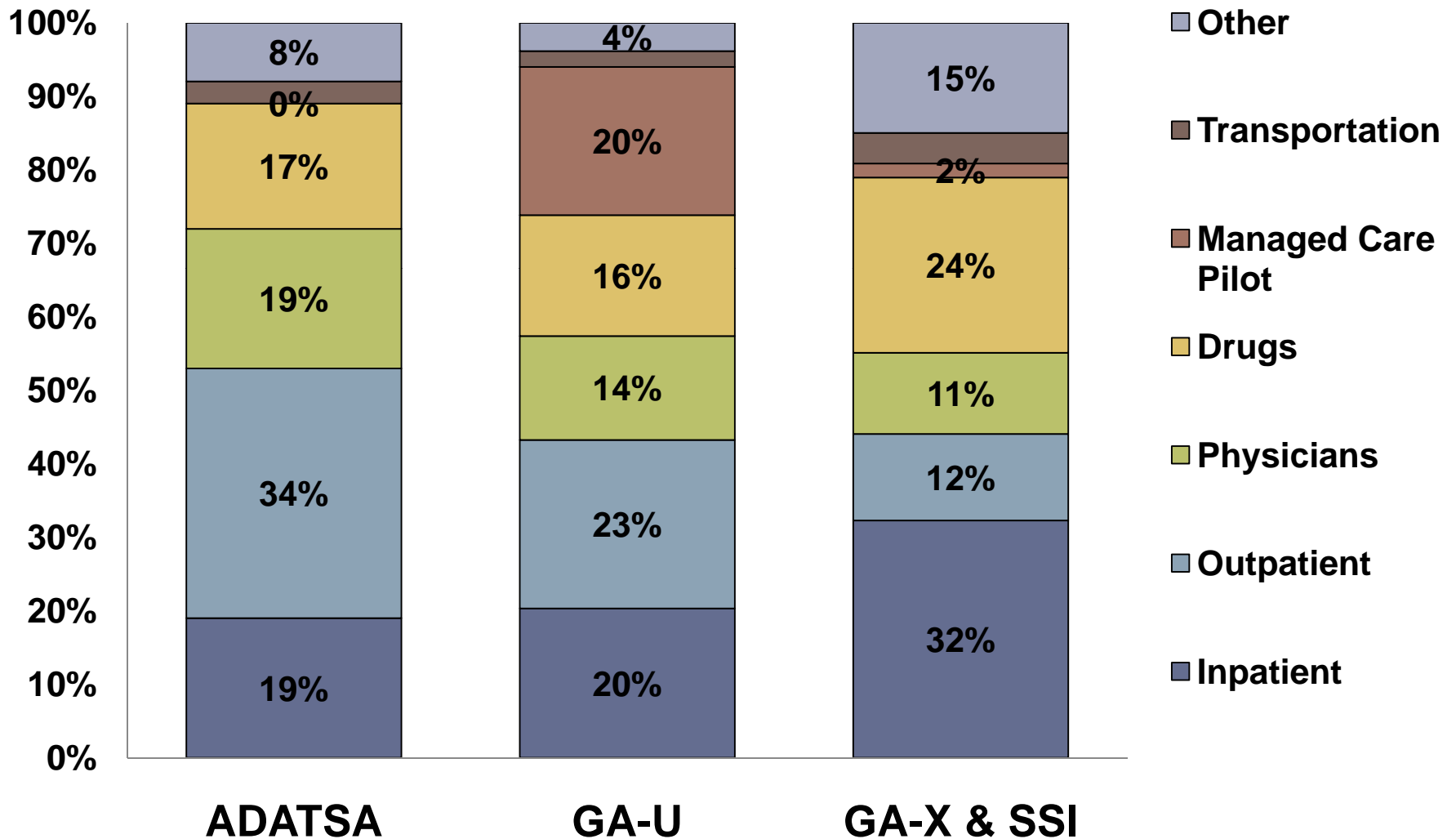
Back-up slides



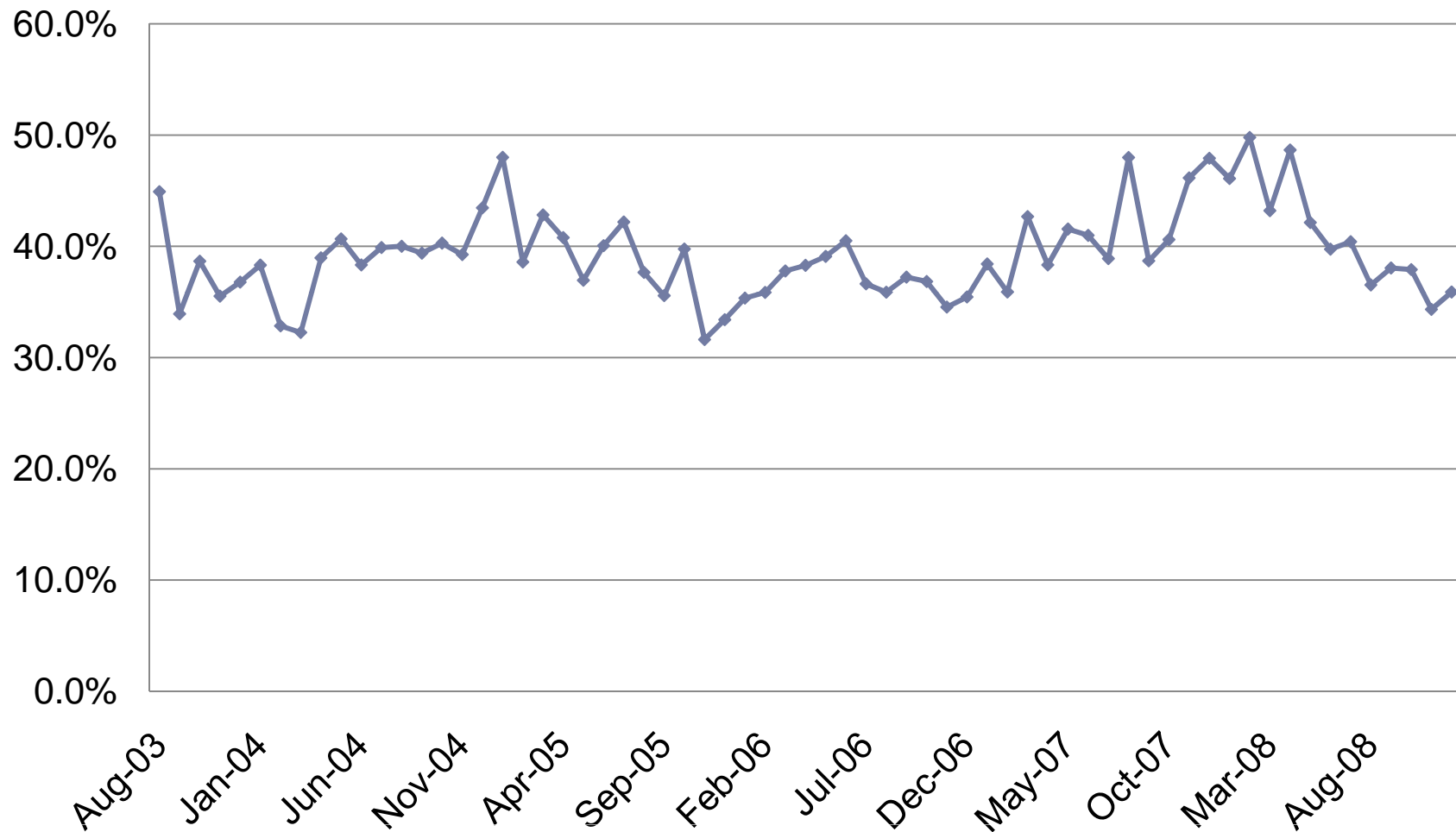
GA-U monthly per person medical costs by service



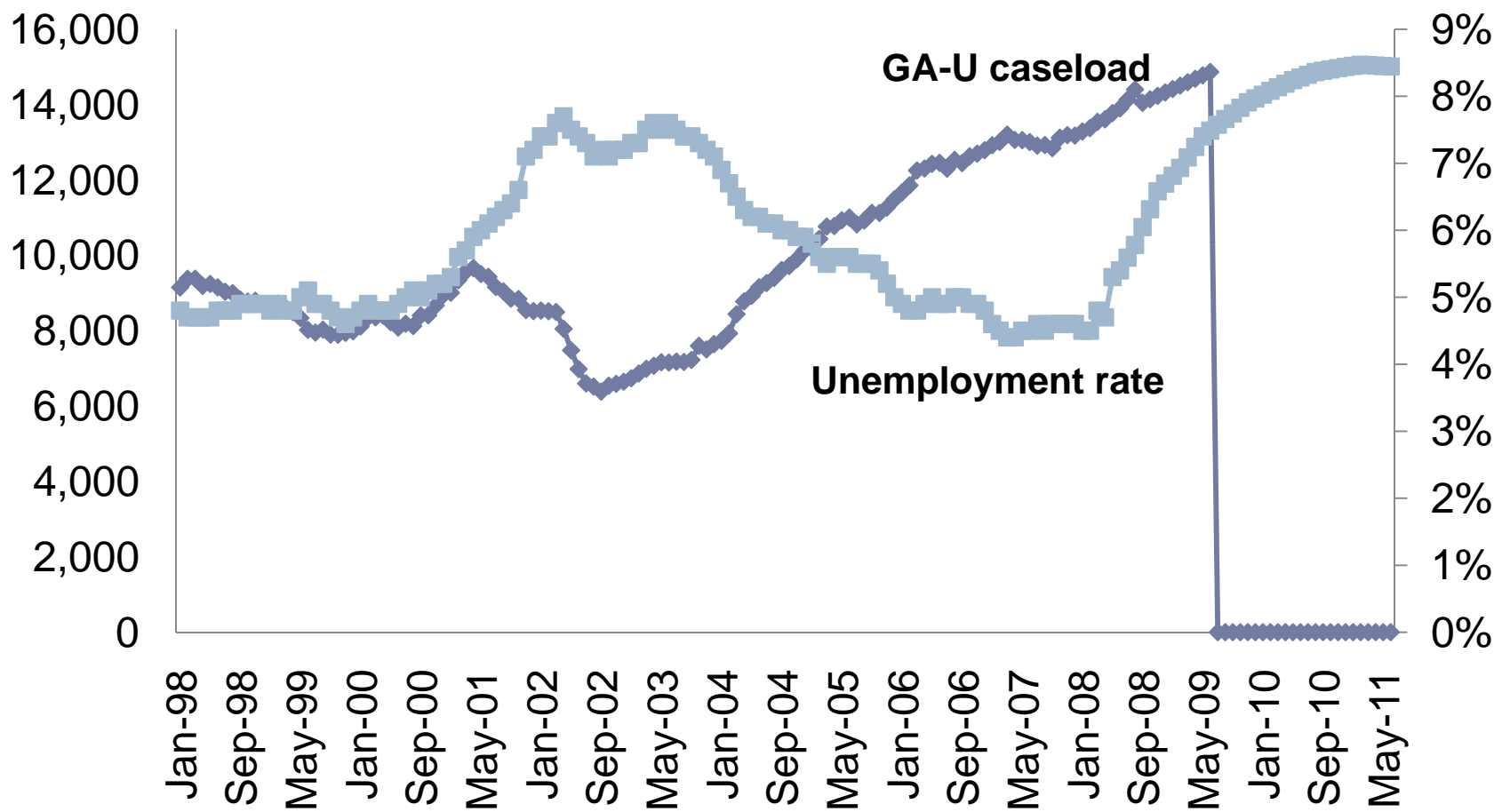
Service Utilization Comparison, per person per month FY2009



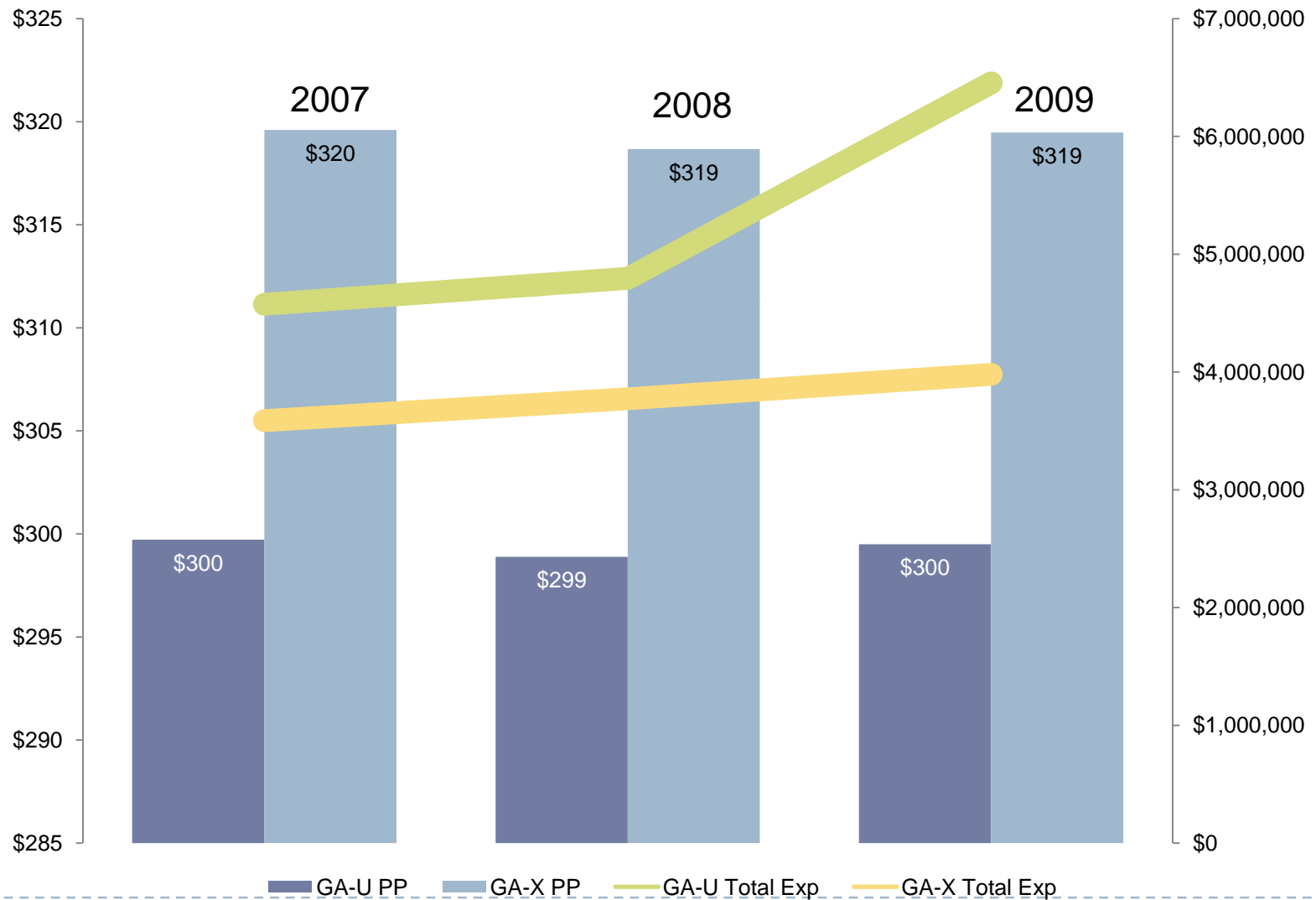
Percent of GA-U caseload moving to GA-X or SSI on a monthly basis



Extend through Governor's budget proposal



With flat per caps, caseloads drive GA-U cash expenditures



GA-U and GA-X caseload changes from prior biennia

