

**Developmental Disabilities Administration
040 - M2 - DA - UTILIZATION OF RESIDENTIAL SERVICES**

Agency Submittal: 11-2017-19-YR Agency Req

Budget Period: 2017-19

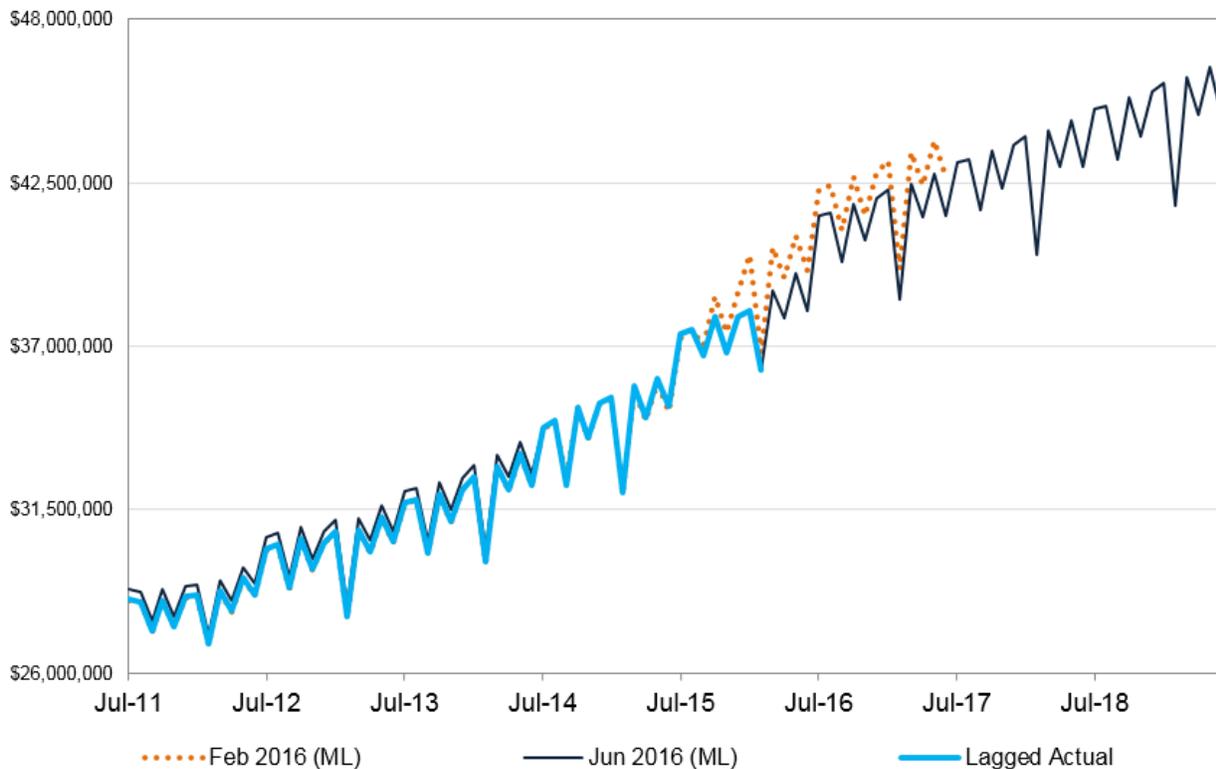
SUMMARY

Changes in the cost of community residential services and supports were identified through the summer 2016 caseload forecast. Supported Living was the biggest cost driver and accounts for about 78 percent of total community residential costs. DDA requests \$39,123,000 Total Funds, (\$19,705,000 GF-State).

PROBLEM STATEMENT

DDA requests \$39,123,000 Total Funds, (\$19,705,000 GF-State) for projected changes in the cost of community residential supports and services that were identified through the summer 2016 caseload forecast which was produced by the Caseload Forecast Council (CFC) and DDA. Examples of these services and supports include but are not limited to supported living, community protection, group homes, and others. Supported Living was the primary cost driver.

Total Community Residential - Expenditures



DSHS VISION
People are healthy • People are safe • People are supported • Taxpayer resources are guarded

DSHS MISSION
To transform lives

DSHS VALUES
Honesty and Integrity • Pursuit of Excellence • Open Communication • Diversity and Inclusion • Commitment to Service

040 - M2 - DA - Utilization of Residential Services

PROPOSED SOLUTION

DDA requests funding for an adjustment to reflect the changes in the cost of community residential services that were projected in the June 2016 caseload forecast.

EXPECTED RESULTS

The agency expects to have sufficient funding to cover residential costs related to the DDA caseload. Funding this decision package will ensure that the current array of services and supports is available for clients as service costs increase or decrease and that providers of services will experience minimal change in their method of conducting business. Forecast driven caseload changes reflect the agency's goals, including:

- Ensuring a safety net is in place for people of need;
- Clients maintain maximum independence;
- Services are of high quality;
- People participate in choices about their services; and
- Clients experience stability.

STAKEHOLDER IMPACT

There is no known stakeholder opposition to this request.

Agency Contact: Bryan Way, (360) 902-7769

Program Contact: Eric Mandt, (360) 725-2579

OTHER CONNECTIONS

Performance Outcomes/Important Connections

1. Does this DP provide essential support to one or more of the Governor's Results Washington priorities?

Goal 4: Healthy & Safe Communities - Healthy People - Provide access to good medical care to improve people's lives.

2. The decision package meets the following DSHS' strategic objectives:

2.1: Increase access to home and community-based services.

2.2: Increase opportunities for individuals who live in large residential facilities to have the option to move into the community and be supported as needed.

3. Identify other important connections or impacts below. (Indicate 'Yes' or 'No'. If 'Yes' identify the connections or impacts related to the proposal.)

- a) Regional/County impacts? No.
- b) Other local government impacts? No.
- c) Tribal government impacts? No.
- d) Other state agency impacts? No.
- e) Responds to specific task force, report, mandate or executive order? No.
- f) Does request contain a compensation change or require changes to a Collective Bargaining Agreement? No.
- g) Facility/workplace needs or impacts? No.
- h) Capital budget impacts? No.
- i) Is change required to existing statutes, rules or contracts? No.
- j) Is the request related to litigation? No.
- k) Is the request related to Puget Sound recovery? No.
- l) Other important connections?

Funding this decision package will ensure that providers of services will see little change in their method of conducting business.

4. Please provide a detailed discussion of connections/impacts identified above.

040 - M2 - DA - Utilization of Residential Services

Alternatives/Consequences/Other

5. What alternatives were explored by the agency, and why was this alternative chosen?

Due to the nature of this request, no alternatives were explored by the agency. This step is the primary driver for funding adjustments related to changes in caseload per capita.

6. How has or can the agency address the issue or need within its current appropriation level?

This request cannot be absorbed within existing resources since funding levels are driven entirely by forecast changes.

7. Does this decision package include funding for any IT-related costs (hardware, software, services, cloud-based services, contracts or IT staff)?

- No**
- Yes (Include an IT Addendum)**

Fiscal Detail**040 - M2 - DA - Utilization of Residential Services**

Operating Expenditures	<u>FY 2018</u>	<u>FY 2019</u>	<u>FY 2020</u>	<u>FY 2021</u>
001-1 General Fund-State	4,487,000	15,218,000	15,218,000	15,218,000
001-C General Fund-Medicaid	4,430,000	14,988,000	14,988,000	14,988,000
Total Cost	8,917,000	30,206,000	30,206,000	30,206,000
Staffing	<u>FY 2018</u>	<u>FY 2019</u>	<u>FY 2020</u>	<u>FY 2021</u>
FTEs	0.0	0.0	0.0	0.0

Performance Measure Detail

Activity:	Incremental Changes			
	<u>FY 2018</u>	<u>FY 2019</u>	<u>FY 2020</u>	<u>FY 2021</u>
Program: 040				
D087 Residential Program	0	0	0	0
No measures submitted for package				

Object Detail

	<u>FY 2018</u>	<u>FY 2019</u>	<u>FY 2020</u>	<u>FY 2021</u>
N Grants, Benefits, and Client Services	8,917,000	30,206,000	30,206,000	30,206,000
Total Objects	8,917,000	30,206,000	30,206,000	30,206,000

DSHS Source Detail**Overall Funding**

Operating Expenditures	<u>FY 2018</u>	<u>FY 2019</u>	<u>FY 2020</u>	<u>FY 2021</u>
Fund 001-1, General Fund-State				
Sources Title				
0011 General Fund State	4,487,000	15,218,000	15,218,000	15,218,000
Total for Fund 001-1	4,487,000	15,218,000	15,218,000	15,218,000
Fund 001-C, General Fund-Medicaid				
Sources Title				
19TA Title XIX Assistance (FMAP)	4,430,000	14,988,000	14,988,000	14,988,000
Total for Fund 001-C	4,430,000	14,988,000	14,988,000	14,988,000
Total Overall Funding	8,917,000	30,206,000	30,206,000	30,206,000