

# Understanding the Community First Choice Option and Recommendations needed from the Planning and Design Workgroup

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# Current Service Silos

**Developmental Disabilities Administration**

**1915(c) Waivers:**  
Basic+, Core, CIBS,  
Community Protection<sup>1</sup>

**Average monthly number Served:**  
11,000

**Eligibility:**  
Level of Care  $\geq$   
ICF/ID  
Income  $\leq$  300% of  
Federal Benefit Level\*

**Settings:**  
In-home  
Supported Living  
Group Home  
Companion Home  
Group Training Home  
Adult Family Home

In addition to Medicaid Personal Care, some current waiver services may also be offered in the Community First Choice program

**Medicaid State Plan Services Shared By DDA and LTC**

**Medicaid State Plan Personal Care**

**Average monthly number Served:**  
19,100

**Eligibility:**  
Level of Care =  
Assistance with ADLs  
Income  $\leq$  138% of  
Federal Poverty Level<sup>1</sup>

**Settings:**  
In-home  
Adult Family Home  
Assisted Living  
Adult Residential  
Care Facility

Medicaid Personal Care will be removed from the State Plan and be offered through the Community First Choice program

**Aging and Long Term Support Administration**

**1915(c) Waivers:**  
COPES, New Freedom<sup>1</sup>

**Average monthly number Served:**  
32,300

**Eligibility:**  
Level of Care  $\geq$

**Nursing Facility**  
Income  $\leq$  300% of  
Federal Benefit Level\*

**Settings:**  
In-home  
Adult Family Home  
Assisted Living

In addition to Medicaid Personal Care, some current waiver services may also be offered in the Community First Choice program

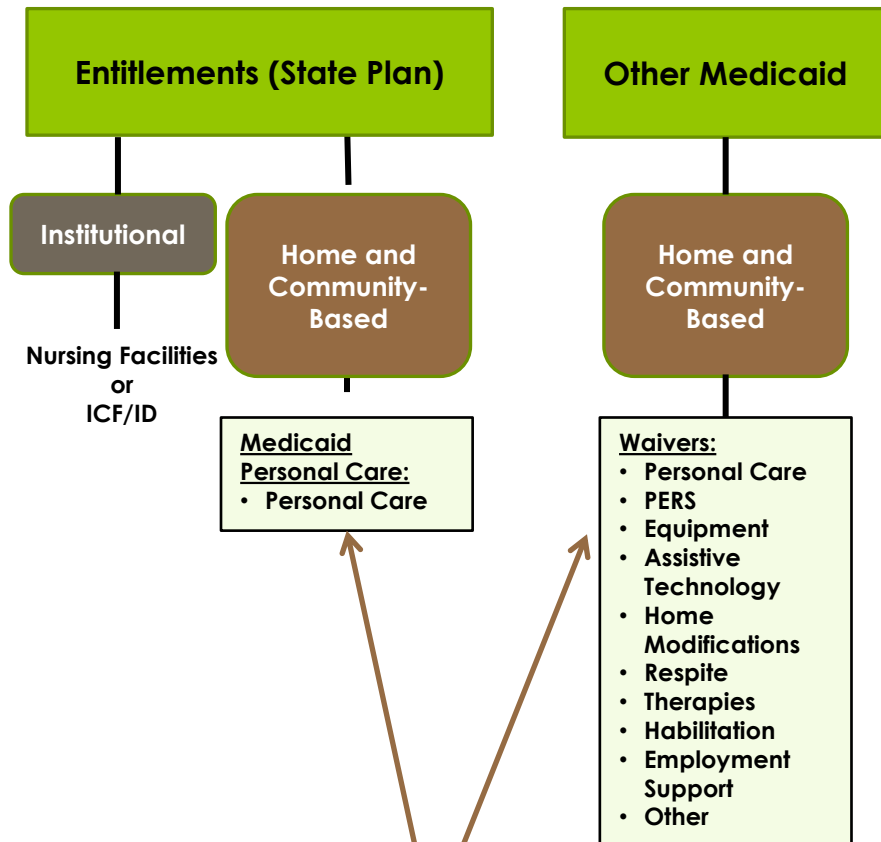
Medical Services are provided through the Medicaid State Plan to all eligible Medicaid beneficiaries.

No changes will be made to the way Medical Services are offered when the Community First Choice program is implemented.

\*300% of the Federal Benefit Level is the SSI standard.

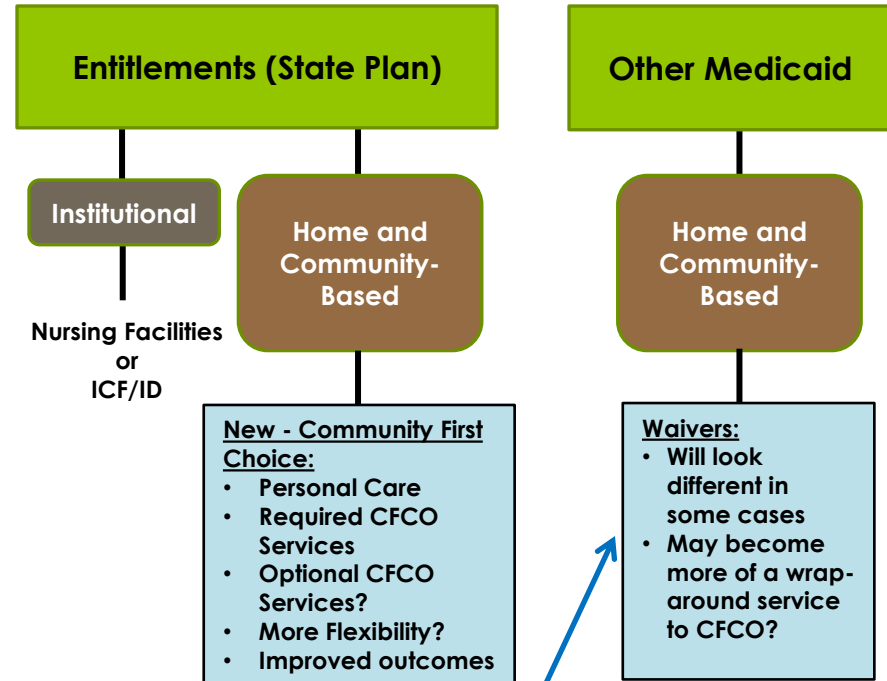
# What does CFCO change about our current system?

## Current:



Current: client is eligible for one or the other

## Future:



New: A client is potentially eligible for both

# 4 Legislative Direction for CFCO – General (HB 2746)

1. **“Refinance” Medicaid Personal Care.\***
  - 56% federal match (currently 50%).
  - Will create state savings.
2. **Include federally required services.**
3. **Possibly include optional services.**
4. **By July 1, 2014: Begin stakeholder work.**
5. **By August 30, 2015: Full implementation.**

\*Fiscal modeling also assumes refinancing most waiver personal care.

# 5 Legislative Direction for CFCO – Fiscal (HB 2746)

## 1. **Meet federal maintenance of effort (MOE):**

- Washington must spend as much state funds for services after CFCO implementation as it would have before.

## 2. **Limit per capita growth under CFCO:**

- Average costs per person cannot be 3% more than what those services would have cost pre-CFCO.

## 3. **An expectation of sizable net state savings.**

- Caseload growth from CFCO cannot exceed a certain level or net savings will not be achieved.
- Fiscal note assumes 2% increase in caseload due to CFCO.

# Legislative Direction for CFCO - Savings

## **Cover the new costs from CFCO (HB 2746):**

- Caseload increases.
- Per capita cost increases, up to 3%.
- Necessary staff resources.
- Preserve personal care services for those ineligible for CFCO.\*

## **Specific investments in developmental disabilities services (SB 6387):**

- 4,000 more served by new Individual and Family Support waiver and
- 1,000 more served by Basic Plus waiver by June 2017.

## **Remaining savings is reserved for potential investments (HB 2746):**

- Joint Legislative Executive Committee on Aging and Disability to make recommendations prior to submission of CFCO proposal.

\*DSHS fiscal modeling has assumed that approx. 1,500 people would not be functionally eligible, so some savings would be used to cover them, although HB 2746 doesn't require this.

# DSHS Decision Guidelines

## **DSHS Mission:**

Transforming Lives

## **DDA Mission**

To transform lives by creating partnerships that empower people to live the lives they want.

## **ALISA Mission**

To transform lives by promoting choice, independence and safety through innovative services.

## **Shared Values**

Compassion

Respect

Honesty and Integrity

Open Communication

Pursuit of Excellence

Empowering

Person-Centered

Innovative

Collaborative Partnering

Diversity and Inclusion

Accountability

Commitment to Service

## The workgroup will develop recommendations to DSHS on the following topics:

- ❖ The amount, duration, scope of required services.
- ❖ Whether any optional services should be explored: What services, what amount, duration and scope?
- ❖ Consideration of qualified providers for each identified service.
- ❖ Recommendations around benefit design: How much choice and flexibility will there be in the benefit design?
- ❖ Ideas for monthly waiver services that would permit waiver eligible individuals to access some benefits through CFCO?
- ❖ Are there ways to leverage CFCO to maximize function/independence, self-management and ability for clients to work towards health goals?



# CFCO Components- to be determined

