

ALTA/DDA/BHA IPAC SUBCOMMITTEE MEETING

Administrations and Divisions:

Home & Community Services (HCS), Residential Community Services (RCS), Behavioral Health Administration (BHA),

Developmental Disabilities Administration (DDA), Division of Behavioral Health and Recovery (DBHR), Office of the Deaf & Hard of Hearing (ODHH)

November 10, 2020 from 9 a.m. – noon

No in-person locations available.

Please register for IPAC Subcommittee ALTA/BHA/DDA on November 10, 2020
starting at 9:00 AM PST at:

<https://attendee.gotowebinar.com/register/7982740694599152141>

After registering, you will receive a confirmation email containing information about joining the webinar.

Welcome and Introductions – Office of Indian Policy Dr. Marie Natrall/Brenda Francis-Thomas

- Welcoming
- Invocation
- Announcements:
 - Safe Start Advisory Groups:
Governor Jay Inslee announced members of Safe Start advisory groups with focus on health systems readiness, social supports and safe return to work.

These groups include a diverse group of voices, from community leaders in labor, business, government and nonprofit organizations. They represent a broad cross-section of Washingtonians from east and west of the Cascades, different generations and a focus on different impacts from the pandemic on our state.

Each advisory group constitutes a forum for the community to consult with the governor's office and state agencies on next steps as Washington moves forward. The members of these community leader groups are in touch with communities around the state and will inform decision-making.

Social Supports Community Leaders Group

The Social Supports Community Leaders Group will offer perspectives on the increasing need for social services because of the COVID-19 pandemic, including food security and safe shelter and housing. It will look at recovery through an equity lens to defend the state’s most vulnerable and make sure that every Washingtonian is part of the recovery.

We have scheduled a Safe Start Tribal Listening Session for November 10, 2020. This will take place Noon to 1:00 PM following the DSHS Aging Subcommittee meeting and followed by the HCA Monthly Meeting.

Join Zoom Meeting

<https://dshs-wa.zoom.us/j/4998474947>

Meeting ID: 499 847 4947

One tap mobile

+12532158782,,4998474947# US (Tacoma)

Dial by your location

+1 253 215 8782 US (Tacoma)

888 475 4499 US Toll-free

877 853 5257 US Toll-free

Meeting ID: 499 847 4947

- Roll Call

Aging and Long-Term Services Administration – Marietta Bobba; Ann Dahl

- Medicaid Transformation Roundtable #2 – 9 a.m.

Medicaid Transformation Roundtables and Consultation		
Meeting	Date & Time	Webinar Registration Link
Roundtable #2	11-10-2020 9:00-10:00 AM	https://global.gotowebinar.com/join/7982740694599152141/564121505 *during the regularly scheduled DSHS IPAC ADS Subcommittee
Roundtable #3	11-18-2020 10:00-11:30 AM	https://attendee.gotowebinar.com/register/7789283822076029442 *during the regularly scheduled TCOW
Tribal Consultation	12-09-2020	https://attendee.gotowebinar.com/register/9115703863895763714 *during the regularly schedule HCA-DOH MTM

Please contact Jessie Dean, Tribal Affairs Administrator, by telephone at (360) 725-1649 or via email at jessie.dean@hca.wa.gov if you have additional comments or concerns.

- Consumer Direct of Washington: Introductions and discussion: Individual Providers for AL TSA & DDA. (20 minutes)
- Covid-19 check-in and sharing
- Tribal Initiative Updates:
 - Squaxin Island Tribe
 - Nisqually Tribe
 - Makah Tribe
 - Lummi Nation
 - American Indian Community Center
- Adult Protective Services Check-In – APS staff

Developmental Disabilities Administration – Justin Chan

- DDA clients with tribal affiliation (self-identified) and receiving DDA services
- Questions from audience
- Click here to view [COVID-19 Updates](#)
- [Developmental Disabilities Administration Eligibility](#) – To be found eligible as a client of DDA, a person must:
 - Be a Washington State resident;
 - Have evidence of a qualifying developmental disability that began before age 18; and
 - Have evidence of substantial limitations.

The Revised Code of Washington [71A.10.020\(5\)](#) defines a developmental disability as:

- a disability attributable to intellectual disability, cerebral palsy, epilepsy, autism, or another neurological;
- other condition of an individual found by the secretary to be closely related to an intellectual disability; or
- to require treatment similar to that required for individuals with intellectual disabilities, which originates before the individual attains age eighteen, which has continued or can be expected to continue indefinitely, and which constitutes a substantial limitation to the individual.”
- [DDA Eligibility Flow Chart \(PDF\)](#): An overview of the process to apply for DDA eligibility and services.
 - [Intake and Eligibility](#) – Complete the required forms and documents. You can request a packet by filling out a [Service and Information Request](#) (<https://www.dshs.wa.gov/dda/service-and-information-request>) or by returning the information listed below:
 - [Request for DDA Eligibility Determination Form \(14-151\)](#)

- [Consent \(14-012\)](#)
- [Notice of Privacy Practices for Client Confidential Information \(03-387\)](#)
- [Washington State Voter Registration](#) for applicants age 18 or older
- Documents that support that you have a developmental disability, as described in [DSHS Form 14-459 Eligible Conditions Specific to Age and Type of Evidence](#) such as:
 - Educational records
 - Psychological records
 - Medical records
- Contract with DDA:
 - [Interested in Becoming a Certified Supported Living Provider?](#) Follow the steps below:
 - Apply for a business license
 - Complete an [application](#)
 - Mail the complete application packet to Management Services Division, Business Analysis and Application Unit (BAAU) at DSHS.
 - For US Postal Mail: AL TSA BAAU, PO Box 45600, Olympia, WA 98504-5600
 - For Federal Express: AL TSA BAAU, 4450 10th Ave SE (Blake West), Lacey, WA 98503
 - [Additional DDA Contracts available to Tribes](#). See Contracting and [Frequently Asked Questions](#)
 - Community Guide and Engagement
 - Positive Behavioral Support and Consultation
 - Environmental Accessibility Adaptations
 - Etc...
- For any questions, requests or comments, please reach Justin Chan chanjk@dshs.wa.gov or your [Local DDA Tribal Liaison](#)

Behavioral Health Administration – Teva Weissman

- COVID-19 Updates
- BHA Tribal Liaison update
- Trueblood Updates
- BHA would like to continue with meetings and set up chances to work with Tribes through web platforms. Please contact Teva Weissman at teva.weissman@dshs.wa.gov for more information.

Closing

Safe Start Advisory Group Meeting Reminder

Agenda Items for next meeting:

- Tribal Initiative Updates:
 - Squaxin Island Tribe
 - Nisqually Tribe
 - Makah Tribe
 - Lummi Nation
 - American Indian Community Center
- Adult Protective Services Check-In – APS staff
- ALTA Tribal Affairs website updates: <https://www.dshs.wa.gov/altsa/altsa-tribal-affairs>
- Client Data: AI/AN in facilities, RCL, using ALTA services

Next meeting is on December 8 from 9 a.m. to 12 p.m.

No In-Person Locations available.

Please register for IPAC Subcommittee ALTA/BHA/DDA at:

<https://attendee.gotowebinar.com/register/7982740694599152141>

After registering, you will receive a confirmation email containing information about joining the webinar.



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Aging and Long-Term Support Administration
PO Box 45600, Olympia, WA 98504-5600

October 9, 2020

Dear Tribal Leader,

AARP released its fourth iteration of the Long-Term Services and Supports (LTSS) Scorecard on September 24. Washington state's overall score ranks us as 2nd in the nation.

The full report can be found at:

<http://www.longtermscorecard.org/~media/Microsite/Files/2020/LTSS%202020%20Short%20Report%20PDF%20923.pdf> and is attached to this message.

The data in the *2020 LTSS Scorecard* provides the foundation for measuring and comparing state LTSS systems utilizing a set of measures that are readily available across most states. It is important to note that the scorecard is not a report on the impact of COVID-19 on individuals who need LTSS or how states have addressed the pandemic in long-term care settings.

This scorecard ranks states and Washington, D.C. in order from 1 to 51 on a wide range of issues pertaining to older adults, people with disabilities and their caregivers and families. The LTSS scorecard has five domains that states are ranked within, and each of those domains has multiple indicators that are used to derive the overall score. The domains include:

- Affordability and Access
- Choice of Setting and Provider
- Support for Family Caregivers
- Effective Transitions
- Quality of Life and Quality of Care

Washington improved in 4 of the domains, receiving high marks in the top quartile of the nation in Affordability and Access, Choice of Setting and Provider, Support for Family Caregivers, and Effective Transitions. We are proud of the continued improvements made in our state to assist individuals in need of long-term services and supports. This achievement is the result of decades of hard work, strategic decisions, the partnerships and consultations we foster in our government-to-government relationship with our tribes, our close relationships in working with our stakeholders and a common understanding that people want and deserve choice in where they age, the services they receive and who their support network is.

We would like to take this opportunity to thank all of our tribal governments for the work you do each day to support and provide LTSS to so many Washingtonians in need. Our hope is that the 2020 LTSS Scorecard sparks ongoing conversations and action in our state so we may continue to assess our performance across multiple dimensions and indicators, learn from others, and improve the lives of older adults, people with physical disabilities, and their families.

It is important to note that Washington state delivers this high level of service in a truly efficient, cost-effective manner in comparison to other states. Overall, we continue to be pleased with our performance on the Scorecard. Our support for family caregivers, our first-in-the-nation

establishment of a public LTSS insurance benefit program, and our development of specialized services to assist our diverse population in need of information, options counseling and/or services to support their goals and preferences continue to make us a national leader in the provision of LTSS.

Thank you, again, for all you do to support Washingtonians in need and your contributions to this national leadership in LTSS.

Sincerely,

A handwritten signature in black ink, appearing to read "Bill Moss", with a long horizontal flourish extending to the right.

Bill Moss,
Assistant Secretary

DSHS: Transforming Lives

New Employer for Individual Providers



How will this benefit IPs?

- More options for recording hours worked (mobile device, computer connected to the internet, telephone call or in-home device)
- Assistance with payment, training and credentialing
- Face-to-face assistance
- Assigned Service Coordinators
- Growth and retention of workforce

Where can I get more information?

Stay Informed about the CDE Project
www.dshs.wa.gov/altsa/cde

- Sign up to receive Consumer Directed Employer updates by email.
- Sign up to attend a monthly informational webinar or stakeholder meeting.
- Review the latest Materials & Resources.

Contact Us

Email:
CDE@dshs.wa.gov

Web:
www.dshs.wa.gov/altsa/cde



Consumer Directed Employer

What is happening?

In 2021, Consumer Direct Washington (CDWA), a private company, will become the Consumer Directed Employer (CDE) in Washington State. CDWA will be the employer of all the Individual Providers (IPs) who care for clients receiving services from the Department of Social and Health Services (DSHS).

Who will this affect?

This will affect IPs who are contracted with DSHS and clients who receive a service from an IP.



What will change?

- IPs will be employees of the CDE and will no longer contract with DSHS.
- Authorizations will be made to the CDE instead of IPs.
- The CDE will issue payment to IPs.
- Clients and IPs will contact the CDE with IP-related questions.
- Client responsibility will be paid directly to the CDE.
- Clients will work with the CDE and IP on assignment of authorized hours.
- The CDE's system will support Electronic Visit Verification (EVV).
- Paydays will be every other week.
- The CDE will have an issue resolution process for clients and IPs.

What will stay the same?

- Clients are the managing employer and determine who provides care and when services are scheduled.
- Work week and overtime limits
- Case manager assessing benefit level and authorizing services
- DOH credentialing, training and background check requirements
- Rate of pay and benefits

What are the next steps?

1. Keep your personal information current in IPOne, including mailing and email address.
2. Stay current with training and background checks.
3. If not already receiving electronic payments, sign up for electronic funds transfer (EFT) to your bank account or choose to receive an ALINE Pay debit card.
4. Attend CDE webinars to stay up to date.
5. Stay connected to know when changes will occur.



CDE Fact Sheet for Case Managers

What Stays the Same?

Staying the Same for Case Managers and Clients

- Client-centered and self-directed care remains the top priority in the implementation of the Consumer Directed Employer (CDE).
- Clients retain authority to select, schedule, supervise, manage and dismiss their Individual Providers (IP).
- Case managers will continue to assess and monitor client health and safety.
- Client service amounts will continue to be determined through the client CARE assessment.
- Client Responsibility determination will continue to be assessed with existing criteria.

Staying the Same for IPs

- IPs will be paid according to their Cumulative Career Hour (CCH) and advanced training pay rates.
- IP Paid Time Off (PTO) accrual remains unchanged.
- IPs will document time and tasks provided to individual clients.
- Permanent Work Week Limits (WWL) will not change.
- IPs will maintain compliance with Washington background check requirements.
- IPs will adhere to training requirements, categories and compliance criteria.
- IP eligibility criteria stays the same.

What Changes?

Changing for Case Managers and Clients

- DSHS and AAAs will have no direct involvement in the administrative work of hiring, paying, and supporting IPs.
- Case managers will report IP-related concerns to Consumer Direct Care Network Washington (CDWA).
- CDWA will monitor and support IP training compliance, and delivery of employer-specific training.
- After client assessment is complete, the case manager will assign care tasks and authorize hours to CDWA rather than to the IP.
- CDWA will work with the client to assign assessed hours between multiple IPs as needed, and review both WWL and overtime utilization.

Changing for IPs

- IPs who are dismissed by a client may retain their employment with CDWA, and may continue to provide service for other clients.
- CDWA will conduct background check compliance and any necessary Character, Competence and Suitability reviews.
- CDWA will perform all required payroll functions including payroll deductions, PTO accrual, and pay increases as directed.
- CDWA will provide IPs with the methods and training to submit eligible time and task entry, including Electronic Visit Verification (EVV). Live-in IPs will not be required to use EVV.
- Temporary Work Week Limits will become the responsibility of CDWA with input from case managers as needed.
- CDWA will be responsible for the work that is currently the responsibility of the Home Care Referral Registry (HCRR).

Changing for Case Managers, Clients and IPs

- CDWA will collect Client Responsibility, as needed, from the client and will communicate a client's non-payment to the client and the case manager.

CDE Questions & Answers condensed version

This is a condensed list of answers to questions received about the Consumer Directed Employer. For full version see: <https://www.dshs.wa.gov/altsa/stakeholders/consumer-directed-employer-materials-and-resources>

Consumer Directed Employer (CDE):

- State legislature passed ESSB 6199 in 2018 mandating creation of a CDE
- Consumer Direct Care Network of Washington (CDWA) is the contracted vendor who will become the CDE and legal employer of Individual Providers (IPs) in 2021
- CDWA provides IPs one place for all administrative needs (payroll, taxes, tracks training & certification, track background checks)
- CDWA will remove administrative IP related work from case managers; affords case managers more time with clients and case management related tasks

Client Participation (a.k.a. Client Responsibility):

- Client income eligibility determines clients monthly participation towards the cost of their Medicaid services (DDA clients do not pay client participation)
- Clients will pay their participation directly to CDWA instead of the IP, regardless of their relationship
- CDWA will pay IPs for all hours worked; CDWA will collect the client's responsibility after IP services have been provided
- CDWA will work with clients who are having challenges paying their responsibility, but may eventually stop services if the client does not pay their portion

Carina/Home Care Referral Registry (HCRR):

- Carina will continue to be an online database available for matching clients and IPs
- CDWA will have staff who will assist clients and IPs with using Carina and matching client needs to available providers

Clients and Individual Providers (IPs):

- Clients will continue to select, direct, and dismiss their individual providers
- CDWA will be responsible to work with clients to assign caregiving tasks and hours to their IPs based on the plan of care, including nurse delegation
- CDWA will provide training to clients regarding the transition to CDE
- Clients can choose in-home care from an IP through CDWA or, through a Home Care Agency
- CDWA will have a call center and dedicated Service Coordinators to communicate with clients and IPs, help with the hiring process, and resolve escalated problems

Individual Provider Employment:

- Qualified IPs, in good standing with their credentials, with active authorization to provide services to DSHS clients will become employees of CDWA and will complete a hiring process with CDWA

CDE Questions & Answers condensed version

- IP wage, background check, training, certification requirements, and Work Week Limits remain same
- DSHS and CDWA will pilot the changeover to CDE with a small group of IPs prior to the broader rollout
- The IOne system will go away after all IPs are converted to the CDE; CDWA will manage IP payroll

Case Management:

- AL TSA and DDA leadership are committed to retaining staff whose work is affected by CDE implementation
- Caseloads are not anticipated to increase as a result of CDE implementation
- Authorizations for the total number of eligible hours will be made to the CDE rather than to the IP(s)
- The CDE will be responsible to sign the DDA Person Centered Support Plan (PCSP) or, the AL TSA Service Summary
- CDWA will have a call center and Service Coordinators to communicate with case management as needed

Electronic Visit Verification (EVV):

- CDWA will implement the Electronic Visit Verification (EVV) system for IPs
- **IPs who live with the client** to whom they provide services will **not be required to use EVV** for clocking in/out and capturing location of services. Instead these IPs will report their hours and tasks worked on a weekly basis
- **IPs working for a client they do not live with, will use EVV** to record hours/services provided including clocking in/out and recording tasks performed
- IPs with more than one client in a home can only be on the clock for one client at a time



Worried about memory loss?

There are a number of reasons for memory loss in adults – some of these conditions may be reversible. A first step is to talk with a health care provider about it.

Why is getting checked so important?

- Your provider can take steps to rule out causes for memory loss that might be treatable.
- Even if the reason turns out to be something not reversible such as a type of dementia, it's best to know early so you can:
 - Learn about ways to stay active and healthy
 - Make legal, financial, and care plans for the future
 - Get the support you need
 - Participate in clinical trials

An early diagnosis – along with the right services, support, and education – can help you take control of your health and your life.

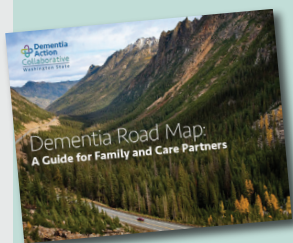
The right information at the right time helps you live your best life.

If you have memory loss or dementia, help is available.

Explore Washington's **Community Living Connections** Memory Loss and Dementia webpage for resources and information about local supports and services. On this page you can:



1. Hear Washingtonians speak about their lives with dementia in the "Let's Talk Dementia" video series.



2. Find the *Dementia Road Map: A Guide for Family and Care Partners*.
3. Take control of your future with the *Dementia Legal Planning Toolkit*.

Find the above resources and more at memorylossinfo.wa.org. To talk with a person on the phone about local services and supports, call **1-855-567-0252**.

alzheimer's 
association[®]

To learn about the warning signs of Alzheimer's, the value of diagnosis, what to expect in a medical evaluation, and supports available, visit the Alzheimer's Association website at alz.org. To talk with a person on the phone, call **1-800-272-3900**.

The Dementia Action Collaborative is a group of public-private partners committed to preparing Washington state for the growth of the dementia population.



dshs.wa.gov/altsa/dementia-action-collaborative



WASHINGTON STATE'S COMMUNITY LIVING CONNECTIONS (CLC) is a website dedicated to linking you to personalized care and support options. The CLC site offers help, guidance, information and planning tools which are particularly important if you or a loved one are facing Alzheimer's or dementia.

Explore: Learn about services and supports available in your home or community.

Search for Resources: Discover available services and engagement opportunities.

Connect: Find specific help where you need it.

Plan and Prepare: Set a plan for yourself and the future.

Dealing with memory loss is very challenging. You will find answers to your questions, guidance on how to proceed, available resources for services and assistance – all this and more in the **Alzheimer's and Dementia** section of the CLC website. Go to:

www.memorylossinfowa.org





Explore the CLC site. You are only a click away from more information about the following:

SAFETY

Check out a comprehensive Safety Info Kit, as well as resources focused on wandering.

DRIVING

Find resources to help make decisions about driving.

LEGAL/FINANCIAL

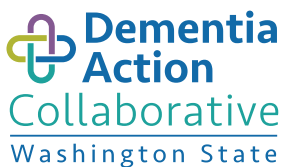
Planning for the impacts from memory loss is critical.

CAREGIVING

Access many resources for successful caregiving, and don't miss the Dementia Road Map.

MEDICAL AND DENTAL

Find information about diagnosis and the medical issues associated with memory loss and dementia.



Established in 2016, the Dementia Action Collaborative is a group of public-private partners committed to preparing Washington state for the growth of the dementia population. For more info and to access resources on dementia, visit: dshs.wa.gov/altsa/dementia-action-collaborative



STATE OF WASHINGTON
HEALTH CARE AUTHORITY

626 8th Avenue, SE • P.O. Box 45502 • Olympia, Washington 98504-5502

October 23, 2020

Dear Tribal Leader:

SUBJECT: Medicaid Transformation Project 1115 Waiver – Amendments and Extension

In accordance with section 1902(a)(73)(A) of the Social Security Act regarding the solicitation of advice prior to the submission of any Medicaid State Plan Amendment or waiver likely to have a direct effect on Indians, Indian Health Programs, or Urban Indian Organizations, the Health Care Authority (HCA) seeks your advice on the following matter.

Purpose

HCA intends to submit to the Centers for Medicare and Medicaid Services (CMS) two amendments and an extension application for the Medicaid Transformation Project 1115 Waiver, as part of Washington's COVID-19 response.

Amendment to Value Based Purchasing Attainment

HCA will request an amendment to change the attainment of value-based purchasing (VBP) for 2021, from 90% to 85%. Below is a summary of the rationale and the request:

The onset of the COVID-19 pandemic has posed a myriad of challenges to providers, including the capacity to advance additional risk-based contractual arrangements given the uncertainty posed by drastic changes in utilization, impacts on quality measure calculation, and the unknown duration of the pandemic itself. Considering these factors, HCA has decided to adjust the 2021 VBP adoption target to 85% (from 90%).

Note: Indian Health Care Providers (IHCPs) are exempt from HCA's VBP purchasing strategy.

Amendment to Long Term Services and Supports (LTSS) Initiative

The Department of Social and Health Services (DSHS) Aging and Long-Term Support Administration (AL TSA) will request an amendment regarding the additional benefits for aging adults to stay in their homes provided under the 1115 waiver. Specifically, the requested changes are:

- Modification of the definition of "Transportation" to expand access to community engagement activities; and
- Addition of a new Presumptive Eligibility process for clients being discharged from acute care hospitals or diverted from community psychiatric hospitals to their homes with LTSS.

Dear Tribal Leader

October 23, 2020

Page 2

Medicaid Transformation Project Extension (COVID Extension Year)

As part of Washington's COVID-19 response, HCA plans to submit an extension application for the Medicaid Transformation Project 1115 Waiver by December 31, 2020. This would extend all initiatives and programs included under the waiver for one additional year, creating a new end date of December 31, 2022.

The COVID Extension Year would be funded through lifting the state expenditure cap to meet the previously-approved CMS spending limit, which would result in an additional \$139 million to Accountable Communities of Health (ACHs) and IHCPs.

The approval for COVID Extension Year is a two-part process:

- Approval from CMS for a one-year extension of existing waiver authorities.
- Authority from the Governor and the Washington State Legislature to increase funding up to the CMS spending limits.

Anticipated Impact on Indians/Indian Health Programs/Urban Indian Organizations

HCA anticipates that the changes to the Medicaid Transformation Project will either have no impact or a positive impact on AI/AN Medicaid beneficiaries by providing additional flexibilities and extended funding. We understand that there may be impacts that we have not anticipated. We would appreciate any input or concerns that Tribal representatives wish to share.

Copy Available

A draft copy of the amendments and the extension application will be distributed before the first Roundtable.

Comments and Questions

HCA would appreciate any input or concerns that Tribal representatives wish to share regarding these changes to the Medicaid Transformation Projects. During the October Monthly Tribal Meeting, we have scheduled the following Tribal Roundtables and Tribal Consultation:

Medicaid Transformation Roundtables and Consultation		
Meeting	Date & Time	Webinar Registration Link
Roundtable #1	10-28-2020 9:00-10:30 AM	https://attendee.gotowebinar.com/register/4099377774841090306 *during the regularly scheduled TCOW
Roundtable #2	11-10-2020 9:00-10:00 AM	https://global.gotowebinar.com/join/7982740694599152141/564121505 *during the regularly scheduled DSHS IPAC ADS Subcommittee
Roundtable #3	11-18-2020 10:00-11:30 AM	https://attendee.gotowebinar.com/register/7789283822076029442 *during the regularly scheduled TCOW
Tribal Consultation	12-09-2020 3:00-5:00 PM	https://attendee.gotowebinar.com/register/9115703863895763714 *during the regularly schedule HCA-DOH MTM

Dear Tribal Leader

October 23, 2020

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Please contact Jessie Dean, Tribal Affairs Administrator, by telephone at (360) 725-1649 or via email at jessie.dean@hca.wa.gov if you have additional comments or concerns.

Please forward this information to any interested party.

Sincerely,



MaryAnne Lindeblad, BSN, MPH
Medicaid Director
Health Care Authority



Bea-Alise Rector
Director, Home and Community Services Division
Aging and Long-Term Support Administration
Department of Social and Health Services

By email

cc: Timothy Collins, Senior Director, OIP, DSHS
Marietta Bobba, Tribal Affairs Administrator, ALTSA, DSHS
Mich'l Needham, Chief Policy Officer, PD, HCA
Michael Arnis, Deputy Chief Policy Officer, PD, HCA
Jessie Dean, Tribal Affairs Administrator, OTA, HCA

From: Bobba, Marietta (DSHS/AL TSA)

Sent: Thursday, October 29, 2020 3:00 PM

To: Subject: Dementia and memory loss rack cards - Order for your clinic, Elders Center before November 13th for free

Importance: High

Hello everyone,

The Washington State Dementia Action Collaborative (DAC) has created two different 4 x 9 Rack Cards, intended for display in public areas or to be distributed directly to consumers who may find them useful. Attached, you will find PDF examples of both rack cards. The Rack Cards have different intended purposes:

- The attachment titled *DAC_MeminfoWA_Rack-Card_2020*) was developed to promote www.memorylossinfowa.org -this rack card focuses broadly on the resources available to individuals who are experiencing memory loss;
- The attachment titled *DAC_Early-Diagnosis_Rack_Card_2020* was developed to the importance of early diagnosis and treatment.

These rack cards can be ordered online through **November 13, 2020** and will be shipped in late November at no cost to you.

If you feel that your organization or others in your area could benefit from using these materials, please fill out the order form here: <https://forms.gle/GPySRCPwCA2JPgP49> . The order form has an old order date of October, please ignore.

Thank you for your interest in these new promotional materials. Please let me know if you have any questions.

Marci, Lynne and Marietta

Marietta Bobba, MBA/ TRIBAL AFFAIRS ADMINISTRATOR/ Aging & Long-Term Support Administration
Governor's Interagency Council on Health Disparities/Program and Grants Development
Washington State Department of Social and Health Services
(O) 360-725-2618; bobbam@dshs.wa.gov

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