

## **MISSION**

Transforming lives by providing support and fostering partnerships that empower people to live the lives they want.

Transformar vidas al proporcionar apoyos y fomentar alianzas que empoderen a las personas para que vivan las vidas que desean.

Повысить качество жизни через предоставление услуг и стимулирование партнерских отношений, которые дают людям возможность жить такой жизнью, какой они хотят.

通过提供支持和促进伙伴关系来改善生活,使人们能够过上 自己想要的生活。

사람들에게각자원하는삶을살수있도록자율권을 부여해주는 협업 관계를 육성하고 지원을 제공함으로써 삶을 변화시킵니다.

## ការផ្ទាស់ប្តូរជីវិតដោយផ្តល់ការគាំទ្រ និងជួយធ្វើឱ្យចម្រើនដល់ភាពជាដៃគូដែលផ្តល់អំណាច ដល់មនុស្សឱ្យរស់នៅតាមជីវិតដែលពួកគេចង់បាន។

In aynu nolosha wax-ka-beddelno anagga oo bixinayna taageero oo dhiirrigelinayna is-kaashiyada awoodda u siinaya dadka in ay ku noolaadaan nolosha ay rabbaan.

Змінюємо життя людей на краще, забезпечуючи підтримку та сприяючи розвитку партнерських відносин, які дають людям можливість жити так, як вони того бажають.

Thay đổi cuộc sống bằng cách hỗ trợ và tăng cường các quan hệ cộng tác cho quyền mọi người sống cuộc sống mà họ muốn.

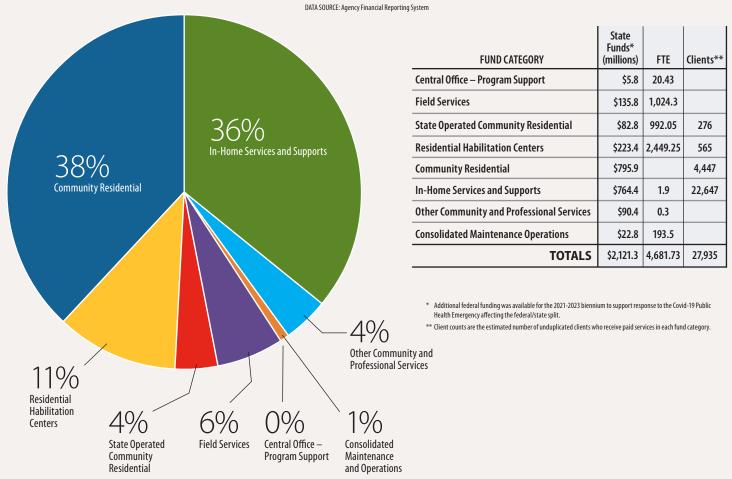
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## DSHS Developmental Disabilities Administration 2021-23 Operating Budget

General Fund State: \$2.1 billion (45%)
Federal / Other Funds: \$2.6 billion (55%)
Total DDA Budget: \$4.8 billion





**Debbie Roberts,** *DSHS Developmental Disabilities Administration Assistant Secretary* 

### **2022 CLIENT SERVICES AND SUPPORTS**

While we have strong systems of care for 50,000 people who are eligible clients of the Department of Social and Health Services' Developmental Disabilities Administration, the increased funding in both the biennial and supplemental budgets allows us to reinforce systems in a sustainable way and build an even stronger foundation. We have opportunities to reinvent and modernize both our eligibility determination process and our service delivery systems. DDA has been very busy in Fiscal Year 2022 hiring staff and building capacity to implement what will be a robust and far-reaching range of investments. In addition to the extraordinary growth and enhancements to our service delivery system we are also excited at the opportunity to redesign our eligibility rules to serve more people. To do all this important and exciting work I am committed to ensuring DDA partners with stakeholders; gets input from diverse groups; improves equity, diversity, access, and inclusion; drafts sound policy for the future; and implement the investments to support the individuals we serve.

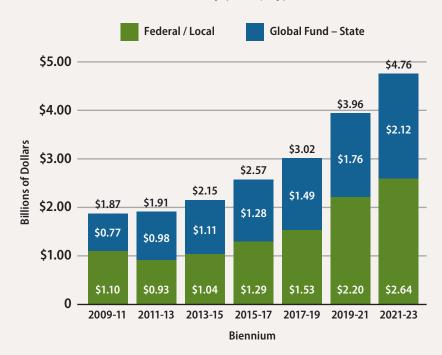
#### THE IMPACT

We are pleased to see the Legislature and the Governor's continued support for services and supports for individuals with intellectual and developmental disabilities. The 2021-2023 biennial and supplemental budgets (Senate Bill 5092 and Senate Bill 5693) provided us with many new opportunities for DDA services and systems of support to grow.

DDA continues to partner with individuals and families to develop reports to the Legislature and the Governor. These reports will be the blueprints to transform systems and lives. As always, we are so grateful to have you as partners and advocates.

## Operating Budget Over Time

DATA SOURCE: Agency Financial Reporting System



## **Client Story**

I'm grateful that both my sons have the same DDA case manager who does her best to help us. Having that connection makes all the difference. When a case manager knows you as a person, the energy is there to help you through.

- Mindy, Parent



## **Eligibility**

A person with intellectual and developmental disabilities must first be determined eligible to be a client of the Developmental Disabilities Administration before an assessment can be conducted to determine if the person is functionally and financially eligible for the service requested.

## 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.

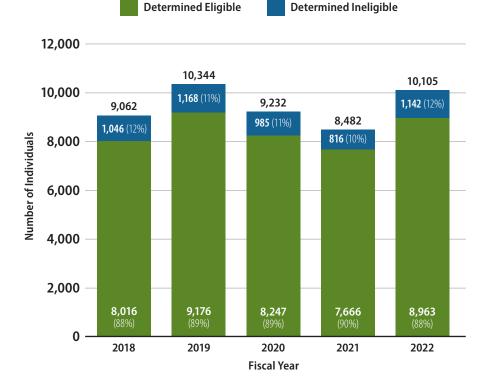
Eligibility starts with completing an application packet.

A person can request a packet be mailed to them by filling out this online form.

Digital applications can be downloaded and submitted via email as well.

# **Initial Eligibility Determinations**





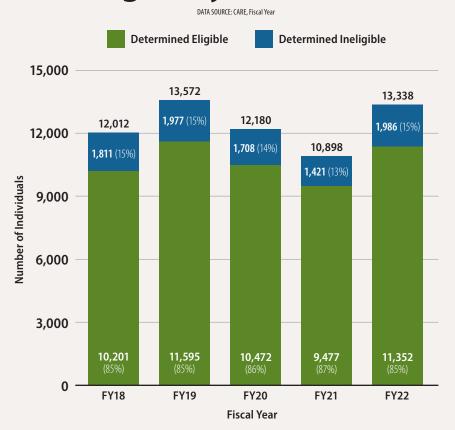
### **ELIGIBILITY INSIGHT**

DDA makes determinations of whether people are eligible to be clients when:

- They first apply (initial)
- They re-apply
- It is time for a review

The number of initial eligibility applications increased by 4.2% from Fiscal Year 2021 to Fiscal Year 2022. This reverses the decreases in the number of applications received during the pandemic. School is an important partner in connecting children with DDA and is often where we get the information needed to make an eligibility determination. When schools closed due to the pandemic our applications decreased and when they opened back up our applications increased.

## **Total Eligibility Determinations**



Includes all Initial, Review, and Re-applications determined eligible or ineligible.

The number of people applying increased by 7% from Fiscal Year 2021 to Fiscal Year 2022.

An average of 85% of people who applied were determined to be eligible and 15% were determined to be ineligible.

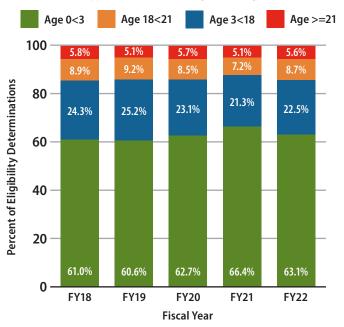
### **ELIGIBILITY INSIGHT**

During the 2022 legislative session, the Legislature passed Second Substitute House Bill 2008. This legislation ends the use of intelligence quotient (IQ) testing to enroll as a client of DDA. This change will take effect July 1, 2025.

DDA is working to modify eligibility criteria which will include opportunities for stakeholder input. People who are made eligible using IQ scores now will not lose eligibility due to changes in the eligibility criteria coming in 2025.

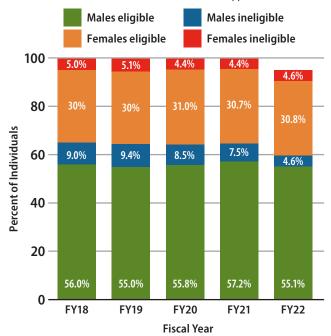
## Total Eligibility Determinations – Age Group

This graph shows the total of all people applying by their age group. Eligibility determinations decreased for the 0≤3 age group and increased for all other age groups over the previous year. This is the opposite of what occurred in the previous fiscal year. Includes all Initial, Review, and Reapplications determined eligible or ineligible



## Percent of Eligibility Determinations – Gender

Includes all Initial, Review, and Re-applications determined eligible or ineligible. Eligible applications on average have been 65% males and 35% females since 2018. **Note:** Gender is not required to be reported. Eligibility determinations other than male or female were 0.57% of applications



DATA SOURCE: CARE, Fiscal Year

# Eligibility Determinations - Race and Ethnicity

Includes all Initial, Review, and Re-applications determined eligible or ineligible.

DATA SOURCE: CARE, Fiscal Year

	FY	'18	FY19		FY	20	FY	'21	FY	22
	ELIGIBLE	INELIGIBLE								
American or Alaska Native	1.2%	0.4%	1.0%	0.3%	1.1%	0.4%	1.1%	0.4%	1.2%	0.4%
Asian	6.7%	0.6%	5.9%	0.6%	7.4%	0.6%	9.0%	0.5%	9.0%	0.7%
Black or African American	5.3%	1.0%	4.0%	0.7%	5.2%	0.7%	5.7%	1.0%	5.5%	1.3%
Native Hawaiian or Other Pacific Islander	1.0%	0.1%	1.0%	0.1%	1.3%	0.1%	1.0%	0.1%	1.0%	0.3%
Unreported	10.8%	1.1%	8.0%	3.2%	10.6%	1.1%	11.3%	1.1%	10.5%	1.1%
White	54.1%	10.1%	45.3%	6.4%	54.3%	8.9%	53.0%	7.8%	51.3%	9.2%
Two or More Races	6.5%	1.0%	19.8%	3.8%	7.3%	1.1%	7.1%	1.0%	7.1%	1.3%
Totals	85.6%	14.3%	84.9%	15.1%	87.2%	12.8%	88.0%	11.9%	85.6%	14.2%
Hispanic or Latino	17.8%	2.5%	16.0%	2.2%	19.3%	2.3%	18.3%	2.2%	17.2%	2.1%

# Eligibility Determinations - Conditions\*

DATA SOURCE: CARE, Fiscal Year

	FY18	FY19	FY20	FY21	FY22	5 YR. AVG.
Another Neurological or Other Condition	2.2%	2.5%	2.1%	2.0%	1.9%	.12%
Autism	5.9%	6.2%	6.6%	6.5%	7.3%	6.5%
Cerebral Palsy	2.3%	1.9%	1.8%	1.2%	1.5%	1.7%
Developmental Delay	78.9%	79.6%	80.0%	82.0%	79.8%	80.1%
Epilepsy	0.6%	0.5%	0.6%	0.5%	0.6%	0.6%
Intellectual Disability	7.1%	7.0%	6.2%	5.9%	6.3%	6.5%
Medically Intensive Children's Program**	0.2%	0.1%	0.0%	0.0%	0.0%	0.1%
Two or more disabilities	2.9%	2.2%	2.6%	2.1%	2.6%	2.5%

<sup>\*</sup>These percentages are of clients determined eligible, not total eligibility determinations.

<sup>\*\*</sup>As of August 13, 2018, clinical eligibility for the Medically Intensive Children's Program is no longer a separate eligibility category.

## **Eligible Caseload**

DDA's caseload is divided into two groups, "Paid" and "No-Paid." Clients approved to receive a paid service are assigned to a case manager on the paid services caseload and those who are not currently eligible to receive a paid service are assigned to the no-paid services caseload without a case manager.

With the passage of Senate Bill 5819, the Developmental Disabilities Administration has received funding to hire case managers on the No-Paid Services caseload, beginning July 2022. The caseload ratio will be 1:300 and at the time of the publishing of this report hiring is well under way. It is the first time in more than a decade we have been able to offer case management to people who are not receiving a paid service from us, and we are really excited. Our goal is to make sure everyone knows about our services and how to access them, even if they are not quite ready for them. We also have information to share about local resources that clients and their families might not know about.

During our outreach to clients and families on the No-Paid Services caseload over the past year we had the pleasure of connecting with clients and families we have not been able to since that caseload lost their case managers more than a decade ago. Here is some of what people had to say:

"My granddaughter was born during a dark cloud, but with the support from Washington State it was like a village stepped up to help. I am gracious for every little bit."

"This is a little emotional for me, I have been waiting for this for a long time."

"Thank you so much for calling, we didn't know where to start!"

"Thank you so much! You know when you feel like you are drowning, and someone reaches out – it feels like someone just threw me a life preserver! You get us in touch with the person who can pull it back."

"I do appreciate you listening to my story, your kind of compassion doesn't seem to exist much anymore. You have been wonderful, and the state has always been wonderful."

"I don't like talking to people on the phone. I am afraid they won't accept me and hang up on me. You aren't like that! I can feel your vibe over the phone, and you accept me for who I am."

## **Outreach Story**

### Michelle and Maryanne

Michelle, a 16-year-old client on the No-Paid Services caseload was contacted as part of our outreach efforts. Maryanne, her mother, reported that they are eager to get started with DDA services and are excited to have a case manager to aid them in navigating local resources for Michelle. "You don't understand how much this phone call means to us; we didn't know where else to turn!"



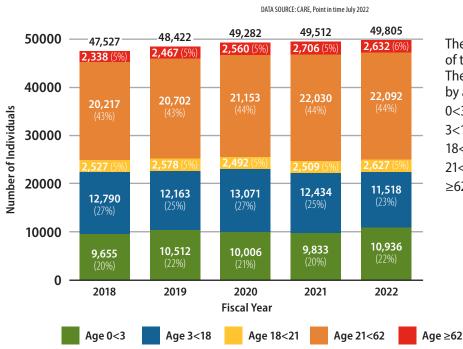
# Eligible Caseload Type: Paid and No-Paid Services

DATA SOURCE: CARE, Point in time July 2022 **Paid Service Clients No-Paid Service Clients** 49,805 49,512 49,282 48,422 50000 — 47.527 12,469 12,891 14,049 13,487 (25%)40000 14,448 Number of Individuals 30000 20000 10000 33,079 34,935 35,233 36,621 37,336 0 2018 2019 2020 2021 2022 Fiscal Year

### **ELIGIBILITY INSIGHT**

Eligibility to be a client of DDA is the first step in accessing services. After being determined DDA eligible, a person requesting services is assessed by a DDA Case Resource Manager. This assessment determines functional eligibility for services and includes a person-centered service plan that lists the type of service, amount, and provider. Most DDA services also require the recipient to be Medicaid eligible, which in Washington state is called Apple Health. Availability of some services is limited by funding or enrollment limits. Participation in all DDA services is voluntary.

## **Eligible Caseload – Age Group**



The average annual growth rate of the DDA caseload is 2.05%. The average annual growth rate by age group is:

0 < 3 = 13.27%

3<18 = 9.95%

18 < 21 = 4.08%

21<62 = 12.30%

≥62 = 24.04%

# Eligibility Caseload – Race/Ethnicity and Caseload Type

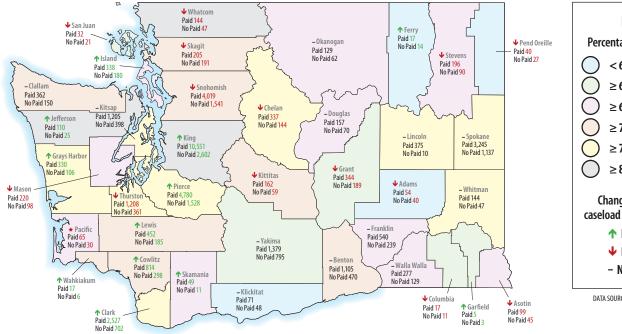
DATA SOURCE: CARE, Point in time July 2022

	No Paid Caseload		Paid Ca			aseload	DDA	Wa. State Total	U.S. Total
	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	Total	(as of 2020**)	(as of 2021***)
American or Alaska Native	1.08%	1.33%	0.78%	1.20%	0.86%	1.33%	2.19%	1.83%	1.30%
Asian	2.19%	3.65%	2.69%	4.60%	2.56%	4.36%	6.93%	9.61%	6.10%
Black or African American	2.28%	3.91%	2.21%	3.78%	2.23%	3.82%	6.04%	4.31%	13.60%
Client chooses not to report/unable to report	2.82%	4.83%	2.40%	3.79%	2.51%	4.05%	6.56%		
Native Hawaiian or Other Pacific Islander	0.49%	0.75%	0.46%	0.76%	0.47%	0.76%	1.22%	0.81%	0.30%
Other	0.37%	0.47%	0.04%	0.08%	0.12%	0.17%	0.30%		
White	27.38%	42.88%	28.30%	44.03%	28.07%	43.74%	71.81%	78.25%	75.80%
Two or More Races	1.73%	3.45%	1.75%	3.13%	1.75%	3.21%	4.96%	5.19%	2.90%
Grand Total	38.34%	61.28%	38.63%	61.37%	38.56%	61.44%	100.00%	100.00%	100.00%
Hispanic or Latino*	6.71%	11.04%	5.36%	8.87%	5.70%	9.41%	15.11%	13.36%	18.90%

<sup>\*</sup> A person of Hispanic or Latino origin can be of any race

## **Where Clients Live**

## **County and Caseload Type**

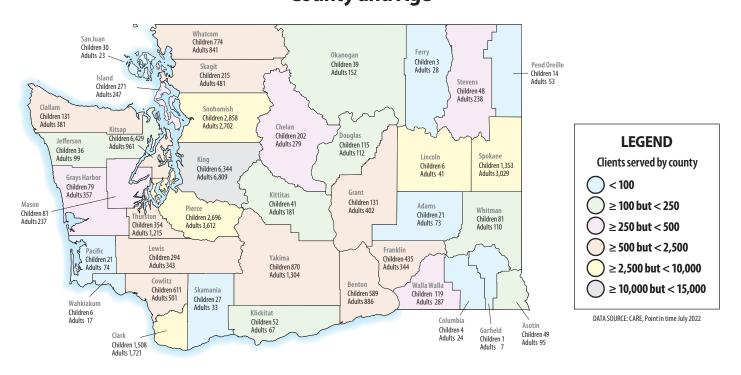


DATA SOURCE: CARE, Point in time July 2022

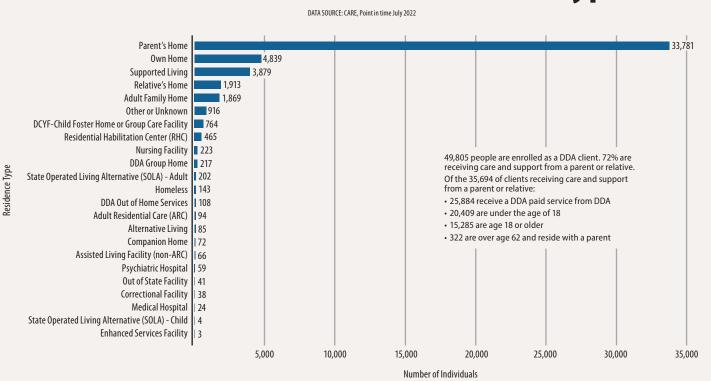
<sup>\*\*</sup> Data source: Washington State Office of Financial Management, Forecasting and Research Division - 2020

<sup>\*\*\*</sup>Data source: Data Source: United States Census Bureau – July 1, 2021 estimate

## Where Clients Live County and Age



## Where Clients Live - Residence Type

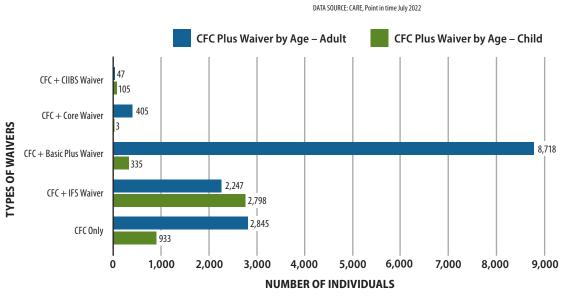


## **Programs and Services**

The Developmental Disabilities Administration provides services through the Medicaid State Plan and five 1915c waivers and has a small amount of funding for services that do not have a federal match.

Medicaid State Plan • Entitlement • No cap	Community First Choice	Residential Habilitation Center	Preadmission Screening and Resident Review (PASRR)
• Statewide	Medicaid Personal Care		
Medicaid Waivers  Optioned Services  Not an entitlement	Individual and Family Services	Core	Community
Target locations     Target populations	Basic Plus	Children's Intensive In-Home Behavioral Support	Protection
Other • State Only • About 2% of budget	Child Development Services	State Supplemental Payments	

## **Community First Choice and Waiver Eligibility**



- CFC 1915(k) is a Medicaid State Plan program offering services to support individuals living in home and community-based settings.
- Waivers 1915(c) are capped programs which offer targeted services to children and adults in a variety of home and community-based settings.
- 4,174 children receive CFC services. This is a decrease of 15.8% since last year.
- 14,262 adults receive CFC services. This is an increase of 6.5% since last year.

### **OUTREACH STORY**

One parent told us, "My child has his own way of communicating. If he could communicate with others, his whole world would change. Services will make his world better. This will make my life so much better."



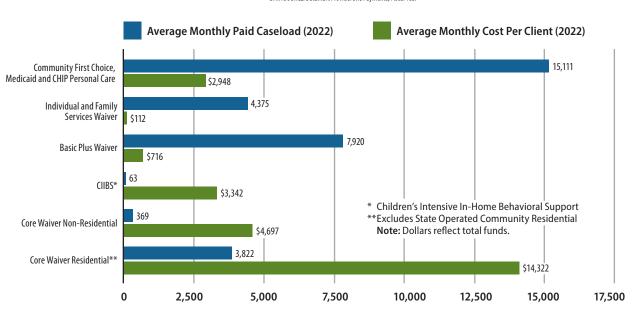
## DDA Home and Community-Based Services Waiver Enrollment

DATA SOURCE: CARE, Point in time July 2022

	JI	JLY 201	8	ال	JULY 2019			JULY 2020			JULY 2021			JULY 2022	
	Children	Adults	Total	Children	Adults	Total	Children	Adults	Total	Children	Adults	Total	Children	Adults	Total
Individual and Family Services (IFS)	4,049	2,073	6,122	4,038	2,180	6,218	4,126	2,181	6,307	3,814	2,432	6,246	3,697	2,485	6,182
Basic Plus	423	8,434	8,857	381	8,711	9,092	343	9,144	9,487	304	9,446	9,750	394	10,165	10,559
Core	81	4,489	4,570	76	4,515	4,591	69	4,526	4,595	47	4,510	4,557	45	4,509	4,554
Community Protection	0	407	407	0	407	407	0	408	408	0	401	401	0	391	391
Children's In-home Intensive Behavioral Supports	52	19	71	65	18	83	68	21	89	63	32	95	116	51	167
TOTALS	4,605	15,422	20,027	4,560	15,831	20,391	4,606	16,280	20,886	4,228	16,821	21,049	4,252	17,601	21,853

## **Home and Community Based Caseload**

DATA SOURCE: DataMart ProviderOne Payments, Fiscal Year



## Waiver Services Successes

### SPECIALIZED HABILITATION

In October 2020, a new service called Specialized Habilitation was added to our waivers. It provides community-based and individualized support to assist a client to learn or maintain skills in self-empowerment, safety awareness, self-advocacy, relationships, social communication, appropriate coping strategies for everyday life changes, managing daily tasks, or adaptive skills.

### **COMMUNITY ENGAGEMENT**

Between July 2021 and June 2022, 1,249 individuals benefited from Community Engagement, which was a 30% increase from the previous fiscal year.



Since its creation, 421 individuals have benefited from Specialized Habilitation. Between July 2021 and June 2022, utilization increased by 59.7%.

## **Supported Employment**

DATA SOURCE: CARE, Calendar Year

## **Supported Employment by Wage Status**



## Weekly Average Support Hours, Paid Hours Worked and Wages

	Support Hours per week	Work Hours per week	Wages per week
Individual Employment	2.1	10	\$156.13
Group Supported Employment	1.8	6.7	\$80.38
Community Inclusion	1.8	N/A	N/A

Supported Employment includes both Individual Employment and Group Supported Employment.

Note: Dollars reflect total funds.

≥Minimum Wage and/or Self-Employed

Subminimum Wage

Job Seeking - No Wages Reported

# **Employment and Day Services Success Stories**

In response to COVID-19 DDA worked with county partners, employment providers, and the Washington Initiative for Supported Employment WISe to create robust online training resources for direct support staff professional development. DDA guided professional development activities so direct support staff were able to bill for training or professional development time instead of direct client support time only when they were unable to deliver direct services due to COVID-19. Access to training and professional development kept the employment provider pool stable in Washington State and resulted in an increase in competency for direct support staff. In FY2021, 28



direct support staff received their Association of Community Rehabilitation Educators ACRE certificates over the past year and 191 direct support staff are now Certified Employment Support Professionals CESP.

During the COVID-19 pandemic DDA rolled out our new value-based payment pilot project: Job Foundation. The Job Foundation project is a collaborative partnership with the Developmental Disabilities Administration, Division of Vocational Rehabilitation, Office of Superintendent of Public Instruction, Educational Service Districts, schools and counties to connect employment providers to students ages 19-20 in their second to last year of school.

The goal of the project is to work with the student and schools to complete a report that identifies strengths and supports for success in key domains: communication, interactive social skills, self-advocacy, task management, work interest exploration and system navigation. As a result of the report the team has actionable next steps towards job development activities through DVR during the last year of the individual's schooling. Twenty of the 39 Washington State Counties participated in the project the first vear, completing 184 reports with students that exited school in 2022. Outcome payments for successful job placements within the first year out of school for individuals with

high support needs is an element of the project and began July 2022. Support with training and outreach was provided to counties and employment providers throughout the year. Due to these outreach and training efforts, five additional counties have signed on to the project. 203 reports are projected to be completed for students that will exit school in 2023.



# Supported Employment - Wage Status and Acuity\* Level



**NUMBER OF INDIVIDUALS**\*Acuity refers to the level of support needed. Acuity data excludes Pre-Admission Screening and Resident Review (PASRR).

# **Employment and Day Services Success**

The Developmental Disabilities Administration helped employment providers to deliver services to clients in essential jobs throughout the pandemic.

43% of individuals who reported wages prior to March 2020 continued to work and receive in-person or virtual job coaching services from direct support staff.

In 2020, many clients who continued to work saw an average increase of approximately 20% in paid work hours. Employment providers were responsive to individual client needs during this time and provided necessary support to clients such as pivoting to teleworking, learning new COVID-19 related policies and procedures, and using technology to complete their work tasks or receipt of job coaching services.



2021 saw an impressive increase of new jobs for clients in employment services. DDA data shows an increase of 14% between the 3rd quarter of 2020 and 3rd quarter of 2021; 43% to 57%.

# **Employment and Day Program Services by County**

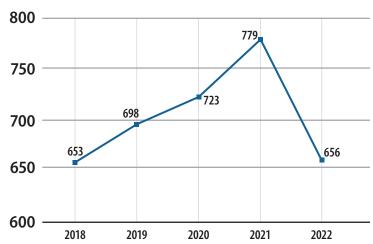
DATA SOURCE: CARE, Point in time August 2022

	Group	ا مینامانینا	Cammunitu			Group	ا مانانا ما	Community	
County	Supported Employment	Individual Employment	Community Inclusion	Total	County	Supported Employment	Individual Employment	Community Inclusion	Total
Adams		4	1	5	Lewis		58	28	86
Asotin	7	10	6	23	Lincoln		5	4	9
Benton	17	89	43	149	Mason		59	9	68
Chelan	7	51	32	100	0kanogan		20	9	29
Clallam		101	36	137	Pacific		21		21
Clark		466	78	544	Pend Oreille		7	2	9
Columbia		3	6	9	Pierce	54	739	122	915
Cowlitz		87	64	151	San Juan		8		8
Douglas	3	21	22	46	Skagit	6	158	47	211
Ferry		3	3	6	Skamania		12		12
Franklin	11	28	4	43	Snohomish		819	142	961
Garfield	1	3		4	Spokane	35	548	209	792
Grant	9	40	24	73	Stevens		52	17	69
<b>Grays Harbor</b>		86	12	98	Thurston		378	37	415
Island		80	9	89	Wahkiakum		3		3
Jefferson	5	25	9	39	Walla Walla	7	49	43	99
King	16	2,134	306	2,546	Whatcom	37	314	34	385
Kitsap		277	37	314	Whitman	9	25	5	39
Kittitas		30	33	63	Yakima		126	123	249
Klickitat		2		2	GRAND TOTALS	224	6,951	1,556	8,731

# Preadmission Screening and Resident Review (PASRR)

## **Total Number of Clients Served by PASRR**

(Per Month/First Half 2022)



Data Source: FY2018; DPMS (pulled 10/19/22) from June 2018 report

Data Source: FY2019-first half FY2022; Mandatory Workload Steps and DPMS

Data Source: second half FY2022; PDS Caseload Activities report (pulled 10/19/22

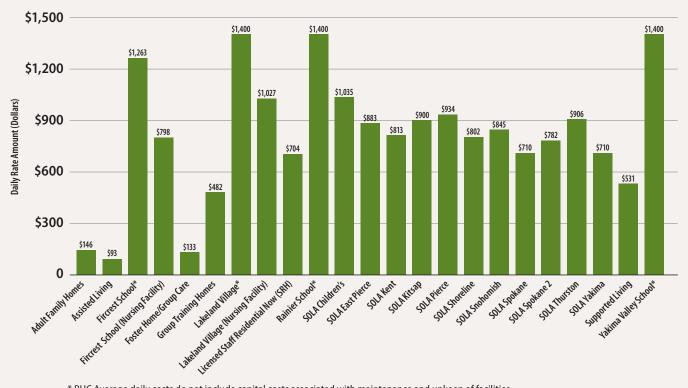
Preadmission Screening and Resident Review, PASRR, is a unique program within DDA whose team created mission statement is: "Through a commitment to social justice and respectful, person-centered practices, we partner with individuals who live in institutional settings to utilize their power and choice."

The PASRR program provides specialized services to people who have Intellectual Disabilities or Related Conditions that are referred to Medicaid licensed nursing facilities. Many PASRR participants are not eligible clients of DDA, although, the PASRR Team determines if the person is eligible for the PASRR program based on federal rules and provides necessary services to them.

In 2021 the Washington State PASRR Team was nationally recognized by the Centers for Medicare and Medicaid for the "Lessons Learned in the Pandemic". Washington was the only state PASRR program highlighted in a presentation centering on the use of Assistive Technology for people isolated in Nursing Facilities.

## **Average Daily Rate by Residential Setting**

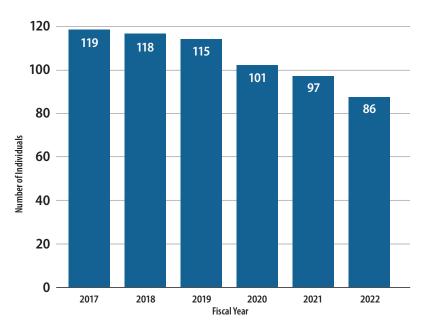
DATA SOURCE: Office of Rates Management, Fiscal Year 2022



<sup>\*</sup> RHC Average daily costs do not include capital costs associated with maintenance and upkeep of facilities. **Note:** Dollars reflect total funds.

# **Children's Out-of-Home Residential Services**

DATA SOURCE: CARE, Point in time July 2022

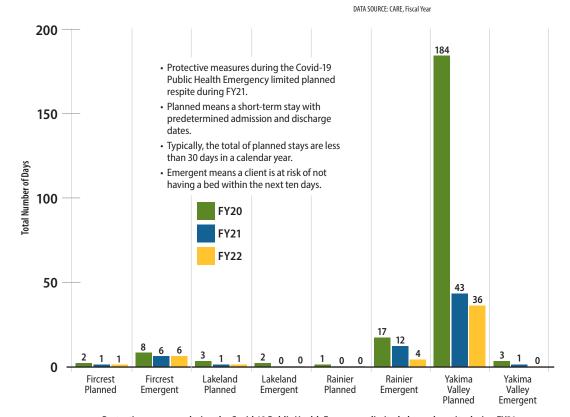


DDA offers residential habilitation services to children in licensed or certified settings outside of the family home in a program called Out-of-Home Services.

Most clients who receive Out-of-Home Services receive services in licensed staffed residential homes. Services are also provided in State Operated Living Alternatives, Group Care Homes or Child Foster Homes.

**Note:** Out-of-Home Services was previously called Voluntary Placement Services.

# Temporary Intermediate Care Facilities Services at Residential Habilitation Centers (RHC)



Engrossed Substitute Senate Bills 5268, 5092, and 5693 require several changes around RHC admissions and work is well underway or already completed.

DDA rescinded the previous RHC admission policies and have a new RHC admission policy effective May 5, 2022. The new policy informs clients/families of the temporary nature of the ICF prior to making a request and at pre-admission meetings.

After 60 days from admission, the RHCs review if the client meets discharge criteria. If they do not, the client's support team makes any necessary adjustments to the plan and schedules another review in the next 120 days.

Protective measures during the Covid-19 Public Health Emergency limited planned respite during FY21

# Residential Habilitation Centers (RHCs) Budget and Census



Annually since FY13, the number of residents decreased by 6.1% and the average daily rate increased by 10.6%

\*Fiscal Year 2020 saw the closure of Rainier PAT A.

\*\* Since Fiscal Year 2021, Klamath have been excluded from this count.

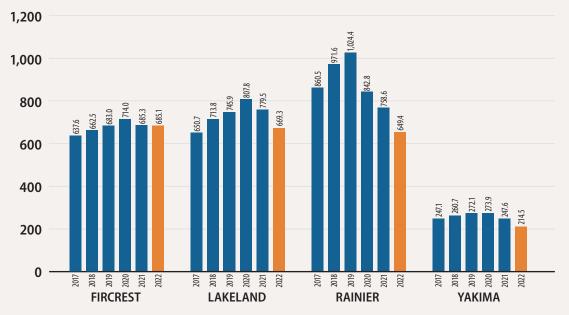
Note: Dollars reflect total funds.

## **Residential Habilitation Center FTEs\***

DATA SOURCE: DDA Budget Office, Fiscal Year

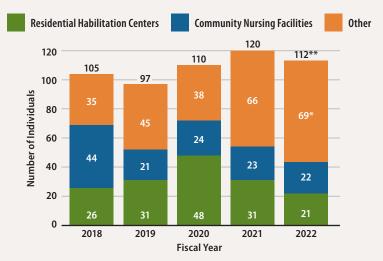
\* An FTE of 1.0 is equivalent to a full-time worker.

Note: Expended FTEs include amounts associated with Consolidated Maintenance Operations and Consolidated Service and Support.



## Roads to Community Living (RCL) Moves

DATA SOURCE: CARE, Fiscal Year

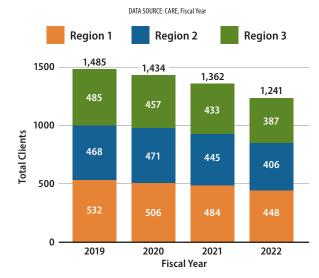


The Roads to Community Living grant funded through the Centers for Medicare and Medicaid Services provides an enhanced federal matching rate of 75%. The enhanced rate is available during the first 12 months after a person moves out of an institution to a qualified community setting.

RCL offers additional services to support a successful transition to community services. Additional RCL services include personcentered planning, assistive technology, training for families and staff, and environmental modifications.

- \* Note: 49 of those 69 were from Medical Hospitals.
- \*\* COVID and the staffing crisis limited the number of moves to the community.

# State Supplementary Payments in Lieu of the IFS Waiver

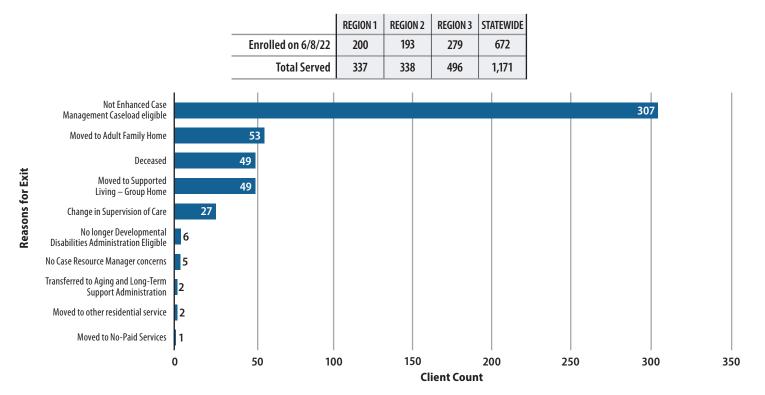


Supplemental Security Income SSI State Supplementary Payments is a monthly cash benefit available for some people.

In 2022, 1,241 individuals received State Supplementary Payments in lieu of the Individual and Family Services waiver. Payments are based on assessed need and range from \$100 to \$300 a month.

# **Enhanced Case Management Caseload Exit Reasons**

DATA SOURCE: CARE, Fiscal Yea



The 2016 Legislature created and funded the Enhanced Case Management Program for clients who may be at high risk for abuse or neglect. These specialized caseloads are 1:40 client/case manager ratio and the case manager visits the client at least once every four months to:

- Help ensure quality of care and health and safety needs are met,
- $\bullet \ \ \text{Assist the client, family, and providers with access to available resources,} \\$
- Promote community integration through paid and non-paid supports, and
- Promote a person-centered, holistic approach to services.

## **Enhanced Case Management Gets Enhanced**

In the 2022 legislative session the Legislature provided DDA with funding to enhance this successful program even more. The funding will allow the number of clients that can be served in this program at any given time to more than double from 700 to 1500. Expanding capacity of the ECMP will give more people access to a case manager more often. It will also allow for a reduction in caseload size from 1:40 to 1:30 so case managers will have even more time to assist clients and families with resources they need.

Between the program's launch in September 2016 and June 2022, DDA served 1,171 people in the program. Of the 501 clients who exited the program during this time, most left – one could say graduated – because their risk factors decreased.



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## RAINIER SCHOOL

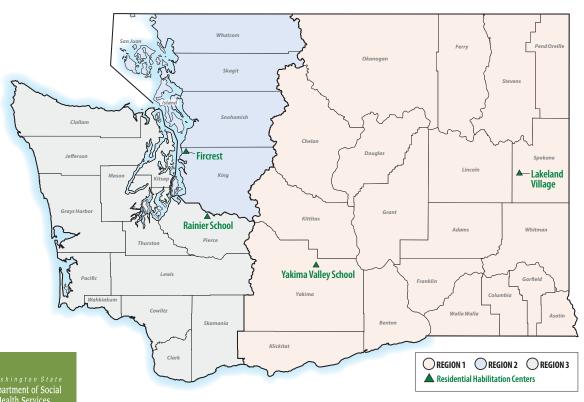
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To request an application packet for DDA eligibility, an assessment for services, or to learn more about DDA's services and resources, go to dshs.wa.gov/dda/service-and-information-request