Medicaid And Long-Term Care Services for Adults

Explore:

- The process for applying and receiving Medicaid.
- Care options for people receiving Medicaid.

A national leader

Choice

Quality

Care

A message from the Director of…

Home and Community Services

If you have received this booklet, then you (or your loved one) are looking at options for getting help with your care. This is unchartered territory for many people and things may feel unfamiliar and confusing. It can be difficult to know what help is available and how you will pay for it.

Home and Community Services is the part of state government that helps low income seniors and adults with disabilities and their families get information, support, and services when long term care is needed.

We are proud that Washington State is recognized as a pioneer and national leader in helping all adults who need care continue to live as independently as possible at home or in a community setting.

What does this mean for you? You have many options and choices to get the care you need. You are not alone in knowing what they are and getting services set up.

Home and Community Services' financial and social workers are professionals that will help you understand your options and match your needs and preferences to quality services available in your community.

I encourage you to read through this booklet and ask your financial or social worker any questions you may have. I know you are in capable, knowledgeable hands.

Sincerely,

Bill Moss
Director, Home and Community Services

Medicaid
And
Long-Term
Care Services
for Adults

You Have a Choice.

This booklet is for adults 18 or older who have a chronic condition, disease, or disability, need help with care, and are exploring using Medicaid to help pay for it.

This booklet will help you learn more about:

- How to apply for Medicaid.
- The income and resource eligibility limits for Medicaid.
- Estate recovery of any funds you receive.
- In-home and residential care service options and resources if you are eligible for Medicaid.

DSHS does not discriminate in serving or contracting with people because of race, color, national origin, gender, sexual orientation, age, religion, creed, marital status, disability, or Vietnam Era Veteran status, or the presence of any physical, mental, or sensory handicap.

Photos by Carole Huff

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Applying for Medicaid

Medicaid is a government health insurance program that pays for medical long-term care services for people who have very limited income and resources.

If you are eligible, Medicaid pays for services in your own home, a community residential care facility (adult family home or assisted living facility) or nursing facility.

HCS is part of the Aging and Disability Services Administration (ADSA), an administration within the Department of Social and Health Services (DSHS).

HCS staff provide a variety of services and support to you.

How to Apply

If you are 18 or older, you can apply for Medicaid through your local Home and Community Services (HCS) office or online.

There are three main parts to the application process:

1. Filling out and turning in an application.
2. A financial review to determine your financial eligibility.
3. A personal care assessment to determine your functional eligibility.

Apply in person or by mail

Call or visit the HCS office to get an application form. Phone numbers for HCS offices are on the back of this booklet. The application form can be:

- Mailed to you.
- Picked up at the HCS office.
- Downloaded and printed off the Internet at: http://www.dshs.wa.gov/pdf/ms/forms/14_001.pdf.

Apply online

To fill out and submit the application online, go to www.dshs.wa.gov and click on "Apply for Services." This brings you to a secure Internet page. Any information you enter on the application is protected. There are step-by-step instructions to help you.

Filling Out the Application

Follow the instructions and answer all the questions on the application. If you need help filling out the application, call your local HCS office.

Information you will need to provide includes:

- A Social Security number.
- Proof of identification.
- Proof of income.
- Documentation of resources (such as bank statements, property tax statements, life insurance).
- Immigration or alien documents.
- Proof of citizenship if you do not receive Medicare or Supplemental Security Income (SSI), or Social Security Disability Benefits.

Additional Support

If you have difficulty reading the application or have mental, physical, hearing, or sight issues that makes it difficult to understand what is happening during the application process, ask a HCS staff person for help.

HCS staff may be able to offer you Braille materials, written materials translated or on computer disk, large print materials, use of assisted listening devices, TTYs, or a qualified/certified interpreter.

If you want someone else to apply for you, you need to sign a consent form giving the other person permission to represent you during the application process. The consent form must be updated yearly.

Make sure the person is prepared to answer questions about your personal and financial situation.

Financial Review

Once you have completed your application, a HCS financial services specialist works with you to see if you are financially eligible to receive Medicaid. Depending on what works best for you, this can be an in-person or telephone interview.

When you talk to the financial services specialist, you can explain in more detail the answers on your application form.

See the next section "Income and Resource Eligibility Limits" for more information about the income and resource eligibility limits and any resource transfers the financial services specialist will be reviewing with you.

Medicaid rules can be found at: http://www.dshs.wa.gov/manuals/eaz/sections/ltcindex.shtml

HCS employees can explain Medicaid rules but are not able to give you personal, financial, or legal advice. You may want to talk with an attorney who understands Medicaid rules if you need help with a decision.

Staff at your local Senior Information and Assistance Office can help you locate legal assistance. See page 17 for how to contact them.

You must declare all resources you have when applying for Medicaid.

Income and resource eligibility limits

You must meet various income and resource requirements to be eligible for Medicaid. Income and resource limits are set by law and change each year.

Income

Medicaid income limits vary depending on the services you need, your living situation, and your marital status. The HCS office will have current information.

Resources

You must declare all resources you have when applying for Medicaid. Resources include money, assets, or property you have such as cash, bank accounts, stocks and bonds, retirement plans, trusts, annuities, life insurance policies, sales contracts, vehicles and land. If you are married, resources of both spouses will be used to determine your eligibility for Medicaid.

Certain "exempt" resources are not counted toward the resource limits. Exempt resources can include your home, household goods and personal effects, some real estate sales contracts, a car, life insurance with a face value not more than $1,500, burial plots, and most prepaid burial plans.

Federal law states that certain gifts or transfers made to qualify for Medicaid are subject to penalties. State law also contains penalties for the person who receives resources transferred for less than fair market value.

Transferring resources

Under state and federal law, the HCS financial services specialist must review any transfer of resources that took place 60 months before the date you apply for Medicaid.

If resources were transferred within that timeframe and you did not receive fair market value for them, you may not be eligible to receive long-term care Medicaid services for a period of time.

You can transfer your home without penalty to your:

- Spouse.
- Sibling who has an equity interest in the home and has lived there for at least one year immediately before the date of Medicaid eligibility.
- Dependent child under 21 years of age.
- Child who is blind or disabled.
- Adult child who has lived with you and provided care to allow you to remain at home for the past two years.

Personal Care Assessment

A HCS social worker comes to your home and talks to you at length. This interview allows the social worker to understand and evaluate what is currently happening in your day-to-day life and what kind of help you need. This is called an assessment.

This assessment is then used to determine if the level of care services you need makes you functionally eligible to receive Medicaid.

If you are eligible to receive Medicaid, the social worker will review your options for care services with you. See pages 9-13 for a review of what some of these options may be. It is helpful to read this section before you meet with a social worker.

Your care assessment helps determine if you are functionally eligible to receive Medicaid.

As part of your care assessment, a nurse can be available to help assess and plan what kind of help you may need with skilled health care task(s). This may be a consultation between a nurse and your social worker, or a phone call or home visit between you and the nurse.

Many people already have family and friends helping with care. For example, your nephew may take you grocery shopping, your daughter may help you pay bills, and a friend may pick you up each Sunday for church.

Talk with these family and friends and find out if they are going to continue to do these things for you before you meet with the social worker.

What to Expect When Your Application is Approved

You will receive a letter letting you know if you have been approved for Medicaid coverage.

You will receive a letter letting you know you have been approved for Medicaid coverage.

The letter will tell you how much of your income you may keep for your personal needs, spousal support, home maintenance allowance, medical insurance premiums, necessary medical expenses not covered by Medicaid, and how much you must pay your provider towards your cost of care (participation). See the next section, Your income once you receive Medicaid, for more information about what these things are.

Contact the person who sent you the letter if you have any questions about what is in the approval letter.

You will receive a Provider One Services Card. It pays for:

- Medical services covered under Medicaid such as lab work or doctor visits.
- Prescription drugs if you are **not** receiving Medicare. Medicare Part D pays for most of your prescription drugs if you are receiving Medicare.

The social worker will help you develop an individualized care plan. He or she then coordinates setting up needed services.

You will receive a Client Rights and Responsibility form (DSHS 14-113) that outlines your rights and responsibilities when receiving Medicaid. A copy of it can also be viewed at www.dshs.wa.gov/pdf/ms/forms/14_113.PDF.

Your financial and functional eligibility to receive Medicaid benefits will be reviewed at least once a year.

Your eligibility to receive Medicaid benefits will be reviewed at least once a year.

If you are not approved

You will receive a letter letting you know your application has been denied for Medicaid coverage.

There are many low-cost resources and programs that you might want to explore. Contact your local Senior Information and Assistance office. See page 17 for more information.

Your Income Once You Receive Medicaid

Once you begin receiving Medicaid, you may have to contribute some of your income towards the cost of your care. This is called your participation. Your participation amount depends on the services you receive, your marital status, and your income. You must pay these participation costs if they are required.

Part of your available income may go towards a spousal allowance. A spousal allowance is used to bring your spouse's income up to established federal government standards. Receiving a spousal allowance depends on the program, your needed services, and your living situation. Part of your available income may also go to support dependent relatives.

If you live at home, part of your available income can be kept for home maintenance such as rent, utilities, and taxes and personal needs. If you live in a residential care facility, you keep some of your income for your personal needs.

If you will be staying in a nursing facility a short time, you may be able to keep additional income to help maintain your home for your return. This is known as a "Housing Maintenance Exemption". Your doctor must verify that you will likely return home.

Supplemental Payment Policy

Medicaid plus the amount you pay in participation is payment in full for your care. Adult family homes (AFHs) or assisted living facilities (ALFs) (see page 14) may request additional money from you for items **not covered in the Medicaid rate**. Here are some examples.

- You would like a private room in a home with available semi-private rooms. You would have to pay additional money to the home to have a private room.
- You prefer a name brand incontinent brief rather than the generic brand the home buys. You would have to pay more for the brand name incontinent brief.

Supplemental payment policy requirements are outlined in Washington Administrative Code (WAC) 388-105-0050 and 388-105-0055.

AFHs or ALFs charging additional money for items not covered in the Medicaid rate must give you a copy of their supplemental payment policy outlining additional payments. Contact the RCS Complaint Resolution Unit at 1-800-562-6078 if after reviewing the supplemental payment policy you have concerns or complaints.

Recovery of Funds From Your Estate

By law, Washington State may recover (be paid back) payments DSHS made for all Medicaid and long-term care services you received prior to your death. Payment is taken from the your estate (assets you owned or had an interest in at the time of death). This is called Estate Recovery.

Washington State will recover the cost of all Medicaid-funded services (federal and state-funded programs) and long-term care services from age 55, including:

- Doctor visits
- Hospital stays
- Prescription drugs
- Medical equipment
- All other medical services
- Nursing home services
- Waivers services (COPES and New Freedom)
- Medicaid personal care services
- Adult day health
- Private duty nursing
- Managed care premiums

Washington State will also recover the cost of state-only funded long-term care services received at any age, including:

- Chore
- Adult family home services
- DDD state-funded long-term care services
- Adult residential care services
- Related hospital services and prescription drug costs

Estate recovery only applies to assets you owned or had an interest in at the time of death. The state will not begin recovery efforts until after your death, during the life of a

Resident Personal Funds Held by a Facility

If a residential care facility holds any personal funds of a resident who dies, the money must be given within 45 days to:

- The individual or probate jurisdiction administering the resident's estate.

  - or -

- The Office of Financial Recovery. This office may release funds to pay for burial costs.

surviving spouse, domestic partner, or while a surviving child is under age 21, blind, or disabled. Hardship provisions to protect dependent heirs may apply.

Certain lands belonging to American Indians or Alaska Natives may be exempt from Estate Recovery.

Various exemptions have existed over the years. DSHS will apply whatever estate recovery law existed on the date that benefits were received.

Liens Against Property

DSHS may file a lien or make a claim against any property to repay the costs of long-term care and medical services received if:

- The property is part of your estate and you have died.
- You are permanently living in a nursing home or other medical facility.

Before filing a lien against real property as part of estate recovery, DSHS will give notice and an opportunity for a hearing to your estate's personal representative or any other established titled owner of the property.

If you are permanently living in a nursing home or other medical facility and receive Medicaid, DSHS may recover costs from your estate or the sale of your property. If you return home, the lien is released. A lien is not filed against your home if your:

- Spouse, domestic partner, or a minor, blind, or disabled child lives in the home.
- Sibling has an equity interest in the home, currently lives there, and has lived there for at least one year immediately before you moved to the facility.

For more information on estate recovery, consult an attorney with experience in Medicaid law. You can also contact Coordinated Legal Education, Advice, and Referral (CLEAR) toll-free at 1-888-201-1014.

CLEAR is a project of the Northwest Justice Project – a non-profit statewide organization that provides free civil legal services to low-income Washington State residents. They have a web site in English and Spanish at www.nwjustice.org.

Care Options for People Receiving Medicaid

A HCS social worker, sometimes referred to as a case manager, will review your care options with you after your care assessment (see page 4).

There are many services, programs, and resources available to help you continue to live at home.

The following pages are a summary of some of the care options you may discuss. Your social worker will have more information and answer any questions you may have about these options, your eligibility for them, and talk through with you what you think will work best.

Services and Programs That Help You Stay at Home

Many people can continue to live at home if they have help with things like preparing meals, personal care, or housekeeping. There are many services, programs, and resources available to help you in these areas.

Often, family and friends are already helping you and will continue to do so. Your social worker will work with you and develop a care plan to fill in gaps where more help is needed.

Help with Personal Care

Needing help with personal care means you need assistance with things such as bathing, dressing, or toileting. Programs such as Medicaid Personal Care (MPC) or Community Options Program Entry System (COPES) pay for personal care services.

A caregiver can be hired to help you with personal care if you meet the eligibility requirements. Depending on your income, DSHS will pay for all or part of these caregiver services (see page 6 for more information). DSHS also pays for basic caregiver training for any qualified caregiver(s) hired.

It is your choice who your caregiver(s) will be.

It is your choice who your caregiver(s) will be. You can find a caregiver yourself, called an Individual Provider (IP), get one through a home care agency, or a combination of both. If you want a family member to be your caregiver, he or she can only be hired as an IP. Your social worker can help you with this process.

Individual Provider (IP)

With an IP, you decide who comes to your house and provides your care. You set your caregiver's work schedule and determine how and when the tasks will be done.

You are the IP's employer. This means you choose, hire, and supervise the caregiver. You may also want to find a backup caregiver when your regular IP has time off. To find an IP, you can:

- Choose a friend or family member (with some exceptions).
- Use the Home Care Referral Registry (see below).
- Look for someone in your community.

DSHS will do a background check on anyone you select.

For a more detailed understanding of your employer responsibilities, read through the "Acknowledgement of My Responsibilities as the Employer of My Individual Provider" (DSHS 11-055). This is a form you will receive from your case manager.

Home Care Agencies

Your other option is to choose a licensed and contracted home care agency to provide a caregiver. A home care agency recruits, does background checks through DSHS, hires, supervises their workers, and makes sure caregivers get required training. A home care agency provides you with a backup caregiver if your scheduled caregiver can't work.

The home care agency supervisor will work with you to find caregivers that best meet your needs. However, you have less control over who is chosen and you may not have the same caregiver coming into your home each time. Homecare agencies are not allowed to hire one of your family members to provide your care.

Home Care Referral Registry of Washington State

The Home Care Referral Registry of Washington State is a FREE referral service that matches you with prescreened IPs in your area. You can use the Registry to find an IP or backup caregiver.

There are Registry Centers in many communities in Washington. To see if there is a Registry Center near you, call 1-800-970-5456 or visit their website at www.hcrr.wa.gov for more information.

Hiring Family or Friends as Your Caregiver – A Guide for Adults Needing Care (DSHS 22-1332) is a free booklet offering practical tips and suggestions if you hire a family member or friend to provide care. See page 16 for ordering information.

There are several in-home care options available if you need help with health care.

Help with Health Care Needs

In the past, many people moved to a nursing home if care was needed from a licensed health care professional such as a registered nurse. Today, there are several in-home care options that may be available if you need help with health care tasks.

Self-Directed Care

If you live in your home, you can direct and supervise an IP to help you with health care tasks that you can't do because of your disability. This would include things an IP would not usually be able to do including administering medications, bowel programs, bladder catheterization, and wound care.

Nurse Delegation

In this program, a registered nurse (RN) evaluates your health care needs and trains and supervises a nursing assistant or certified home care aide (HCA) to provide health care tasks that you can't do for yourself. There are rules about what types of care can and cannot be delegated.

The nursing assistant or HCA must receive training and be approved by the delegating nurse before doing any delegated tasks. Nurse delegation is available in your home or a residential care facility.

Home Health Care

A home health care agency provides skilled nursing care or a home health aide. Your social worker can work with you on this.

Hospice

Hospice care involves a team of professionals and volunteers who provide medical, psychological, and spiritual care for people near the end of life and their families. Hospice care is most often provided at home but is also available in other care settings, including a hospital. A doctor's referral is needed.

Other Services That Can Help

The following are additional services that may be available.

Adult Day Services
Adult day services are programs offering services in a group setting outside the home. Adult Day Care programs include help with personal care, social and therapeutic activities, education, routine health monitoring, a nutritious meal and snacks, coordination of transportation, first aid, and emergency care.

Adult Day Health programs provide all of these services plus nursing and rehabilitative therapies.

Environmental Modifications
Modifications, such as ramps, a grab-bar in the shower or near a toilet, or widening doorways for a wheelchair, may be added to your home to help you adapt to your changing needs safely.

Home Delivered Meals
A nutritious meal is delivered to your home once a day.

Individualized Training
Training is provided if you or your caregiver(s) need further information/skills to effectively carry out your care plan.

Medical Equipment
Necessary medical equipment is purchased that isn't covered by Medicaid or Medicare.

Personal Emergency Response System (PERS)
An electronic device is provided that allows you to get help in an emergency. The system is connected to your phone or you may also wear a portable "help" button. When activated, staff at a response center will call 911 and/or take whatever action has been set-up ahead of time.

Transportation
Limited transportation is provided to help you get to needed services and activities.

Additional Programs

The following programs are limited to certain geographic areas throughout the state. Talk with your social worker to learn more about these programs.

New Freedom Consumer Directed Services
New Freedom is a program that allows you greater control and choice over the services you receive. With New Freedom, you receive a monthly budget to purchase services and items to help you live as independently as possible.

A consultant knowledgeable about local service options works with you to purchase the services you want. A financial management service pays your service providers and helps you monitor your budget.

New Freedom is currently available in King and Pierce Counties for people who live at home.

Washington Medicaid Integration Partnership (WMIP)
WMIP is a managed care program available to adults 21 and older who are eligible for Medicaid.

WMIP is currently offered in Snohomish County. To learn more about WMIP, visit http://hrsa.dshs.wa.gov/mip/ or call Molina Healthcare of Washington at 1-800-869-7165.

Program of All-Inclusive Care for the Elderly (PACE)
PACE provides an integrated, multidisciplinary, team approach to health care and social services for adults 55 and older at a local PACE center. Tailored to meet your individual needs, the PACE center is the focal point for coordinating and providing most services.

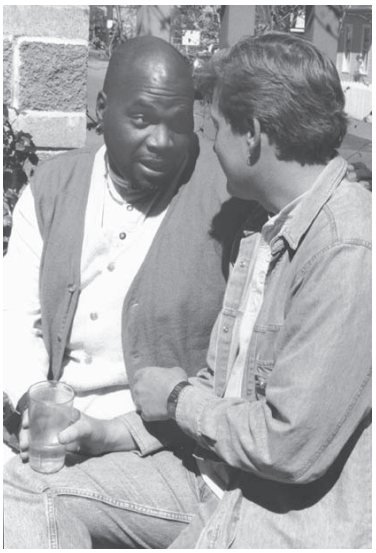
PACE is currently available in parts of King County. To learn more about the King County PACE program, call Providence ElderPlace at 206-320-5325.

Residential Housing and Care Options

There are many options where you can live and get care if you can no longer stay at home. Most people are familiar with nursing homes. People are not as familiar with other live-in care options.

Assisted living is often used to describe any live-in care facility that provides housing, basic services and assumes general responsibility for the safety and well-being of residents.

The following is some helpful information about possible residential care housing options for people receiving Medicaid. The facility must be licensed by Washington State and accept Medicaid payment for residents.



There are many options where you can live and get care if you can no longer stay at home.

Adult Family Homes and Assisted Living Facilities

An adult family home (AFH) is licensed to provide housing and care services for up to six people in a house. The AFH may be run by a family with children, a single person, couple, friends, or business partners. The AFH may also hire other employees. Some AFHs allow pets. In some homes, multiple languages may be spoken.

An assisted living facility (ALF) is licensed to provide housing and care for seven or more people in a home or facility. Housing options range from a room with access to shared living space to your own apartment. ALFs vary in size and ownership from a family operated 7-bed facility to a 150-bed facility operated by a large national corporation.

All AFHs and ALFs provide housing and meals (room and board), varying levels of help with personal care, and assume general responsibility for your safety and care. What additional services are offered is different for each home and may include:

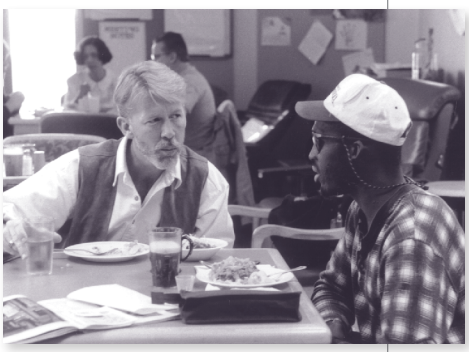
- Intermittent nursing care (a nurse available on a part-time basis).
- Assistance with or administering of medications.
- Specialized care to people living with developmental disabilities, dementia, or mental illness.

Your social worker will have a listing and knowledge of what homes are available in your local area. A listing of adult family homes and assisted living facilities can also be found on the internet at www.adsa.dshs.wa.gov.

Choosing Care in an Adult Family Home or Assisted Living Facility (DSHS 22-707) is a free booklet from DSHS that talks about how to find and choose the right home for you. The booklet includes a checklist of things to ask and look for that can help you make your decision. Read it on the internet at www.adsa.dshs.wa.gov (click on Publications).

Nursing Facilities

Nursing facilities provide 24-hour, supervised nursing care, personal care, therapy, nutrition management, organized activities, social services, room, board, and laundry services.



With support, you may not need to stay in a nursing facility.

Returning Home after a Stay in a Nursing Facility or Hospital

If you currently live in a nursing facility or have been in the hospital, there may be several services and support available to help you return home or to other housing options where you can get the care you need. A nursing facility case manager from your local Home and Community Services office will help you review your care and housing options and work with you to develop a discharge plan.

In addition, your nursing facility case manager can help identify transition services that may be available to you. Examples of these services may include help:

- Exploring your housing options and finding a place to live.
- Creating an individualized discharge and care plan.
- Paying some of your home expenses while you are in a nursing facility (for six months or less).
- Paying for a security deposit or getting utilities turned on.
- Modifying your home to make it safer such as a adding a ramp or bathroom grab bars.
- Getting settled again in the community.

Contact your nursing facility case manager or local Home and Community Services office for more information (see back of booklet for phone numbers).

You Have a Choice...

This booklet has given you information on applying for Medicaid and your options for care if you are eligible to receive it.

There are many people, options, and resources available to help you stay as independent as possible.

Participating in home and community services is voluntary. You have the right to decline or stop services at any time.

Once you start receiving services, always contact your social worker if you have questions or your care needs change.

Additional Information

Ordering Publications

You may order this booklet and other DSHS publications through the Washington State Department of Printing (DOP). Go to the DOP's website at: www.prt.wa.gov and click on General Store.

Publication requests may also be placed by:
E-mail at: fulfillment@prt.wa.gov
Phone at: 360-570-3062
Fax at: 360-586-6361

Make sure to include the name of the publication, publication number, and a contact name and street mailing address.

All publications listed in this booklet and more can be found and read on-line at www.adsa.dshs.wa.gov. Translated versions of all publications can also be found there in Spanish, Russian, Cambodian, Chinese, Korean, Laotian, and Vietnamese.

Senior Information and Assistance (I&A)

Many of the care options discussed in this booklet are available to an adult paying privately or through other insurance for long-term care services. If you are not eligible for Medicaid and want to talk with someone about what services and resources are available where you live, call your I&A office.

To find your local I&A office, visit the Area Agency on Aging (AAA) website at www.agingwashington.org and click on "local AAAs", look for the AAA office in the yellow pages of your telephone book under "Senior Services", or call 1-800-422-3263 and ask for the number.

Resources for Caregivers

There are several resources to help support family and friends providing unpaid care. You do not have to be applying for or receiving Medicaid to take advantage of these resources.

Family Caregiver Support Program
The Family Caregiver Support Program helps unpaid caregivers of older adults. Services are free or low cost and generally include:

- Caregiver support groups and counseling
- Caregiver training and education
- Respite care
- Information and help getting services

Contact your local Senior Information and Assistance office for more information on this program.

Free booklet
The *Family Caregiver Handbook* (DSHS 22-277) is a free booklet that can help you learn more about all aspects of providing care. See page 16 for ordering information or read it on the Internet at www.adsa.dshs.wa.gov (click on Publications).

ADSA Website

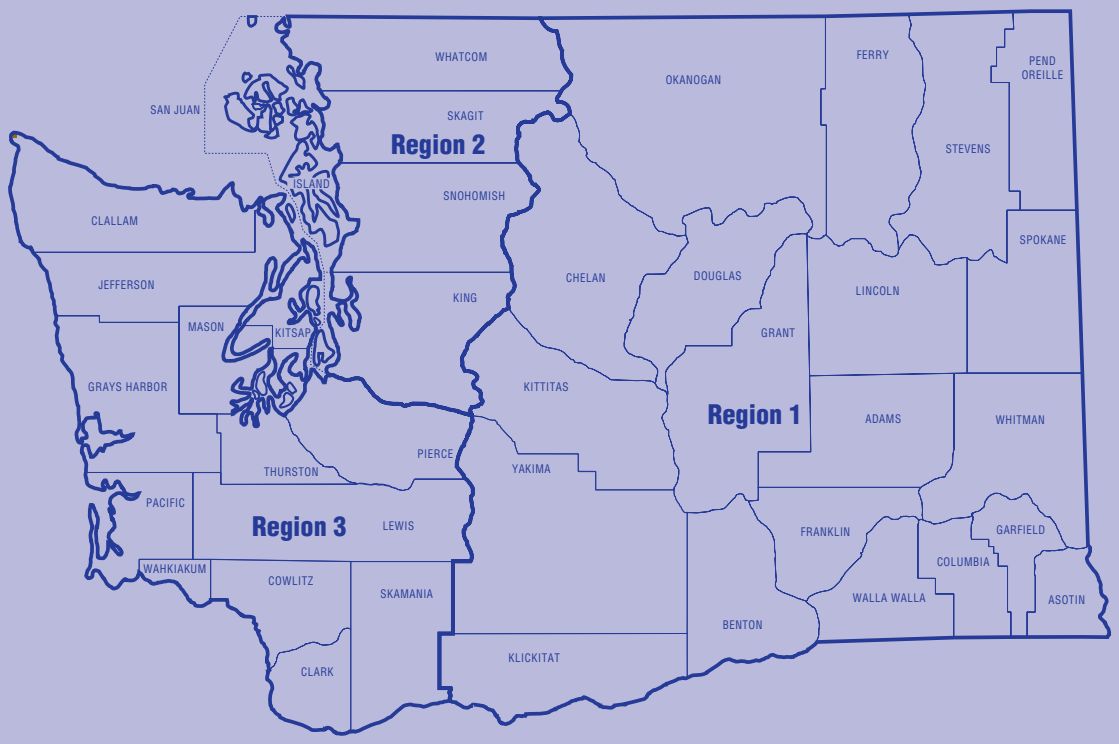
Visit the ADSA website to learn more about:

- The types of care services, programs, and resources available and how to find them.
- Residential housing options for a person who can no longer live at home and how to find them.
- State, federal, and local resources that help pay for care and prescription drugs.
- Information, resources, and programs for people who are caring for a loved one.
- Long-term care planning:
  - The legal and financial steps necessary to help plan wisely for the future.
  - Tips on healthy aging.
- Translated versions of this booklet in Cambodian, Chinese, Korean, Laotian, Russian, Spanish, and Vietnamese.

Visit **www.adsa.dshs.wa.gov** today!

Home and Community Services Regional Phone Numbers

See map to find the region you live in. Call the number listed for your region and ask for the local HCS office nearest you.



REGION 1

509-323-9400
1-800-459-0421
TTY 509-329-3698

Adams, Asotin, Benton, Chelan, Columbia, Douglas, Ferry, Franklin, Garfield, Grant, Kittitas, Klickitat, Lincoln, Okanogan, Pend Oreille, Spokane, Stevens, Walla Walla, Whitman, and Yakima Counties

REGION 2

206-341-7600
1-800-346-9257
TTY 1-800-833-6384

Island, King, San Juan, Skagit, Snohomish, and Whatcom Counties

REGION 3

253-476-7200
1-800-442-5129
TTY 253-593-5471

Clallam, Clark, Cowlitz, Grays Harbor, Jefferson, Kitsap, Lewis, Mason, Pacific, Pierce, Skamania, Thurston, and Wahkiakum Counties

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We are all partners against adult abuse

Abuse of vulnerable adults (people who need help to care for themselves) can happen anytime, anywhere. DSHS investigates alleged abuse, neglect, exploitation, or abandonment of vulnerable adults.

If you suspect abuse, neglect, or exploitation of a vulnerable adult:

Call DSHS toll-free

DSHS TOLL FREE 1-866-ENDHARM
Voice/TTY Accessible
1-866-363-4276

Washington State Department of Social & Health Services
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