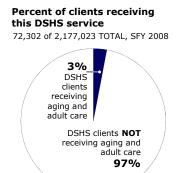


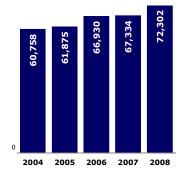
Long term care for vulnerable adults

JANUARY 2010

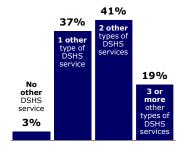
DSHS | One Department, One Vision, One Mission, One Core Set of Values



Aging and adult services client trend



Clients need many services In SFY 2008, percent using aging and adult services and . . .



PROGRAM CONTACT Chris Imhoff, 360.725.2272 imhofc@dshs.wa.gov

RDA CONTACT (CSDB) Maija Sandberg, 360.902.0749 sandbmt@dshs.wa.gov

> BUDGET CONTACT Edd Giger, 360.902.8067 gigerea@dshs.wa.gov

www1.dshs.wa.gov/rda/

Report Number 11.146.050

Decreasing poverty and improving the safety and health status of aging and adult clients

2008 CLIENT SERVICE COUNTS

AGING AND ADULT SERVICES: DSHS provides Home and Community Services and Residential Care Services through its Aging and Disability Services Administration (ADSA). These two programs serve older adults and people with functional disabilities 18 years of age or older, providing assistance with daily living activities such as bathing, dressing, shopping, self care, eating, and medication management. The long-term care system includes community services provided through Home and Community Services (HCS) regional field service offices and Area Agencies on Aging (AAA). Residential Care Services (RCS) assures facility quality and includes quality assurance, survey, inspection, licensing and enforcement, and complaint resolution. In State Fiscal Year (SFY) 2008, **72,302 clients** received the services described below from ADSA's aging and adult service programs. The average cost per client was **\$17,328**.

COMPREHENSIVE ASSESSMENTS

Initial and periodic assessments of need are conducted by HCS or AAA case managers. Individual clients are interviewed, usually in their home, for initial, annual, significant change, and brief assessments. Respite needs are also assessed. *48,582 clients, average client cost* = \$1,398

ADULT FAMILY HOMES

Adult Family Homes (AFH) are small group care residential settings licensed to care for up to 6 adults who cannot live alone but do not need 24-hour skilled nursing supervision. AFH residents are not related to the provider, and settings encourage maximum resident independence and involvement. They provide a range of daily activities tailored to resident preferences: room, board, laundry, supervision, assistance with activities of daily living, and personal care. Some provide nursing, other special care, or transportation. 6,019 clients, average client cost = \$11,497

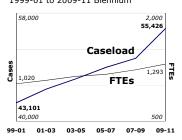
NURSING FACILITIES

A nursing facility or nursing home provides 24-hour supervised nursing care, personal care, therapy, nutrition management, organized activities, social services, room, board, and laundry. Residents have the right to exercise reasonable control over life decisions in comfortable, clean, safe, homelike environments. They have a right to choice, participation, privacy, and the opportunity to engage in religious political, civic, recreational, and other social activities that foster self-worth and enhance quality of life. Residential facility staff members assist with medication, eating, dressing, walking, or other personal needs. Payment may be made through the client's resources, Medicaid or Medicare, or the Veterans Administration. 19,498 clients, average client cost = \$27,061



NOTE: CSDB identifies service use information and expenditures specific to each DSHS client. Costs that cannot be assigned to individual clients are not included—such as facilities, licensing, admin, outreach, prevention, fraud investigation, community block grants, and cost recoveries.

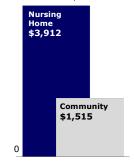
Comparing FTEs and caseload 1999-01 to 2009-11 Biennium



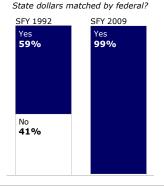
Toward community care SFY Caseload

Comparing costs

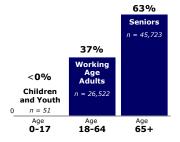
SFY 2008 Per client per month



Maximizing federal dollars



Client age distribution SFY 2008



BOARDING HOMES

A boarding home is a facility in a community setting licensed to care for seven or more residents. The home provides housing, meal services and assumes general responsibility for the safety and well being of residents. Most residents pay for their care privately. Boarding homes allow residents to live an independent lifestyle in a community and vary in size—up to 150 beds. Some provide intermittent nursing services. Others specialize in serving people with mental health problems, developmental disabilities, or dementia. All are licensed by ADSA and inspected to ensure minimum care and safety requirements.

Medicaid Contracted Boarding Homes Services: Boarding homes that contract with ADSA provide one or more of the following service packages:

Assisted Living: These facilities have private apartments, emphasizing privacy, independence, and personal choice. Intermittent nursing services must be provided as well as help with medication administration and personal care. ADSA pays a daily rate based on clients' assessed level of care. Clients may pay participation fees if their incomes exceed Medically Needy Income levels. 6,140 clients, average client cost = \$10,326

Adult Residential Care: Services include medication assistance and personal care. Residents may need and receive limited supervision. Payments are provided either by the state or through federal Title XIX funding. Adult Residential Care plus Enhanced Adult Residential Care: 2,563 clients, average client cost = \$10,414

Enhanced Adult Residential Care: Clients receive help with medication administration and personal care. No more than two people share a room and intermittent nursing care must be provided. Facilities specializing in dementia care must succeed in a competitive bid process within available funding limits.

IN-HOME SERVICES

Includes Chore and Personal Care services delivered in client's home, and other services essential to clients safely living in their own homes. State-funded Chore provides in-home personal care services to non-Medicaid eligible, low-income, disabled, or very frail adults still living in their own homes. The Chore program is closed and does not accept new clients. Personal Care employs individuals and contracted agencies to assist low-income disabled or frail adults with the activities of daily living, such as bathing, dressing, grooming, meal preparation, and household chores, allowing clients to safely remain in their own home. Includes Title XIX funded Personal Care services COPES, and Medically Needy reimbursements. May also provide: Adult Day Care, Client Training, Community Transition (services and/or items), Environmental Modification (necessary physical adaptations to client's home), Personal Emergency Response System, Home-Delivered Meals, Special Medical Equipment, Skilled Nursing and Transportation. The New Freedom Waiver program (King County) allows clients with the help of a financial manager to manage monthly budgets for in-home services. 38,935 clients, average client cost = \$11,923

MANAGED CARE

Includes services to older adults who have chosen to receive benefits through a managed care plan (Program of All-Inclusive Care for the Elderly or Washington Medicaid Integration Partnership). Offers acute medical and long-term care services managed through a single managed care provider in selected urban counties. 548 clients, average client cost = \$18,245

ADDITIONAL SERVICES

Includes expenditures for Nursing Home Discharge Allowance, Private Duty Nursing, Nurse Delegation, and Adult Day Health Services. 6,151 clients, average client cost = \$3,872

Not in this report: Adult Protective Services, Respite Services, some AAA services, COPES participation reimbursements, nursing facility placement, and nursing home nurses aid training, continuing education for individual providers, audit settlements and recoupments, and Old Age Survivors Insurance (OASI) refund.