

HOUSE BILL REPORT

HB 1546

As Reported by House Committee On:
Early Learning & Human Services

Title: An act relating to the no paid case load of the division of developmental disabilities.

Brief Description: Concerning people with disabilities who receive no paid services from the department of social and health services' division of developmental disabilities.

Sponsors: Representatives Green, Johnson, Walsh, Kagi, Roberts, Smith, Zeiger, Upthegrove, Freeman, Appleton, Ryu, Morrell, Jinkins, Bergquist and Pollet.

Brief History:

Committee Activity:

Early Learning & Human Services: 2/14/13, 2/22/13 [DPS].

Brief Summary of Substitute Bill

- Requires the Department of Social and Health Services (DSHS) to provide services through the Individual and Family Services Program to individuals on the waiting list and who are not receiving paid services.
- Requires the DSHS to expand the Informing Families/Building Trust Communications Project to provide information to individuals and families about the developmental disabilities system.

HOUSE COMMITTEE ON EARLY LEARNING & HUMAN SERVICES

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 10 members: Representatives Kagi, Chair; Freeman, Vice Chair; Walsh, Ranking Minority Member; Scott, Assistant Ranking Minority Member; Farrell, Goodman, MacEwen, Roberts, Sawyer and Zeiger.

Minority Report: Do not pass. Signed by 1 member: Representative Overstreet.

Staff: Linda Merelle (786-7092).

Background:

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

No Paid Services Case Load.

Beginning in January 2011 the Division of Developmental Disabilities (DDD) no longer provided case management services for clients who did not receive a paid service. Clients on the "no paid services" case load are eligible for services but do not receive them. In a report issued in January 2012 the Washington State Developmental Disabilities Council (DDC) estimated that the "no paid services" case load was in excess of 16,000 persons. More than half of the persons who were surveyed for the report indicated that they needed a service immediately, and the most requested service was for respite care. Respite care allows parents to have a "respite" from the demands of caring for their son or daughter 24 hours per day, seven days per week or to allow time to run errands and take care of other matters outside of the home. A parent may hire an independent care provider who comes into the home or takes the son or daughter on an outing. Under some circumstances, parents may take their child to a licensed facility for a period of hours. The number of respite hours allotted may vary. They may be taken pursuant to a set schedule, but more often, they are taken sporadically when the need arises. Only care providers who are parents are allowed to receive respite services through the DDD.

Informing Families/Building Trust Communication Project.

The DDC and the DDD collaborate on the Informing Families/Building Trust Communication Project to provide information about the developmental disabilities system to persons who are on the "no paid services" case load.

According to the Department of Social and Health Services (DSHS), approximately 50 percent of the clients on the "no paid services" case load were enrolled in Medicaid, and approximately 16 percent of the clients had undergone an assessment to determine which services they needed. The services most requested by those who had "no paid services" were family support, personal care, and respite.

Individual Family Services Program.

The Individual Family Services Program (IFS Program), provided through the DDD, supports families who are caring for a family member with developmental disabilities in their home. Families may receive respite care, therapies, home and motor vehicle modifications, specialized nutrition and clothing, transportation, training, behavior management, education, and recreational opportunities.

Caseload Forecast Council.

The Washington State Caseload Forecast Council (Council) is charged with forecasting the entitlement caseloads for the state. The Council meets several times per year to adopt official forecasts, which are then used as a basis for biennial and supplemental appropriations. Currently, the Council forecasts the DDD personal care services and community residential services. Funding for these services is increased or reduced depending upon the forecasted caseload and the per capita costs for the services.

Summary of Substitute Bill:

Individual and Family Services.

Within funds provided by the Legislature, the DSHS must provide services under the IFS Program to individuals who have requested such services and who are not receiving any paid services from the DSHS, as follows:

- 1,000 individuals for the fiscal year ending June 30, 2014; and
- 1,000 individuals for the fiscal year ending June 30, 2015.

Informing Families/Building Trust Communication Project.

The DSHS must expand the Informing Families/Building Trust Communication Project to provide information to individuals and families about the developmental disabilities system.

Substitute Bill Compared to Original Bill:

The DSHS is not required to hire case managers necessary to conduct assessments for those on the "no paid services" caseload who ask for services and who may appear to be eligible for Medicaid Personal Care services.

The DSHS is required to expand the Informing Families/Building Trust Communication Project, but it is not required to assure that funds provided will be matched with Medicaid funds.

The DSHS must provide services under the IFS Program for persons on the IFS waiting list. They must provide services for 1000 individuals in fiscal year 2014, and 1000 in fiscal year 2015. The statutory provisions regarding how the DSHS should prioritize services and requiring the client to account to the DSHS regarding the use of funds received for services have been removed.

The Caseload Forecast Council is not required to forecast the "no paid services" caseload.

Appropriation: None.

Fiscal Note: Available. New fiscal note requested on February 24, 2013.

Effective Date of Substitute Bill: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

Staff Summary of Public Testimony:

(In support) The provisions of this bill represent some of the recommendations that came of the Developmental Disabilities Service Systems Task Force (Task Force). The unfunded case load is a huge problem. The state has not made any headway over the years. There are approximately 15,000 clients of the DDD who receive "no paid services." In the economic

downturn, clients of the DDD have gone from having a case manager to having nothing. The Legislature has to make a commitment to start working on this issue. If no good faith effort is made to address these issues, Washington may face the same kinds of circumstances that exist in K-12 education. To begin to make a good faith effort, clients on the "no paid services" caseload should be forecasted. There is no population more vulnerable than those with developmental disabilities. The DDD should hire case managers to service those clients, and look at how to prioritize them for services. The most needed service is respite care. The breadth of voluntary caregiving is overlooked, and those who continue to provide those services need to be honored. The Task Force did not scratch the surface of what it was asked to do. This bill represents just the beginning of the work. People are on the "no paid services" caseload because they knock on the door at the wrong time, and they do not receive services. Luck should not be the basis for policy. Respite is one of the lowest cost services that the state offers. Purchasing back the case managers would be a good move. Many people do not know that they might be eligible for Medicaid Personal Care. Although a diagnosis for a developmental disability is given to a person, it affects the entire family. Persons eligible for services may go for years without receiving them, and only receive them when a crisis hits. After receiving services, everything is different because things have improved. The IFS Program was created to provide services to persons with developmental disabilities, and the funding has all but disappeared. If funding were provided, it may address some of the issues raised in the bill. For some caretakers, it is rare to get more than four straight hours of sleep during the night. This bill would allow services that families desperately need. Families need a break. For many families, that could be the neighborhood babysitter. It is about three times more expensive when there is a skilled person required. Families want time to go shopping, sleep, or go out with their other children in the family. Families are in this for the long haul, but they can also fracture under the stress. Lack of respite care causes premature death for caregivers. Many parents do not want to remand their children to foster care or to another home. Most people could not tolerate having their loved ones away from them for more than a temporary time. Families should be able to stay together if they can.

Persons Testifying: Representative Green, prime sponsor; Diane Larsen Peirce County Coalition for Developmental Disabilities; Sue Searles; Ed Holen, Developmental Disabilities Council; Marcy Johnson, Service Employees International Union 1199 Northwest; Betsy McAlister, The Arc of King County, and King County Parent Coalition; Paula Gordon; Linda Porter, Lifespan Respite Washington; and Don Clintsman, Department of Social and Health Services, Division of Developmental Disabilities.

Persons Signed In To Testify But Not Testifying: None.