

SENATE BILL REPORT

SB 6126

As of January 18, 2024

Title: An act relating to increasing access to respite care for those with intellectual or developmental disabilities and their caregivers.

Brief Description: Increasing access to respite care for those with intellectual or developmental disabilities and their caregivers.

Sponsors: Senators Kauffman, Boehnke, Frame, Wellman, Trudeau, Nobles, Conway, Hasegawa, Kuderer, Lovick, Nguyen, Randall, Saldaña, Valdez and Wilson, C..

Brief History:

Committee Activity: Human Services: 1/18/24.

Brief Summary of Bill

- Directs the Department of Developmental Disabilities (DDA) to provide respite care as part of the aggregate services under both the basic plus and the children's intensive in-home behavioral support waiver.
- Directs DDA to submit a waiver amendment to the Centers for Medicare and Medicaid Services and upon approval, update the waivers within 30 days to allow for respite care as aggregate services.

SENATE COMMITTEE ON HUMAN SERVICES

Staff: Alison Mendiola 786-7488

Background: The Developmental Disability Administration (DDA) within the Department of Social and Health Services (DSHS) serves people with developmental and intellectual disabilities. DDA provides employment services, assistance providing personal care, respite services, environmental modification, and housing.

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

Respite care is short-term intermittent care to provide relief for a person who lives with the client, is the client's primary care provider, and is:

- the client's family member and a paid or unpaid care provider;
- a nonfamily member who is not paid to provide care for the client;
- a contracted companion home provider paid by DDA to provide support to the client;
or
- a licensed children's foster home provider paid by DDA to provide support to the client.

Home and community based services (HCBS) waivers are services approved by the Centers for Medicare and Medicaid Services (CMS) under section 1915(c) of the Social Security Act as an alternative to intermediate care facility for individuals with intellectual disabilities (ICF/IID). Certain federal regulations are waived enabling the provision of services in the home and community to individuals who would otherwise require the services provided in an ICF/IID. Each waiver has a capacity limit on the number of people who can be served in a waiver year. DDA has the authority to limit capacity based on availability of funding for new waiver participants.

A number of services are available under the basic plus waiver including aggregate services. Aggregate services include assistive technology, extermination of bedbugs, community engagement, environmental adaptations, occupational therapy, physical therapy, remote support, skilled nursing, specialized equipment and supplies, specialized habilitation, speech, hearing, and language services, staff and family consultation, transportation, and wellness education. Total costs must not exceed \$6,192 per year per participant.

A number of services are available under the children's intensive in-home behavioral support (CIIBS) waiver, including aggregate services. Aggregate services include assistive technology, environmental adaptations, nurse delegation, specialized clothing, specialized equipment and supplies, specialized habilitation, staff and family consultation, transportation, and vehicle modifications the total costs of which may not exceed \$15,000 per year in any combination.

Respite care is available in the basic plus and CIIBS waiver, as well as other waivers. Respite care limits are determined by a DDA assessment and are not part of aggregate services.

Summary of Bill: DDA is to provide respite care as part of aggregate services available under both the basic plus waiver and the CIIBS waiver.

By September 1, 2024, DDA is to submit a waiver amendment to CMS and upon approval, DDA has 30 days to update the basic plus and CIIBS waivers to allow respite care as aggregate services.

Appropriation: None.

Fiscal Note: Not requested.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony: PRO: Caring for those with developmental disabilities (DD) poses unique challenges. While there are support systems in place it is important to improve the quality of life for both the clients and caregivers and respite care provides that opportunity. Caregivers have an opportunity to recharge and clients can be involved with the community. This is a great bill that gets families more hours of respite care but without costing more money. Caregiving is a lifelong commitment. Often aggregate funds go unused so this would be great as it also provides for travel and recreational programs, like summer camp and art programs. Life is unpredictable and it's easy to run out of hours. Anything that helps is welcomed. Respite is the only DD service that can be provided in a group setting so this lets the clients connect with community programs and lets able bodied people join their friends in activities.

Persons Testifying: PRO: Senator Claudia Kauffman, Prime Sponsor; Adrienne Stuart; Moses Perez, Open Doors for Multicultural Families; Sandra Gruberg; Cathy Murahashi, The Arc of Washington; Ivanova Smith, Atwork!; Linda Hyatt; Kelley Nesbitt; Ryan Nesbitt.

Persons Signed In To Testify But Not Testifying: PRO: Adana Protonentis, Kindred; Lelach Rave, WCAAP.