

# **Introduction to the Home & Community Living Administration**



# DSHS - House of Health and Human Services

Governor and  
DSHS Aligned  
Priorities

DSHS  
Service  
Priorities

DSHS  
Foundational  
Priorities

Healthy  
and Safe  
Communities

Prosperous  
Economy

Efficient,  
Effective and  
Accountable  
Government



Build  
Economic  
Justice



Modernize  
Behavioral  
Health



Advance  
Person-Centered  
Services



Serve People  
in their Community  
of Choice

Government-to-Government  
and Community Partnership

Equity, Access, Inclusion  
and Belonging

Welcome

Employer of Choice

Operational Excellence

Technology Innovation

# What is Reimagine DSHS?

## **A strategic initiative to:**

- Help people get the support they need when and where they need it
- Improving the overall customer experience

### **Behavioral Health and Habilitation Administration**

- Residential habilitation and behavioral health services in a 24/7 setting staffed by state employees
- State Hospitals, State Operated Community Residential Programs, Lake Burien Transitional Care Facility

### **Home and Community Living Administration**

- Program eligibility, case management, contracted community-based supports for people with disabilities of all ages and older adults
- Brings together the programs of Developmental Disabilities Administration and Aging and Long-Term Services Administration



# Why Reimagine DSHS?



Increase awareness of programs and services



People have the power to make plans and set their own service goals



DSHS staff work together to help provide timely access to services



Support safe, successful transitions between settings





# Home & Community Living Administration in Brief



**>115,000**

Seniors and People  
with Disabilities



**\$18.2**

Billion  
Budget (25-27  
Biennium)



**~4,300**

FTE



**78K**

Direct Care Workers

# Home and Community Living Administration's Divisions

## Adult Protective Services

### Supports Choice, Independence & Safety

- Educate the public
- Conducts investigations
- Provides advocacy
- Offer Protective Services to vulnerable adults

## Home and Community Services

### Supports Choice, Independence & Safety

- Provides case management & home and community-based services to clients
- Develops new and innovative services

## Management Services Division

### Supports HCLA

- Budget & forecasting
- Contracts
- Rates
- Facilities
- Financial services

## Office of the Deaf and Hard of Hearing

### Supports Choice & Independence

- Provides training and assistive listening technology for individuals and service providers
- Case management

## Residential Care Services

### Supports Choice & Safety

- Ensures clients and residents of certified and licensed LTC settings live in safe & quality environments
- Develop high quality LTSS options

## Office of the Assistant Secretary

### Supports Divisions

- Provides leadership
- Offers strategic direction & services

## WA Cares

### Universal Long-Term Care Insurance

- Washington's first-in-the-nation program
- Begin paying benefits in July 2026

## Developmental Disabilities Community Services

### Supports Choice, Independence & Safety

- Supporting people with intellectual and developmental disabilities in home and community-based settings

# Setting the Standard for Long-Term Care Services

WA Ranked #2 Nationwide for Excellence in Long-Term Care Services



Affordability  
& Access



Choice of  
Setting &  
Provider



Quality  
& Safety



Support for  
Family  
Caregivers



Community  
Integration

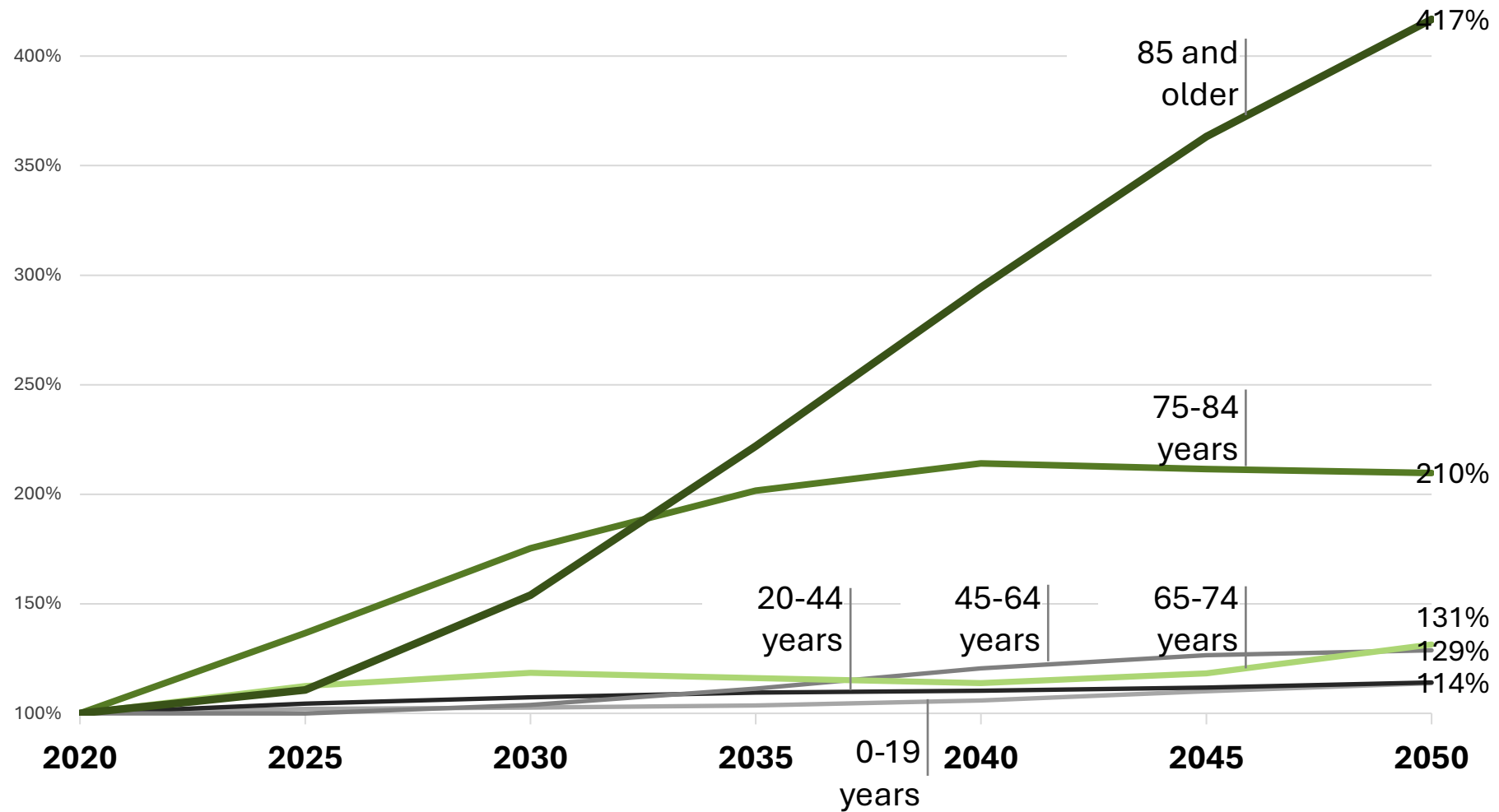
# Home and Community Living Strategic Priorities 25-26

Supporting Choice, Independence, Access & Safety for individuals with disabilities of all ages, older adults, and family and kinship caregivers.

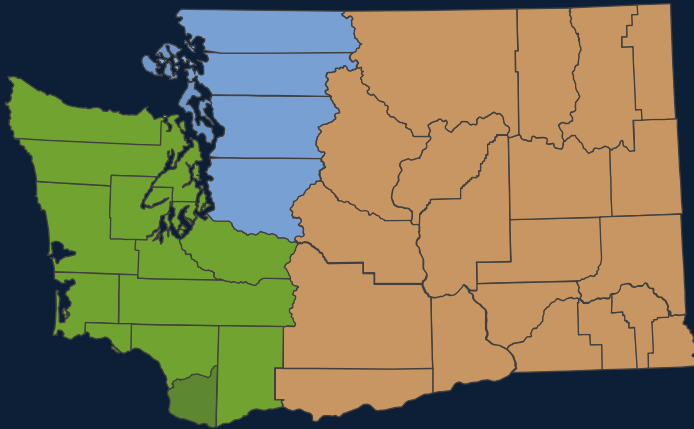
1. Offer personalized services that help people of all ages choose where and how they receive care
2. Uphold and protect client independence, health, safety and rights
3. Engage partners to increase access to coordinated services and improve customer experience
4. Strengthen the direct care workforce
5. Foster a culture of belonging, well-being and engagement



# Washington's Population is Aging



## HCLA's Service Regions



Region 1   Region 2   Region 3

# Case Management Provided by:

### **13 Area Agencies**

- Assist seniors, individuals with disabilities, and caregivers
- Help with planning & connecting to additional care services
- Medicaid redetermination & case management for in-home clients
- 678 Case Managers, 45 Case Aides working across the state

### **28 Home & Community Services Offices**

- Financial and functional eligibility assessments
- Planning, management of care services for clients in residential settings
- Transitional care management out of institutions to community
- 530 case managers across the state

### **30 Developmental Disability Community Services Offices**

- Financial and functional eligibility assessments for DDSCS services
- Planning, management of care services for clients
- 529 case managers across the state

# People Accessing HCLA Services Have Multiple Chronic Conditions, Diverse Needs



**1 in 7 HCS clients** and **1 in 3 DDCS clients** have a mental health diagnosis



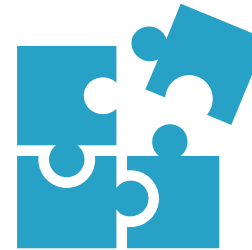
**1 in 4 HCS clients** have dementia diagnosis



**1 in 3 HCS clients** have an intellectual or developmental disability



**Average HCS client has five chronic conditions** diagnosed in the past year



**4 in 10 DDCS clients** are on the Autism spectrum

# HCLA Supports Communities Through Services, Oversight, and Safety

LTSS Services, Investigation, Regulatory Oversight

**6,497**

Facilities  
Licensed, Certified,  
Surveyed and Inspected

**71,200**

Medicaid Clients  
Per Month

**51,062**

CY '24 APS  
Investigations

**22,770**

CY '24 RCS  
Investigations

Choice Independence, Safety, Innovation

64%

26%

9%

Medicaid Recipients

## Client's Home

Consumer Direct WA – IP  
Licensed Home Care Agencies

## Residential Setting

AFH, ALF, ESF  
6,093 Facilities

## Institutional Setting

Nursing Homes and ICF/IID  
199 Facilities

Contracted  
Community  
Residential  
Services

Serves more than  
**4,200 adults and 91  
youth**

State  
Operated  
Living  
Alternative

Serves more than  
**200 adults and 8  
youth**

# HCLA 2026 Supplemental Budget Request

*(Submitted as ALTSA and DDA)*

- Policy Level
  - ALTSA - Interpreters and TED Equipment (ODHH)
    - \$200,000 GF-State
  - DDA – Dan Thompson Account
    - \$2M Dan Thompson account
  - DDA – DDCS Financial Eligibility
    - \$5.5M (\$2.5M GF-State) 17.6 FTE (35.3 positions)
- Both administrations (Placeholders without dollar values)
  - HR1 Federal Reductions
  - Reimagine DSHS
    - \$3M (\$1.5M GF-State) from DDA to BHA – net zero for DSHS

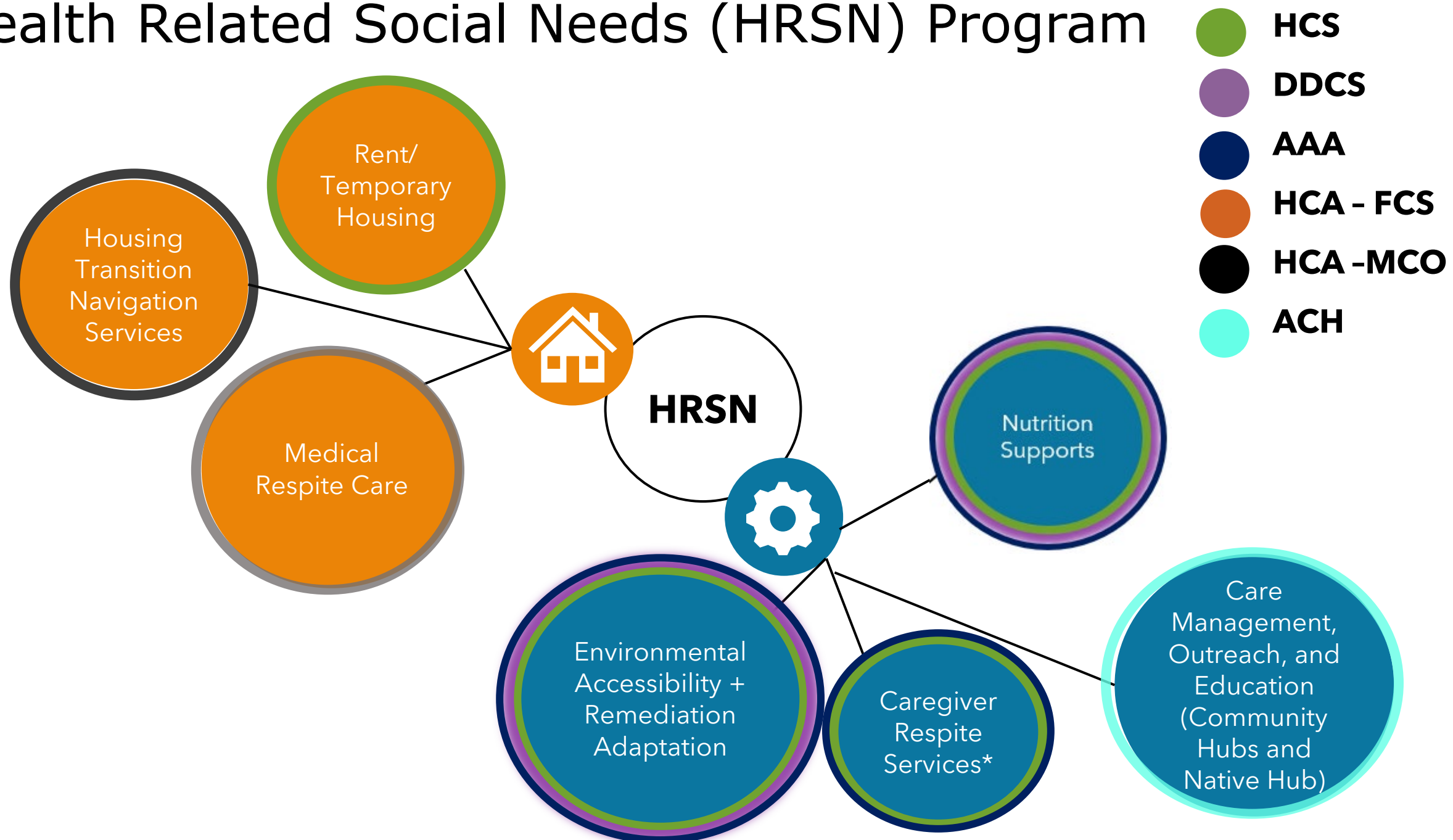


# 2026 Agency Request Legislation

- Exempting certain former foster providers from Adult Family Home licensure
  - Small number of cases statewide
  - Helps keep families with unrelated foster youth together
- Reimagine DSHS
  - ALTSA, DDA and BHA become the new Home and Community Living Administration and Behavioral Health and Habilitation Administration
  - Changes name references and the budget appropriations
- HB1390 – Repealing the Community Protection Program  
*(From the 2025 session)*
  - Education needed on difference between the Client Protection waiver and the Community Protection Act




# Looking Ahead

# Health Related Social Needs (HRSN) Program



# HR1 Impacts

## 3 Million Washingtonians will be affected by changes to SNAP, Medicaid & Marketplace

FAMILIES	IMMIGRANTS & REFUGEES	RURAL RESIDENTS	PEOPLE WITH DISABILITIES	AGES 54-64
				
<p>The vast majority of families receiving TANF, Working Connections Child Care, and Apple Health also receive SNAP.</p> <p>New work requirements for families with children 14 and older will make accessing SNAP and Medicaid benefits harder for families.</p>	<p>Immigrants who do not meet the new qualifying-alien definitions are cut off from federal SNAP and Medicaid benefits and marketplace tax credits.</p> <p>State-funded programs serving immigrants that do not meet new qualifying-alien definitions are at risk of reduction due to lower federal share rates.</p>	<p>Rural counties have higher rates of SNAP and Medicaid assistance and tax credit benefits compared to urban counties. The loss will compromise rural household budgets and local economies.</p> <p>The agricultural community will lose revenue due to SNAP cuts.</p> <p>People designated as Able-Bodied Adults without Dependents (ABAWDS) in counties with limited job opportunities and seasonal workforce are no longer exempt from work requirements.</p>	<p>The majority of people receiving assistance through the Aged, Blind or Disabled, SSI and vocational rehabilitation programs, as well as people with development disabilities also receive SNAP.</p>	<p>New work requirements will make accessing SNAP and Medicaid benefits harder for people age 54-64.</p>



# Emerging Issues: Utilizing Technology for Caregiving

## The Problem:

- Direct care workforce shortage.
- Not enough caregivers to meet growing demand.
- Clients waiting for in-person care struggle with unmet needs.
- Individuals also looking to maximize independence.

## Remote Caregiving as a solution:

- Remote caregiving fills gaps while clients wait for in-person support.
- Supports faster transitions home after institutionalization.
- Helps clients utilize authorized hours effectively.
- Creative solutions to maximize care and independence.
- Retains caregivers who are unable to provide in-person care due to physical disabilities, other commitments, or personal reasons.

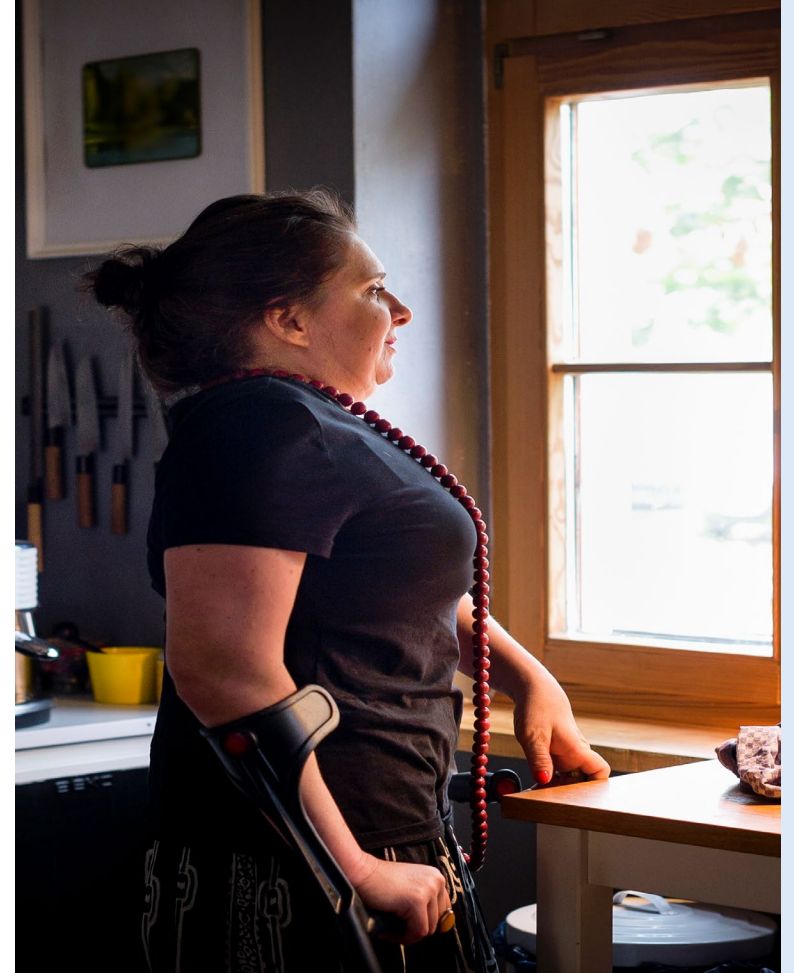


# Emerging Issues: Assistive Technology For Individuals with Physical and Developmental Disabilities

Assistive technology includes items that **increase independence**, **reduce the need for in person help**, or **make day to day tasks easier**. Assistive technology can include training, too.

## Examples include:

- Adaptive utensils, such as weighted silverware or swivel spoons, plates, cups
- Automatic stove shut-off
- Magnifying glass
- Long-handled shoehorn
- Tablets with apps to assist with schedules/task completion
- Vibrating reminder watch
- Tablet and software applications
- Voice-activated systems such as an Amazon Echo and add-ons





# How WA Cares Works

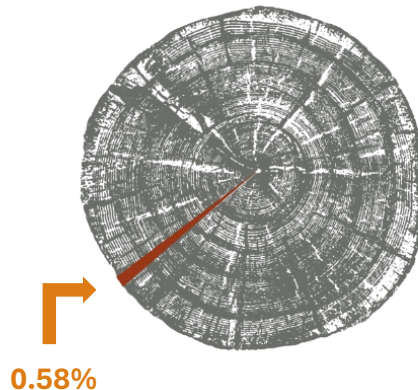
- Earned benefit
- Self-funded by worker contributions
- Works like an insurance program
- Only contribute while you're working
- Everyone covered at same rate regardless of pre-existing conditions
- No copays, no deductibles, and you never have to file a claim

## Typical Income:

\$50,091

## Typical Contribution:

\$291/year



## Contributions

**0.58%**

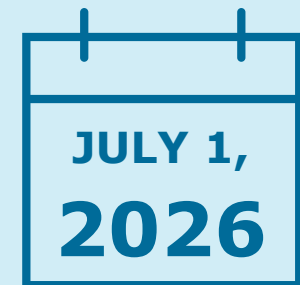
Amount workers  
contribute from wages



Contributions began

## Benefits

Starting at  
**\$36,500**  
(grows over time)



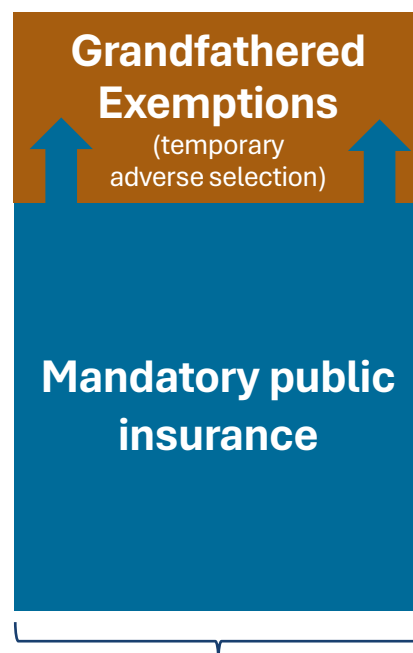
Benefits available

# Leveraging WA Cares to Create a More Affordable Supplemental Private LTC Insurance Market

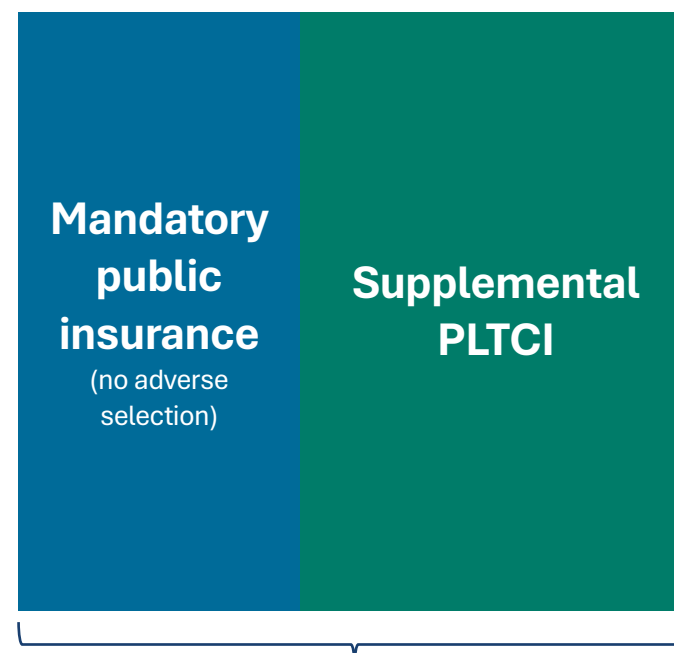
**WA Cares with  
Prospective PLTCI\*  
Exemptions**



**WA Cares with  
Grandfathered PLTCI  
Exemptions**



**WA Cares with  
Supplemental PLTCI**



Original State

Current State

Future State

\* Private Long-Term Care Insurance

# WA Cares Benefits Pilot Project

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- Up to **400 applicants** during the pilot but by law could have up to 500
  - Hopefully **150-200 beneficiaries** found eligible.
- **Pilot is limited to Lewis, Mason, Thurston and Spokane counties** and we are contracting with AAAs in those areas to support us in locating pilot participants.
- Opportunity to test:
  - Beneficiary eligibility determinations
  - Educational materials and systems to support service delivery
  - Provider payments



# WA Cares Implementation Update

## Timeline

- **January 6:** Pilot begins in Lewis, Mason, Thurston, and Spokane counties
- **April 1:** Annual statements become available
- **May 18:** Applications open for statewide launch
- **July 1:** Statewide benefit payments begin

## Customer experience resources

- Benefits guide
- Online account management
- WA Cares Provider Network Directory
- AAAs
- Community Assistance Network
- Benefits and Customer Care Center





# Workforce Development

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High School Home Care Aide Program

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Retention Toolkit

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Transportation Pilot

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Monthly Caregiver Newsletter

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Direct Care Pathways

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Bridging with Tribal Governments

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Workforce Navigators

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Remote Caregiving Pilot

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**Caregiver  
Careers**  
WASHINGTON

# Workforce Development

- New Website
- Caregiver Videos/Photos
- Social Media
- Workforce Spotlight Newsletter
- Radio Ads





# Workforce Shortage Solutions: Supporting Family Caregivers

- **Receiving Pay**
  - Same pay and benefits as other home care workers
- **Training & Education**
  - General and specialized training
  - Support groups & counseling
- **Other Supports**
  - Evidence-based caregiver assessment
  - Caregiver assistance services
  - Respite care
  - Specialized medical equipment, medical supplies, home modifications and assistive technology
- **Kinship Caregiver Supports**
  - Kinship Navigator Program
  - Kinship Caregivers Support Program

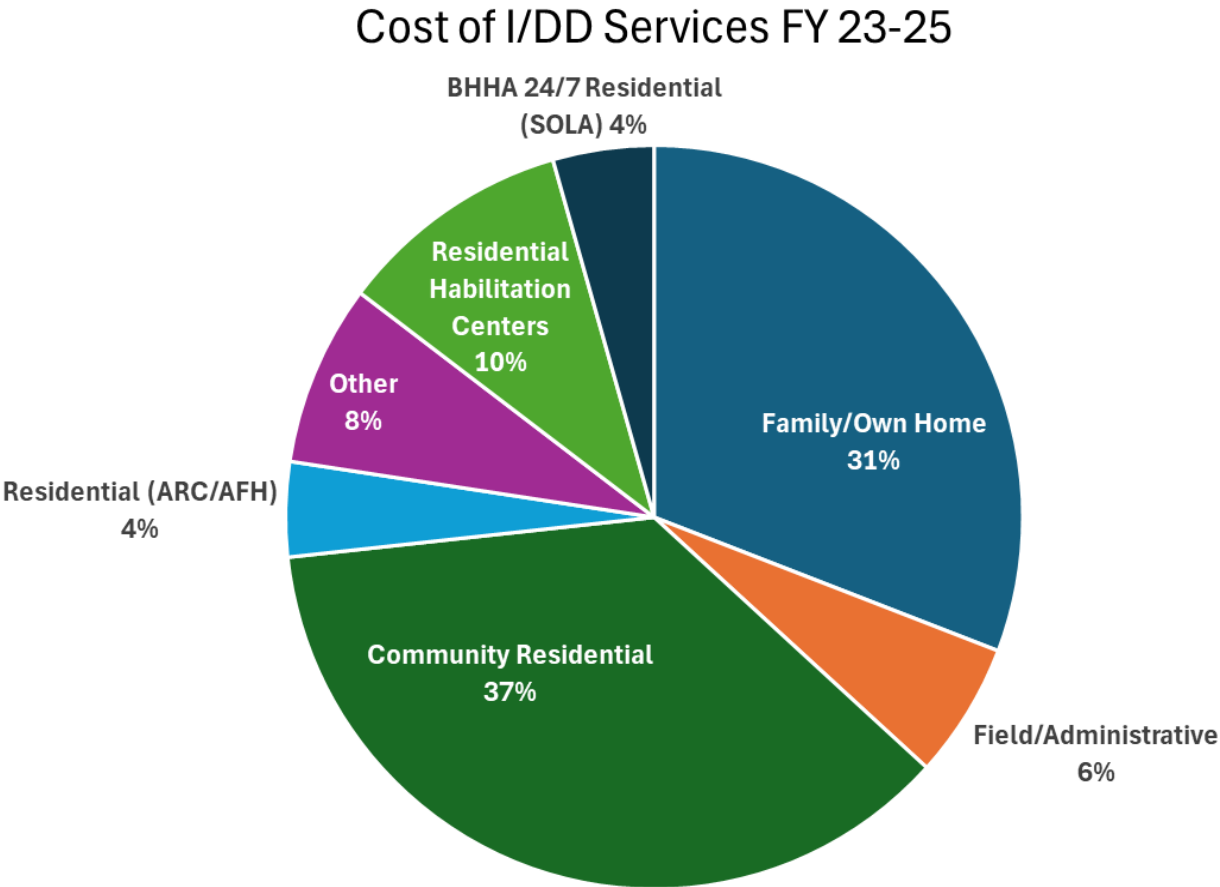
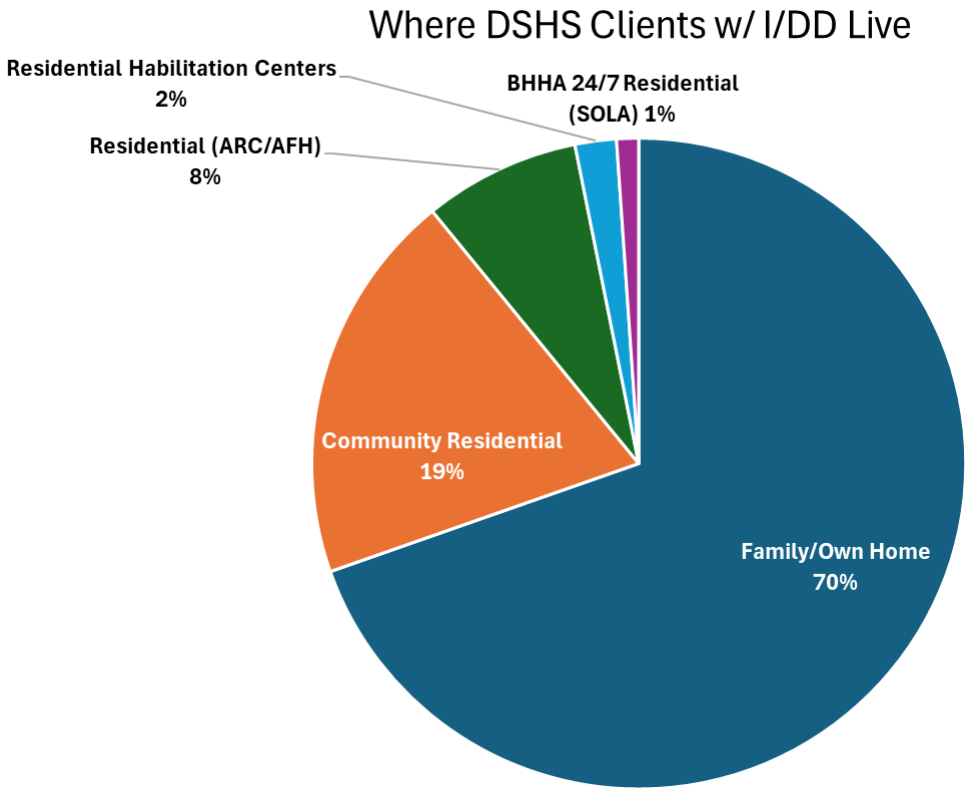


# Thank You

Bea Rector, Assistant Secretary  
Home and Community Living Administration  
[bea.rector@dshs.wa.gov](mailto:bea.rector@dshs.wa.gov)

# Supporting Clients To Live In Their Own Communities

More than 80% of DSHS clients with I/DD live in their family/own home



*\*\*As of May 1, 2025, RHCs and SOLAs are a part of BHHA*



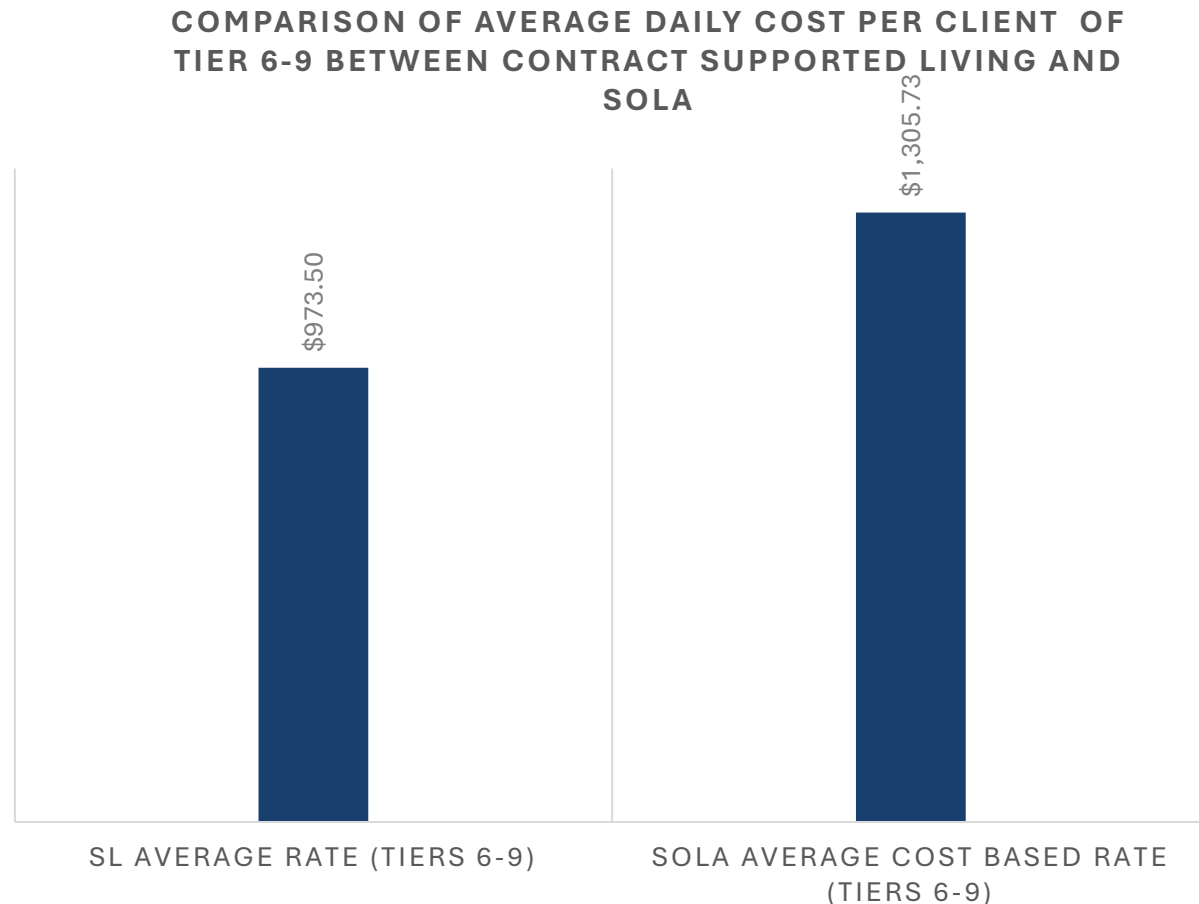


# Comparison of Cost of Contracted Supported Living and State Operated Living Alternatives (SOLA) for tiers 6 to 9

- Both contracted supported living and SOLA provide the same service and are regulated by the same WACs and requirements.
- SOLA is operated by the state with the state workforce. This accounts for the cost difference.

The cost comparison is captured for similar tiers. Majority of clients served by SOLA fall within the Tiers 6-9.

Tiered rate methodology means the method used to derive the individual's daily rate for provider reimbursement.



# Transitions to the Community

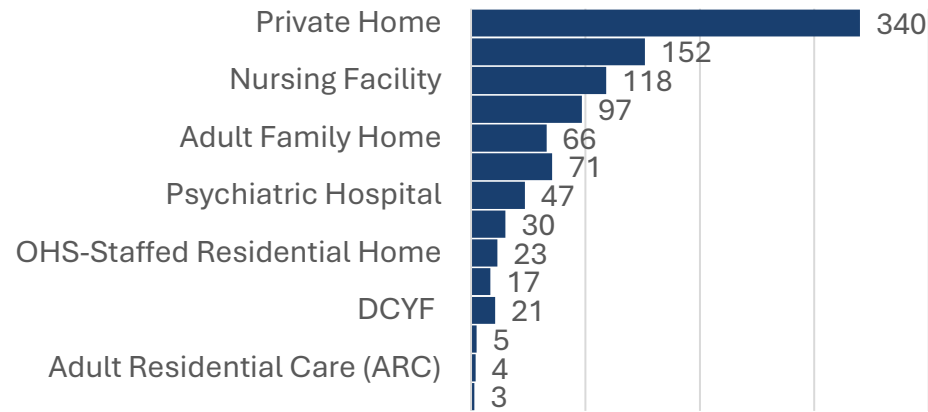
**DDCS implemented Transitional Care Management which is a standardized process to support successful moves to community settings**

FY  
2025

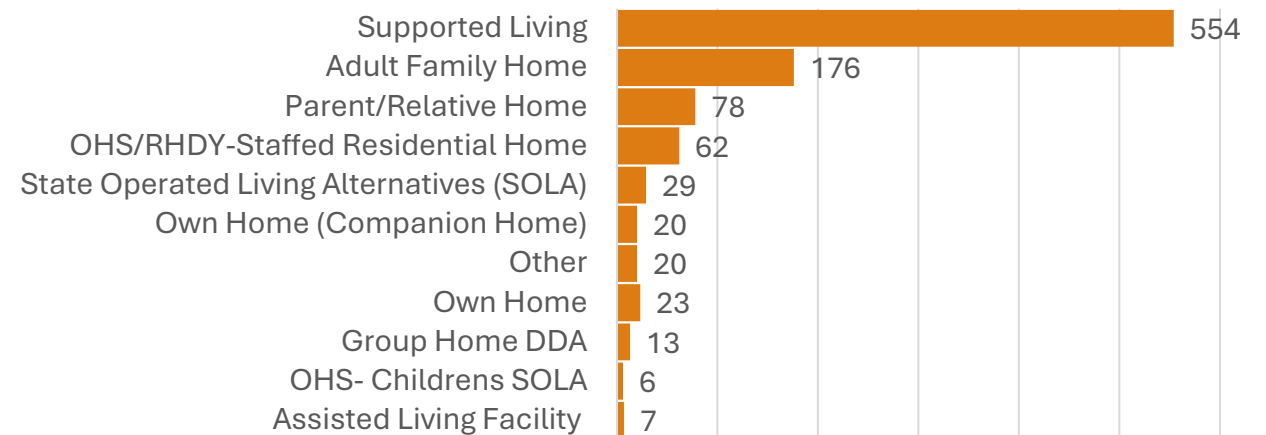
1451 clients supported to transition to community settings

410 Clients have completed a full year of post move support and engaged in their community in FY 2025

DDCS Clients **Transition from** Setting Types to the Community Settings (FY 25)



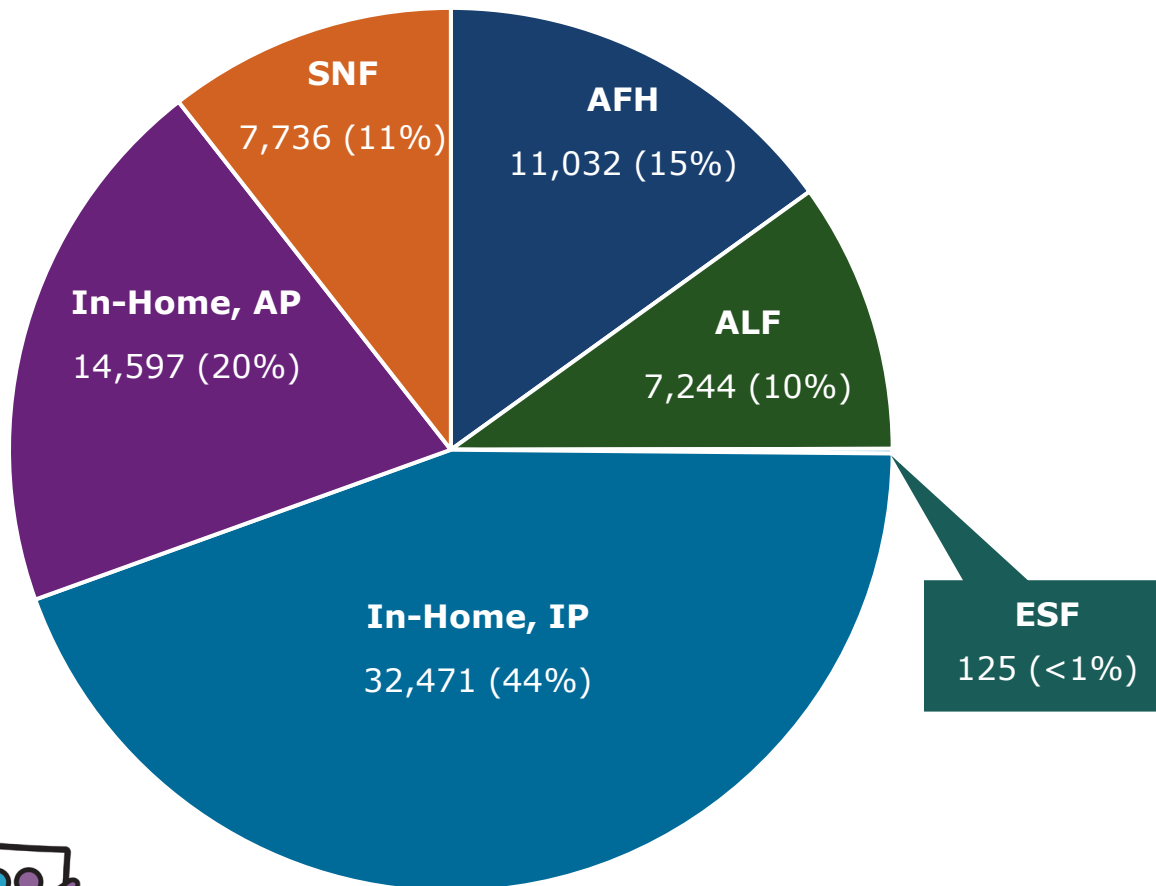
DDCS Clients **Transition to** Setting Types to Community Settings (FY 25)



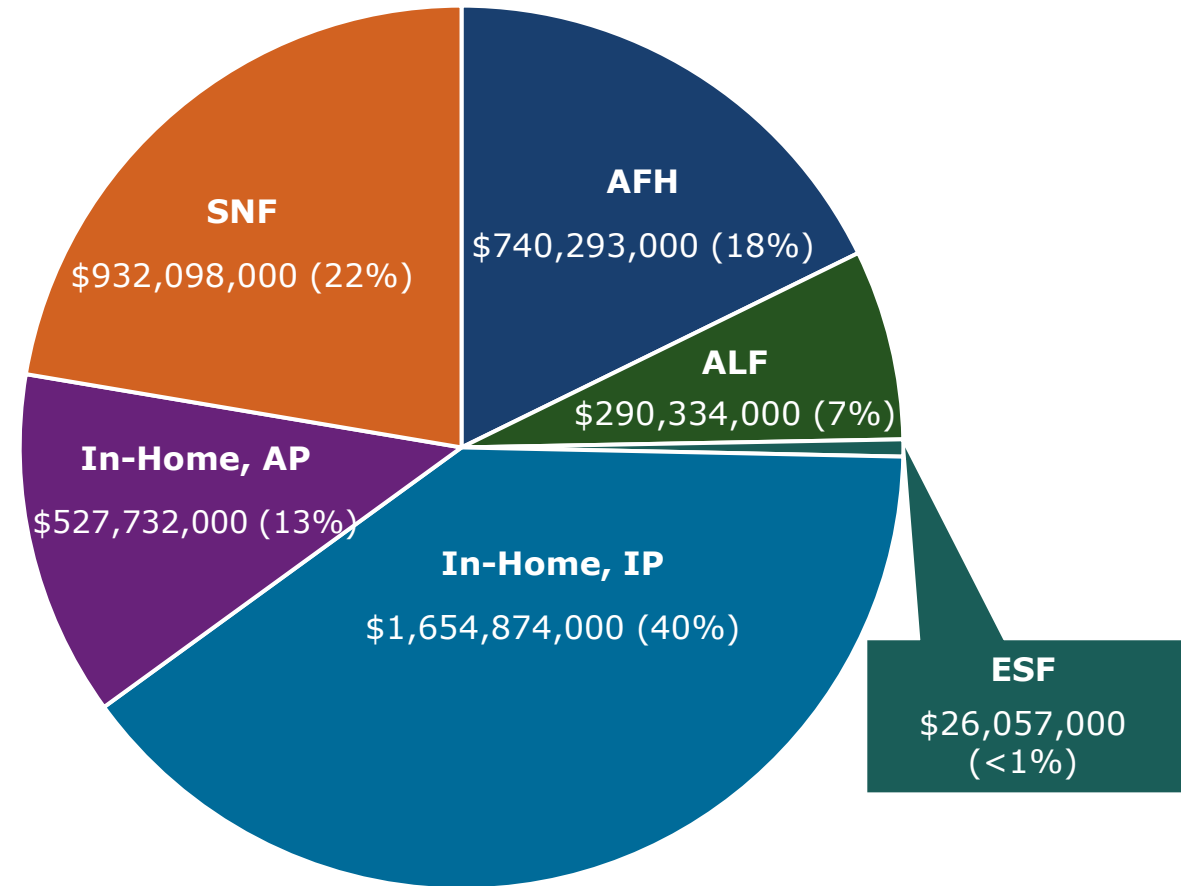
# Supporting Clients Live In Their Own Communities

65% of HCS clients live in their family/own home

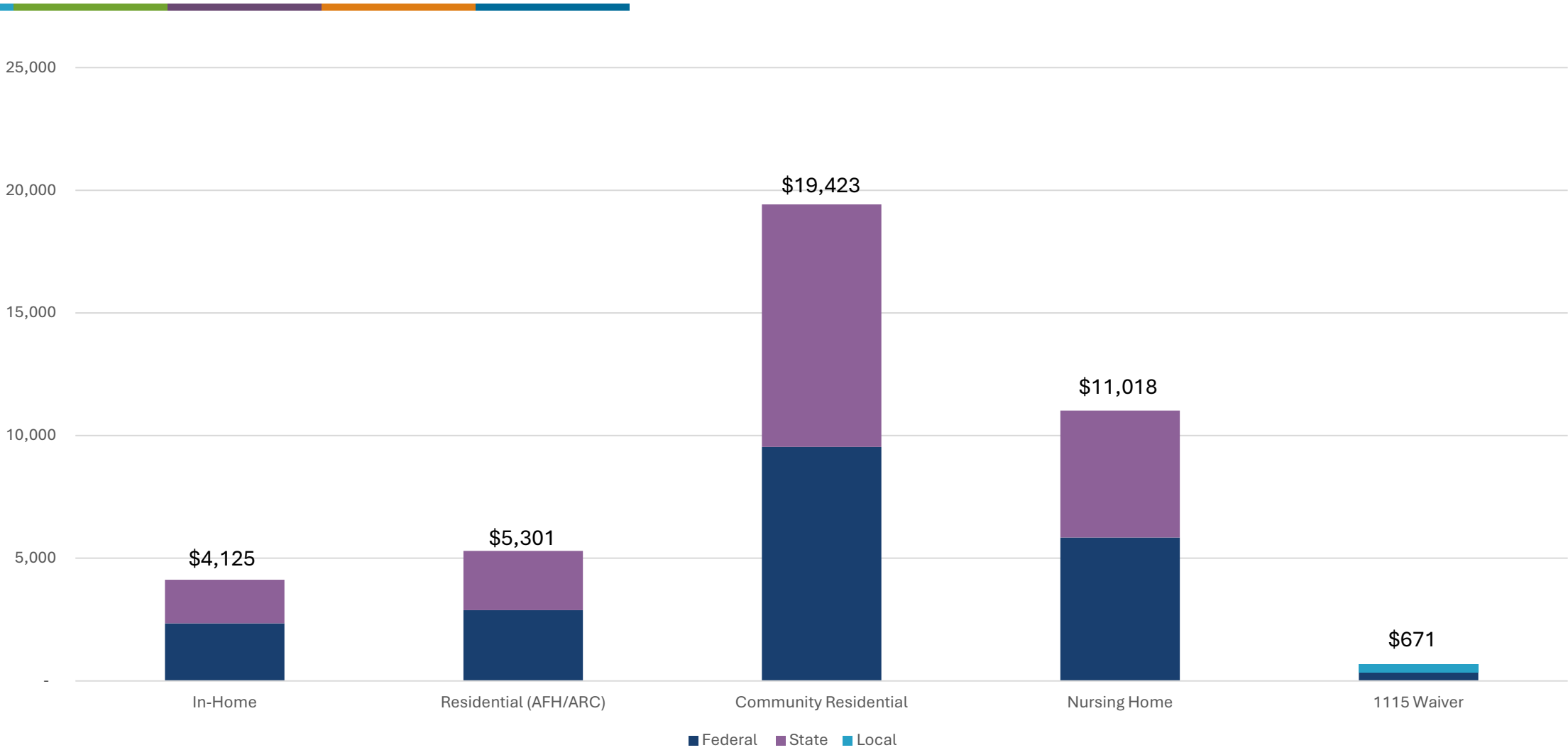
FY24 Average Clients by Setting



FY24 Expenditures by Setting



# In-Home Care is Cost Effective and Preferred

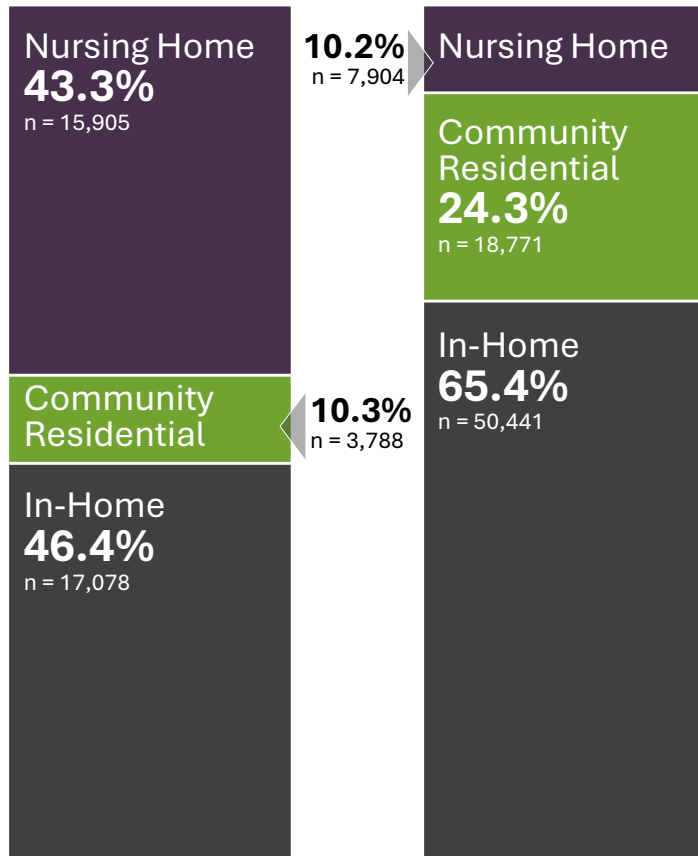


Monthly Per Capita Service Costs –  
Medicaid Long-Term Services and Supports  
*Summer 2025*

# Building Home and Community-Based LTSS Rebalancing Efforts

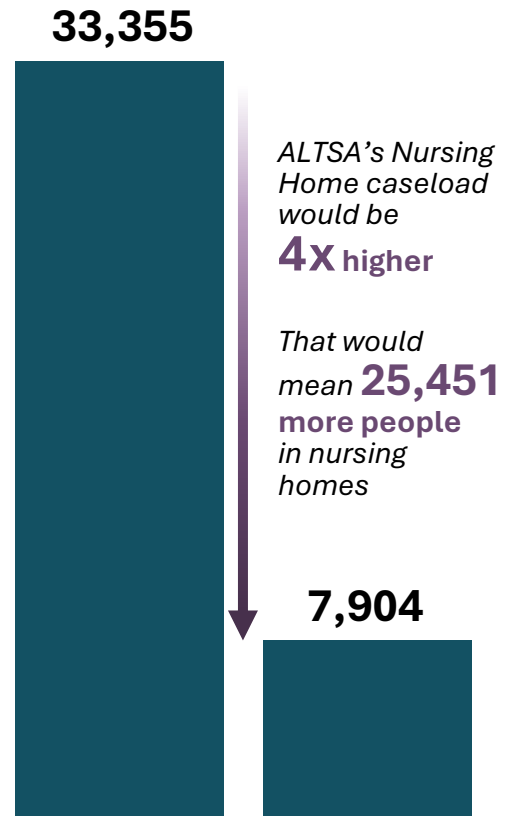
## Medicaid LTSS Caseload

### 1996 2025



## Reduced Nursing Facility Use

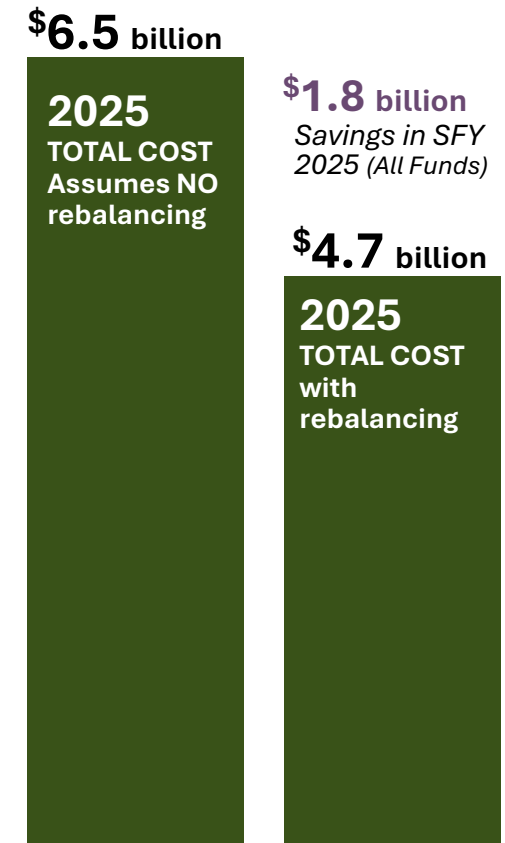
“With” and “Without” Rebalancing



Forecast SFY 2025 average monthly caseload.

## Cost Savings

“With” and “Without” Rebalancing



Estimated LTSS service expenditures with and without rebalancing. Rebalancing assessed relative to SFY 1996 LTSS utilization patterns, All Funds.

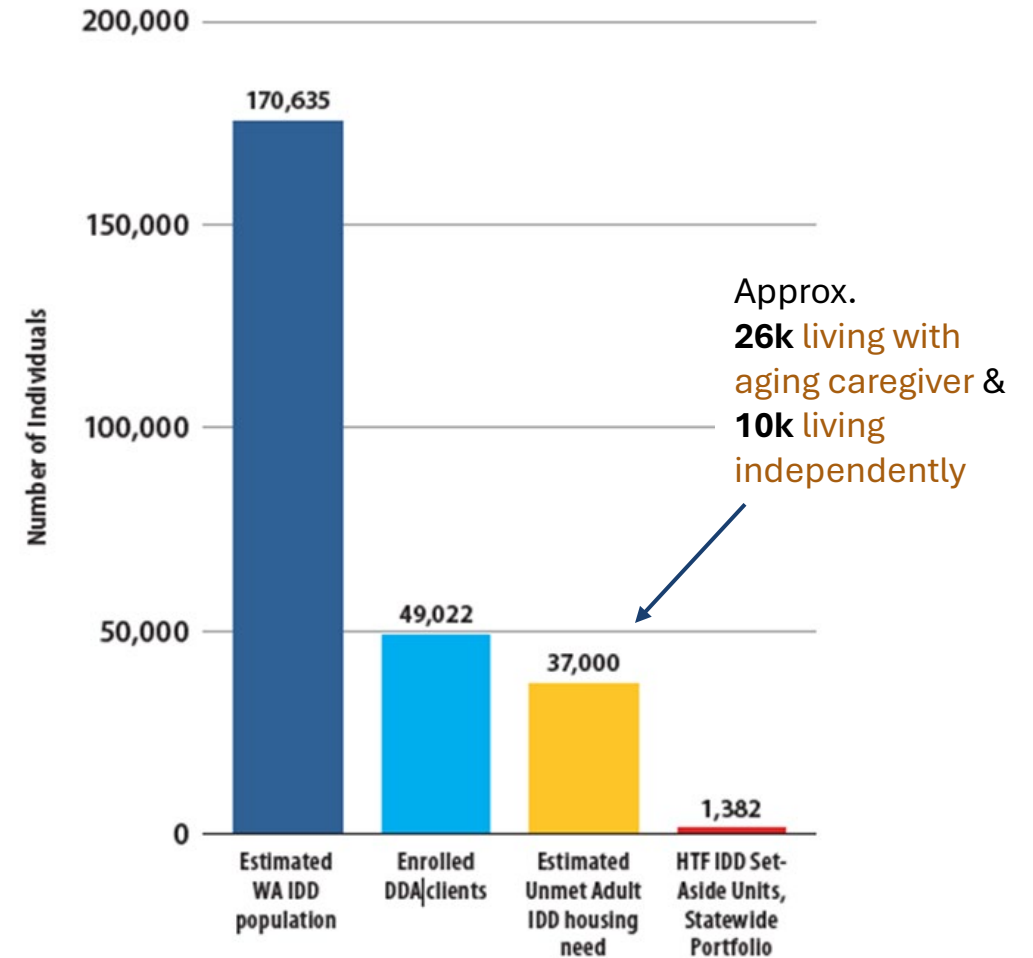
**SOURCE:** Washington State Department of Social and Health Services, Facilities, Finance, and Analytics Administration, Research and Data Analysis Division, April 2024.

# Housing is an unmet need for many people with I/DD

- 37,000** | Estimated unmet Adult I/DD housing need
- ~1,600** | Total HTF I/DD Set-aside Units, Statewide Portfolio since 1986
- 0** | DDCS does not have an I/DD housing subsidy program

Approx. **215 DD Clients** are homeless, as of Feb 3, 2025.

## 2021 WA IDD Population and Housing at a Glance



DATA SOURCE: ECO Northwest, Washington State Department of Social and Health Services, Developmental Disabilities Administration. May 2022





# HCLA Housing Programs & Ages Served

Service	Total Number of Clients	18-34	35-50	51-64	65+
Rental Subsidies for Individuals Exiting Nursing Homes (ALTSA Subsidy)	772	2%	10%	30%	58%
Rental Subsidies for Individuals Exiting/Diverting from State Hospitals (GOSH Subsidy)	583	25%	41%	26%	8%
Tenancy Supports for Individuals Exiting/Diverting from State Hospitals (GOSH Service)	1319	24%	46%	22%	8%
Emergency Rental Assistance	1422	5%	20%	35%	40%
Motel Interim Stays for Transitions	333	24%	34%	30%	12%
HUD Vouchers (Federal) *	1376	3%	27%	58%	12%