

Washington State Department of Social and Health Services

Transforming Lives

Medicaid: Beyond the Silos Series
*Home and Community Services: System-Wide Coordination
to Improve Care and Hold Down Costs*

Bea-Alise Rector, Director

*Home and Community Services
Aging and Long-Term Support Administration*

Washington State Department of Social and Health Services

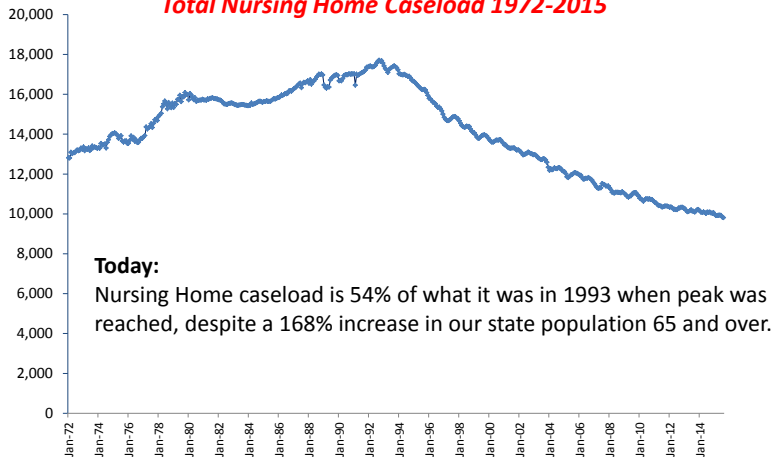
Access to Quality & Cost Effective Services

AARP ranks Washington state **second**
in the nation; for services to older adults,
people with disabilities, and family caregiving.

*Nationally, our long-term care spending is **34th***

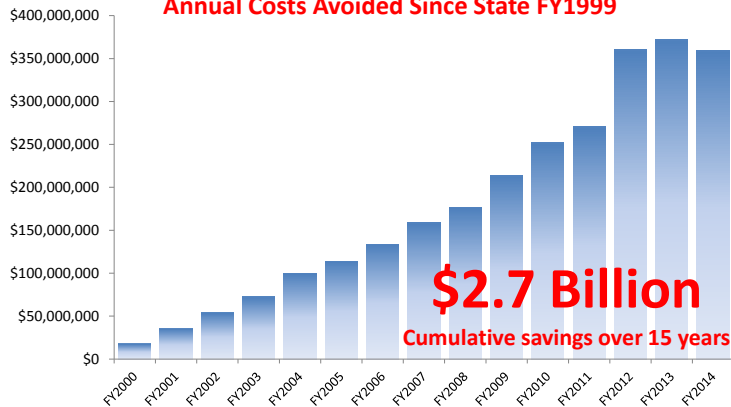
Rebalancing Washington State

Total Nursing Home Caseload 1972-2015



Home and Community Services Result in Taxpayer Savings

Annual Costs Avoided Since State FY1999



Source: DSHS RDA, D. Mancuso, December 2014.

Elements of Washington's Success



Targeting Services Can Address Diverse Needs and Keep Services Affordable for Taxpayers

“The Right Support at the Right Time”

- Long-term care is now six percent of Washington State's budget
- Long-term care spending increases an average of 12% every biennium
- The state's aging population will nearly double between 2015-2035

Continued success is contingent on continued innovation

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HCBS: Improving Outcomes *and* Controlling Costs

- Provide wellness education and training through existing 1915(c) waiver
- Offer skills acquisition training and assistive devices to clients through new state plan option (1915 (k) Community First Choice)
- Improve worker skills and interventions for clients who are high-risk
- Provide supports to unpaid caregivers services to reduce stress and delay need for Medicaid



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New Initiatives Require Federal and Systems Flexibility

- Integrate trained caregivers as a part of the client's health care "team"
- 1115 demonstration waiver
 - ✓ Support unpaid family caregivers with targeted supports such as respite and training
 - ✓ Target limited supports for those "at risk" of Medicaid spend down
 - ✓ Increase the threshold to qualify for nursing home care vs. community care



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