

Rate Setting Board

May 29, 2024

9:00 a.m. – 3:00 p.m.

In Person/Zoom Attendance

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Transforming lives



Transforming lives

TAB 1

Consumer Directed Employer Rate Setting Board

Meeting #5

May 29, 2024

Blake Office Park West 4450 10th Avenue SE, Lacey

Roosevelt / Chelan Rooms

9:00 am – 3:00 pm

Agenda

Time	Topic	Presenter(s)
9:00-9:45	<ul style="list-style-type: none"> ➤ Welcome ➤ Approval of Minutes 05.16.2024 ➤ Opening Remarks/Old Business ➤ Review of follow-up information 	Chair
Retirement		
9:45-10:15	➤ Benefits Group	Benefits Group
10:15-10:30	➤ Union	SEIU 775
10:30-10:45	➤ Board Discussion	All
10:45-11:00	Break	
Training		
11:00-11:30	➤ Benefits Group	Benefits Group
11:30-12:00	➤ Board Discussion	All
12:00-1:00	Lunch	
Carina		
1:00-1:20	➤ Benefits Group	Benefits Group
1:20-1:35	➤ Board Discussion	All
1:35-1:45	➤ Union	SEIU 775
1:45-2:00	➤ Board Discussion	All
Other Benefits		
2:00-2:30	➤ Union	SEIU 775
2:30-2:45	➤ Board Discussion	All
2:45-3:00	➤ Public Comment	Chair/Facilitator
3:00	Adjourn	Chair

Please note the agenda times may vary due to the flow of the meeting conversation.

Rate Setting Board Members

Charles Reed	Chair
Adam Glickman*	Exclusive Bargaining Unit Designee
Bea Rector*	DSHS Representative
Ben Bledsoe*	CDE Representative
Cynthia Hollimon*	Governor's Office Representative
Rep. Kelly Chambers^	House of Representatives (R)
Rep. Steve Tharinger^	House of Representatives (D)
Senator Ron Muzzall^	Senate (R)
Senator Annette Cleveland^	Senate (D)
Georgiann Dustin^	State Council on Aging Representative
Tammy Bowen^	People with Intellectual or Developmental Disabilities Organization
Open Position^	People with Disabilities Organization
Eric Erickson^	Licensed Home Care Agency
Nellie Prieto^	Home Care Worker

*Voting member, ^Advisory member

Rate Setting Board Meeting Schedule

April 22, 2024 9:00am – 3:00pm	In Person/Zoom
April 24, 2024 9:00am – 3:00pm	In Person/Zoom
May 6, 2024 9:00am – 3:00pm	In Person/Zoom
May 17, 2024 9:00am – 3:00pm	In Person/Zoom
May 29, 2024 9:00am – 3:00pm	In Person/Zoom
June 5, 2024 9:00am – 3:00pm	In Person/Zoom
June 13, 2024 9:00am – 3:00pm	In Person/Zoom
July 8, 2024 9:00am – 3:00pm	In Person/Zoom
July 25, 2024 9:00am – 3:00pm	In Person/Zoom
August 5, 2024 9:00am – 3:00pm	In Person/Zoom

TAB 2



Transforming lives

Rate Setting Board

[Approved By-Laws](#)

[Approved Charter](#)

[Approved Policy Selecting Chairperson](#)

[Approved Policy Establishing and Submitting Rates](#)

TAB 3

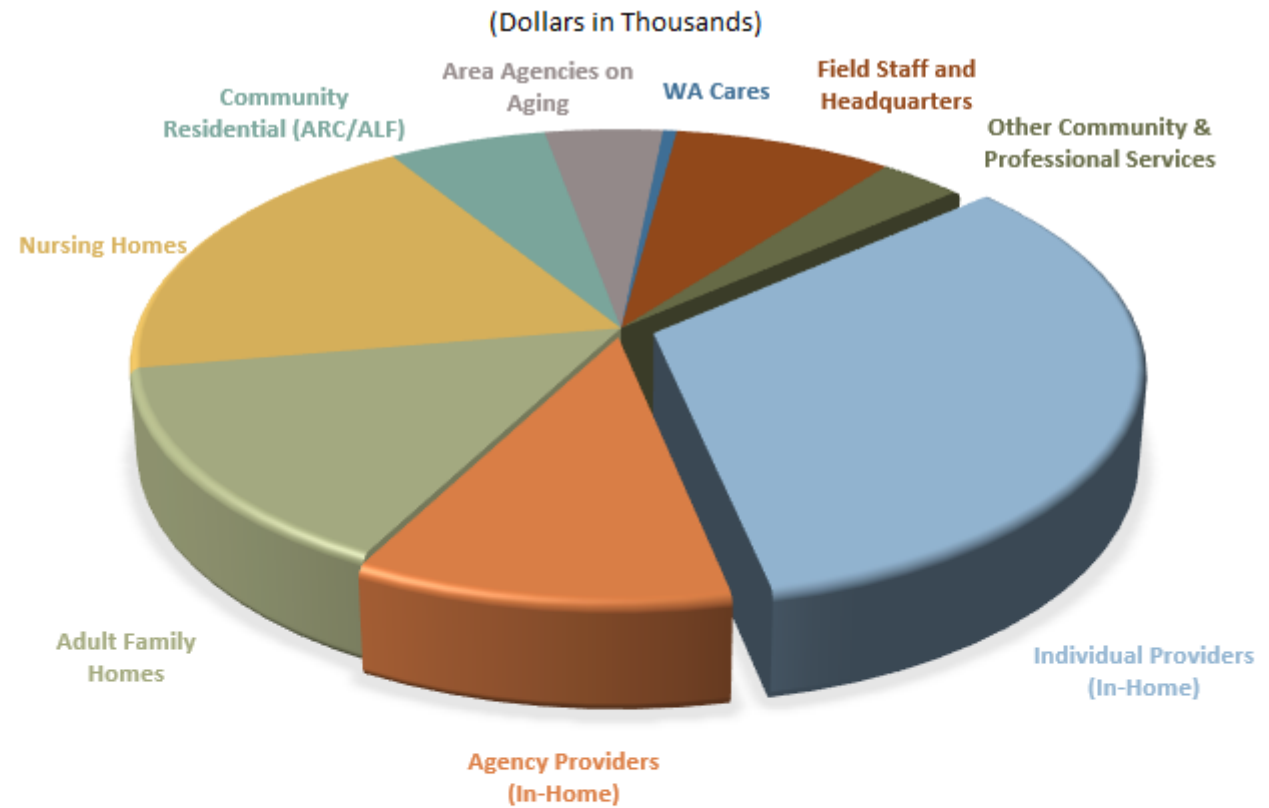
History of Individual Provider (IP) Funding

Jonathon G. Smith, Rates Data Administrator

Office of Rates Management

Management Services Division, ALTSA

AL TSA 23-25 Biennium Budget Summary



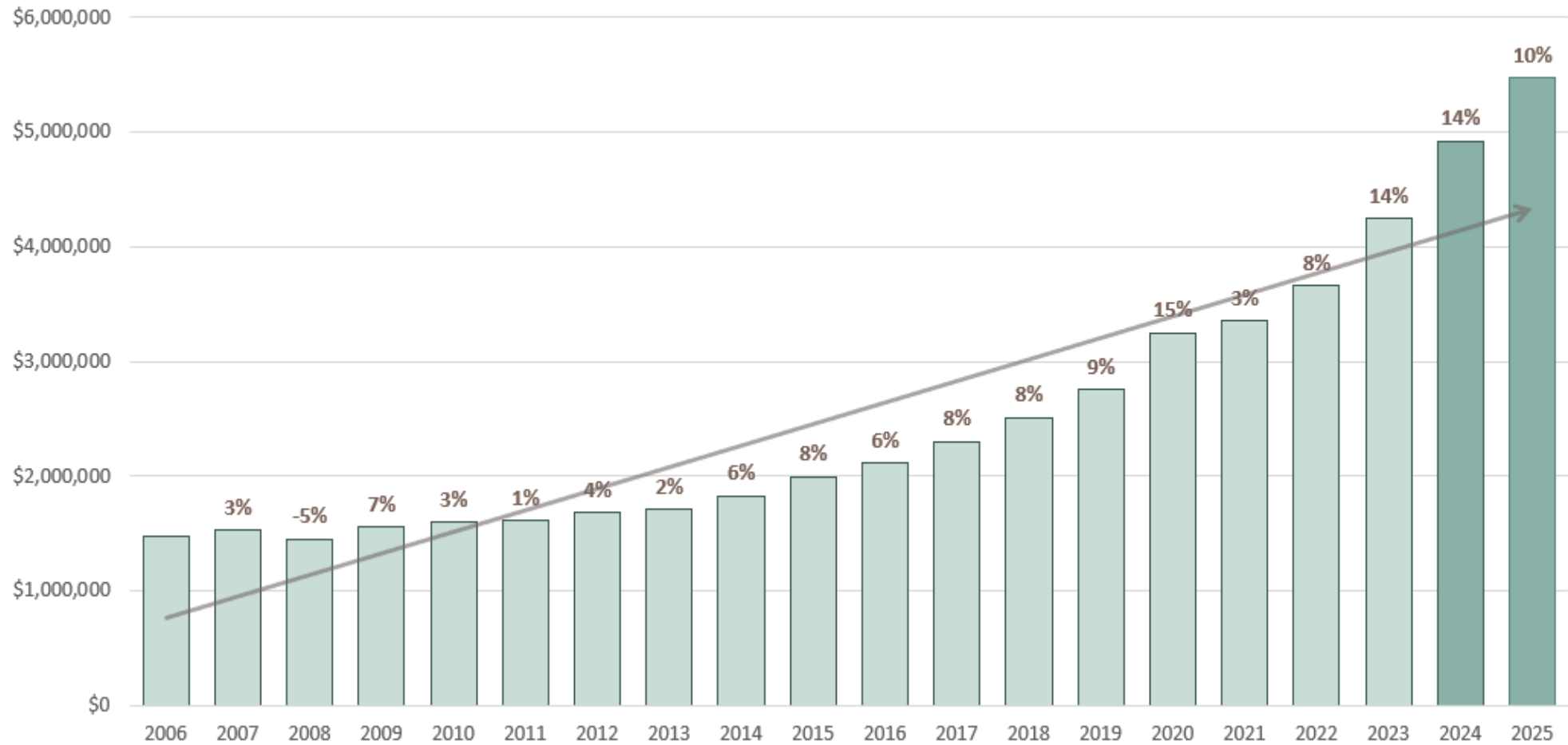
2023-25 Budget

(2024 Supplemental included)

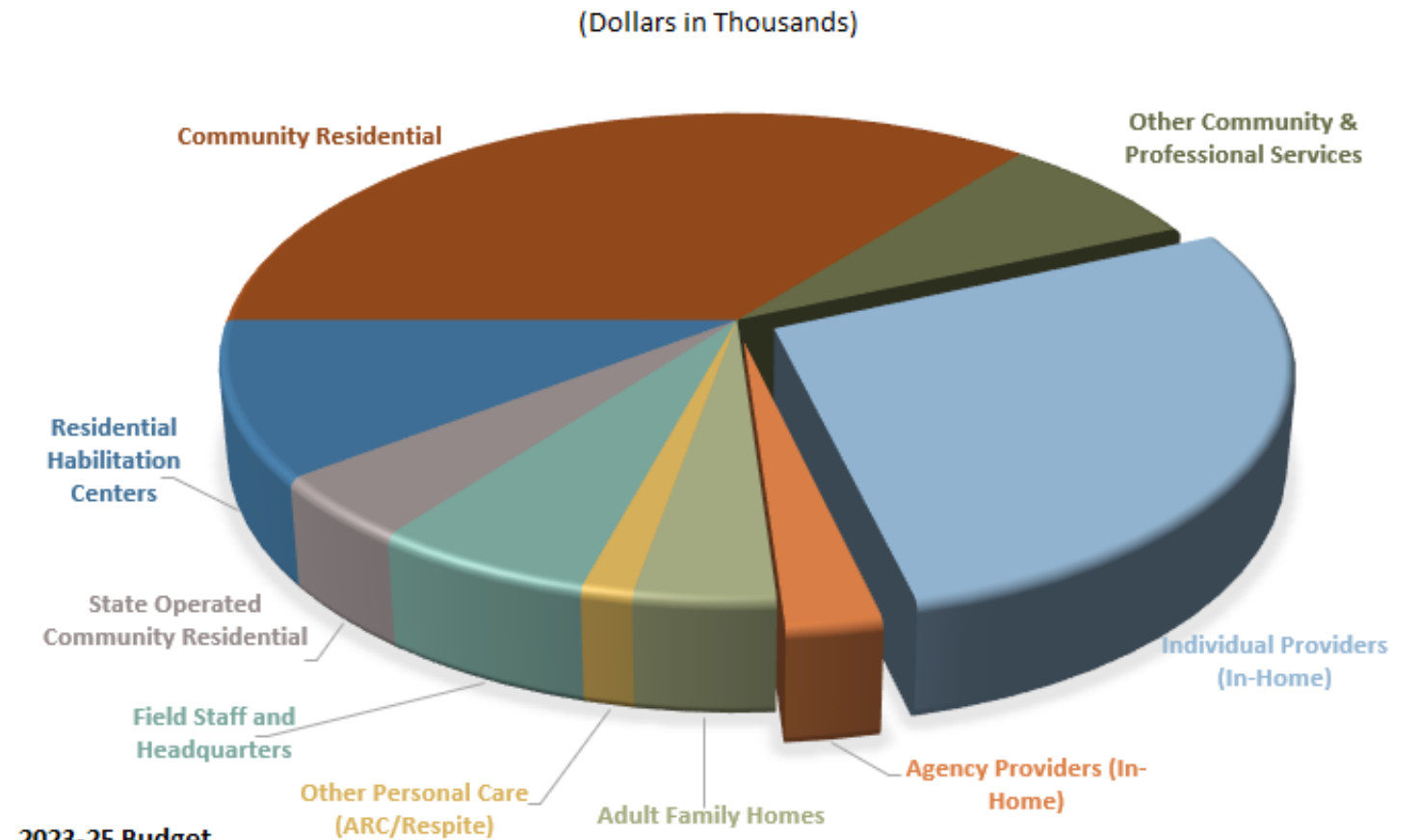
	FTEs	GF-S	Other	Total
Individual Providers (In-Home)	0.0	1,464,182	-	3,439,736
Agency Providers (In-Home)	0.0	488,061	-	1,146,579
Adult Family Homes	0.0	670,657	1,978	1,504,322
Nursing Homes	0.0	796,136	134,084	1,963,480
Community Residential (ARC/ALF)	0.0	288,592	202	621,536
Area Agencies on Aging	0.0	243,335	-	463,885
WA Cares	61.4	-	53,701	53,701
Field Staff and Headquarters	2707.7	413,274	55,301	863,936
Other Community & Professional Services	18.1	168,383	-	331,671
TOTAL	2787.1	4,532,620	245,266	10,388,845

ALTA Budget History by Fiscal Year

(Dollars in Thousands)



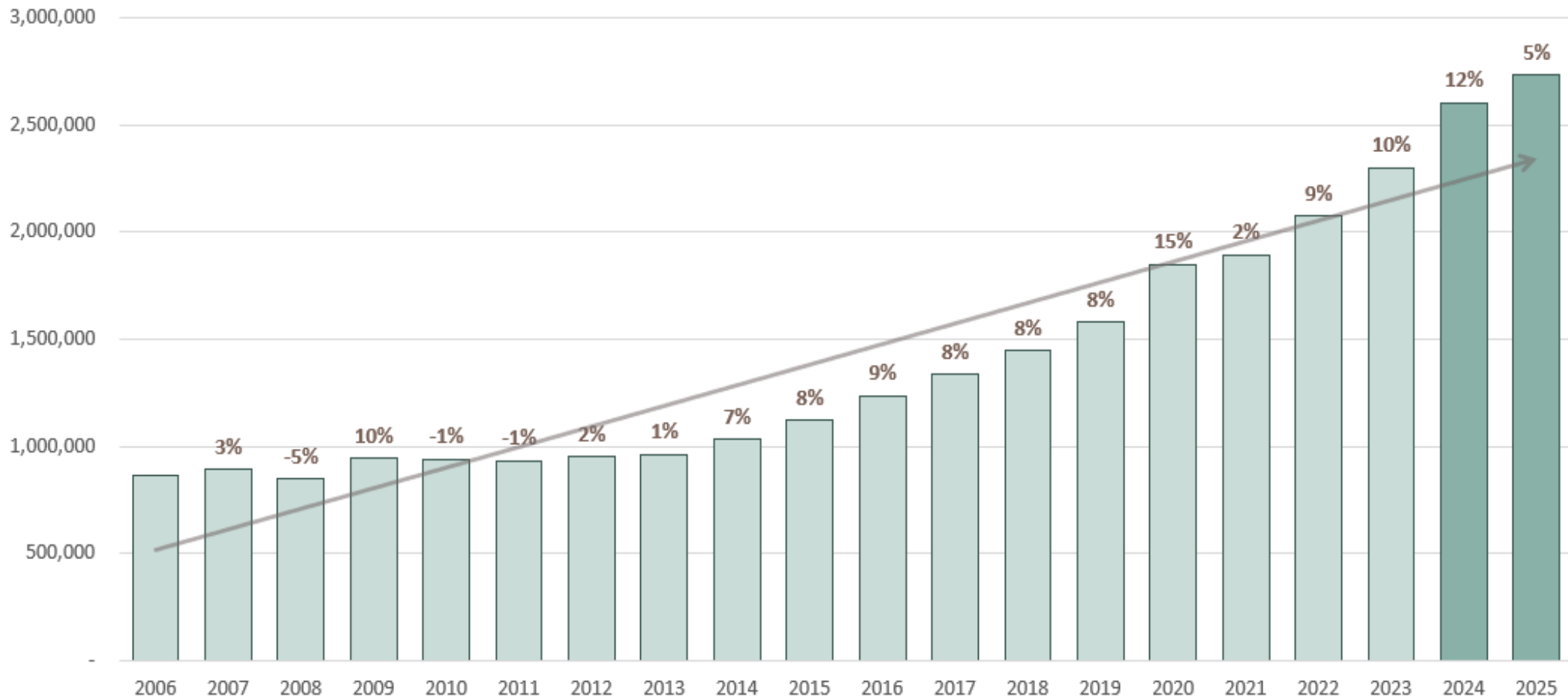
DDA 23-25 Biennium Budget Summary



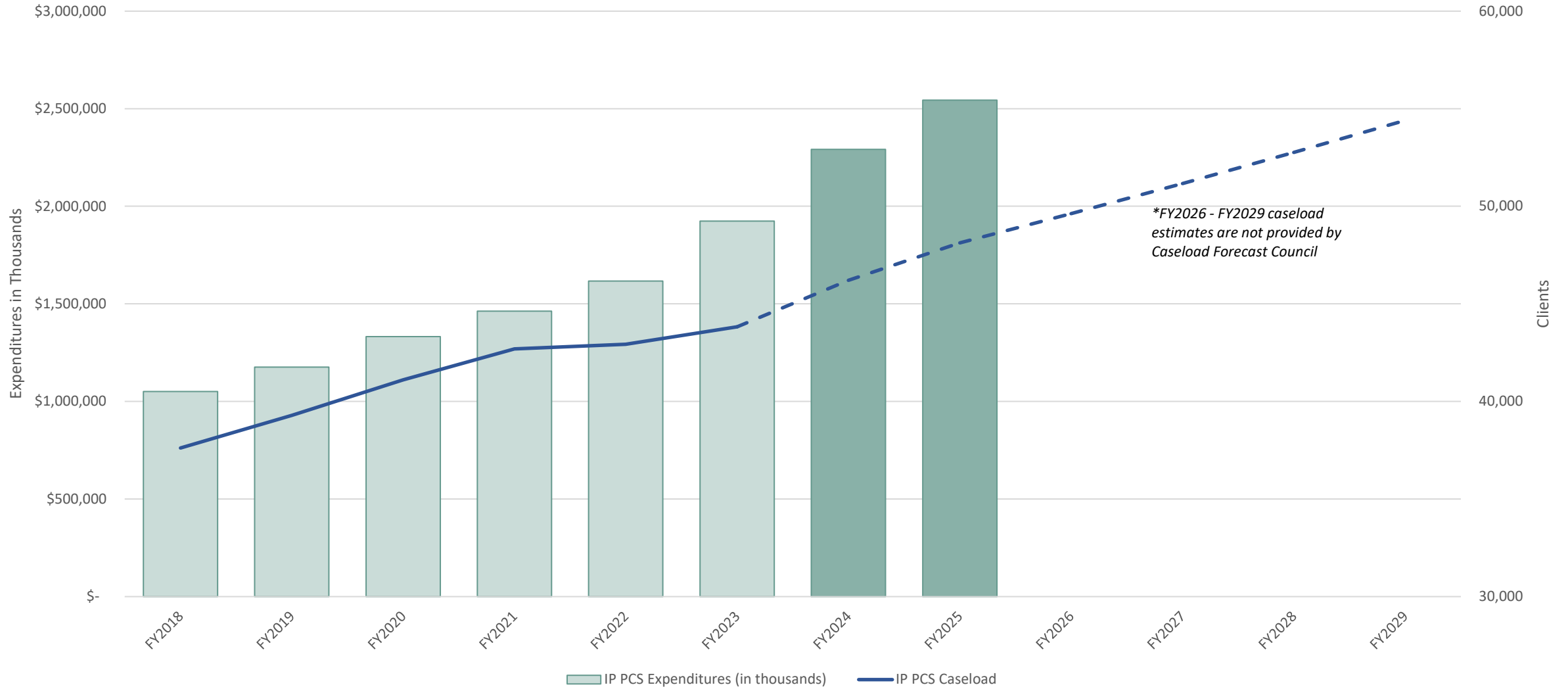
2023-25 Budget (2024 Supplemental included)	FTEs	GF-S	Other	Total
Individual Providers (In-Home)	0.0	659,473	-	1,493,317
Agency Providers (In-Home)	0.0	60,712	-	139,975
Adult Family Homes	0.0	93,087	434	206,767
Other Personal Care (ARC/Respite)	0.0	41,194	-	75,694
Field Staff and Headquarters	1230.9	183,437	-	323,473
State Operated Community Residential	1086.6	126,413	100	230,907
Residential Habilitation Centers	1948.0	279,729	19,488	554,335
Community Residential	0.0	955,363	3,524	1,904,781
Other Community & Professional Services	0.0	208,091	32,120	406,947
TOTAL	4265.5	2,607,499	55,666	5,336,196

DDA Budget History by Fiscal Year

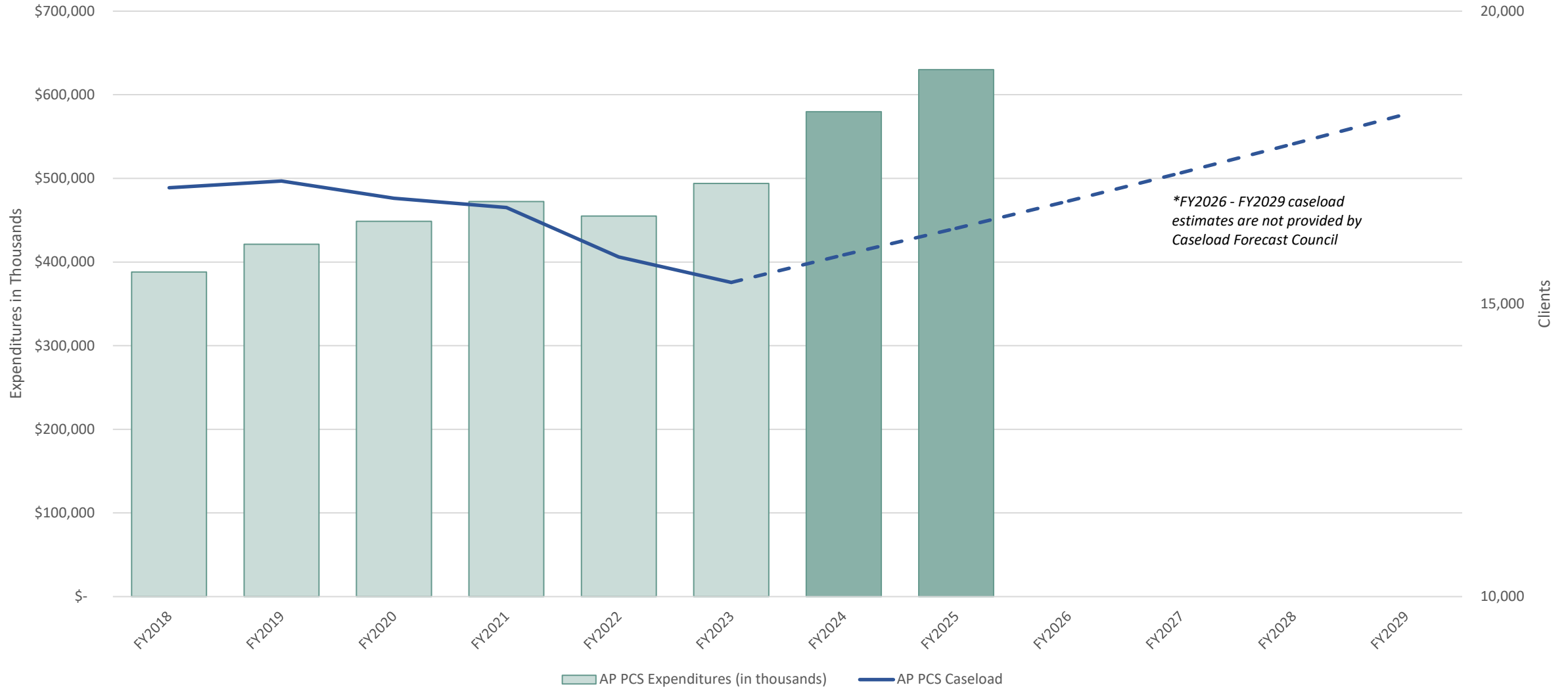
(Dollars in Thousands)



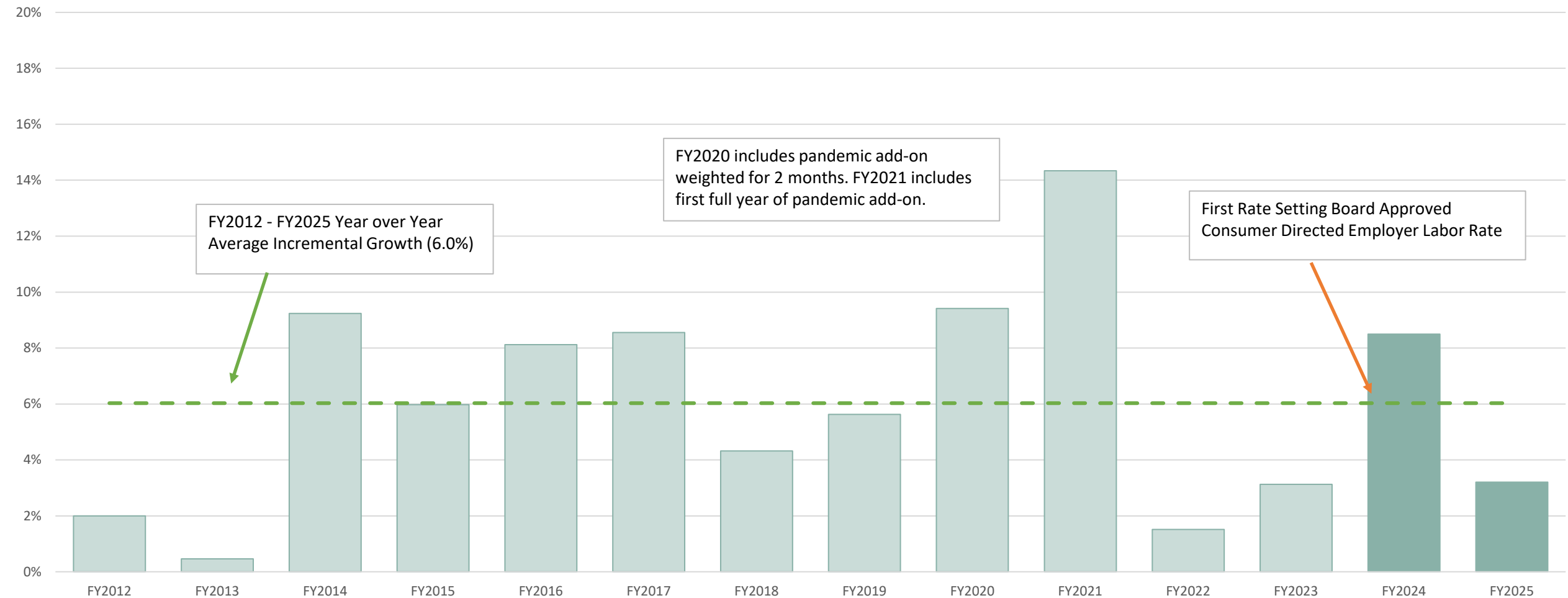
Individual Provider Personal Care Services (PCS) Caseload & Expenditures



Agency Provider Personal Care Services (PCS) Caseload & Expenditures



Individual Provider Incremental “Labor” Rate Growth, Year over Year



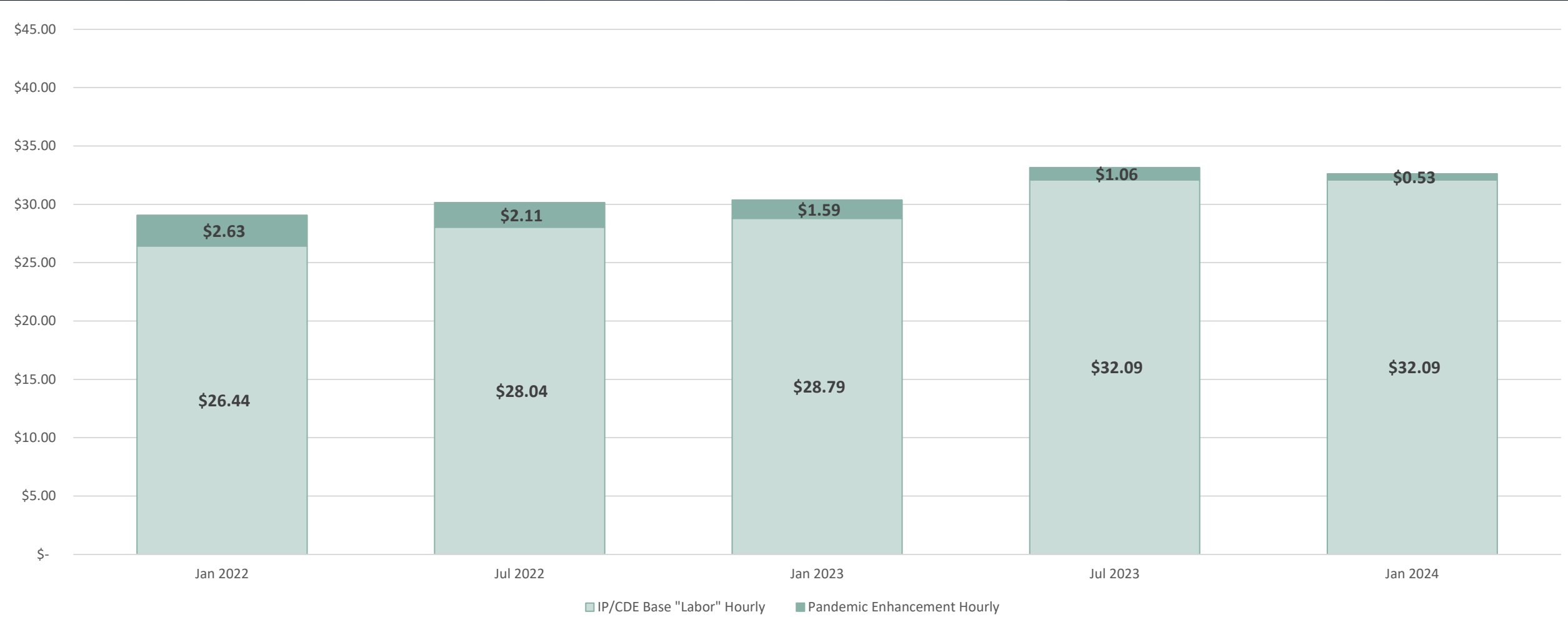
FY2012 - FY2025 Year over Year Average Incremental Growth (6.0%)

FY2020 includes pandemic add-on weighted for 2 months. FY2021 includes first full year of pandemic add-on.

First Rate Setting Board Approved Consumer Directed Employer Labor Rate

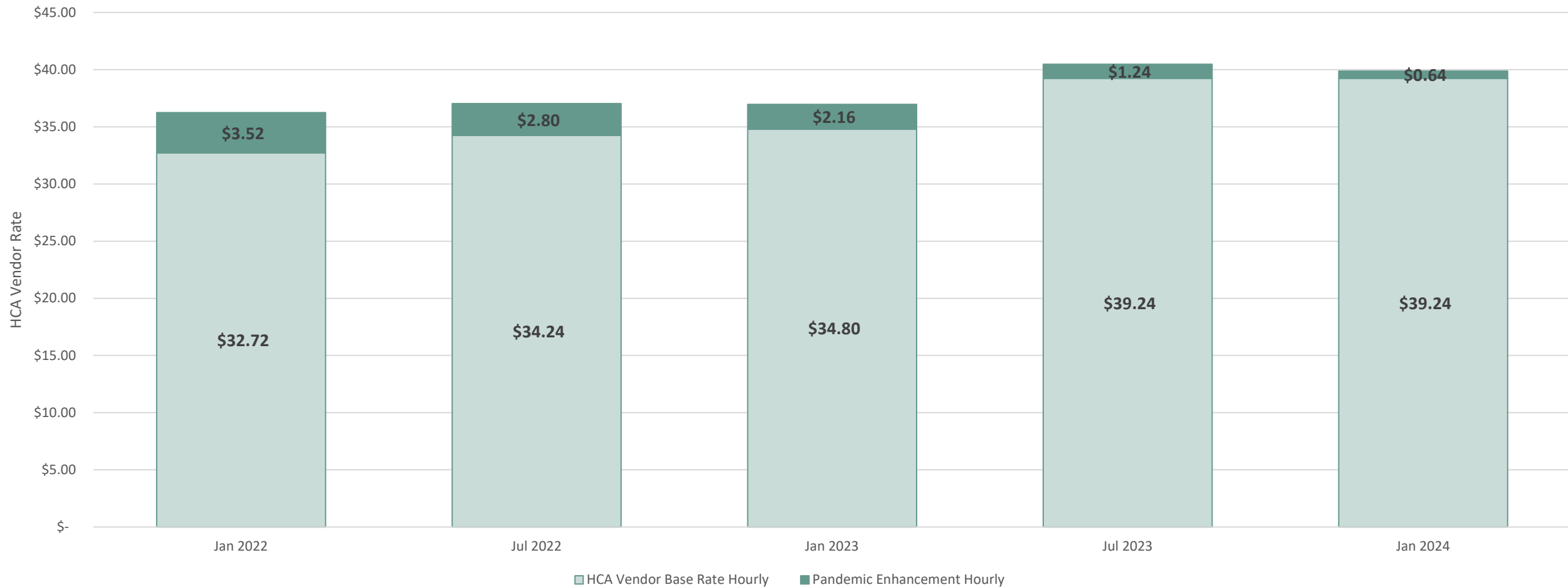
Note: Rate comparisons do not include PPE or Overtime. Otherwise, historical rates include the same considerations, when available, as current CDE labor rate structure.

IP/CDE "Labor" Rate Pandemic Enhancement Impact



Notes: Values represent weighted fiscal year averages before rounding.
July 2022 forward represents CDE rate.

Home Care Agency Hourly Vendor Rate Pandemic Enhancement Impact



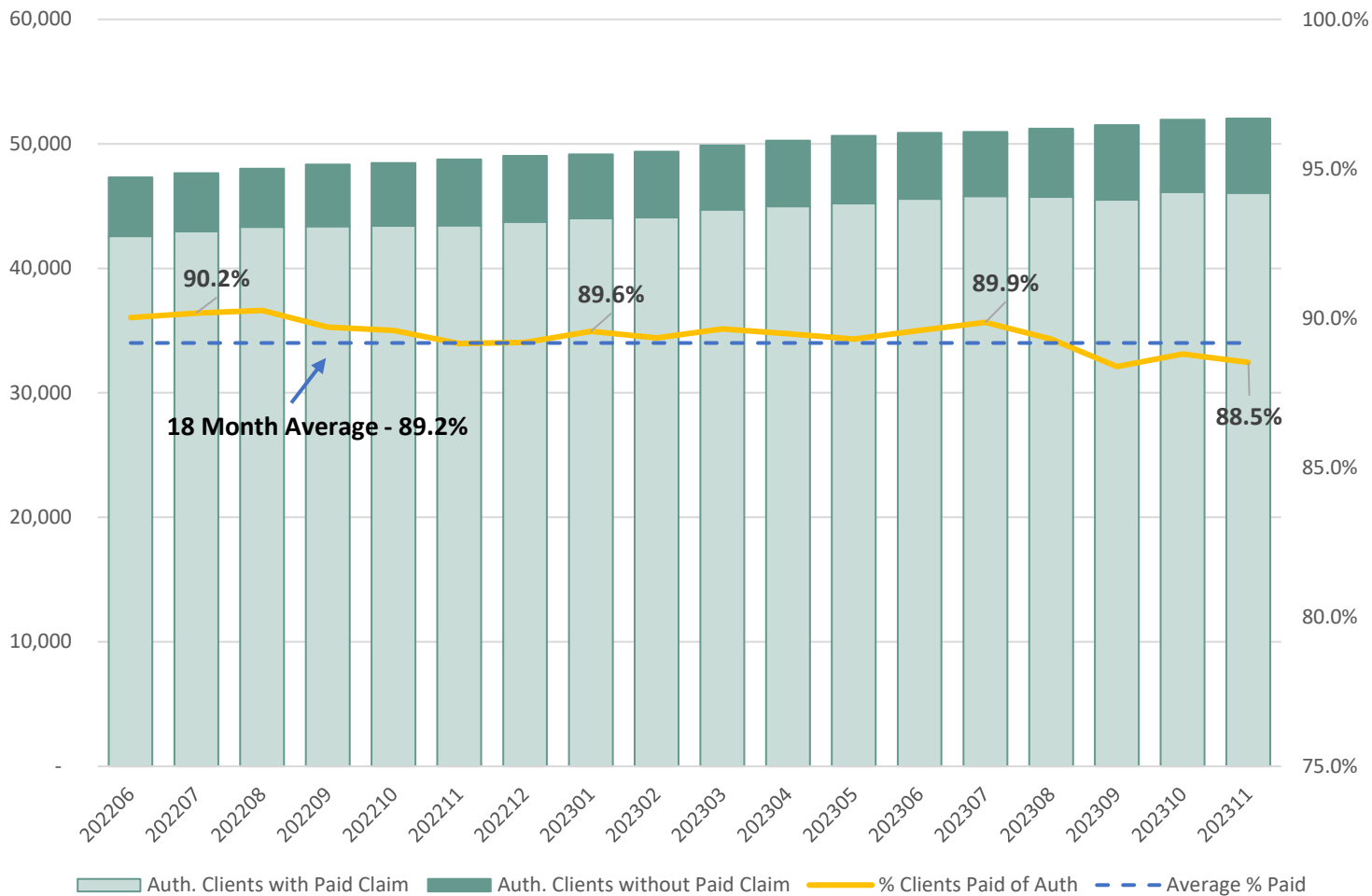
Thank You

Jonathon G. Smith, Rates Data Administrator

Jonathon.Smith@dshs.wa.gov

TAB 4

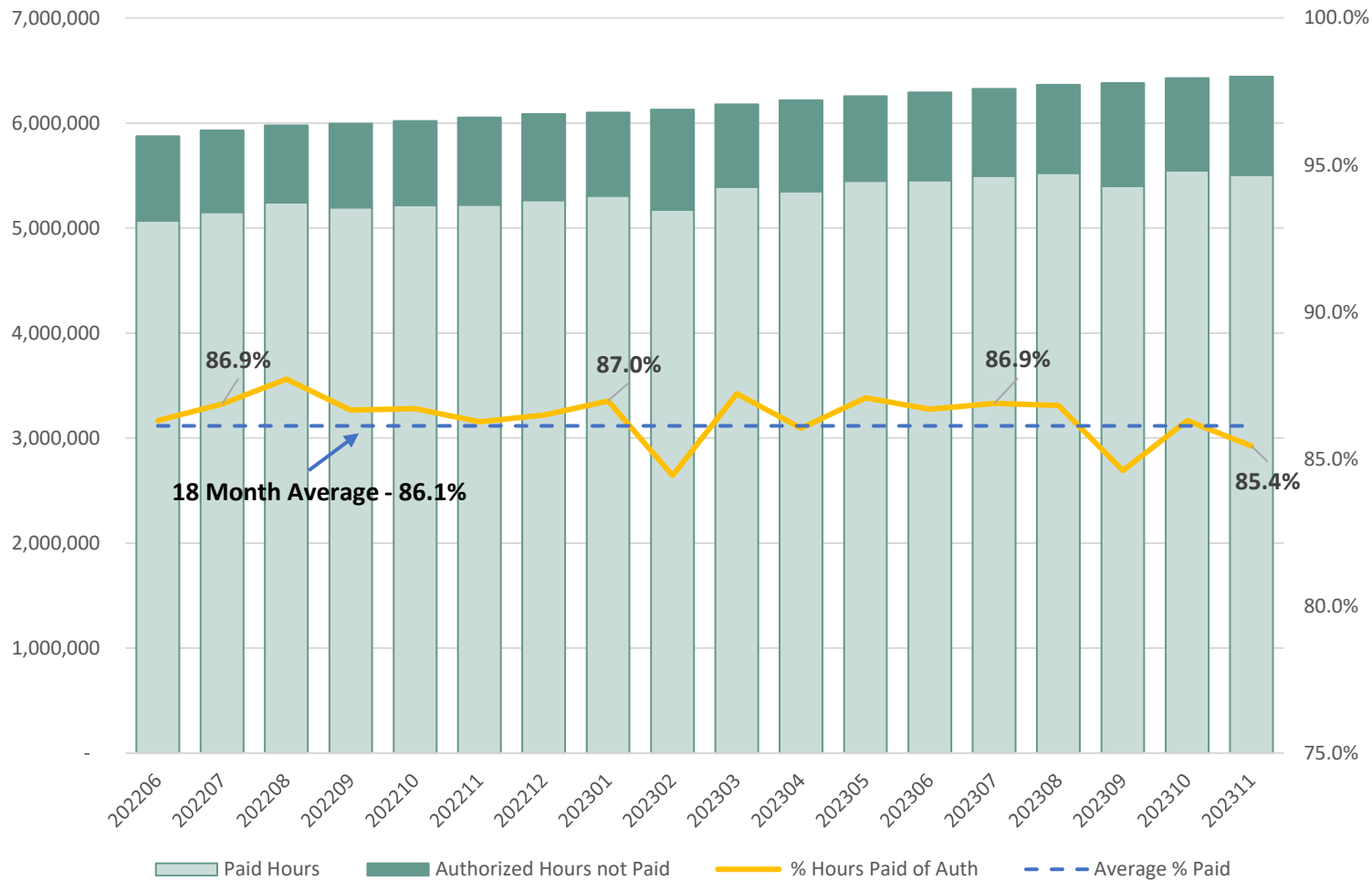
CDE Personal Care Services (PCS) Authorized vs. Paid – Total Clients



MOS	Distinct Authorized Clients	Distinct Paid Clients	Percent of Authorized Clients with a Paid Claim
202206	47,299	42,576	90.0%
202207	47,650	42,966	90.2%
202208	47,993	43,318	90.3%
202209	48,350	43,371	89.7%
202210	48,455	43,412	89.6%
202211	48,747	43,457	89.1%
202212	49,040	43,739	89.2%
202301	49,153	44,020	89.6%
202302	49,364	44,103	89.3%
202303	49,887	44,716	89.6%
202304	50,258	44,970	89.5%
202305	50,649	45,229	89.3%
202306	50,873	45,576	89.6%
202307	50,966	45,795	89.9%
202308	51,225	45,742	89.3%
202309	51,497	45,511	88.4%
202310	51,939	46,122	88.8%
202311	52,043	46,067	88.5%

Paid Claims are unlagged. 6 month look-back to account for billing lag.

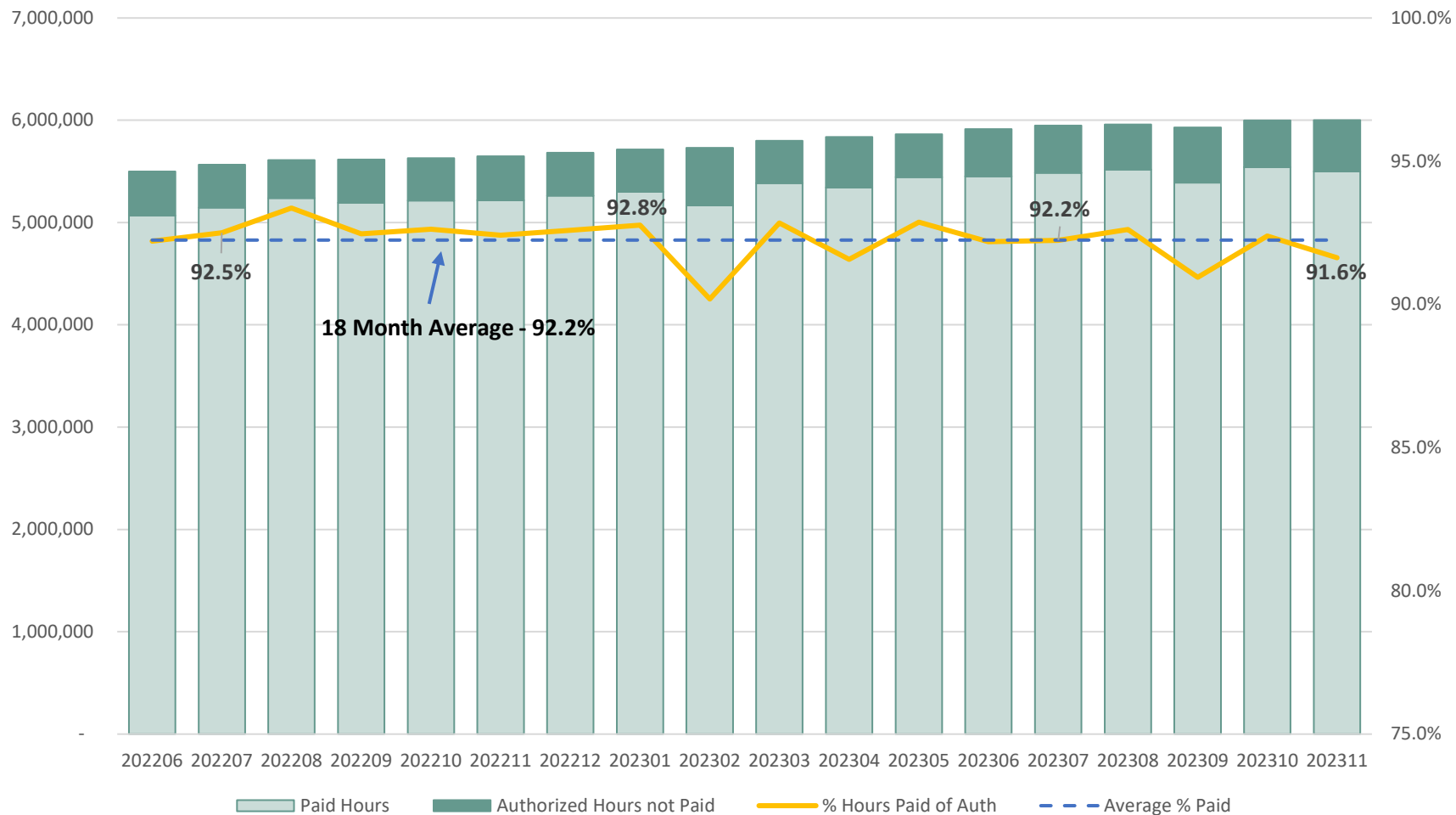
CDE Personal Care Services (PCS) Authorized vs. Paid – Total Hours



CDE Personal Care Services, Authorized versus Paid – Hours by MOS			
MOS	Authorized Hours	Paid Hours	% Hours Paid of Auth
202206	5,875,462	5,071,167	86.3%
202207	5,929,562	5,151,161	86.9%
202208	5,976,611	5,242,498	87.7%
202209	5,995,305	5,195,862	86.7%
202210	6,017,709	5,218,516	86.7%
202211	6,052,962	5,221,720	86.3%
202212	6,086,549	5,264,661	86.5%
202301	6,099,953	5,305,708	87.0%
202302	6,127,620	5,174,189	84.4%
202303	6,178,779	5,389,572	87.2%
202304	6,215,524	5,348,407	86.0%
202305	6,256,863	5,448,731	87.1%
202306	6,291,333	5,454,113	86.7%
202307	6,323,903	5,494,983	86.9%
202308	6,363,533	5,525,267	86.8%
202309	6,379,607	5,398,054	84.6%
202310	6,426,640	5,546,706	86.3%
202311	6,443,132	5,505,016	85.4%

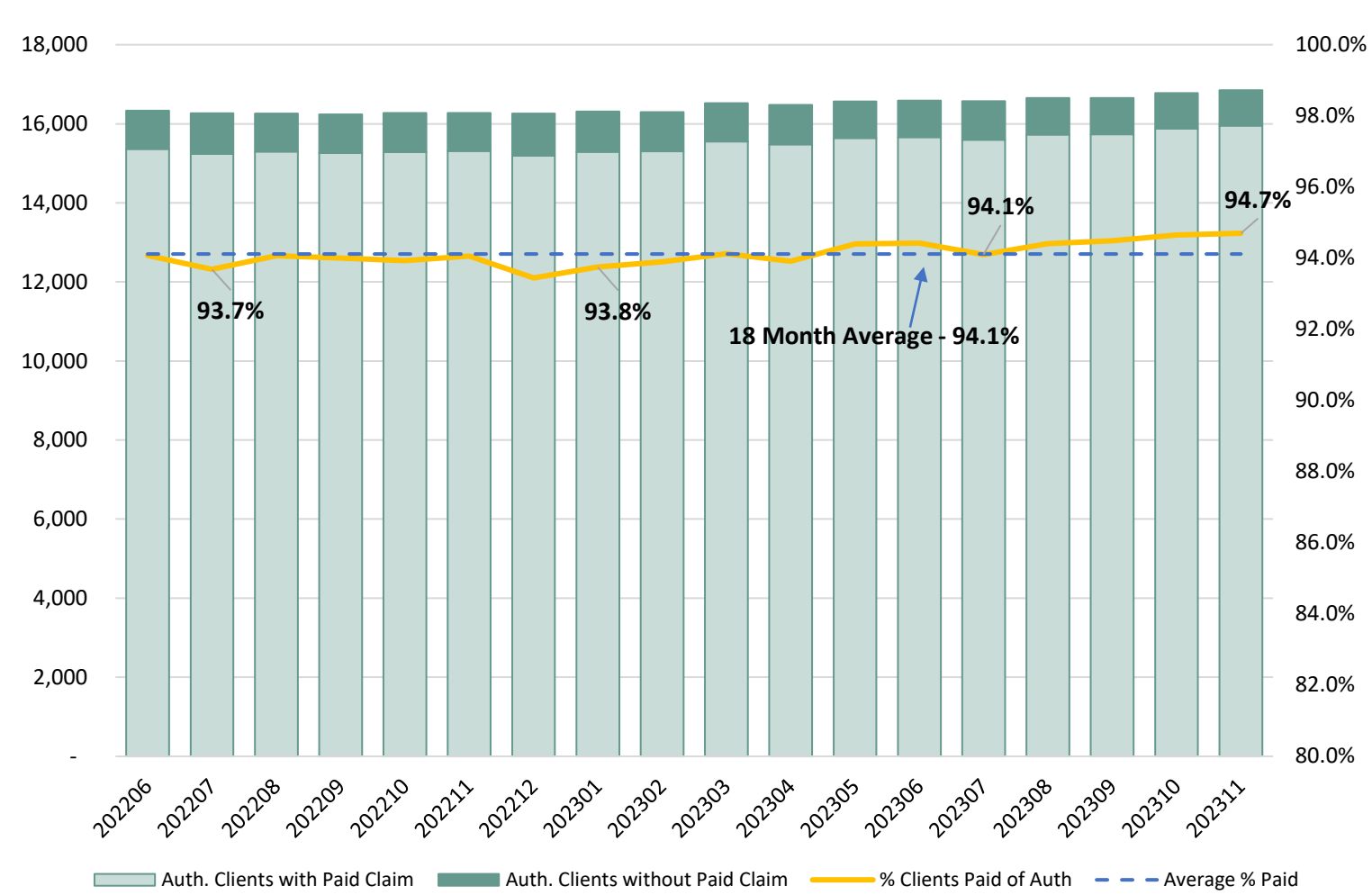
Paid Claims are unlagged. 6 month look-back to account for billing lag.

CDE PCS – Paid Clients Only Authorized vs. Paid – Total Hours



CDE personal care clients who have a paid claim have been receiving, on average, 92.2% of their authorized personal care hours since June 2022.

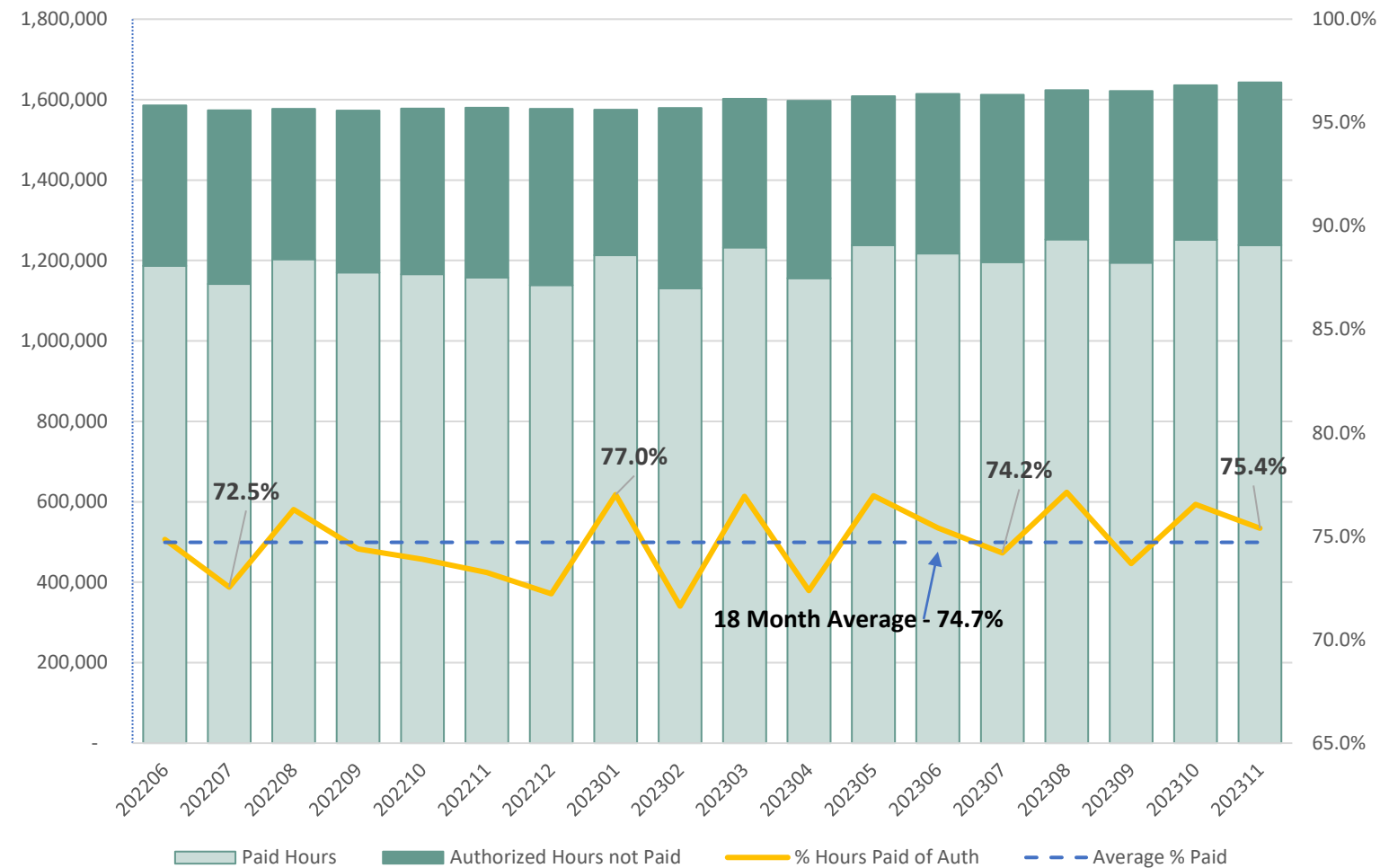
Agency Personal Care Services (PCS) Authorized vs. Paid – Total Clients



MOS	Distinct Authorized Clients	Distinct Paid Clients	Percent of Authorized Clients with a Paid Claim
202206	16,332	15,364	94.1%
202207	16,263	15,236	93.7%
202208	16,258	15,294	94.1%
202209	16,236	15,262	94.0%
202210	16,271	15,283	93.9%
202211	16,275	15,309	94.1%
202212	16,259	15,193	93.4%
202301	16,307	15,288	93.8%
202302	16,298	15,304	93.9%
202303	16,519	15,549	94.1%
202304	16,479	15,476	93.9%
202305	16,567	15,640	94.4%
202306	16,588	15,663	94.4%
202307	16,570	15,593	94.1%
202308	16,656	15,725	94.4%
202309	16,653	15,736	94.5%
202310	16,777	15,880	94.7%
202311	16,848	15,955	94.7%

Paid Claims are unlagged. 6 month look-back to account for billing lag.

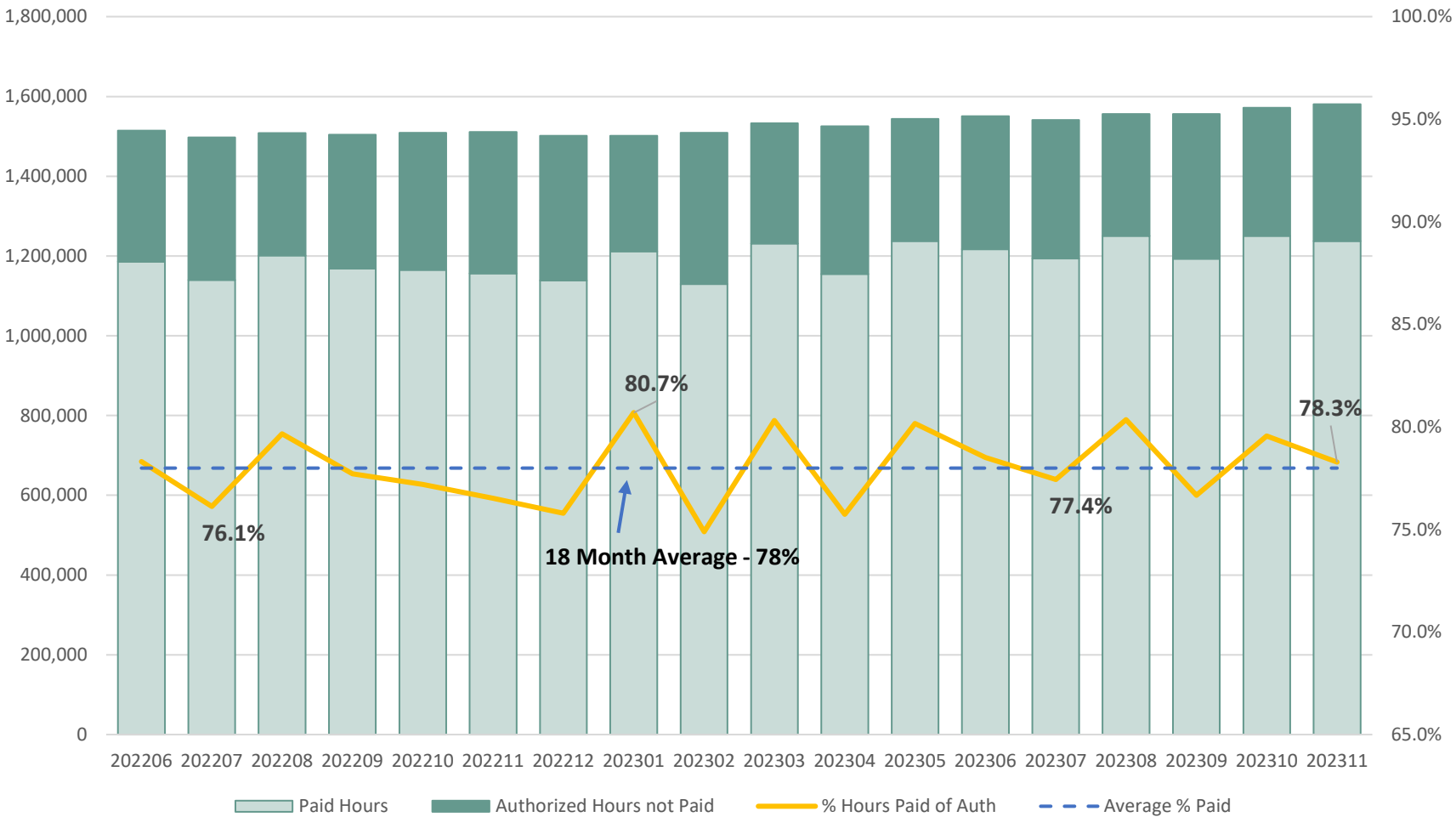
Agency Personal Care Services (PCS) Authorized vs. Paid – Total Hours



CDE Personal Care Services, Authorized versus Paid – Hours by MOS			
MOS	Authorized Hours	Paid Hours	% Hours Paid of Auth
202206	1,585,918	1,187,068	74.9%
202207	1,573,710	1,141,604	72.5%
202208	1,577,123	1,203,217	76.3%
202209	1,572,872	1,169,980	74.4%
202210	1,577,989	1,165,899	73.9%
202211	1,580,048	1,157,310	73.2%
202212	1,577,275	1,139,076	72.2%
202301	1,574,847	1,212,995	77.0%
202302	1,579,090	1,131,003	71.6%
202303	1,601,801	1,232,377	76.9%
202304	1,597,396	1,156,126	72.4%
202305	1,608,697	1,238,000	77.0%
202306	1,614,632	1,217,474	75.4%
202307	1,611,909	1,196,005	74.2%
202308	1,623,806	1,252,311	77.1%
202309	1,621,725	1,194,924	73.7%
202310	1,635,577	1,252,035	76.6%
202311	1,642,961	1,238,575	75.4%

Paid Claims are unlagged. 6 month look-back to account for billing lag.

Agency PCS – Paid Clients Only Authorized vs. Paid – Total Hours



AP personal care clients who have a paid claim have been receiving, on average, 78% of their authorized personal care hours since June 2022.

Clients with no Paid Claims Considerations

- Authorizations are sent to CDWA without an IP being in place. Prior to CDWA, authorizations were only created once the IP was contracted.
- The current hiring process doesn't allow an IP to immediately start with a client. Attestations and O&S training have to be completed first.
- For IPs who are starting the hiring process, it can be time consuming and confusing.
- Clients don't always have an IP selected and the process of finding one is often slow, even with Carina.
- The data interface between ProviderOne and CDWA only sends client information the authorization is created, which causes delays in the CDWA system, especially IP/client match.
- Some hours might not be used due to client not being available for care (for example, hospitalization or refusal of service)

TAB 5

DSHS - ALTSA & DDA Per Capita Costs

Winter 2024 Forecast

Note: Per Capita costs are greatly affected by the average acuity of clients served.

Aging and Long-Term Support Administration

FY24	Caseload	Monthly Per Capita Cost	State %
Adult Day Health	542	\$ 1,021	49.0%
Adult Family Homes	10,767	\$ 5,576	43.7%
Adult Residential Care	3,604	\$ 4,282	46.5%
Assisted Living	3,560	\$ 2,340	44.9%
In-Home Services - Individual Provider	32,748	\$ 4,094	42.0%
In-Home Services - Agency Provider	14,172	\$ 3,061	42.0%
Managed Care	1,446	\$ 4,830	48.0%
Nursing Homes	7,640	\$ 9,863	46.8%
Private Duty Nursing	166	\$ 19,359	47.4%

FY25	Caseload	Monthly Per Capita Cost	State %
Adult Day Health	543	\$ 1,033	50.0%
Adult Family Homes	11,459	\$ 5,801	44.6%
Adult Residential Care	3,712	\$ 4,579	47.4%
Assisted Living	3,482	\$ 2,645	45.9%
In-Home Services - Individual Provider	34,339	\$ 4,383	42.9%
In-Home Services - Agency Provider	14,550	\$ 3,226	42.9%
Managed Care	1,552	\$ 5,116	49.0%
Nursing Homes	7,904	\$ 10,601	47.8%
Private Duty Nursing	165	\$ 19,403	48.3%

Developmental Disabilities Administration

FY24	Caseload	Monthly Per Capita Cost	State %
Residential Habilitation Centers (<i>not forecasted</i>)	485	\$ 48,327	51.0%
Residential Services (supported living)	4,331	\$ 18,019	49.7%
Adult Family Homes	1,564	\$ 5,370	44.0%
Adult Residential Care	80	\$ 3,779	46.1%
In-Home Services - Individual Provider	13,460	\$ 4,223	43.3%
In-Home Services - Agency Provider	1,666	\$ 2,966	43.3%
Respite Services	3,942	\$ 967	49.1%

FY25	Caseload	Monthly Per Capita Cost	State %
Residential Habilitation Centers (<i>not forecasted</i>)	485	\$ 48,327	50.0%
Residential Services (supported living)	4,391	\$ 18,164	50.6%
Adult Family Homes	1,572	\$ 5,604	45.3%
Adult Residential Care	79	\$ 4,046	47.7%
In-Home Services - Individual Provider	13,785	\$ 4,456	44.2%
In-Home Services - Agency Provider	1,741	\$ 3,191	44.2%
Respite Services	4,113	\$ 1,027	50.1%

TAB 6

SEIU 775 Benefits Group – Retirement Benefits

Rate Setting Board Presentation



May 29, 2024

Confidential and proprietary
information. For SEIU 775 Benefits
Group Trustees and Employees only



Shazia A.
Caregiver, Kent

Agenda

- Retirement Benefits Overview.
- Addressing Caregiver Retirement Need.
- Retirement Scenarios and Analysis.



Cathy H.
Caregiver, Puyallup

Secure Retirement Trust Overview



Retirement

- **80,000+** plan participants.
- First of its kind in the nation, providing additional financial security when caregivers retire.
- Contributions based on hours worked, not payroll deductions.
- Funding is through employer contribution only.
- The Secure Retirement Plan is administered by Milliman, Inc.



Sonja T.
Caregiver, Renton

Caregiver Retirement Benefits

A Timeline



Retirement

2015

SEIU 775 negotiates a retirement rate for home care workers of \$0.23 an hour.

2019

New SRT Plan Design implemented, introducing immediate vesting after a 6-month eligibility period.

2023

1,000 participants receive a monthly retirement payment for the very first time.

2016

The **SEIU 775 Secure Retirement Plan** was created – the very first and only type of plan for home care workers in the nation.


2019

First SRT plan retirement distribution made.

SRT Strategy



Improve career
caregiver
future financial
security.



Increase impact
of retirement
plan.



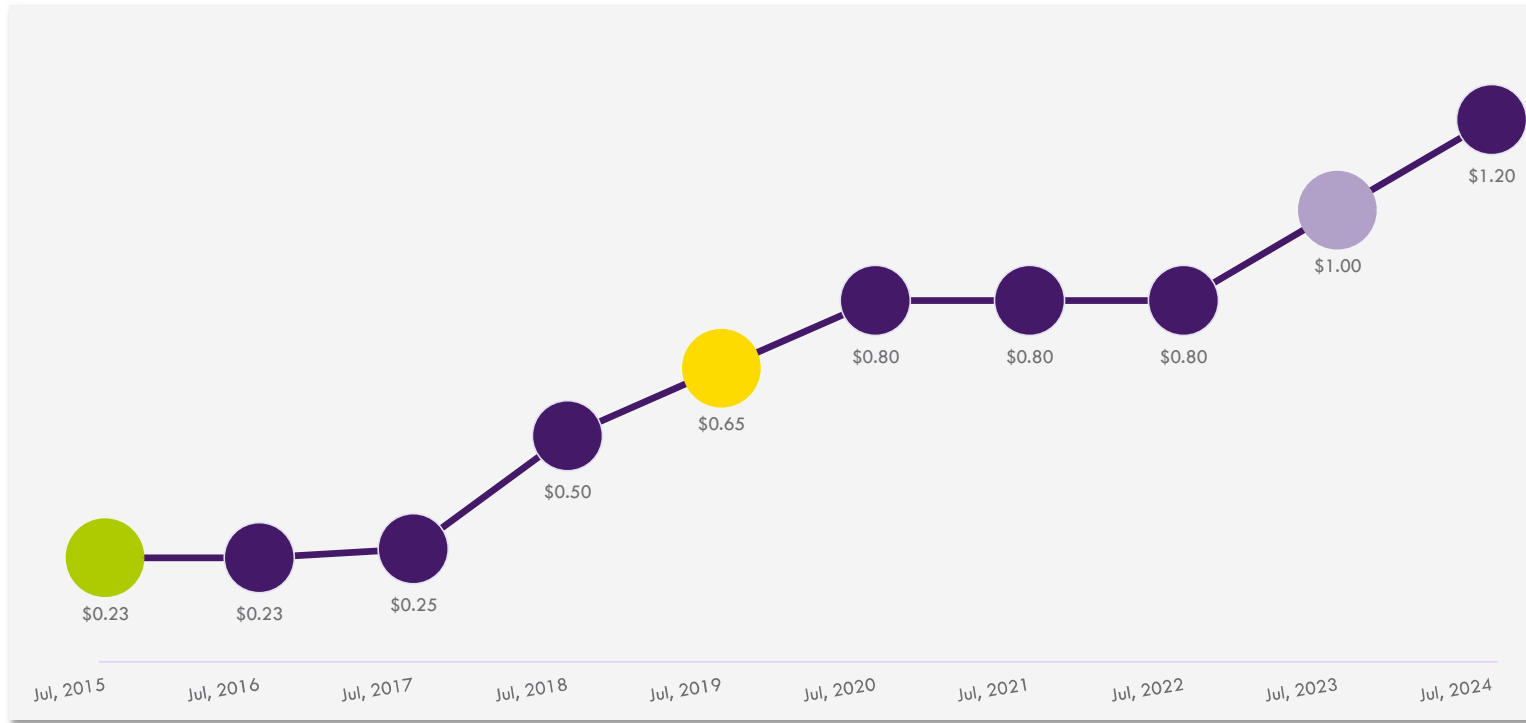
Drive expense
ratio to
desired levels.



Advance
operational
excellence.

Contribution Rates Have Increased

Hourly Contributions By Year (Highest Tier)



2015

Single tier rate for all hours.

2019

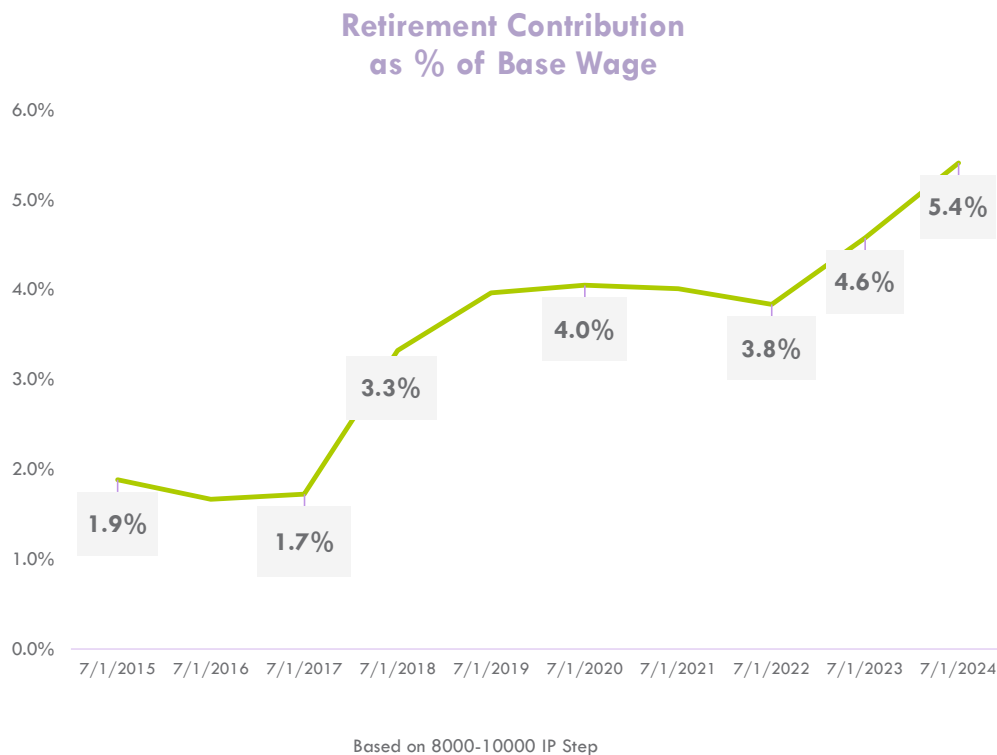
2nd tier introduced at 700 career hours.

2023

3rd tier introduced at 6000 career hours.

Retirement Contributions as a Percentage of Wages

Industry Recommendations Compared to Contributions



Industry Experts Recommend Saving 10-15% Annually

- “Between you and your employer, set aside **at least 10%** of your paycheck....if you are older and haven’t started retirement saving, then 10% will be too low: start thinking **at least 15%-20%.**”
– The Brookings Institution, 2019¹
- “For a successful retirement, you should aim to save **at least 15%** of your income annually over the course of your career.”
– T. Rowe Price, 2024²
- “..if people save **15% to 18%** of their salary annually starting with their first job, they should be in good shape for retirement.”
– CNN Business, 2023³

Plan Expenses

Efficient Management Keeps Expense Ratio Below Industry Averages

Secure Retirement Trust plan administrative expense ratio is expected to remain below industry average.¹

Contributing factors:

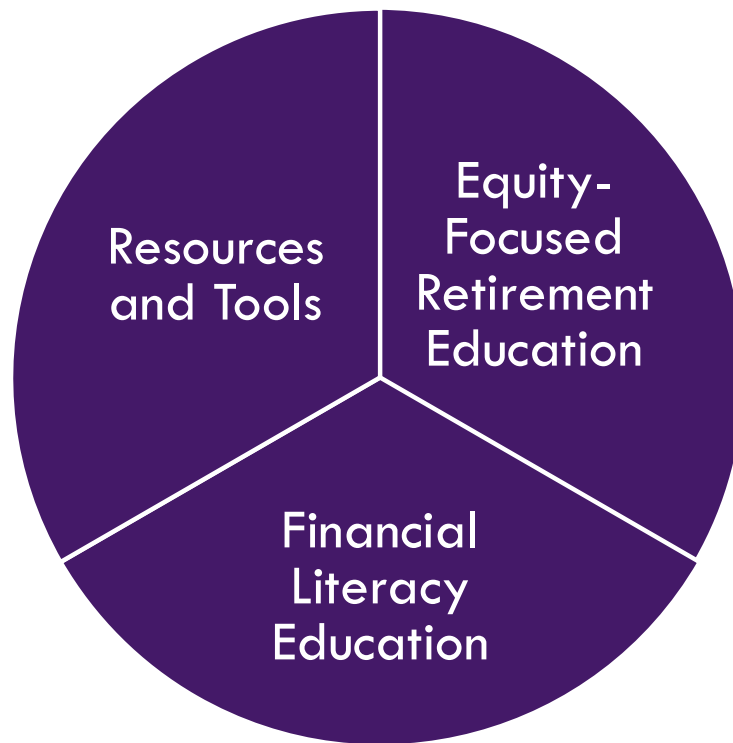
- Plan design.
- Efficient expense management.
- Growing contributions.

Recent Awards and Recognition:

- 2024 Eddy Award, Pensions & Investments.²
- 2024 Plan Sponsor of the Year Finalist, PlanSponsor Magazine³

Financial Literacy and Retirement Education

Additional Benefit to Support Caregiver Financial Security



Addressing Caregiver Retirement Need



Katherine M.
Caregiver, Spokane



“

I wasn't sure whether I was going to be able to save while caregiving. Once [the retirement plan] finally came through, it was a big burst of joy... knowing there was going to be a point where I was going to be able to retire, and have a source of income once I am done working.

– Alyssa E., Sedro-Woolley

Retirement Preparedness Gaps Are Widespread

Washington State Population

~41%

have **no projected retirement income** from retirement plans.

~56%

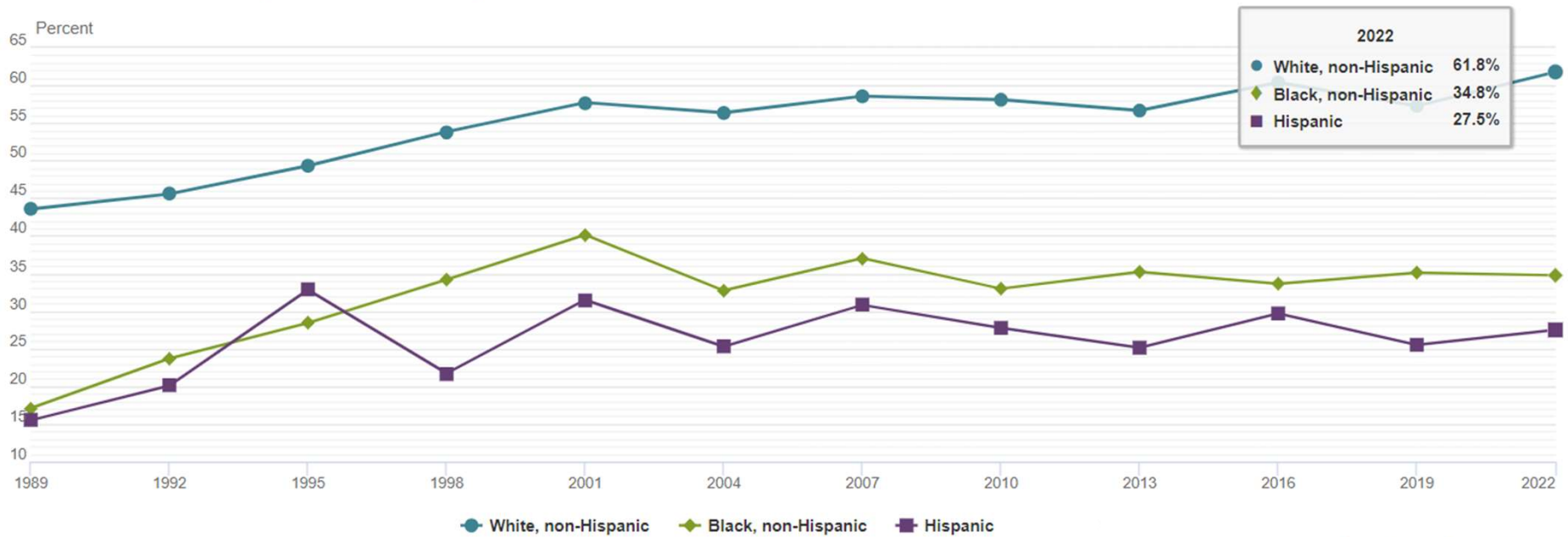
are **unable to save** money each month.

~61%

don't have access to **workplace-based retirement plan**.

The Racial and Ethnic Retirement Gap

Retirement accounts by race or ethnicity



Source: Survey of Consumer Finances
Federal Reserve

Caregiver Retirement Readiness Is Cost Effective

Washington State Cost Savings

Increased Tax
Revenue

Economic Growth
(Rural, Suburban
and Urban)

Social Service
Reduction

Financial Concerns of Caregivers

Percent Who Are Very/Extremely Worried

42%

Saving for
Retirement

40%

Saving for
Emergencies

37%

Paying Off
Debt



“

I was just so happy to have that benefit [SRT], because I didn't really have anything else in place as far as my retirement was concerned.

– Caregiver

Retirement Benefit: Scenarios and Analysis

Kelly Coffing, FSA, EA, MAAA
Principal & Consulting Actuary

Jessica Gardner, ASA, MAAA
Associate Actuary



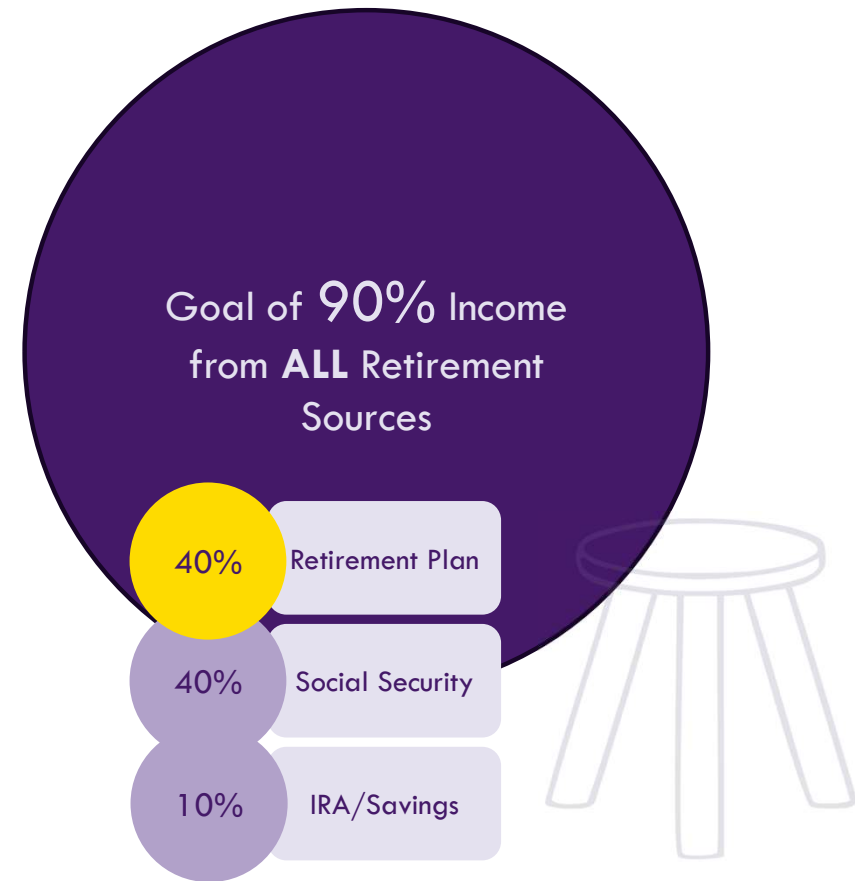
Alice R.
Caregiver, Spokane

Participant Career Retirement Analysis

At Various Modeled Contribution Rates

High-Level Assumptions:

- Inflation: 2.4%.
- Wage growth: 5% annually.
- Investment returns: 5.7% – 6.8% depending on age/risk.



Retirement Benefit Analysis

Different Ways to Look at CPH Impacts

Contributions as a Percentage of Wages

Increasing CPH with wage increases, to obtain meaningful retirement goals.

Retirement for Retention

CPH rates using caregiver feedback to maintain the workforce.

Contributions as a Percentage of Wages

Wage and Retirement Contribution Alignment

Goal: 40% of final year wage provided by plan.

Method: Increase retirement contributions by the same percent as wages.

Full-Time Career Scenario

Contributions as a Percentage of Wages

45 Years of Service from Age 20 to 65:

- Scenario:
 - Contributions set to, and remained at, **9.1%** of wages.
 - 20-year payout amount at age 65 would be 40% of the projected age 65 salary.
- For context, a \$22.47¹ per hour wage would equal a CPH rate of \$2.04 at 9.1% of wages



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¹CDWA 2023-2025 CBA, January 1, 2025 10001-12000 Wage Step



Melissah W.
Caregiver, Seattle

Retirement for Retention

Retirement Account Balance Upon Retirement Needed to Remain in the Caregiving Workforce.

Question: How much of a retirement benefit (account balance) would be needed to stay in the workforce?

Min	\$10,000
★ Median	\$105,000
Max	\$1,000,000
★ Average	\$258,750

Retirement for Retention

Meeting the Retirement Account Goals of Caregivers

CPH Levels Needed to Get Caregivers Their Stated Retention Account Goals* :

- \$100,000.
- \$250,000.

*2024 dollars

10 Years of Service ¹			
Balance at Age 65	\$100,000	\$250,000	
CPH Required	Less than Full Time Hours (1300 annually)	\$4.57	\$11.43
	Full Time Hours (2080 annually)	\$2.86	\$7.15

¹ Based 38-year-old caregiver

Analysis Takeaways

Contributions as a Percentage of Wages

9.1% of base wage as a retirement contribution rate will get a “full career” caregiver to 40% plan replacement income.

Retirement for Retention

Increasing retirement contributions to at least \$2.86 can be an effective way to maintain caregivers considering leaving the job.

Looking Ahead

- Equity-focused outreach and financial education.
- Retention and recruitment benefits.
- Identifying participant retirement readiness benefits to Washington state.

Thank You

Sal Naidoo

Retirement Deputy Managing Director

SEIU 775 Benefits Group



TAB 7

Retirement

Prepared for the Consumer Directed Employer Rate Setting Board
May 2024.

Tangie Webb

She/her | SEIU 775 Vice-President

Retirement & statutory factors



A. Cost of living



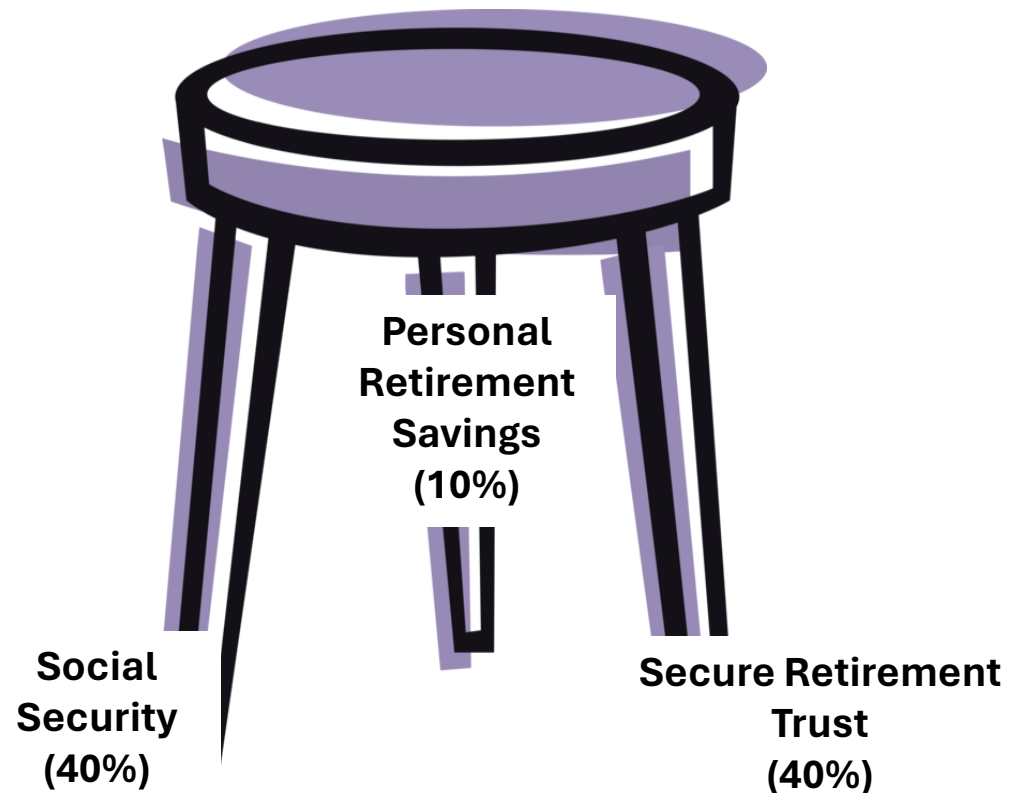
B. Stable workforce: recruitment and retention



C. Public Assistance

Replacement income

Replacement income: for a low-wage worker = 90% or more of the income you had when you were working in retirement.



SRT recommendation

Retirement contribution up to 10% to 15% of wages

=

This would get the SRT benefit to **40% of replacement income and grow as income grows.**

“Between you and your employer, set aside at least 10% of your paycheck....if you are older and haven’t started retirement saving, then 10% will be too low: start thinking at least 15%-20%.”

- The Brookings Institution, 2019

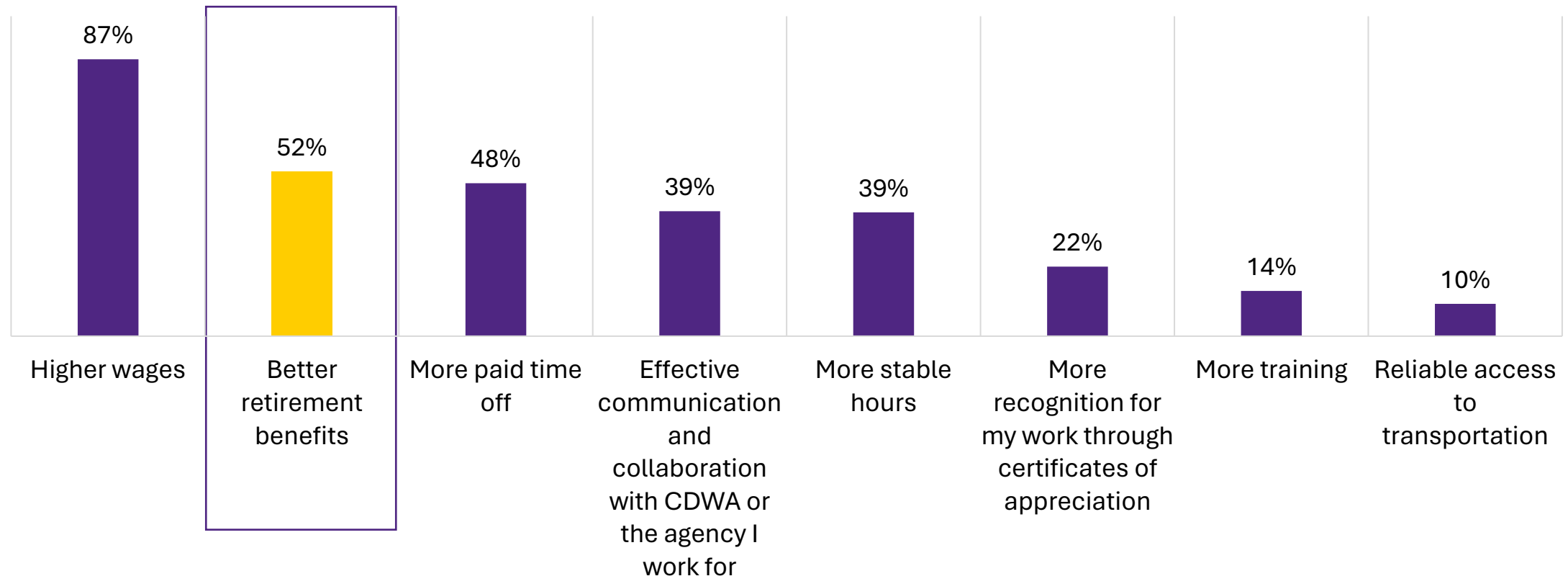
“For a successful retirement, you should aim to save at least 15% of your income annually over the course of your career.”

– T. Rowe Price, 2024

**10% of \$25 =
\$2.50/hour**

Recruitment & retention

Caregivers considering or planning to leave the workforce would be willing to keep working as a home care worker if they had:



Q: If you knew that when you retired as a home care worker you would have saved for your retirement, for which amount would you be willing to keep working as a caregiver?

Summary of caregivers open ended responses to question on how much retirement benefit would need to be to stay in the workforce (Range of \$10,000-\$1,000,000)	
Min	\$10,000
<u>Median</u>	<u>\$105,000</u>
Max	\$1,000,000
<u>Average</u>	<u>\$258,750</u>

**To get to \$100,000 after 10 years of full-time work =
\$2.86/hr. contribution**

At the end of this biennium, we'll be at **\$1.20** per hour for the longer-term caregivers, and what we'd like to do is get that to into the **\$2.50** per hour range for those more experienced caregivers.

Thank you!

TAB 8

SEIU 775 Benefits Group – Training Benefits

Rate Setting Board Presentation



May 29, 2024

Confidential and proprietary
information. For SEIU 775 Benefits
Group Trustees and Employees only



Seattle Classroom

Agenda

- Training Benefits Overview.
- Training Products Overview.
- Model Components.
 - Baseline.
 - Enhancement.



Training Partnership Overview



- Provider of training for 50,000 unionized caregivers to meet their training requirements.
- Offers training on a comprehensive set of topics and a range of client health issues.
- Provides payment from bargained funds for caregivers' certification benefit.
- Focuses on serving and supporting caregivers with a range of language and student supports.



Shazia A.
Caregiver, Renton

TP Strategy



Workforce
Stability.



Support Career
Pathways And
Professionalization.



Optimize Training
Development and
Delivery.



Advance Trust
Operational
Excellence.

By The Numbers



~50,000

learners served annually.



939,000

instructional hours in 2023.



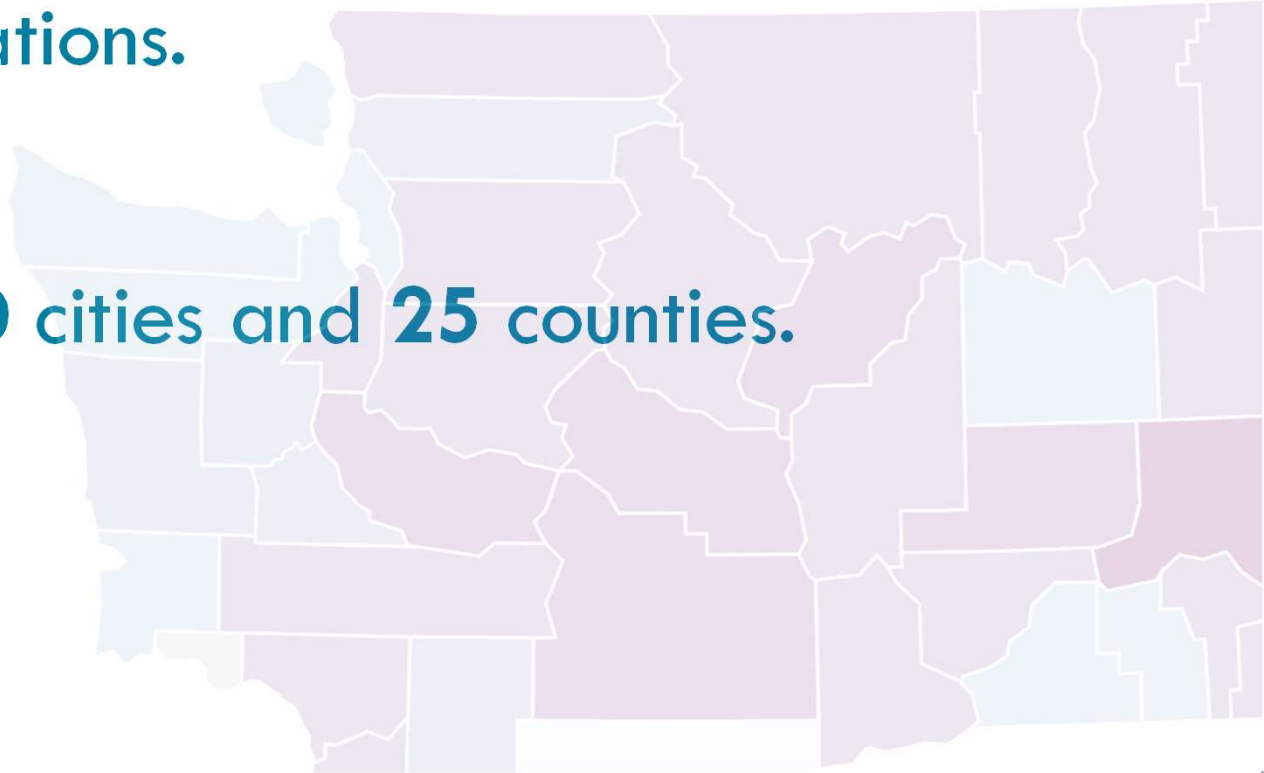
2nd

largest educational institution in WA by enrollment.

Training Available Statewide



- **70** training locations.
- **45+** instructors.
- In more than **40** cities and **25** counties.





On any given day,

8000

caregivers complete
a course offered by
the Training Partnership.

Localized Training

Training is localized in up to 14 languages, depending on course.

AMHARIC

ARABIC

KHMER

CHINESE

KOREAN

NEPALI

PUNJABI

RUSSIAN

SPANISH

SOMALI

TAGALOG

TIGRINYA

UKRAINIAN

VIETNAMESE

+10,000

interpreted hours in additional languages.

Core Training Programs & Products



Our training offerings include:

Orientation & Safety Training

Basic Training

Advanced Home Care Aide Specialist Training

Continuing Education

Nurse Delegation

Peer Mentorship

Certification Benefit



Orientation and Safety

14,600 caregivers anticipated FY25

Available online **anytime**

Preparing All Caregivers to Begin Working Safely.



Purpose:

Provides Caregivers with basic and essential safety skills before they start caring for clients.



Format:

This course is 5 hours long and is available online, in a self-paced format.



Localization:

Fully localized in Amharic, Arabic, Cambodian/Khmer, Chinese (simplified), Korean, Nepali, Punjabi, Russian, Spanish, Somali, Tagalog, Tigrinya, Ukrainian, and Vietnamese.

Basic Training (70 hours)

Preparing Caregivers to Become Certified HCAs.

6,340 caregivers anticipated FY25

~24 cohorts begin **each month**



Purpose:

Teaches the knowledge and skills caregivers need to deliver person-centered, high-quality client care in collaboration with a client and their care team.



Format:

2 modalities to support caregiver choice:

- 3-week dual-modality option, with more time spent in person.
- 5-week tri-modality option, with more flexibility.



Localization:

Full: Amharic, Arabic, Chinese, Khmer, Korean, Russian, Somali, Spanish and Vietnamese

Partial: Farsi, Laotian, Nepali, Punjabi, Samoan, Tagalog and Ukrainian.

Basic Training (30 hours)

Supporting Family, Limited Service and Adult Child Providers.

4,300 caregivers anticipated FY25

~22 cohorts begin **each month**



Purpose:

Provides a core path, plus focus courses for providers to meet their specific needs.



Format:

Online courses, with one in-person skills lab.



Localization:

Chinese, Korean, Russian, Spanish, Vietnamese.

An alternative pathway is available for those that speak other languages.

Basic Training (9 hours)

Training for Respite Providers.

400 caregivers anticipated in FY25

Available online **anytime**



Purpose:
Required training for
Developmental
Disabilities Administration
(DDA) respite providers.



Format:
Online courses.



Localization:
Chinese, Korean,
Russian, Spanish,
Vietnamese.

Basic Training (7 hours)

Practical Support for Parent DDA Providers.

720 caregivers anticipated FY25

~ 2 cohorts launch each month



Purpose:

For parent providers of children with developmental disabilities.



Format:

Two 3-hour webinar classes and the Ready or Not Questionnaire.



Languages Offered:

Available in English with interpreter services.

Advanced Training

Advancement Opportunity for Caregivers Working with Clients with Complex Needs.

550 caregivers anticipated FY25

~2 cohorts each month



Purpose:

Designed for caregivers working with people who have complex needs.

Upon the successful completion of the course, caregivers will receive a \$0.75/per hour pay raise.



Format:

In-person and online.



Languages Offered:

Available in English; community interpreters can be used.

New behavioral health track launching in Spring 2025!

Nurse Delegation

Training to Pass the Nurse Delegation Exam.

80 caregivers anticipated FY25

Available **anytime**, on demand



Purpose:

Equips caregivers with the knowledge and skills to pass the nurse delegation exam.



Format:

Self-study workbook and in-person exam.

Two levels available:

- Nurse delegation core.
- Nurse delegation diabetes.



Languages Offered:

Available in English.

Continuing Education

Refreshing and Learning New Skills.

26,000 caregivers anticipated FY25

Online courses available **anytime**.
Instructor led course blocks offered 17x/month.



Purpose:

Provide caregivers the opportunity to expand their professional skills and explore topics most relevant to clients' needs.



Format:

In-person, webinar and online self-led.



Localization:

Chinese, Korean, Russian, Somali, Spanish, Ukrainian, Vietnamese.

New Continuing Education



Courses Launched Spring 2024

Instructor-Led, In-Person Courses	Online Courses
Workplace Violence (3 hours)	Workplace Violence (3 hours)
Caring for a Client Who Communicates Nonverbally (3 hours)	Caring for a Client Who Communicates Nonverbally (3 hours)
Diabetes Care (3 hours)	Workplace Injuries (2 hours)
Social Support for Clients with Intellectual and Developmental Disabilities (3 hours)	Communicating with Clients Who Have Dementia (2 hours)
	Introduction to Caring for LGBTQ+ Clients (1 hour)
	Preventing Accidents in the Home (1 hour)

Languages: Chinese, English, Korean, Russian, Somali, Spanish, Ukrainian and Vietnamese



Continuing Education

Current *Online* CE Courses.

- Accident Prevention.
- Alcohol Misuse.
- Assertive Communication.
- Caring for Clients With Autism.
- Caring for Clients With Bipolar Disorder.
- Communicating With Nonverbal Clients.
- Communicating With Clients w/ Dementia.
- Control and Prevent Insect Infestations.
- COVID-19 and Caregiver Self-Care.
- Cultural Humility.
- Emergency Care and Disaster Preparedness.
- End of Life Care.
- Environmental Sensitivities.
- Family Boundaries.
- Food Allergies and Sensitivities.
- Improving Time Management Skills.
- Influenza (The Flu).
- Insect Bite and Infestation Safety.
- Introduction to Caring for LGBTQ+ Clients.
- Introduction to Dementia.
- Introduction to Rheumatoid Arthritis.
- Managing Compassion Fatigue.
- Masks and N95 Respirators.
- Medication Assistance.
- Mindful Eating.
- Mold and Other Types of Fungi.
- Opioids and Pain Management.
- Pet Safety in a Client's Home.
- Planning and Preparing for Mindful Meals.
- Post-Traumatic Stress Disorder (PTSD).
- Postsurgical Care.
- Practical Approaches for Caring for Clients With Anxiety.
- Practical Approaches for Caring for Clients With Depression.
- Preventing Accidents in the Home.
- Preventing Stigma Associated With COVID-19.
- Professional Boundaries.
- Providing Care Using a Person-Centered Approach.
- Recognizing and Reporting Consumer Abuse, Neglect, and Financial Exploitation.
- Reducing the Spread of Infection Through Standard Precautions.
- Schizophrenia.
- Seizures and Epilepsy.
- Stroke.
- Substance Misuse.
- Supporting a Client With Hearing Loss.
- Supporting Young Consumers.
- Supporting a Client Using Telehealth Services.
- Supporting a Client With Dementia.
- Supporting a Client With Rheumatoid Arthritis.
- Traumatic Brain Injury.
- Understanding Basic Medical Terminology.
- Vaccines.
- Vicarious Trauma.
- Workplace Injuries.
- Workplace Violence.

Continuing Education

Current *Instructor Led* CE Courses.

In Person:

- Diabetes Care.
- Caring for a Client Who Communicates Non-Verbally.
- Social Supports for Clients with Intellectual and Developmental Disabilities.
- Workplace Violence.

Webinar:

- Assisting with Body Care.
- The Art of Communication.
- Preventing HCA Compassion Fatigue.
- Respectful, Sensitive Care.
- Tools for Calm.

Continuing Education

Topic Selection and Research Approach

Topics are chosen based on:	Considerations:	Research Approach:
<ul style="list-style-type: none">• Stakeholder feedback.• New legislation.• DSHS client demographics and conditions.• AL TSA list of chronic conditions.• Public health emergency needs (e.g., COVID).• Topical interest (e.g., climate change).• Issues identified when researching other topics.	<ul style="list-style-type: none">• We include at least 1 topic in each of the following areas:<ul style="list-style-type: none">• Medical conditions.• Harassment, abuse and discrimination.• Needs of clients with disabilities.• Considerations for choosing specific topics:<ul style="list-style-type: none">• Broad applicability – benefits many clients/caregivers.• Special population with unmet needs (e.g., LGBTQ+ clients, IDD clients).	<ul style="list-style-type: none">• Use current, authoritative sources from public health bodies, academia, nonprofit advocacy organizations and professional organizations.• Consult with subject matter experts.• Emphasize practical, accessible information that serves client needs.• Ensure all guidance is within caregiver scope, per WAC.• Align with BG and SEIU 775 social justice values: Promoting dignity, flourishing, equality, inclusiveness.

Peer Mentorship

Peer-to-Peer Support for HCA Training.

1,000 caregivers anticipated FY25

Available **on-demand**



Purpose:

Certified Home Care Aide mentors support other new standard HCAs to increase skills confidence and to remove barriers of the training process.



Format:

- Unlimited 1:1 phone tutoring support.
- Skills Support Webinar.
- Basic Training v4 webinars
- Testing support.



Languages Offered:

English, Mandarin
Cantonese, Spanish,
Vietnamese,
Tigrinya, Amharic,
Somali, Arabic.

All other languages can be served via interpreter.

Certification Benefit

6,000 caregivers anticipated in FY25

Defraying the Initial Costs of Certification and Testing



- The **Certification Benefit Program** is a program funded by the Training Partnership and governed by the Collective Bargaining Agreements between SEIU 775 and our employers.
- It is designed to offset the cost burden for new caregivers to receive their HCA credential. This benefit authorizes payment to DOH for each qualifying caregiver's:
 - HCA application (\$100).
 - HCA exam (\$150).

Blended Learning Supports Flexibility

Learner Testimonials



“[These are] fundamental skills that I can strongly apply to the career path that is ahead of me.”

“[I] don't have to worry about finding coverage for the client.”



“Love that we only need to come to in-person class once a week.”





“

I was able to put stuff that I'd learned in class... just right into action... All of a sudden it was just the perfect thing for the situation, and I was just really enjoying how the training translated directly into the job.

– Julie G., caregiver

Training Baseline Model

FY 2026-2027



Lesly R.
Caregiver, Mount Vernon

Baseline- Summary

Component	Assumption
Hours	• 3.1% annual growth in hours.

Baseline- Summary

Component	Assumption
Hours	<ul style="list-style-type: none">• 3.1% annual growth in hours.
Delivery and Operations	<ul style="list-style-type: none">• Match current trends in access + add an increase of localized class cadence from 90 to 60 days.• Assumes unnegotiated 4% increase in training network cost.

Baseline- Summary

Component	Assumption
Hours	<ul style="list-style-type: none">• 3.1% annual growth in hours.
Delivery and Operations	<ul style="list-style-type: none">• Match current trends in access + add an increase of localized class cadence from 90 to 60 days.• Assumes unnegotiated 4% increase in training network cost.
Curriculum Development	<ul style="list-style-type: none">• Advanced Training: Complete soft launch of behavioral track. Assess and make improvements.• Standard HCA Basic Training (70): Maintain both options.• Continuing Education: Deployment FY26 and FY27. Research and develop for FY28 and FY29.• Includes focus on caregiver and stakeholder input, testing ideas for population specific materials, and monitoring and evaluation.

Baseline- Summary

Component	Assumption
Hours	<ul style="list-style-type: none"> 3.1% annual growth in hours.
Delivery and Operations	<ul style="list-style-type: none"> Match current trends in access + add an increase of localized class cadence from 90 to 60 days. Assumes unnegotiated 4% increase in training network cost.
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Localization	<ul style="list-style-type: none"> Standard HCA Basic Training in additional 5 languages. Continuing Education Instructor Led and Online – 2 years, 7 languages. Advanced Training in 3 languages.

Baseline- Summary

Component	Assumption
Hours	<ul style="list-style-type: none"> 3.1% annual growth in hours.
Delivery and Operations	<ul style="list-style-type: none"> Match current trends in access + add an increase of localized class cadence from 90 to 60 days. Assumes unnegotiated 4% increase in training network cost.
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Localization	<ul style="list-style-type: none"> Standard HCA Basic Training in additional 5 languages. Continuing Education Instructor Led and Online – 2 years, 7 languages. Advanced Training in 3 languages.
Certification Benefit	<ul style="list-style-type: none"> Certification benefit pays the HCA Certification Application fee and initial HCA Exam Application Fee + administration of those payments to DOH.

Baseline- Summary

Component	Assumption
Hours	<ul style="list-style-type: none"> 3.1% annual growth in hours.
Delivery and Operations	<ul style="list-style-type: none"> Match current trends in access + add an increase of localized class cadence from 90 to 60 days. Assumes unnegotiated 4% increase in training network cost.
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Localization	<ul style="list-style-type: none"> Standard HCA Basic Training in additional 5 languages. Continuing Education Instructor Led and Online – 2 years, 7 languages. Advanced Training in 3 languages.
Certification Benefit	<ul style="list-style-type: none"> Certification benefit pays the HCA Certification Application fee and initial HCA Exam Application Fee + administration of those payments to DOH.
Reserve	<ul style="list-style-type: none"> Maintains 2-month operating reserve.

Baseline Funding Need

Element	Assumption
Hours	3.1% Annual Growth.
Reserves	2 months.

	FY26	FY27
Baseline Funding Need	\$.005	\$.01

Total TP Rate	\$.49	\$.495
----------------------	--------------	---------------

Workforce Stability Approaches

Components of Rate Setting Request.

Enable Caregiver Choice

- Provide caregivers with a choice of Basic Training 70 options.
- Ensure CE can be fully completed online or in-person.



- **Outcome:** Support an array of learner needs resulting in increased training completion.

Increase Language Access

- Increase cadence of localized classes from 90 to 60 days.
- Expand localized offerings for Basic Training.
- Localize Advanced in 3 languages.



- **Outcome:** Ensure equitable access to basic training for all caregivers, regardless of language spoken.

Enhancement: Access Innovations

Piloting Custom Access Solutions

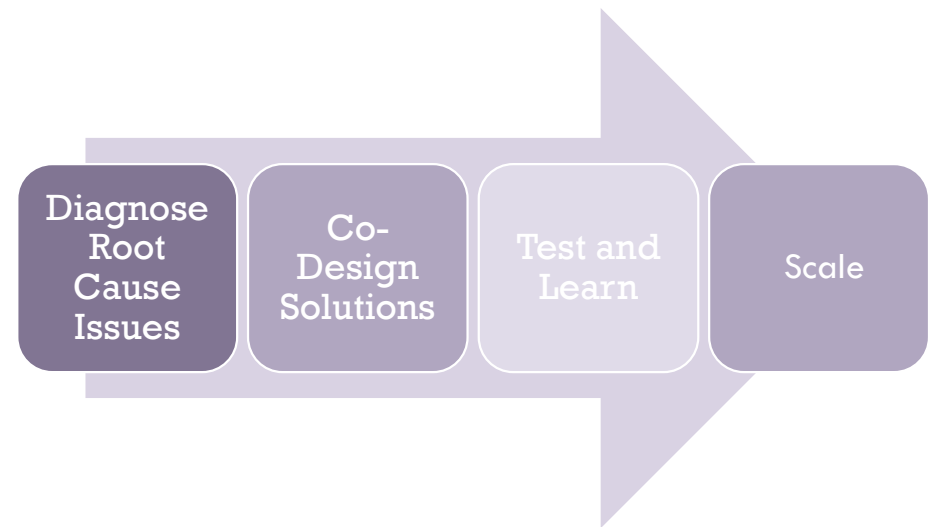
Problem

Caregivers, particularly those in rural areas, experience issues related to access that may not be solved by simply offering more classes.

Solution

Partner with caregivers, employers and other stakeholders to:

- Diagnose root cause issues.
- Co-design innovative solutions.
- Test those solutions before scaling validated solutions regionally.



Access Innovations Funding Need

Element	Assumption
Baseline	All elements from Baseline Model.
Access Innovations	Research, co-design, test, scale.
Reserves	2 months.

Baseline Funding	FY26	FY27
Baseline Funding Need	\$0.005	\$0.01
Access Innovations	\$0.01	\$0.02
Total Funding Need	\$0.015	\$0.03
Total TP Rate	\$.50	\$.515

Workforce Stability Approaches

Components of Rate Setting Request.

Enable Caregiver Choice

- Provide caregivers with a choice of Basic Training 70 options.
- Ensure CE can be fully completed online or in-person.



- **Outcome:** Support an array of learner needs resulting in increased training completion.

Increase Language Access

- Increase cadence of localized classes from 90 to 60 days.
- Expand localized offerings for Basic Training.
- Localize Advanced in 3 languages.



- **Outcome:** Ensure equitable access to basic training for all caregivers, regardless of language spoken.

Custom Access Solutions

- Source, test and implement solutions to address access issues for caregivers, especially in rural areas.



- **Outcome:** Improve access for caregivers resulting in increased training completion.

Thank You

Siobhan Shand

Managing Director, Training Partnership

Siobhan.Shand@myseiubenefits.org

TAB 9



Job-Matching Benefits

Rate Setting Presentation



May 29, 2024



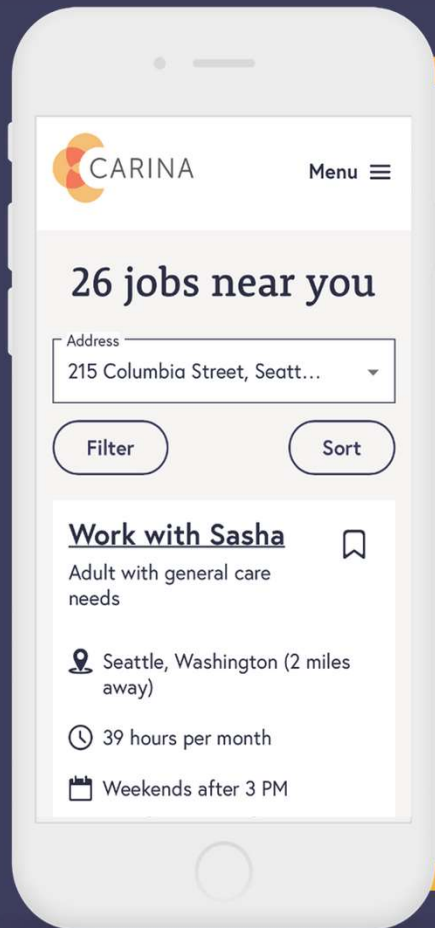
John R.
Caregiver, Seattle

ABOUT US

Carina is a nonprofit technology organization that connects individuals and families who need care with individual providers looking for good jobs and steady work.



Easy to use, effective, and trustworthy technology

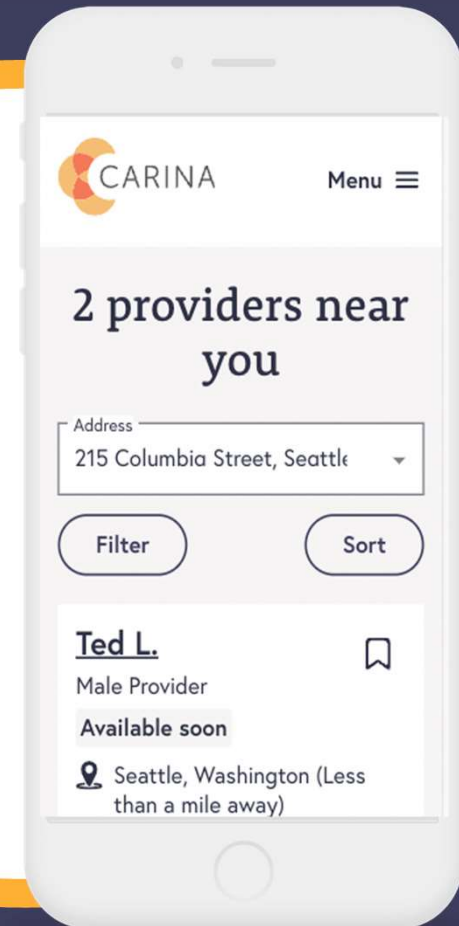


Individuals
looking for care
-Demand-



Providers
looking for work
-Supply-

Connecting both sides of the care relationship

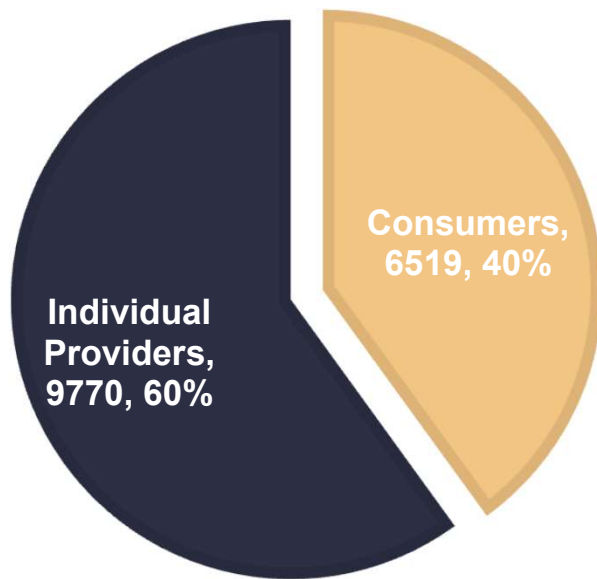


Key Features

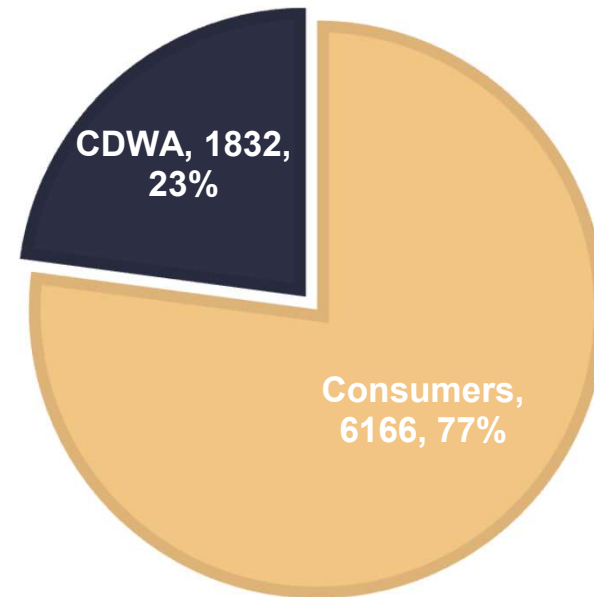
Feature	Provider	Consumer	User Support	CDWA (HCRR)	Case Managers
Verification for Registration	✓	✓	✓	✓	✓
Responsive design	✓	✓			✓
Account Settings	✓	✓	✓	✓	✓
Profile Creation and Editing, including optional photo	✓				
Training and Credential data auto-population	✓				
Job Posting		✓		✓	
Data management (saving, editing, archiving)	✓	✓		✓	
Search & matching with advanced search options	✓	✓	✓	✓	✓
Geocoding and travel time by car and public transport	✓	✓			
In-app Messaging & Communication	✓	✓	✓	✓	
Notifications & Alerts via email & SMS	✓	✓			
Hiring (match) surveys	✓	✓		✓	
Safety & Compliance, including user reporting system	✓	✓			
Educational Resources	✓	✓	✓	✓	✓

Annual Usage

**16,280 ACTIVE USERS
LAST 365 DAYS (AS OF 3/19/24)
BY IP AND CONSUMERS**



**8000 JOBS POSTED
LAST 365 DAYS (AS OF 3/19/24)
SHOWN BY ROLE**



Every five minutes...



...a connection is made on Carina.



Making a Difference in Washington

Self-reported
matches

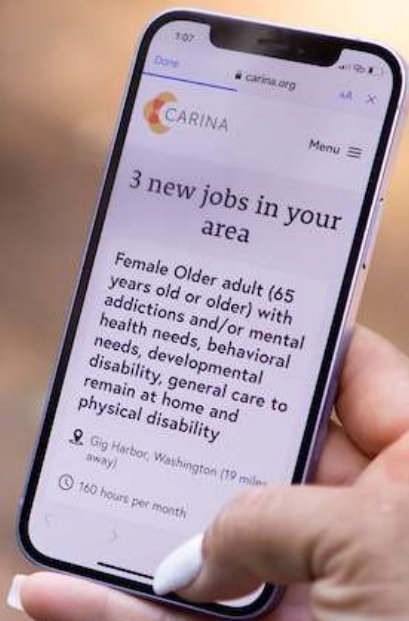
11,000+

Hours of care
delivered

6M+

Earnings for
care workers

\$100M+



“

I asked [‘C’] to save my information in case the person [she hired] didn’t work out. [She] reached out to me... the other person didn’t work out. As soon as I am approved, I will begin caring for her. I’m very excited about this opportunity.

– Kari, Caregiver



“

‘V’ reached out to me. We texted back and forth for a few days. We met on Monday, and it was an instant connection. He’s absolutely amazing. I’m so grateful to Carina for connecting us.

– Kari, Caregiver

Finding an individual provider is especially difficult in the most populous areas of the state

We consider a ratio of less than 2 IPs per job posted to be very low supply

- Choosing an IP or consumer to work with is based on travel time, schedules and skills/preferences and the topline ratio does not account for that complexity
- Some consumers need more than one IP to meet their needs

County	Ratio of IPs looking for work in the last 2 weeks vs jobs posted
King	1
Clark	1.5
Spokane	1.4

"No one I contacted responded. The one person who contacted me lived very far away. I asked if she was planning to move closer but received no response. I resorted to taking on boarders and exchanging free rent for care giving."

Ensure that every IP who is open to taking on a new client or more clients can do so

Core Technology

- Design, development, and deployment of refinements.
- Maintenance and routine improvement.
- Integration management.
- Security and compliance.
- Analytics.

Business Operations

- Project and Program management.
- Stakeholder engagement.
- Communications and outreach
- User support
- Analytics

Enhancements

Examples include:

- Adding fourth and fifth languages
- Skills badging
- Single sign-on

Thank You

Nidhi Mirani
CEO, Carina
nidhi.mirani@carina.org



TAB 10

Non-Trusts' Benefits:

Paid Time Off, Holidays, Mileage and Admin time

Prepared for the Consumer Directed Employer Rate Setting Board
May 2024.

Alexis Rodich

She/her | SEIU 775 Research & Policy Director

Non-trust benefits



Not having standard employment benefits is a recruitment and retention problem



Many employers including home care agencies and other states have better paid holidays, mileage, and other benefits



Other home care employers have differentials that could increase retention and incentivize caring for higher needs clients

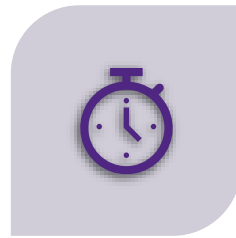
Overview



Paid Time Off



Paid Holidays



Admin Time



Mileage



Differentials

Paid Time Off

Where we were and where we're at

2022 - Before 1st RSB

- 1 hour for every 25 hours worked, capped at 130 hours
- Average IP (102 hours/month) accrues

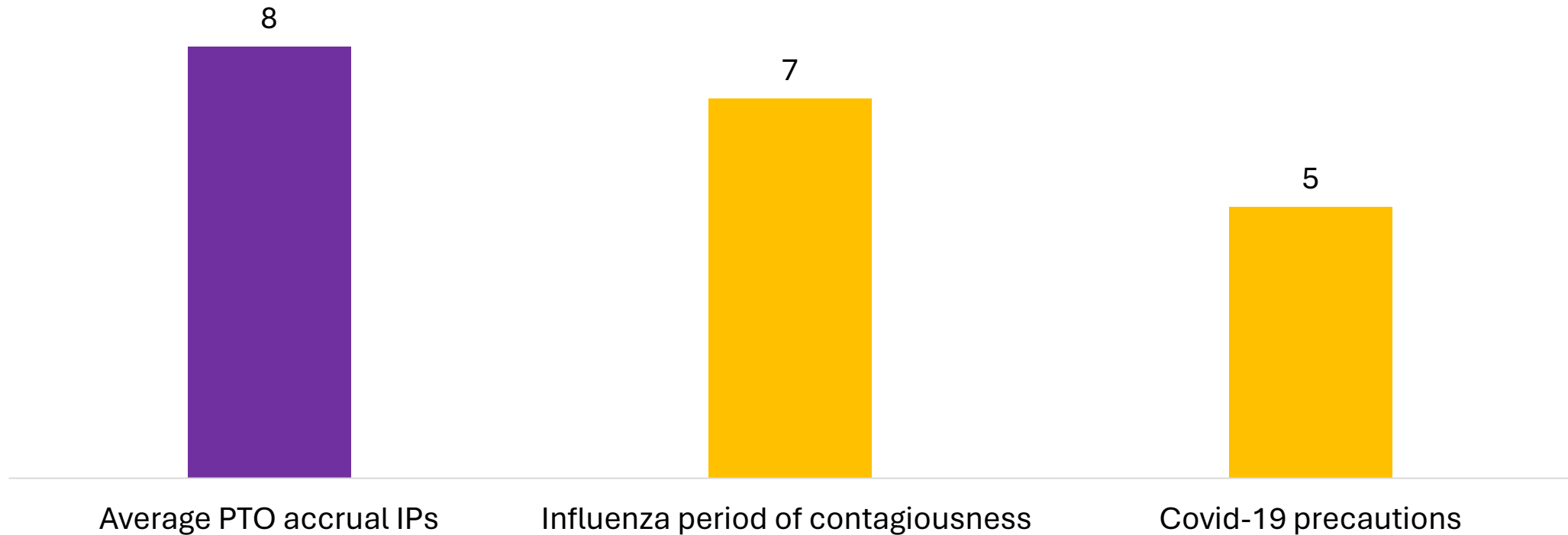
6 days per year

SEIU/CDWA bargaining

- **FY24:** 1 hour for every 24 hours worked, capped at 130 hours
- **FY25:** 1 hour for every 23 hours worked, capped at 130 hours.
 - Average IP (122 hours/month) accrues: **8 days per year.**

Even with some progress, current PTO accrual rate is not enough...

Number of PTO days in a year for IPs vs number of days of contagiousness for influenza and COVID-19 precautions

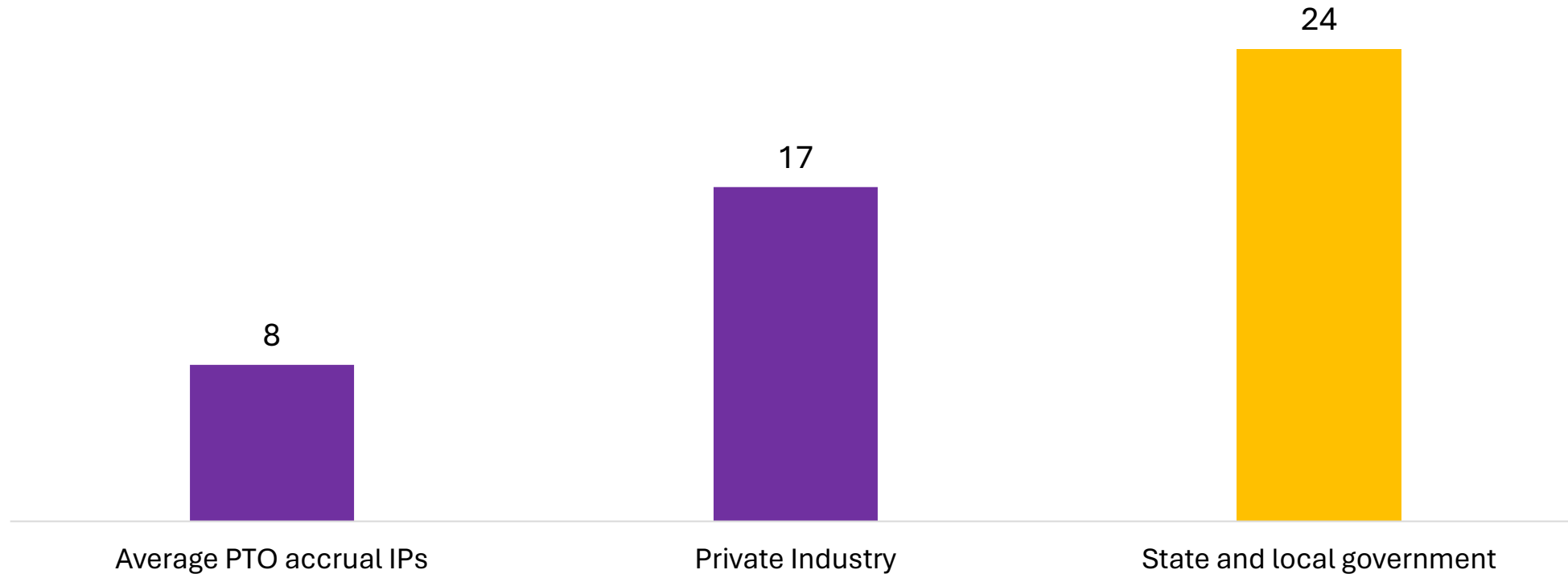


Source: own elaboration with information SEIU 775 & Consumer Direct of Washington CBA 2023-2025; “Clinical Signs and Symptoms of Influenza | CDC,” October 3, 2022. <https://www.cdc.gov/flu/professionals/acip/clinical.htm>; and “About Preventing Spread of Respiratory Viruses When You’re Sick | Respiratory Illnesses | CDC,” March 1, 2024. <https://www.cdc.gov/respiratory-viruses/prevention/precautions-when-sick.html>



IPs in Washington accrue less paid time off than most other workers

Average number of sick and vacation days after 1 year of service



Source: Bureau of Labor Statistics. "Paid Leave Benefits: Average Number of Sick and Vacation Days by Length of Service Requirement." Accessed May 3, 2024. <https://www.bls.gov/charts/employee-benefits/paid-leave-sick-vacation-days-by-service-requirement.htm> and SEIU 775.

...and IPs also have less PTO than workers in similar positions in the state of Washington



- **WA State – CNAs (part-time, pay status for 80 non-overtime hours in a calendar month)**
 - Vacation leave: estimated **13** days per year during the first year of employment
 - Sick days: Up to **12** sick days per year (max. 8 hours per month)
- **Full Life Care (WA Home Care agency):**
 - 1/20 with 125 hours cap
 - 13 days for a full-time worker
 - 9 days for an average of 122 hours per month.



Individual Providers in WA
1 hour for every 23 hours worked, capped at 130 hours

=

- **11** days for a full-time worker
- Average IP (122/month) accrues **8** days per year

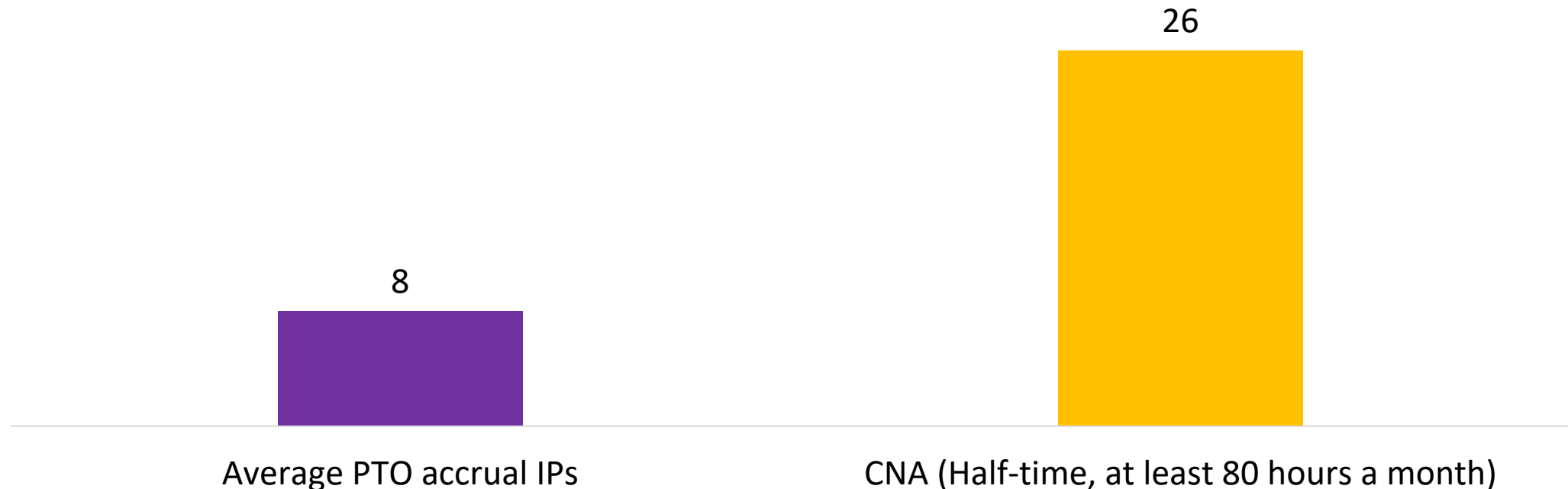
Sources:

WA State CNAs: “Collective Bargaining Agreement between The State of Washington and Washington Federation of State Employees” Effective July 1, 2023, through June 30, 2025, https://ofm.wa.gov/sites/default/files/public/labor/agreements/23-25/wfse_gg.pdf

WA home care agencies: Collective Bargaining agreements 2023 – 2025 found at <https://seiu775.org/findyourcontract/>

CNAs working part time for the state have 18 more paid days off over the course of the first year of employment than IPs in WA state that might be working as caregivers for 10 years or more.

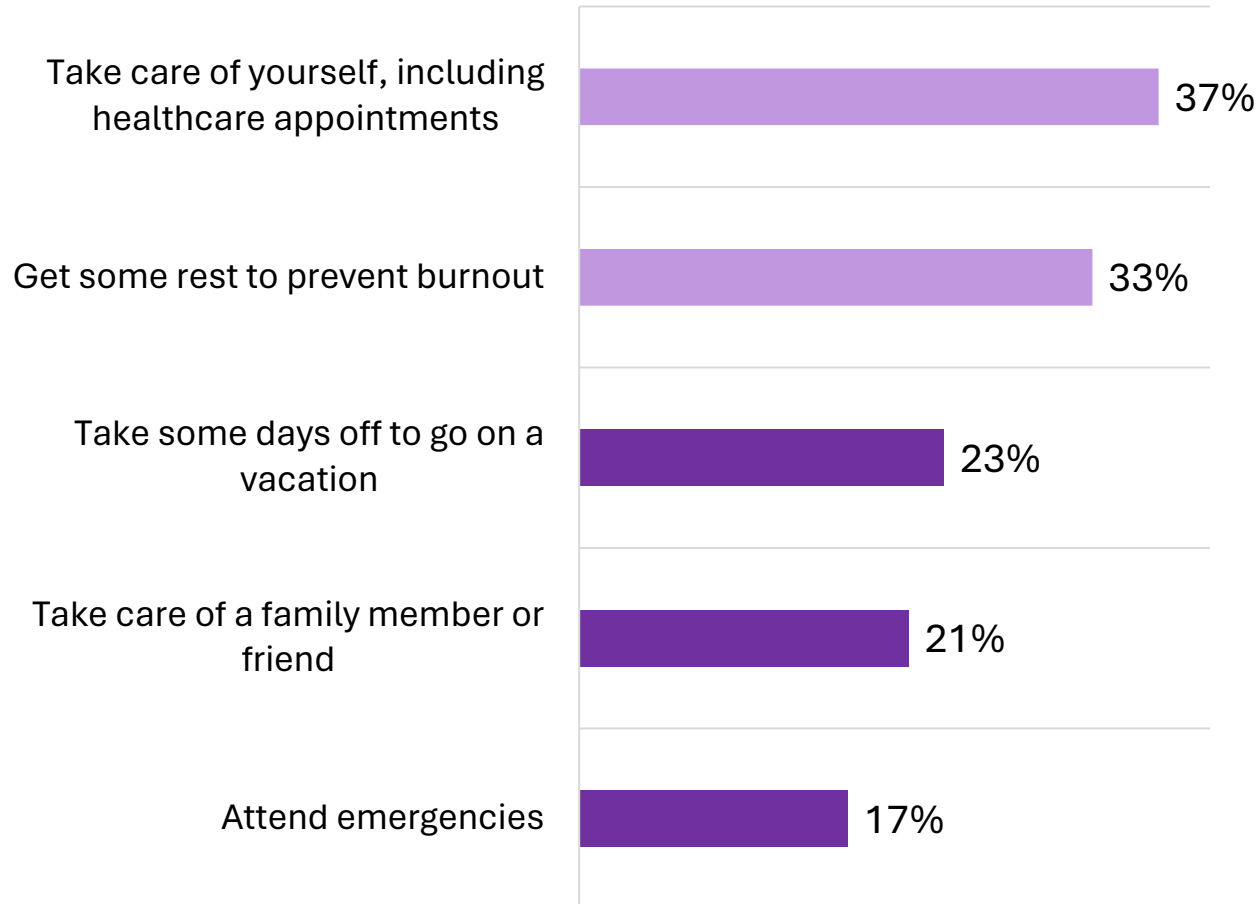
Comps: Vacations and time off in a year



Sources: WA State CNAs: “Collective Bargaining Agreement between The State of Washington and Washington Federation of State Employees” Effective July 1, 2023, through June 30, 2025, https://ofm.wa.gov/sites/default/files/public/labor/agreements/23-25/wfse_gg.pdf

Paid Time Off

Reasons why caregivers Utilized Paid Time Off (PTO)
in the Last 12 Months



Source: SEIU 775 Member survey, March 2024

- Access to adequate paid sick leave means:
 - Less **occupational injury**.
 - Less spread of **contagious disease**.
 - **Less presenteeism** (the act of workers going to work while ill), and **employee death**.
 - **Improved retention**.

Source: "All Workers Should Be Able to Earn Time off: The Federal Government Should Guarantee It," *Brookings*, February 29, 2024. <https://www.brookings.edu/articles/all-workers-should-be-able-to-earn-time-off-the-federal-government-should-guarantee-it/>.

31%

of family caregivers who initially responded they would not provide care to a client other than a family member if they did not need the care, said they would be willing to do it if they had more paid time off.

**PTO and
recruitment
of family
members**

Holidays

Where we were and where we're at...

2022 - Before 1st RSB

- 2 holidays

SEIU/CDWA bargaining

- 2 holidays

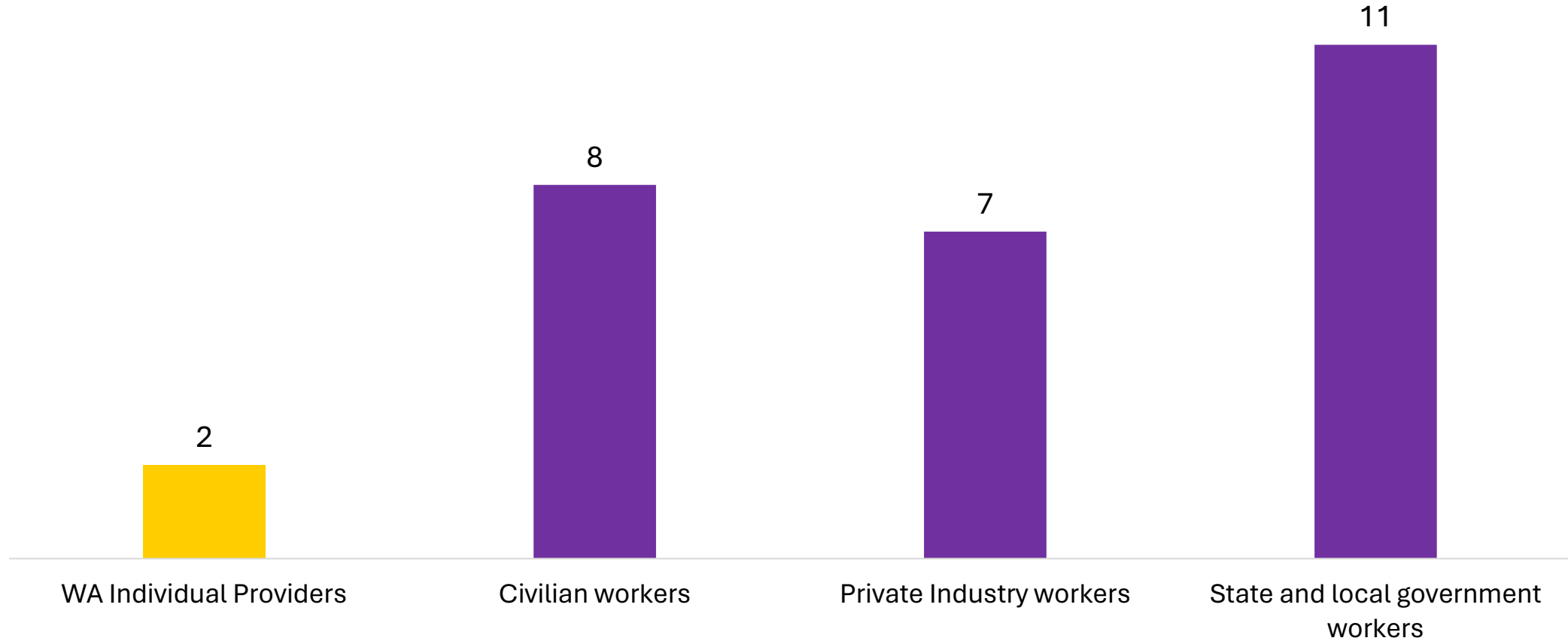
Paid holidays are an equity issue

- “Holidays however deserve consideration simply from an equity basis. The Arbitrator is not aware of any work group in the public or private sector that does not have some provision for Holidays.”
- “Given the emotional and physical nature of the work of the Individual Providers, the Arbitrator views one Holiday as a small step toward filling an essential need of the IPs...”

Arbitrator Skratek pp. 33-34.

IPs have less access to paid holidays than an average worker in the US

WA IP paid holidays and median number of paid holidays for workers in the U.S., March 2023

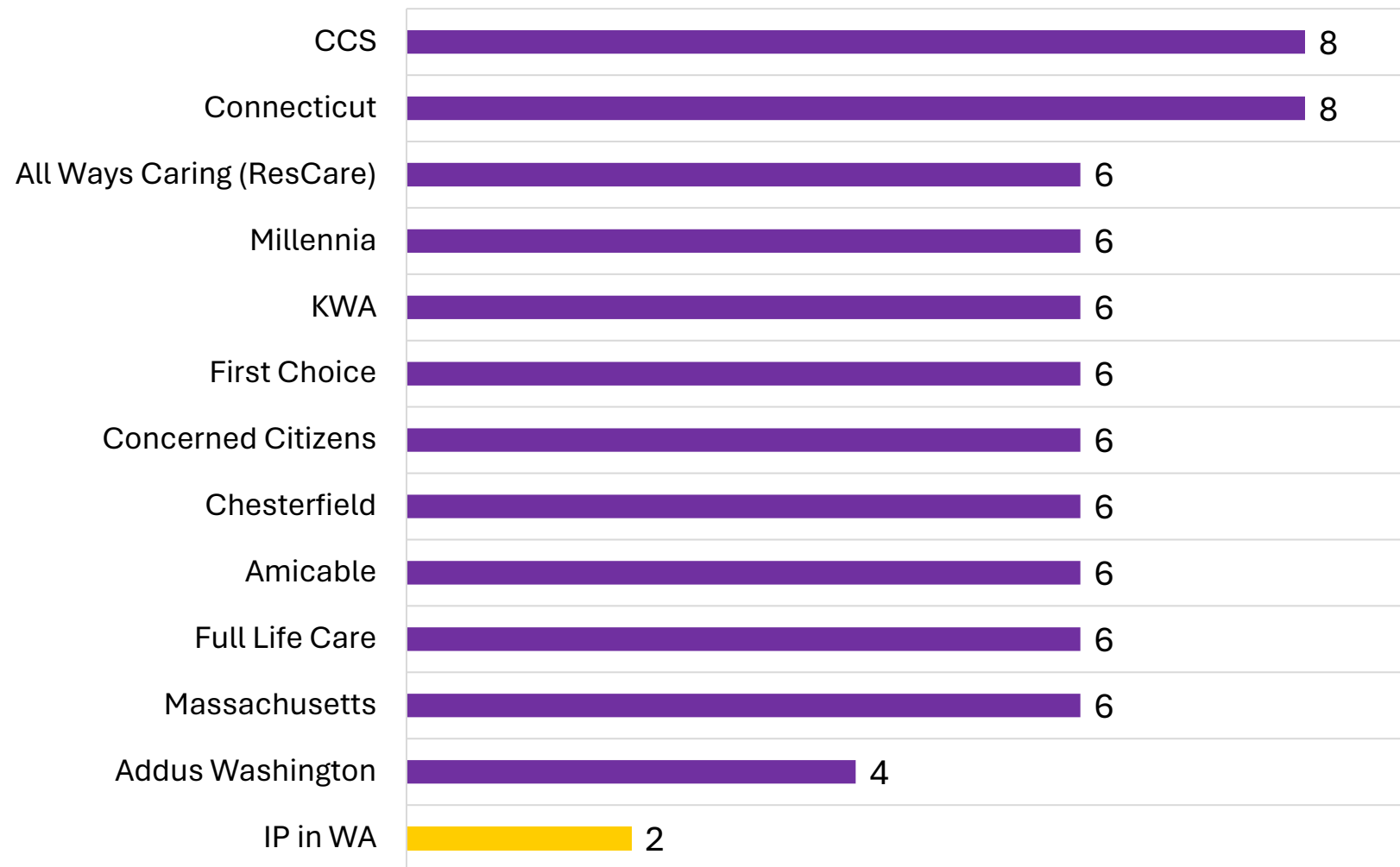


Source: Bureau of Labor Statistics. "Employee Benefits in the United States, March 2023 : U.S. Bureau of Labor Statistics." September 2023. <https://www.bls.gov/ebs/publications/employee-benefits-in-the-united-states-march-2023.html#Glossary>.

**...and fewer
paid holidays
than agency
workers in
WA and even
other states
such as MA,
and CT**



Premium Paid Holidays

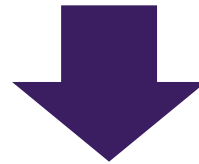


Source: Analysis of other [SEIU Local Home Care Contracts](#) & [SEIU 775 Home Care Contracts](#)

Mileage

Current status

Home care workers are compensated when driving their personal vehicles to provide services to their consumers (such as essential shopping and travel to medical services).



Compensation

A per-mile-driven basis at the standard mileage rate recognized by the Internal Revenue Service up to a maximum of

110 miles per month per consumer up from 100 in June 2023.

Source: SEIU 775 CBA with CDWA, 2023 – 2025.

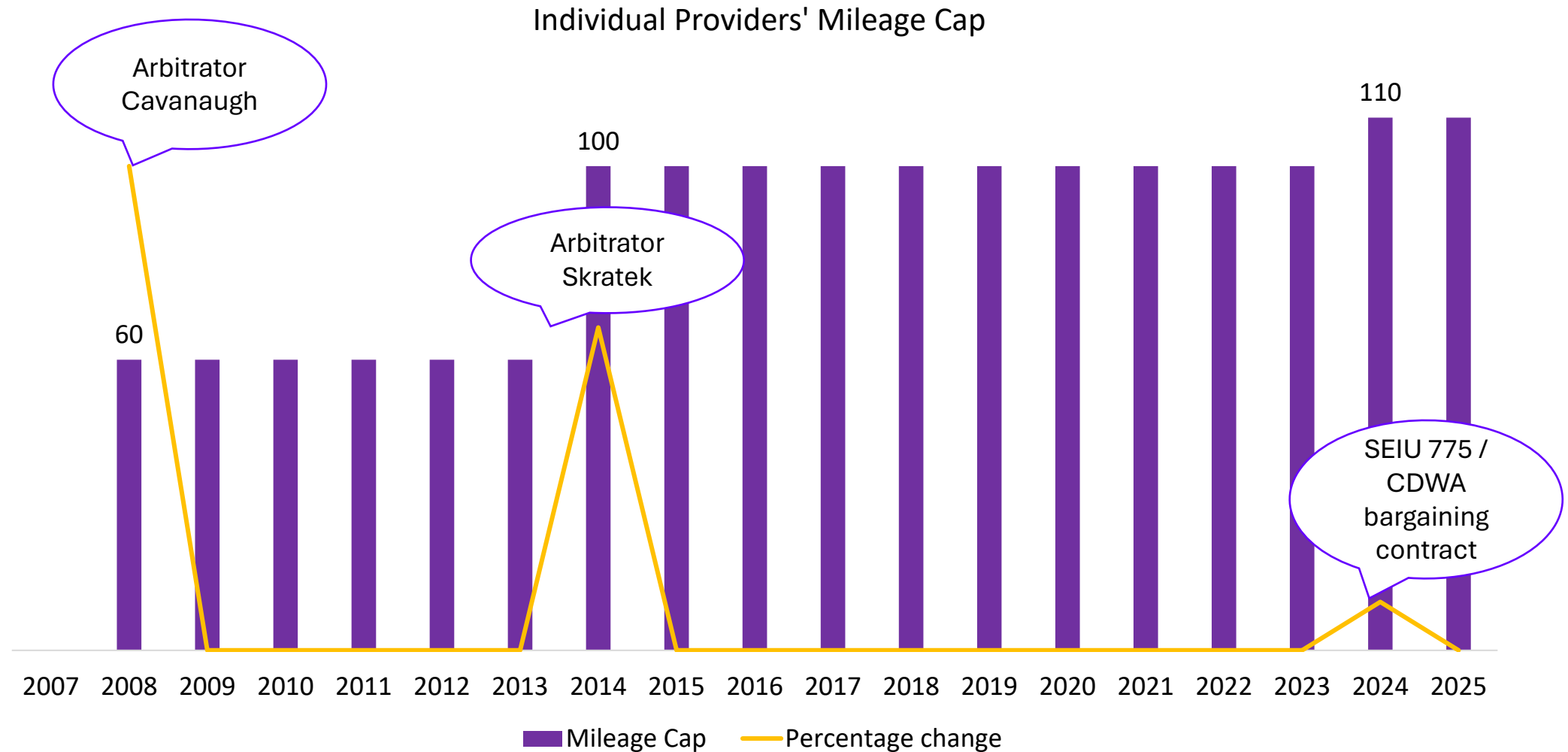
Unreimbursed miles mean caregivers are not getting paid for work that has been authorized under an approved plan of care

“I find it difficult to understand why a low-wage worker, using his or her own vehicle for transportation of a client-transportation that is specifically found necessary and authorized under an approved plan of care should be required to absorb the cost of that transportation. I am mindful that in the recent past, gas prices have occasionally spiked to near \$3.50 a gallon, and that the low points when prices do fall back to "normal" seem to be trending sharply upward.”

Arbitrator Cavanaugh, p. 23

2006 Mileage Award

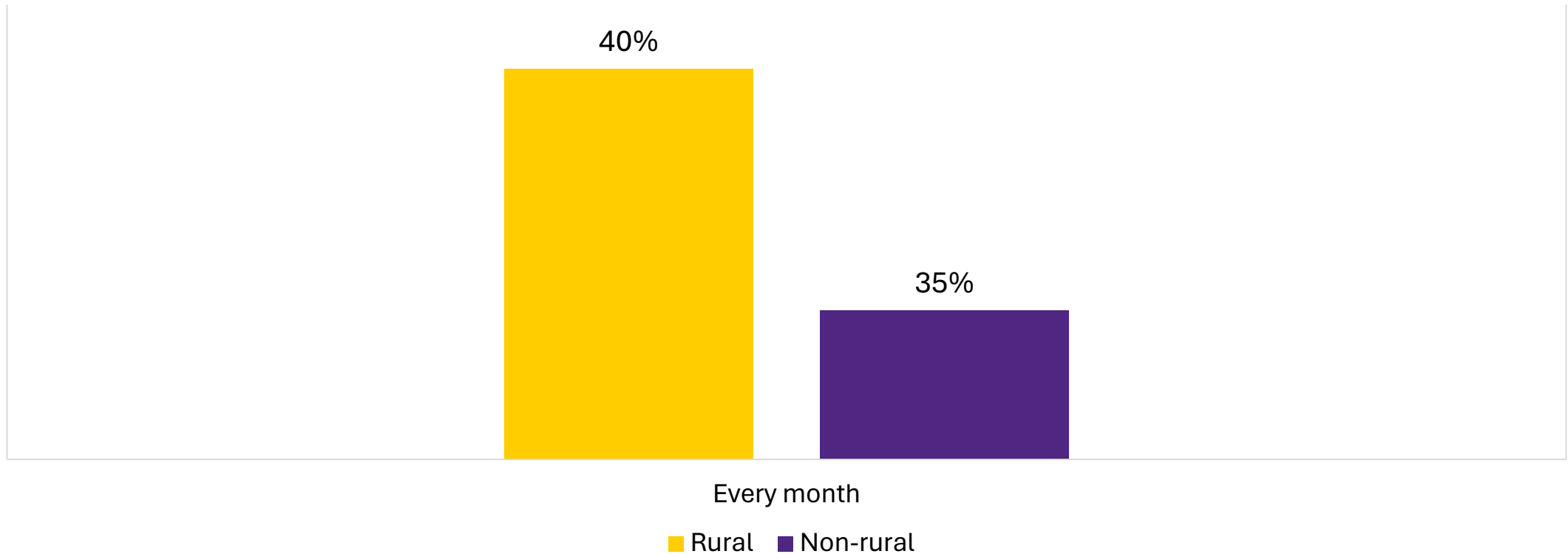
Mileage cap for IPs in WA has not substantially increased for over 10 years



Source: SEIU 775 CBAs with the state of Washington, arbitration agreements, and CBA with CDWA.

40% of caregivers who responded to the survey and live or provide services in rural areas reported driving over 110 miles **every month in the past year.**

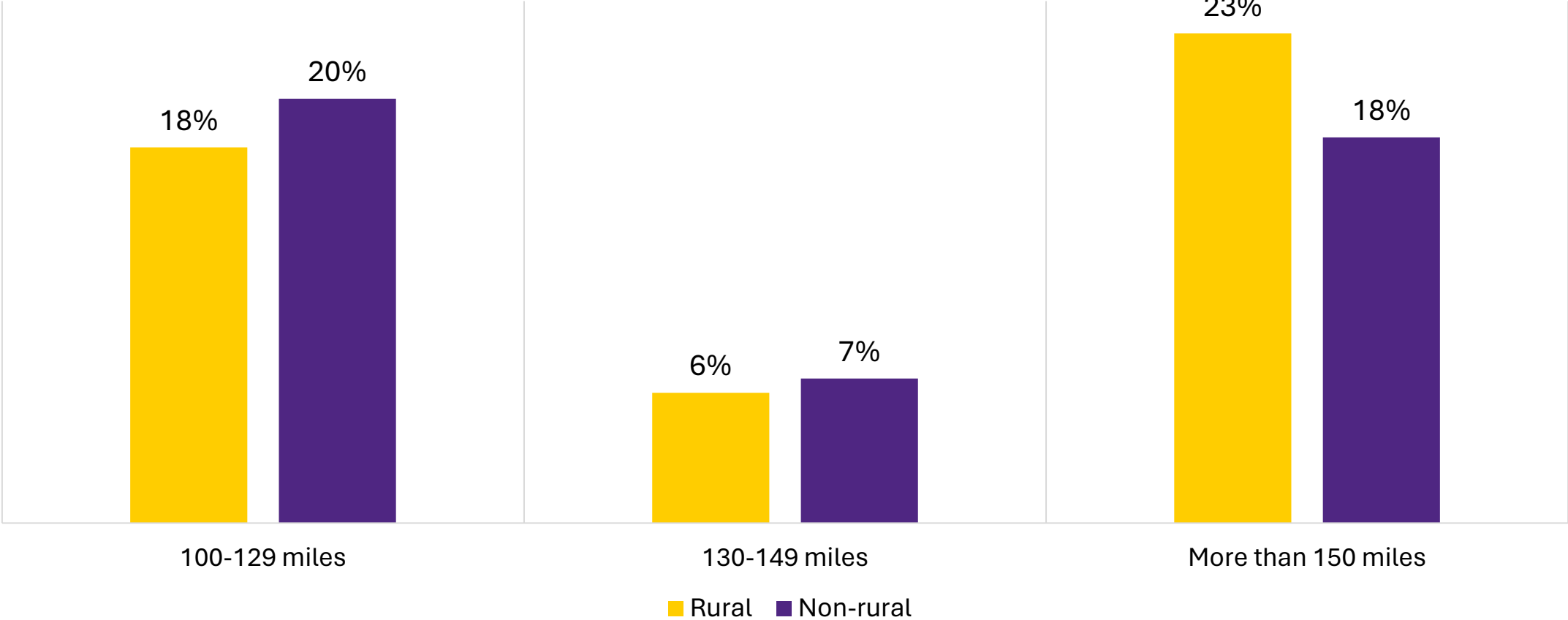
Months of the past year when caregivers drove more than 110 miles per month for your client?



Source: SEIU 775 Member survey, March 2024

And this has an impact on IPs, particularly those providing services in rural counties.

About how many miles per month do you drive for your home care work on average?



Source: SEIU 775 Member survey, March 2024

Gas prices in WA are significantly high

Weekly Retail Gasoline and Diesel Prices



eia Data source: U.S. Energy Information Administration

Source: "Retail Prices for Gasoline, All Grades." Accessed May 3, 2024. https://www.eia.gov/dnav/pet/pet_pri_gnd_a_epm0_pte_dpgal_w.htm.

Forbes ADVISOR

Per gallon of regular gas. Prices are updated daily.
Map: Forbes Advisor • Source: AAA • Embed • Created with Datawrapper

Which State Has the Highest Gas Prices?

California has the highest price of gas, with an average of \$5.39 per gallon of regular gas.

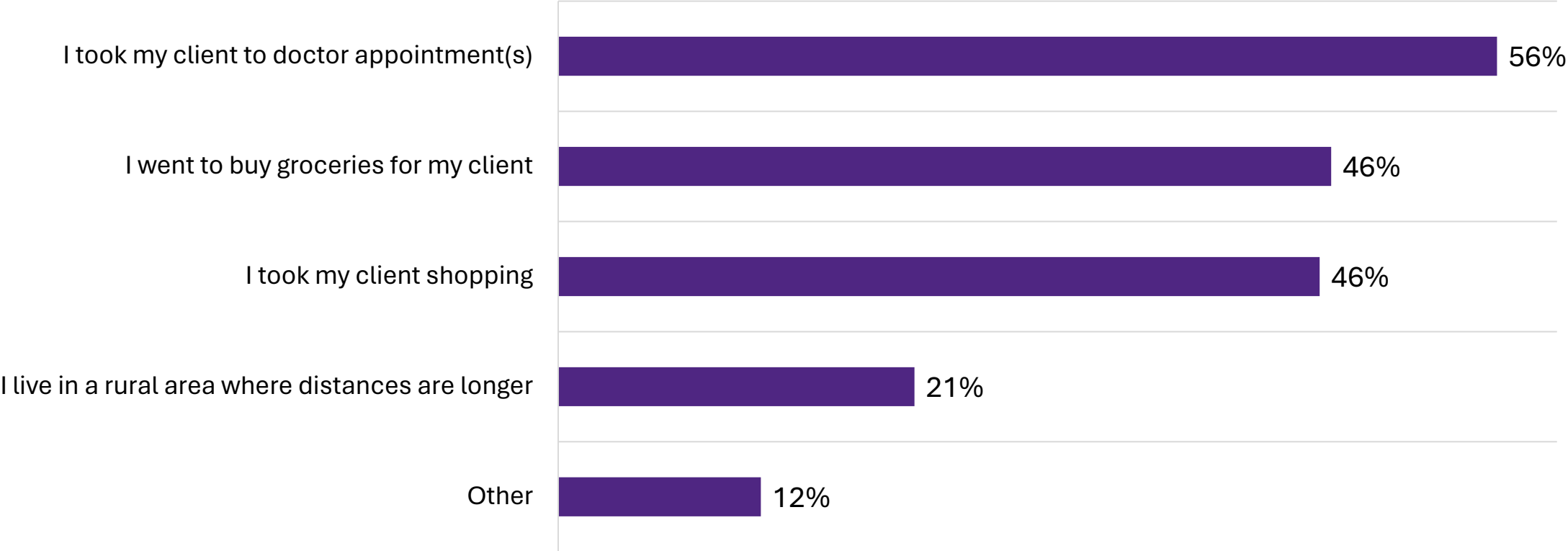
State	Gas Price Today	Price Last Week	Price Last Month
1 California	\$5.39	\$5.11	\$4.87
2 Hawaii	\$4.81	\$4.69	\$4.78
3 Washington	\$4.69	\$4.53	\$4.60
4 Nevada	\$4.56	\$4.44	\$4.26
5 Oregon	\$4.51	\$4.27	\$4.11

Per gallon of regular gas. Prices are updated daily.
Table: Forbes Advisor • Source: AAA • Created with Datawrapper

Source: "Today's Highest Gas Prices By State – Forbes Advisor." Accessed May 3, 2024. <https://www.forbes.com/advisor/personal-finance/gas-prices-by-state/>.

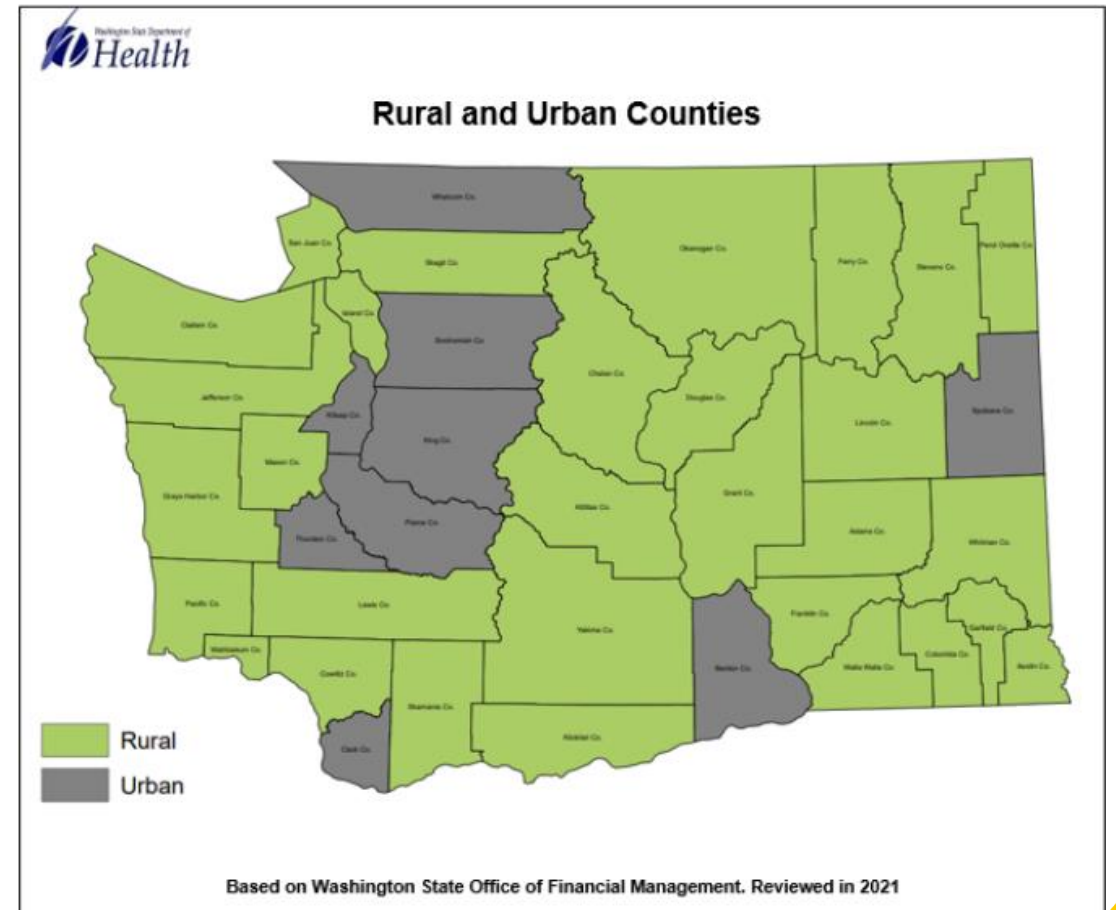
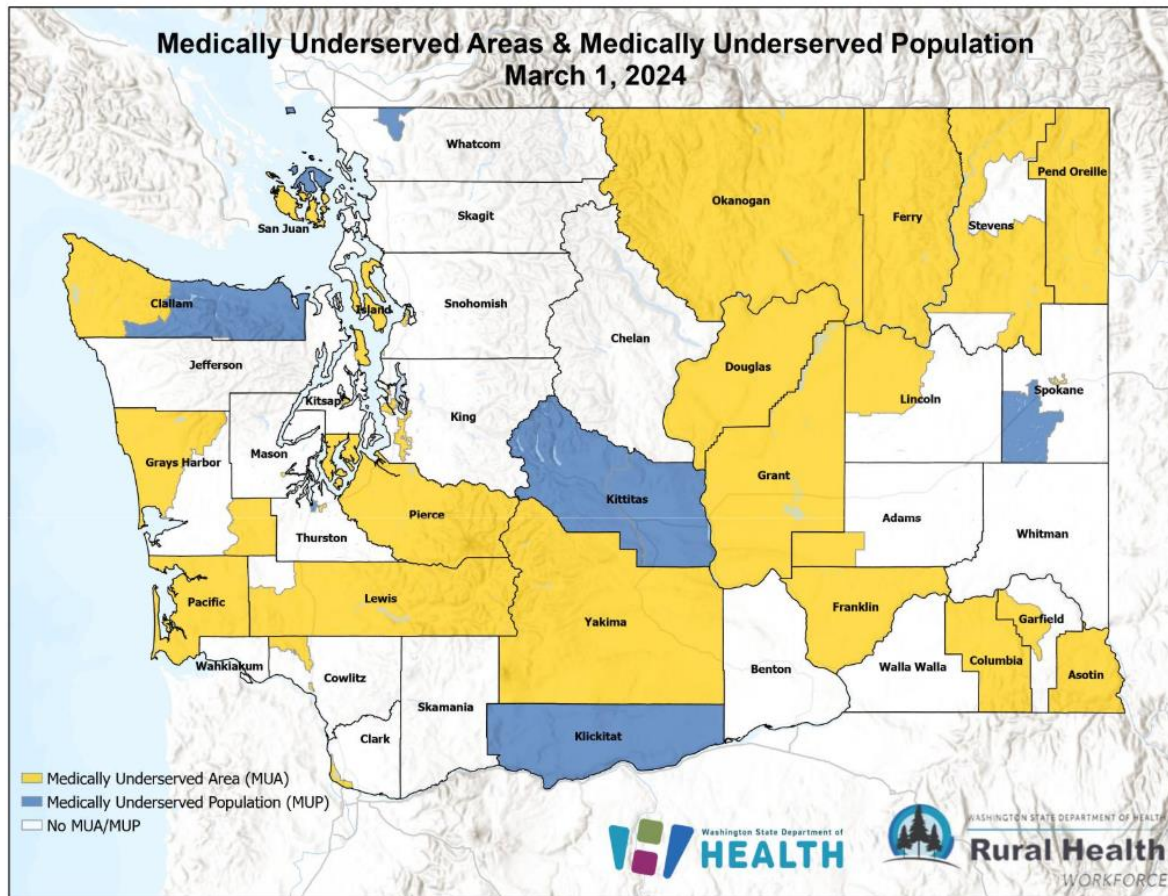
Caregivers need to drive more miles to get their clients to services and goods that they need.

Reasons caregivers drove more than 110 miles per month



Source: SEIU 775 Member survey, March 2024

... with many of those services being scarce, caregivers are forced to drive more.



Source: "Data, Maps and Other Resources," Washington State Department of Health, 2024, <https://doh.wa.gov/public-health-provider-resources/rural-health/data-maps-and-other-resources>.

Comparables: mileage cap

Provider	Cap on mileage reimbursement
Addus Washington	No cap
Amicable	No cap
CCS	No cap
Chesterfield	No cap
Concerned Citizens	No cap
First Choice	No cap
Full Life Care	No cap
Millennia	No cap
All Ways Caring	No cap

Source: Analysis of other [SEIU Local Home Care Contracts](#) & [SEIU 775 Home Care Contracts](#)

Admin Time

Administrative Time – Current contract

15 minutes
every **2 weeks**
for caregivers'
administrative
time



Admin tasks that require time and for which caregivers are not reimbursed:

EVV – every single day, logging in and logging out, and making sure times are recorded accurately.

Fixing and troubleshooting EVV errors

Mileage admin

Scheduling mandatory training, every year

Logging in mileage

Background checks – at least every 2 years

Writing client notes

Differentials

Increase acuity of clients receiving services in the state

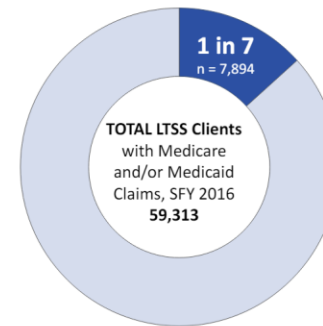
Prevalence of Common Conditions among ALTSA Clients

Condition	Percentage of Clients with Diagnosis
Hypertension	63%
Depression	45%
Anxiety disorder	29%
Diabetes – non-insulin dependent	21%
Chronic Obstructive Pulmonary Disease (COPD)	17%
Diabetes – insulin dependent	15%
Stroke	13%
Dementia other than Alzheimer’s disease	13%
Congestive heart failure	12%
Post-traumatic stress disorder	10%
Bipolar disorder	8%
Cancer	6%
Schizophrenia	6%
Traumatic brain injury	4%
Alzheimer’s disease	4%

Department of Social and Health Services

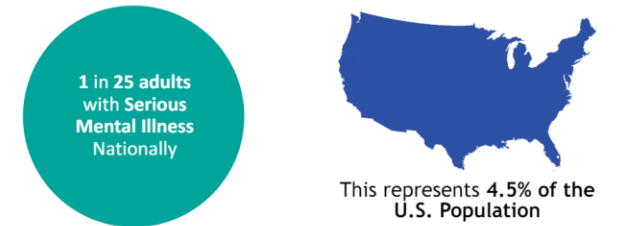
Mental illness prevalence is increasing nationally and locally

Overall prevalence of **Psychotic Disorders in Washington State** among LTSS clients with Medicare and/or Medicaid claims



SOURCE: State data: DSHS Research and Data Analysis Division, Integrated Medicare and Medicaid claims, SFY 2016. (Note: Psychotic Disorders are a subset of SMI. Total SMI numbers in WA are likely higher than 1 in 7). National data: <https://www.nimh.nih.gov/health/statistics/mental-illness.shtml> (Note: National data is total adult population and is not specific to the Medicaid population).

Prevalence of Serious Mental Illness Nationally



- The prevalence of SMI is higher among women (5.7%) than men (3.3%)
- Young adults aged 18-25 years had the highest prevalence of SMI (7.5%) compared to adults aged 26-49 years (5.6%) and aged 50 and older (2.7%).
- The prevalence of SMI was highest among the adults reporting two or more races (8.1%), followed by White adults (5.2%). The prevalence of SMI was lowest among Asian adults (2.4%).

Department of Social and Health Services

23% of caregivers who responded they were not willing to provide care to clients with advanced needs said that they would be willing to for a differential of \$1/hr.

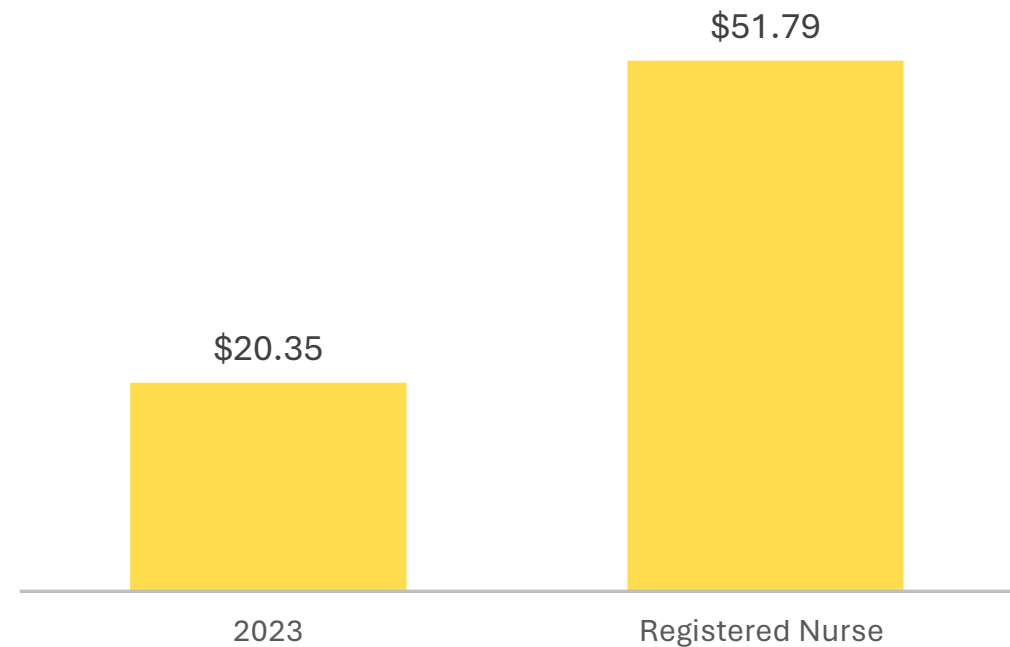
Nurse delegation saves money, but without differential pay for those tasks, their labor is undervalued and underpaid

- Individual providers working with nurse delegation in their care plans can do nurse delegated tasks, but contrary to what happens in other agencies in Washington, such additional labor is not recognized.

Nurse delegation:

- Creates cost savings for Medicaid recipients
- Contributes to the professionalization of the workforce
- Lowers burden on family members who would have to leave work to provide similar dedicated tasks

IP average wage vs Registered Nurse median hourly wage, 2023



Source: Own elaboration with information from "Washington - May 2023 OEWS State Occupational Employment and Wage Estimates," BLS, accessed May 4, 2024, https://www.bls.gov/oes/current/oes_wa.htm, and SEIU 775 estimates on average IP wage for 2023.

**9 out of 10 SEIU
775 agencies
have nurse
delegation
differentials**



Organization	Nurse Delegation
Addus Washington	35 cents
Amicable	25 cents
CCS	50 cents
Chesterfield	25 cents
Concerned Citizens	25 cents
Full Life Care	50 cents, 07/24: 75 cents
KWA	25 cents
Millennia	25 cents
All Ways Caring (ResCare)	60 cents
IPs	None (\$0)

Other states and agencies in WA have special and extraordinary care differentials



Organization	Extraordinary/Special Care
Massachusetts	Starting Jan 2026 : additional \$3.25/hr for caring for a client with complex needs.
Addus Washington	50 cents (special/extraordinary care); 1 dollar (clients with communicable diseases)
Amicable	25 cents (Total Transfer and/or Total Toileting Differential, Client Special Skills Behavioral Needs Differential)
CCS	50 cents Employees in this category are assumed to be able to work for clients who have client-specific needs such as Toileting, Transfer, and Behavioral issues. Client-specific differentials – are based on the needs of specific clients.
Chesterfield	35 cents (Combined total with special, behavioral needs, toileting, transfer)
Concerned Citizens	25 cents (Total Transfer and/or Total Toileting Differential, Client Special Skills Behavioral Needs Differential)
First Choice	50 cents for special / extraordinary care
Full Life Care	\$1 (special, extraordinary care)
KWA	50 cents (special/extraordinary care)
All Ways Caring (ResCare)	50 cents (special skill/extraordinary care)
IPs	None (\$0)

Proposal

- Enough funding for a rate that allows modest increases in PTO, holidays, fewer unpaid miles, and the creation of at least one differential for individual providers.

Thanks!

TAB 11

Transforming
Lives

Consumer Directed Employer (CDE) Rate Setting Board (RSB)

Meeting #5 | **Agenda** | May 29, 2024

Blake Office Park West 4450 10th Avenue SE, Lacey

Roosevelt & Chelan Rooms

9:00 am – 3:00 pm



Agenda overview, 9:00 – 3:00

- Welcome and Introductions
- Retirement
 - Break
- Training
 - Lunch
- Carina
- Other Benefits

Welcome and Introductions

Facilitator, Chair

- Welcome and Introductions
- Approval of Minutes 05.17.2024
- Opening Remarks/Old Business

UPDATED

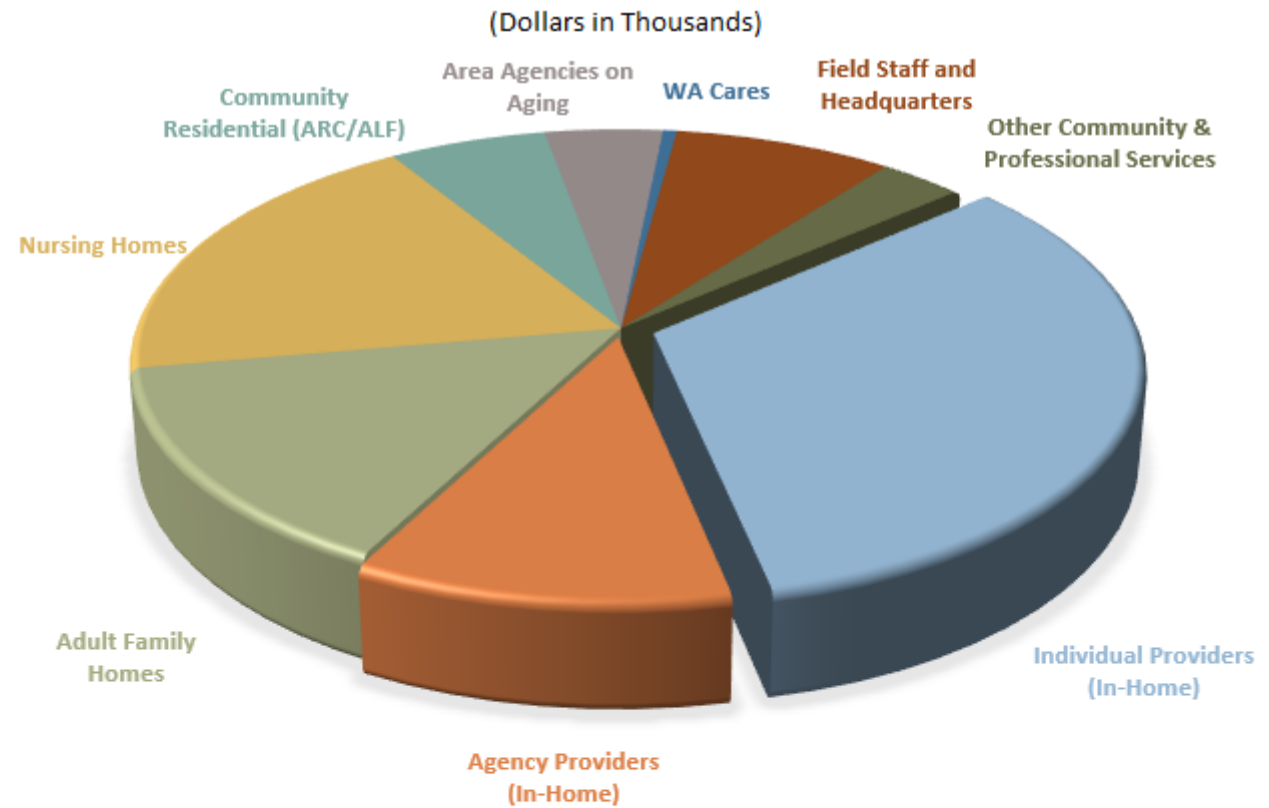
History of Individual Provider (IP) Funding

Jonathon G. Smith, Rates Data Administrator

Office of Rates Management

Management Services Division, ALTSA

AL TSA 23-25 Biennium Budget Summary



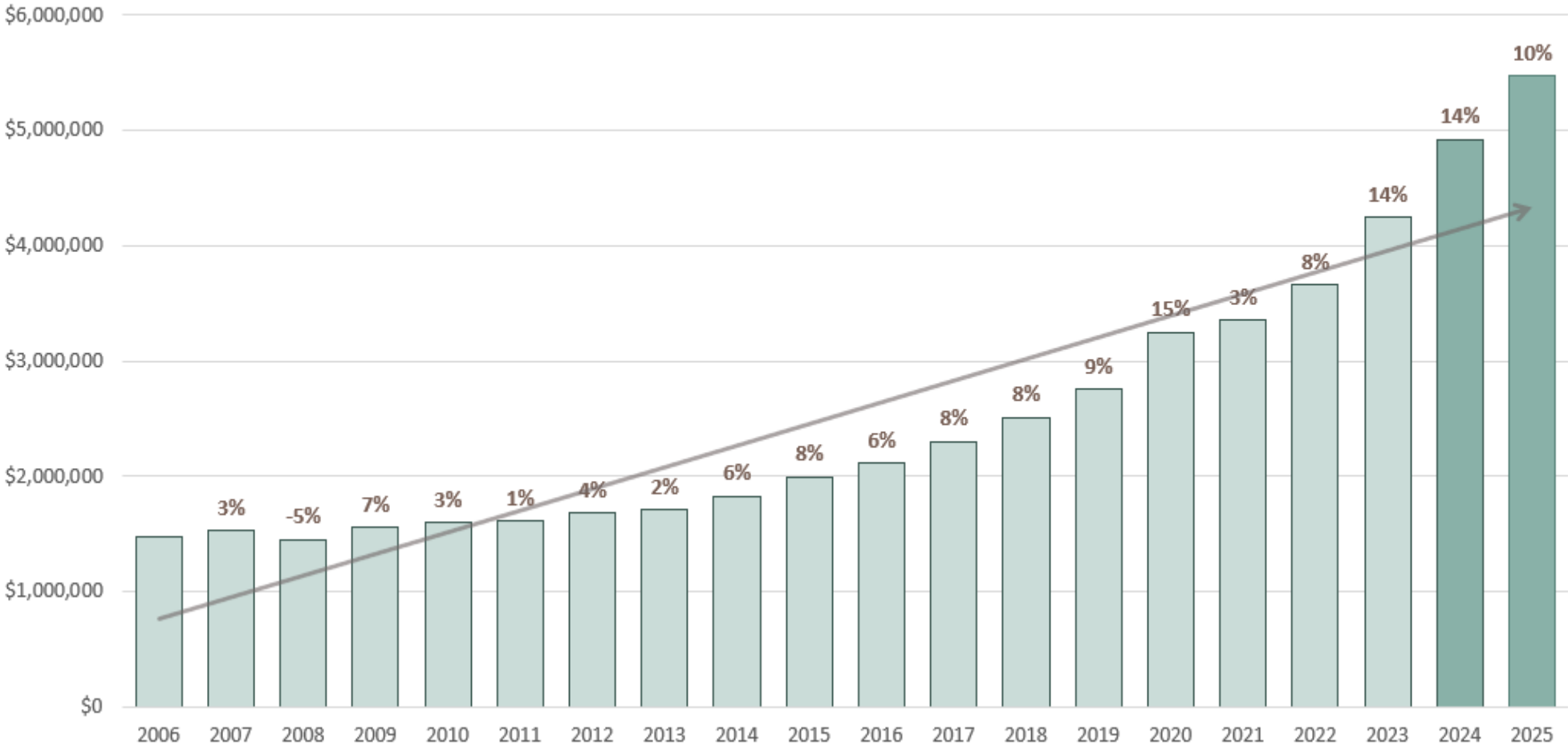
2023-25 Budget

(2024 Supplemental included)

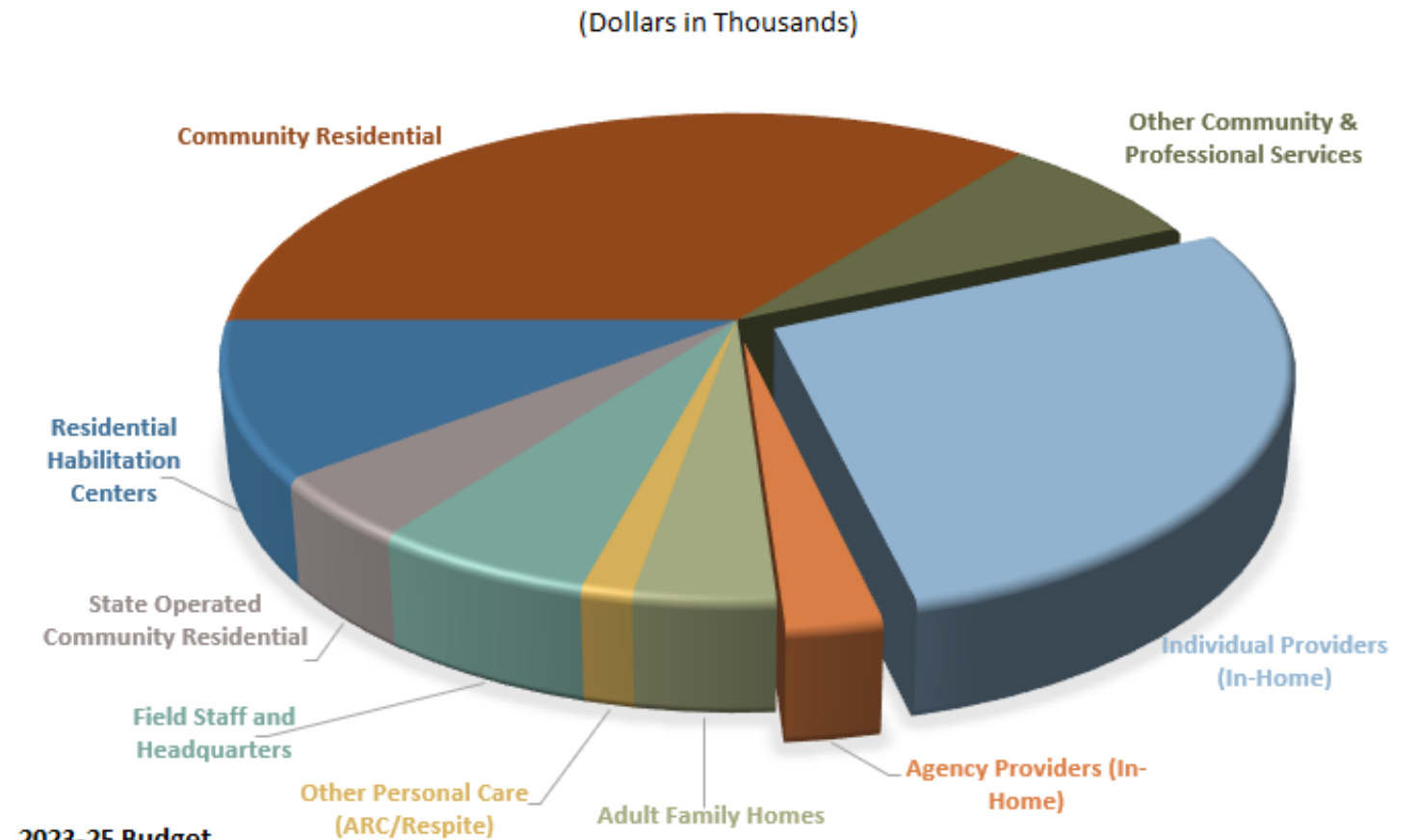
	FTEs	GF-S	Other	Total
Individual Providers (In-Home)	0.0	1,464,182	-	3,439,736
Agency Providers (In-Home)	0.0	488,061	-	1,146,579
Adult Family Homes	0.0	670,657	1,978	1,504,322
Nursing Homes	0.0	796,136	134,084	1,963,480
Community Residential (ARC/ALF)	0.0	288,592	202	621,536
Area Agencies on Aging	0.0	243,335	-	463,885
WA Cares	61.4	-	53,701	53,701
Field Staff and Headquarters	2707.7	413,274	55,301	863,936
Other Community & Professional Services	18.1	168,383	-	331,671
TOTAL	2787.1	4,532,620	245,266	10,388,845

ALSA Budget History by Fiscal Year

(Dollars in Thousands)



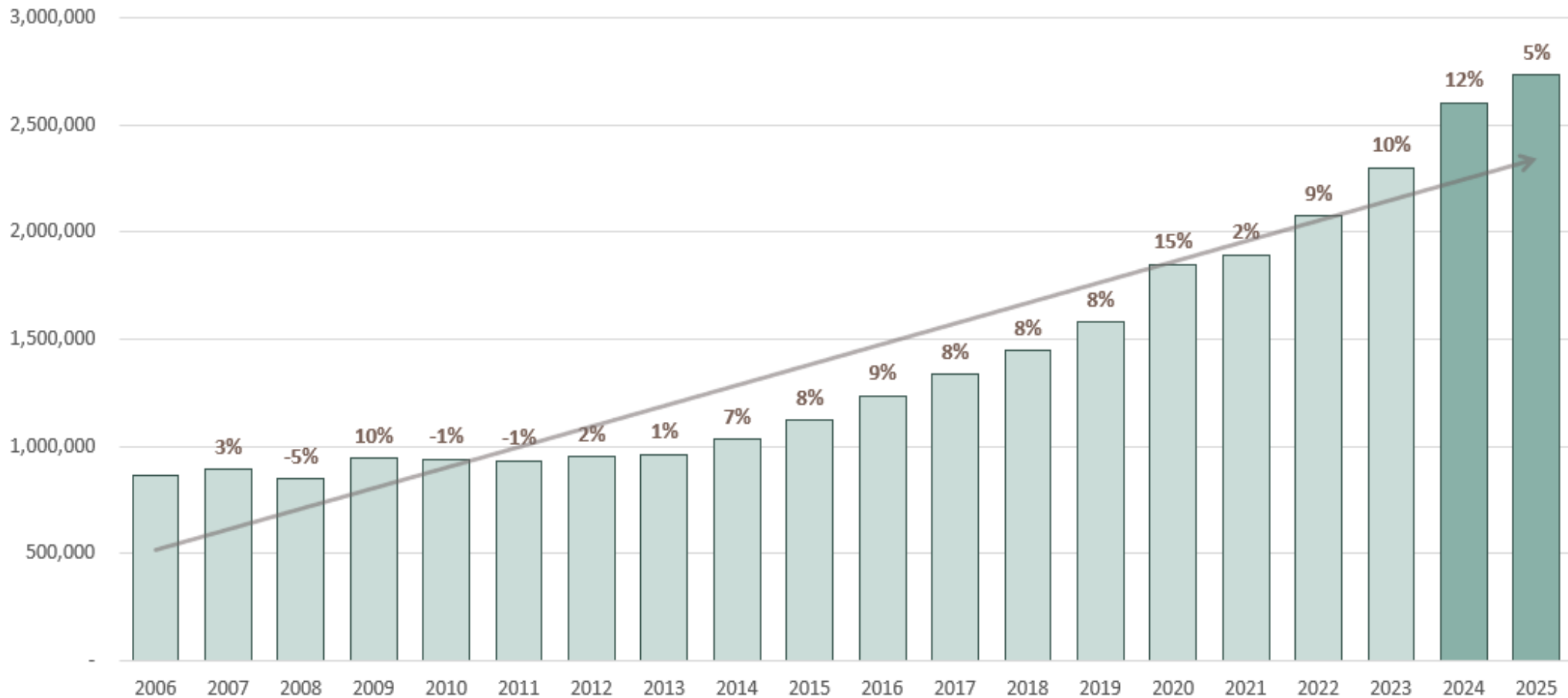
DDA 23-25 Biennium Budget Summary



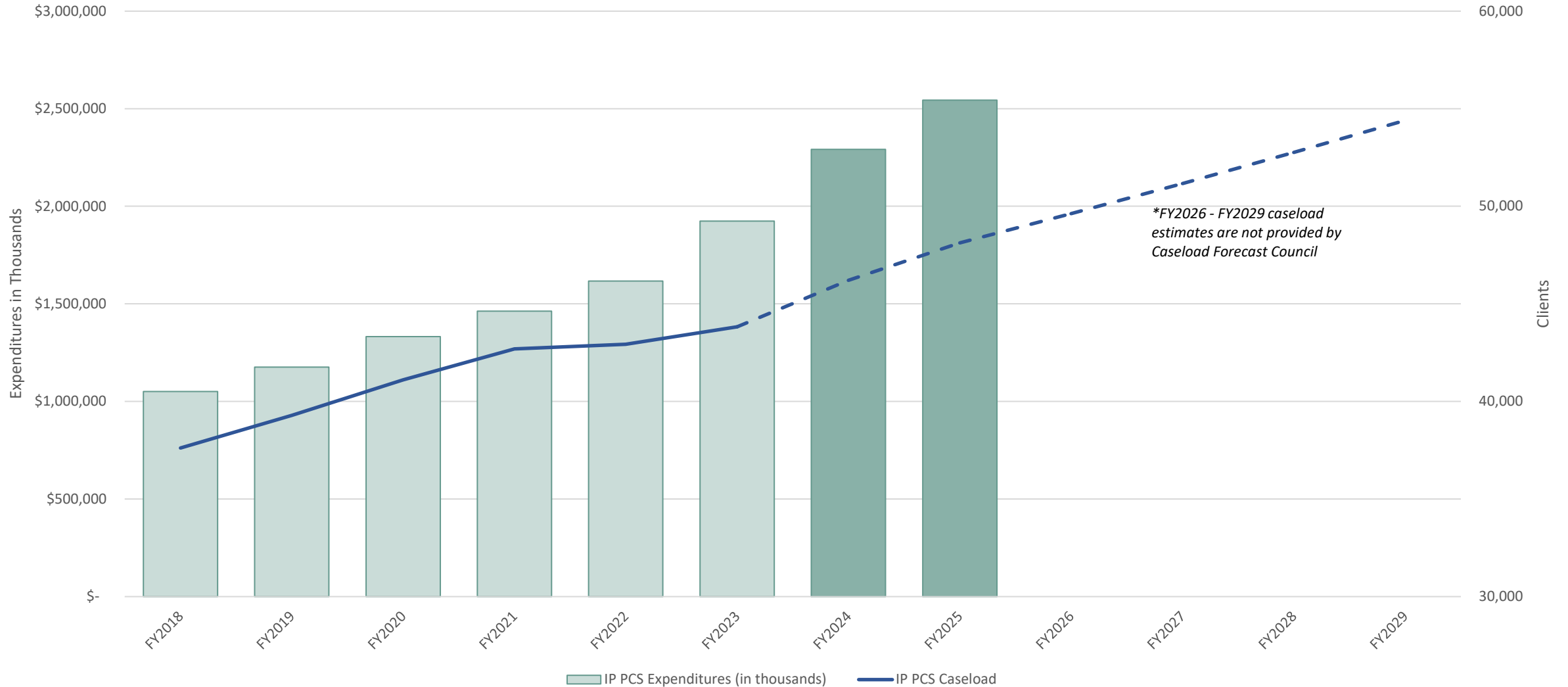
2023-25 Budget (2024 Supplemental included)	FTEs	GF-S	Other	Total
Individual Providers (In-Home)	0.0	659,473	-	1,493,317
Agency Providers (In-Home)	0.0	60,712	-	139,975
Adult Family Homes	0.0	93,087	434	206,767
Other Personal Care (ARC/Respite)	0.0	41,194	-	75,694
Field Staff and Headquarters	1230.9	183,437	-	323,473
State Operated Community Residential	1086.6	126,413	100	230,907
Residential Habilitation Centers	1948.0	279,729	19,488	554,335
Community Residential	0.0	955,363	3,524	1,904,781
Other Community & Professional Services	0.0	208,091	32,120	406,947
TOTAL	4265.5	2,607,499	55,666	5,336,196

DDA Budget History by Fiscal Year

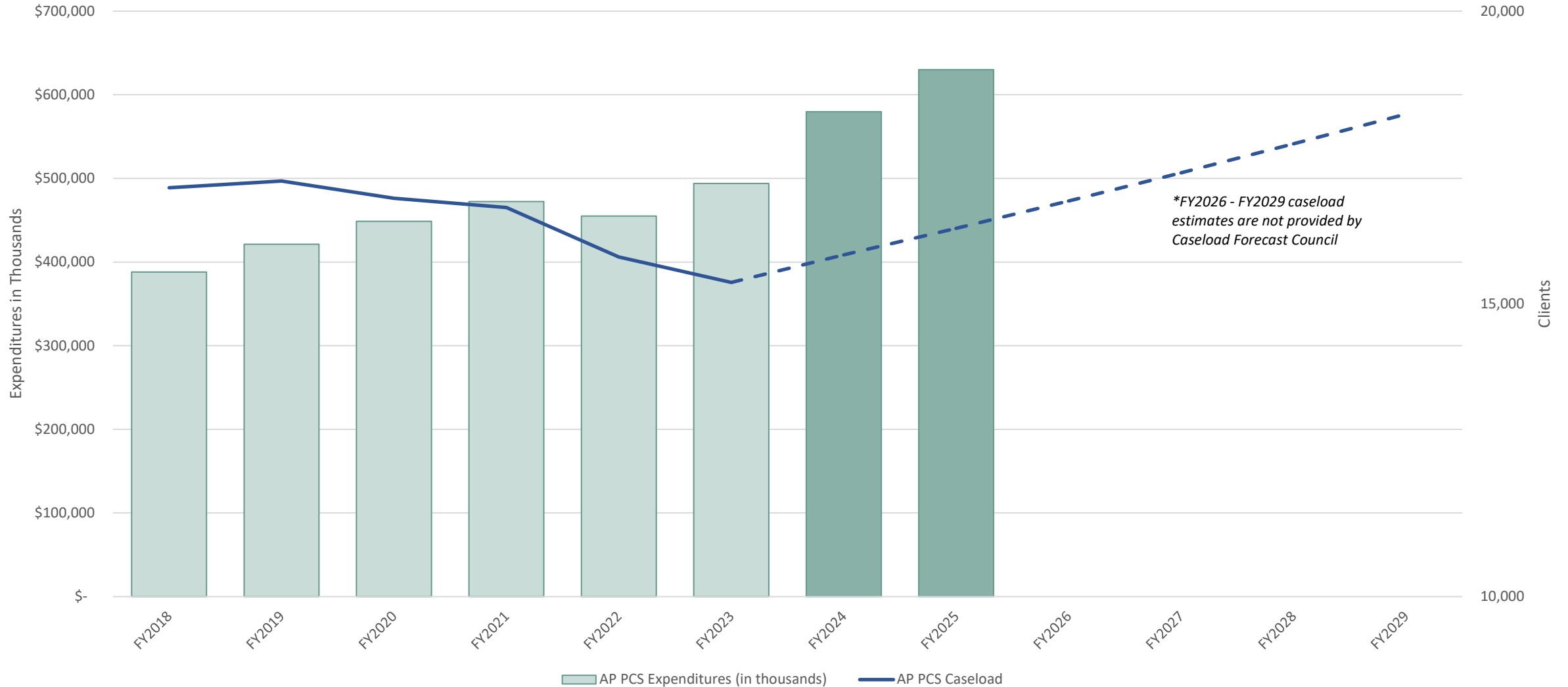
(Dollars in Thousands)



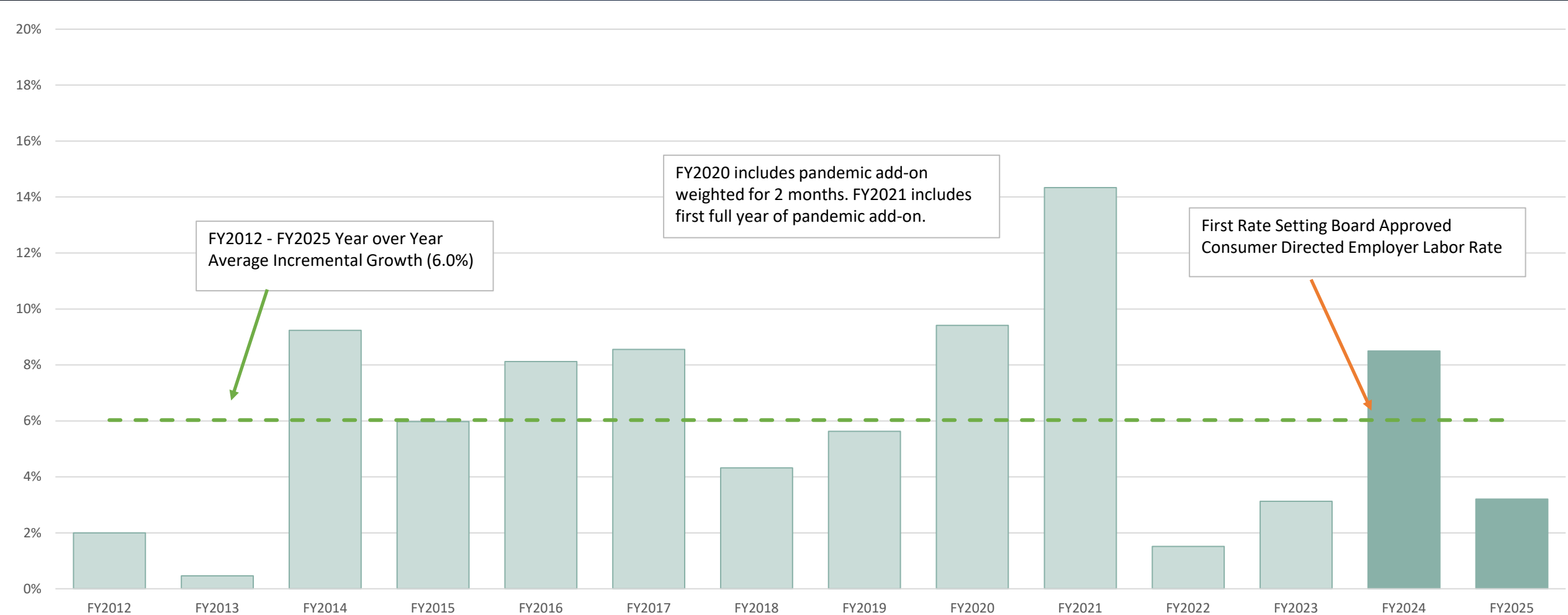
Individual Provider Personal Care Services (PCS) Caseload & Expenditures



Agency Provider Personal Care Services (PCS) Caseload & Expenditures



Individual Provider Incremental “Labor” Rate Growth, Year over Year



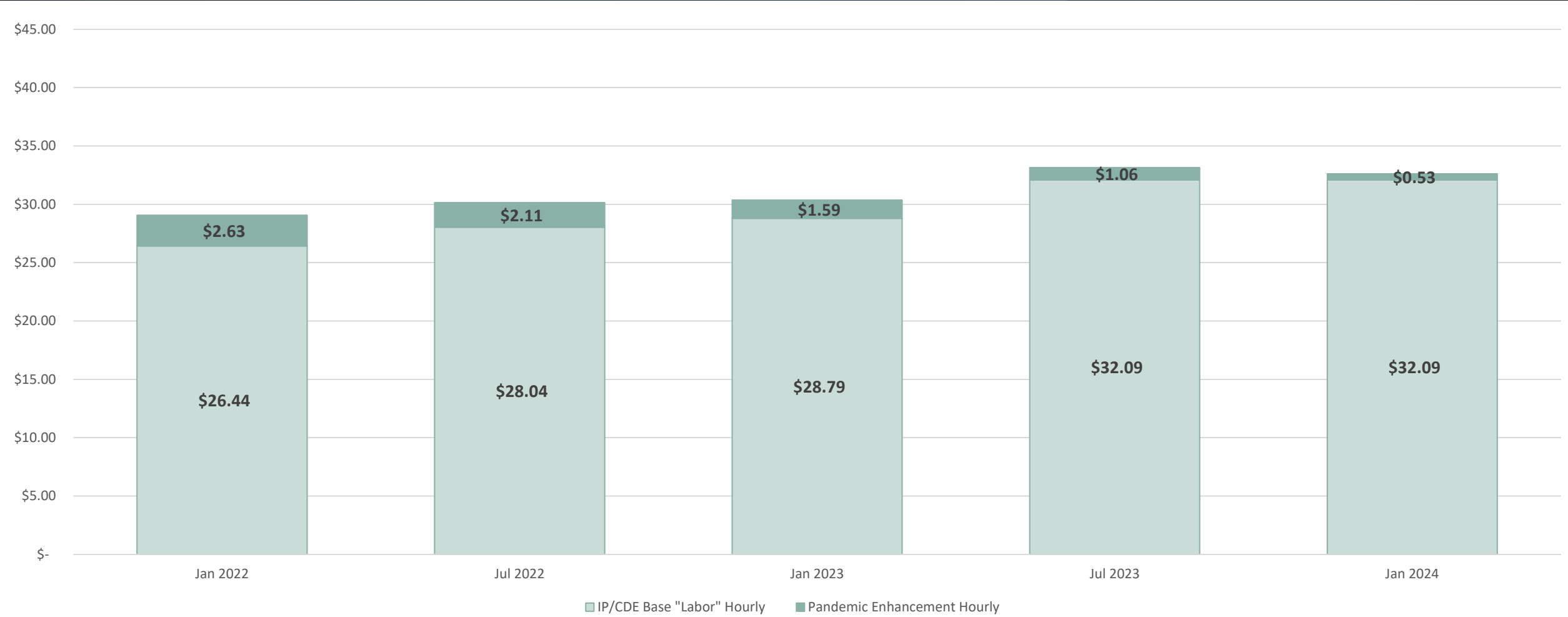
FY2012 - FY2025 Year over Year Average Incremental Growth (6.0%)

FY2020 includes pandemic add-on weighted for 2 months. FY2021 includes first full year of pandemic add-on.

First Rate Setting Board Approved Consumer Directed Employer Labor Rate

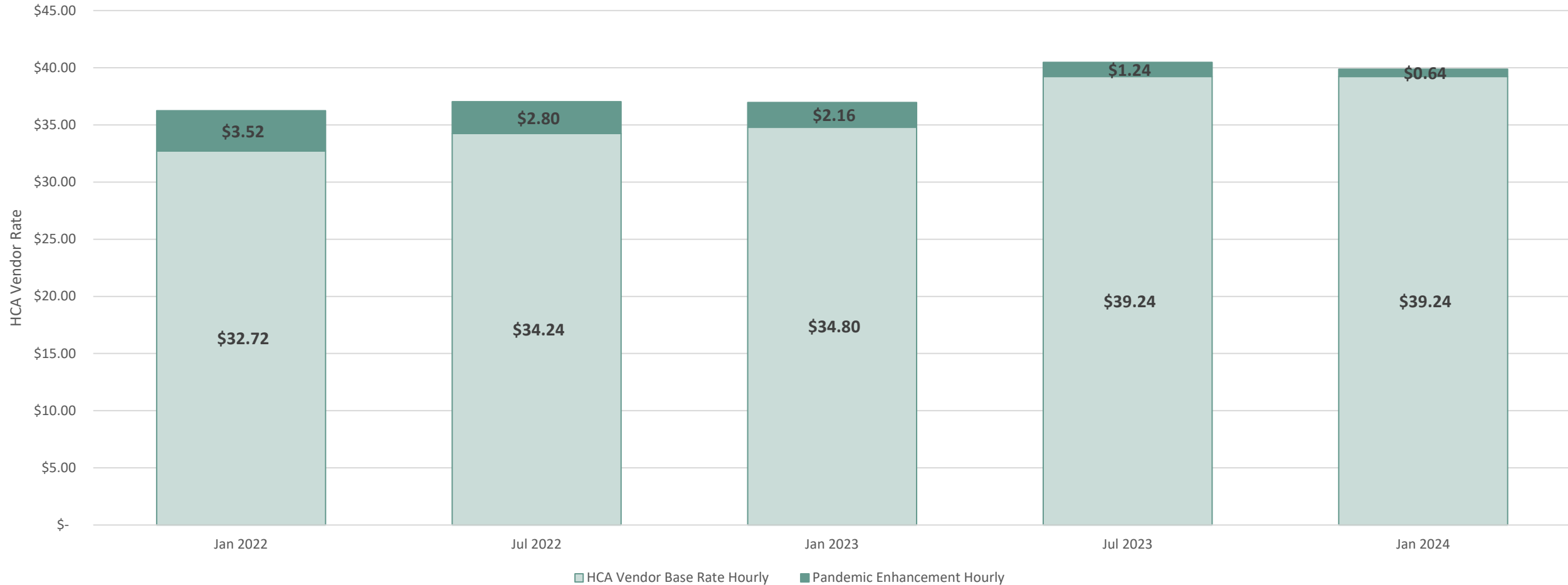
Note: Rate comparisons do not include PPE or Overtime. Otherwise, historical rates include the same considerations, when available, as current CDE labor rate structure.

IP/CDE "Labor" Rate Pandemic Enhancement Impact



Notes: Values represent weighted fiscal year averages before rounding.
July 2022 forward represents CDE rate.

Home Care Agency Hourly Vendor Rate Pandemic Enhancement Impact



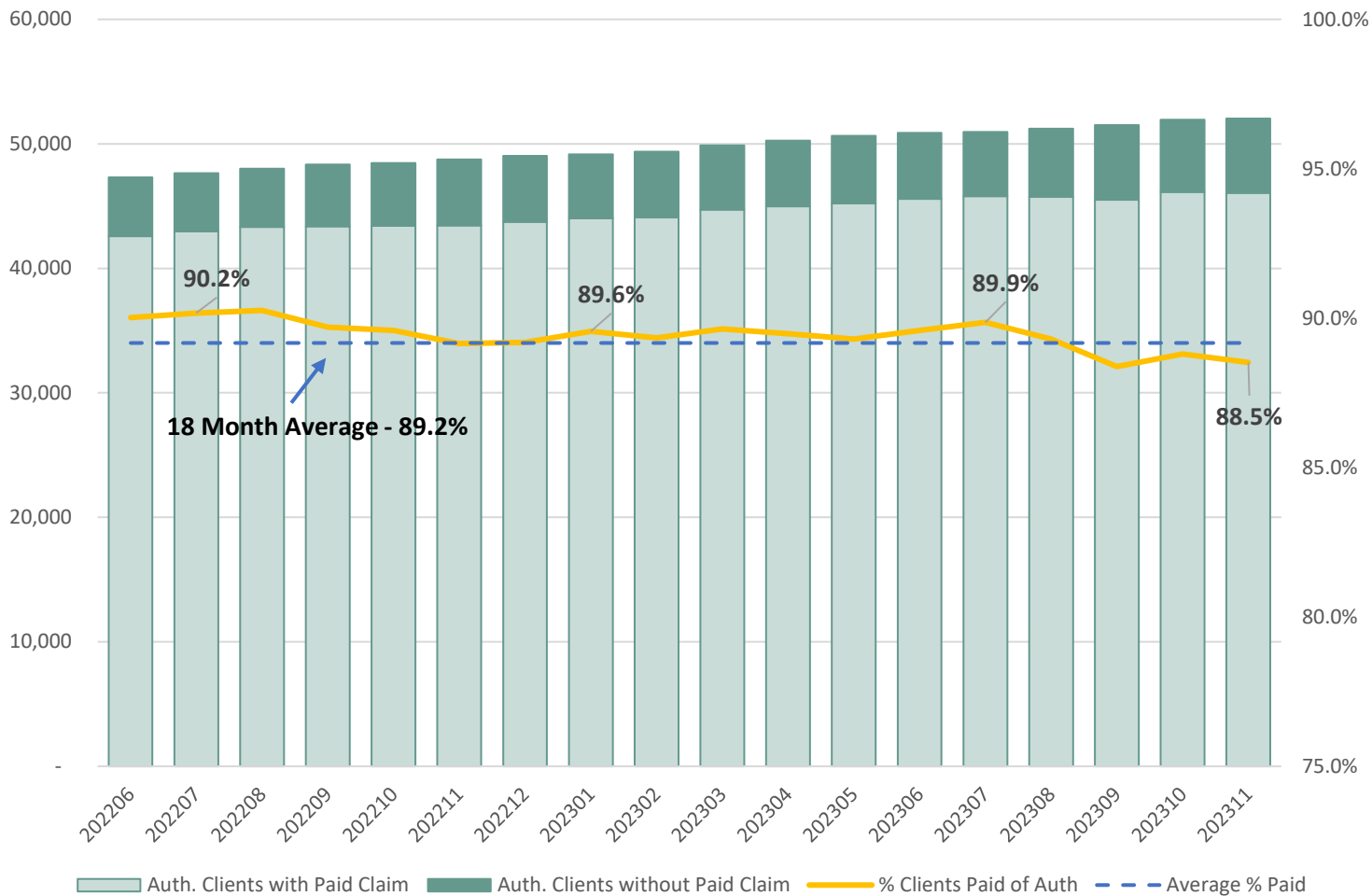
Authorized vs Paid claims

Jonathon G. Smith, Rates Data Administrator

Office of Rates Management

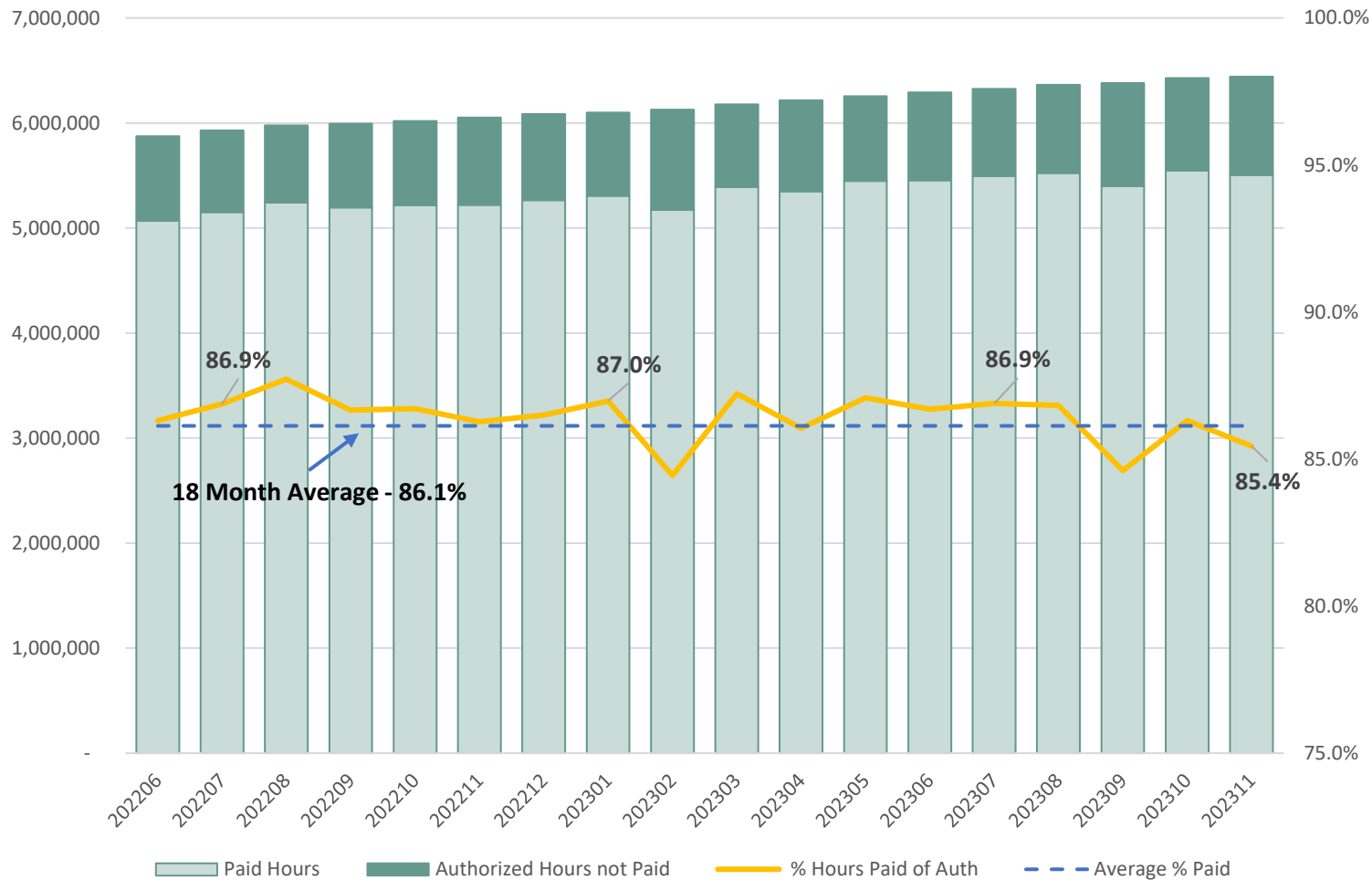
Management Services Division, ALTSA

CDE Personal Care Services (PCS) Authorized vs. Paid – Total Clients



MOS	Distinct Authorized Clients	Distinct Paid Clients	Percent of Authorized Clients with a Paid Claim
202206	47,299	42,576	90.0%
202207	47,650	42,966	90.2%
202208	47,993	43,318	90.3%
202209	48,350	43,371	89.7%
202210	48,455	43,412	89.6%
202211	48,747	43,457	89.1%
202212	49,040	43,739	89.2%
202301	49,153	44,020	89.6%
202302	49,364	44,103	89.3%
202303	49,887	44,716	89.6%
202304	50,258	44,970	89.5%
202305	50,649	45,229	89.3%
202306	50,932	45,488	89.3%
202307	51,315	45,747	89.1%
202308	51,698	46,006	89.0%
202309	52,081	46,265	88.8%
202310	52,464	46,524	88.7%
202311	52,847	46,783	88.5%

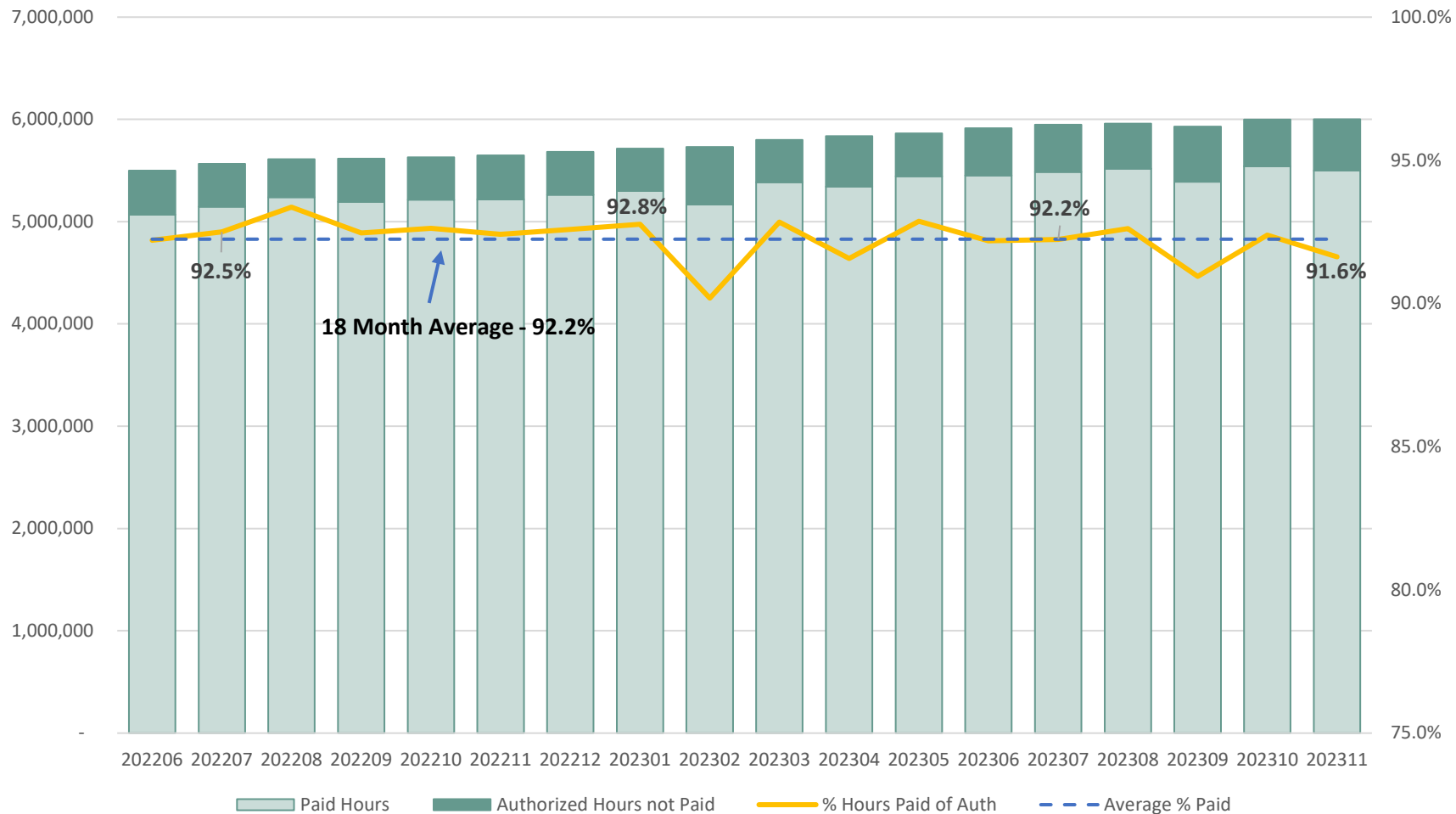
CDE Personal Care Services (PCS) Authorized vs. Paid – Total Hours



CDE Personal Care Services, Authorized versus Paid – Hours by MOS			
MOS	Authorized Hours	Paid Hours	% Hours Paid of Auth
202206	5,875,462	5,071,167	86.3%
202207	5,929,562	5,151,161	86.9%
202208	5,976,611	5,242,498	87.7%
202209	5,995,305	5,195,862	86.7%
202210	6,017,709	5,218,516	86.7%
202211	6,052,962	5,221,720	86.3%
202212	6,086,549	5,264,661	86.5%
202301	6,099,953	5,305,708	87.0%
202302	6,127,620	5,174,189	84.4%
202303	6,178,779	5,389,572	87.2%
202304	6,215,524	5,348,407	86.0%
202305	6,256,863	5,448,731	87.1%
202306	6,291,333	5,454,113	86.7%
202307	6,323,903	5,494,983	86.9%
202308	6,363,533	5,525,267	86.8%
202309	6,379,607	5,398,054	84.6%
202310	6,426,640	5,546,706	86.3%
202311	6,443,132	5,505,016	85.4%

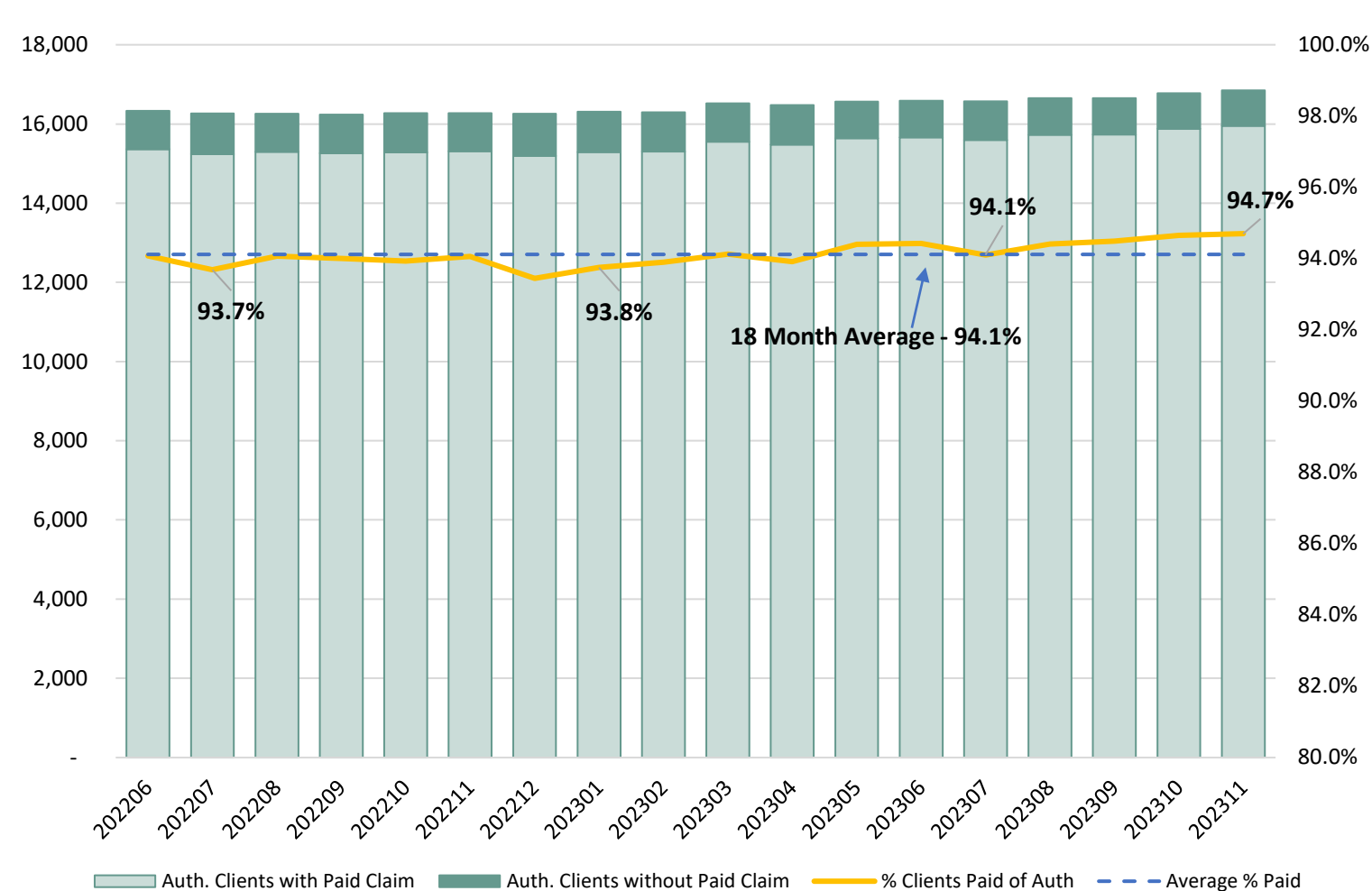
Paid Claims are unlagged. 6 month look-back to account for billing lag.

CDE PCS – Paid Clients Only Authorized vs. Paid – Total Hours



CDE personal care clients who have a paid claim have been receiving, on average, 92.2% of their authorized personal care hours since June 2022.

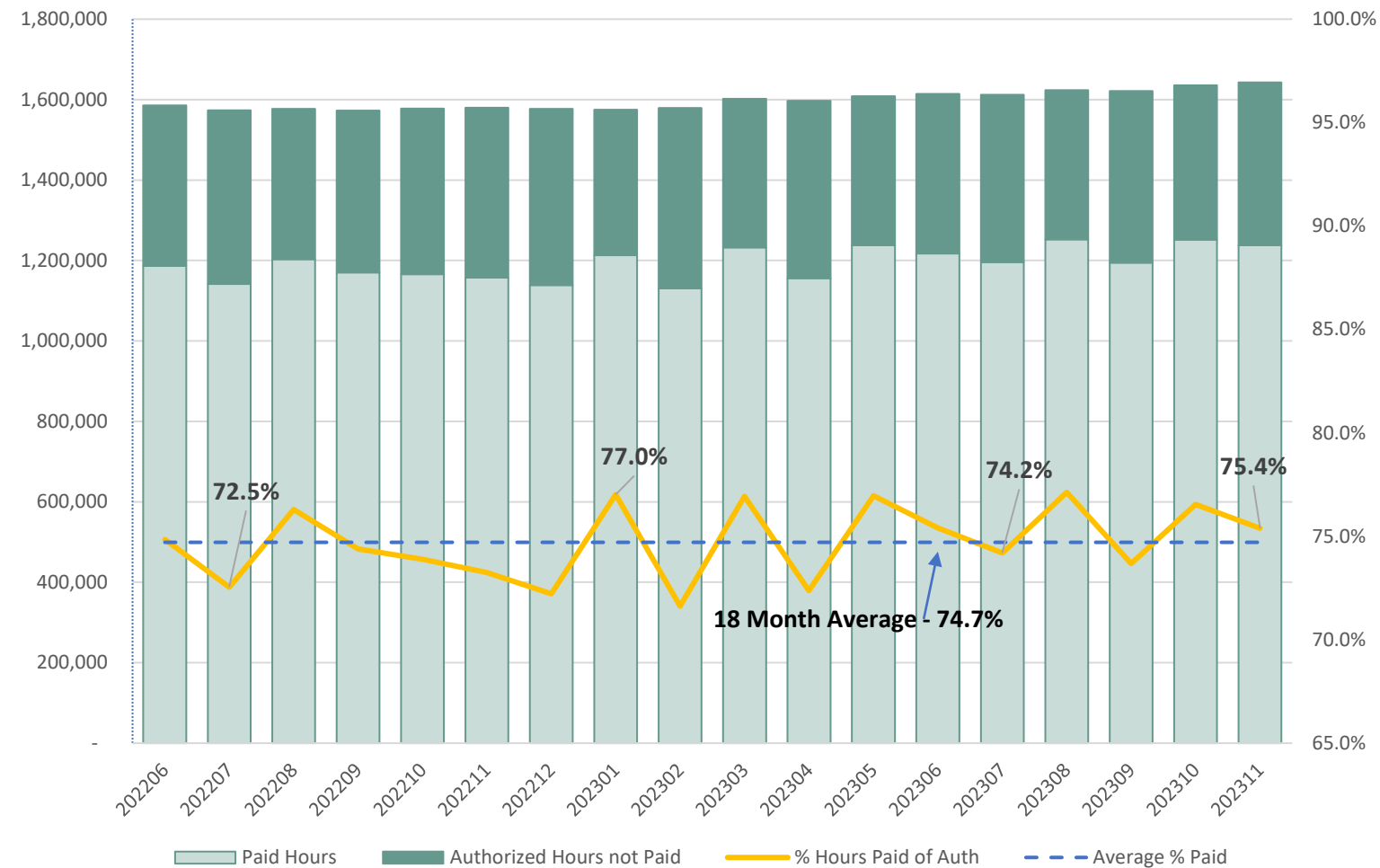
Agency Personal Care Services (PCS) Authorized vs. Paid – Total Clients



MOS	Distinct Authorized Clients	Distinct Paid Clients	Percent of Authorized Clients with a Paid Claim
202206	16,332	15,364	94.1%
202207	16,263	15,236	93.7%
202208	16,258	15,294	94.1%
202209	16,236	15,262	94.0%
202210	16,271	15,283	93.9%
202211	16,275	15,309	94.1%
202212	16,259	15,193	93.4%
202301	16,307	15,288	93.8%
202302	16,298	15,304	93.9%
202303	16,519	15,549	94.1%
202304	16,479	15,476	93.9%
202305	16,567	15,640	94.4%
202306	16,588	15,663	94.4%
202307	16,570	15,593	94.1%
202308	16,656	15,725	94.4%
202309	16,653	15,736	94.5%
202310	16,777	15,880	94.7%
202311	16,848	15,955	94.7%

Paid Claims are unlagged. 6 month look-back to account for billing lag.

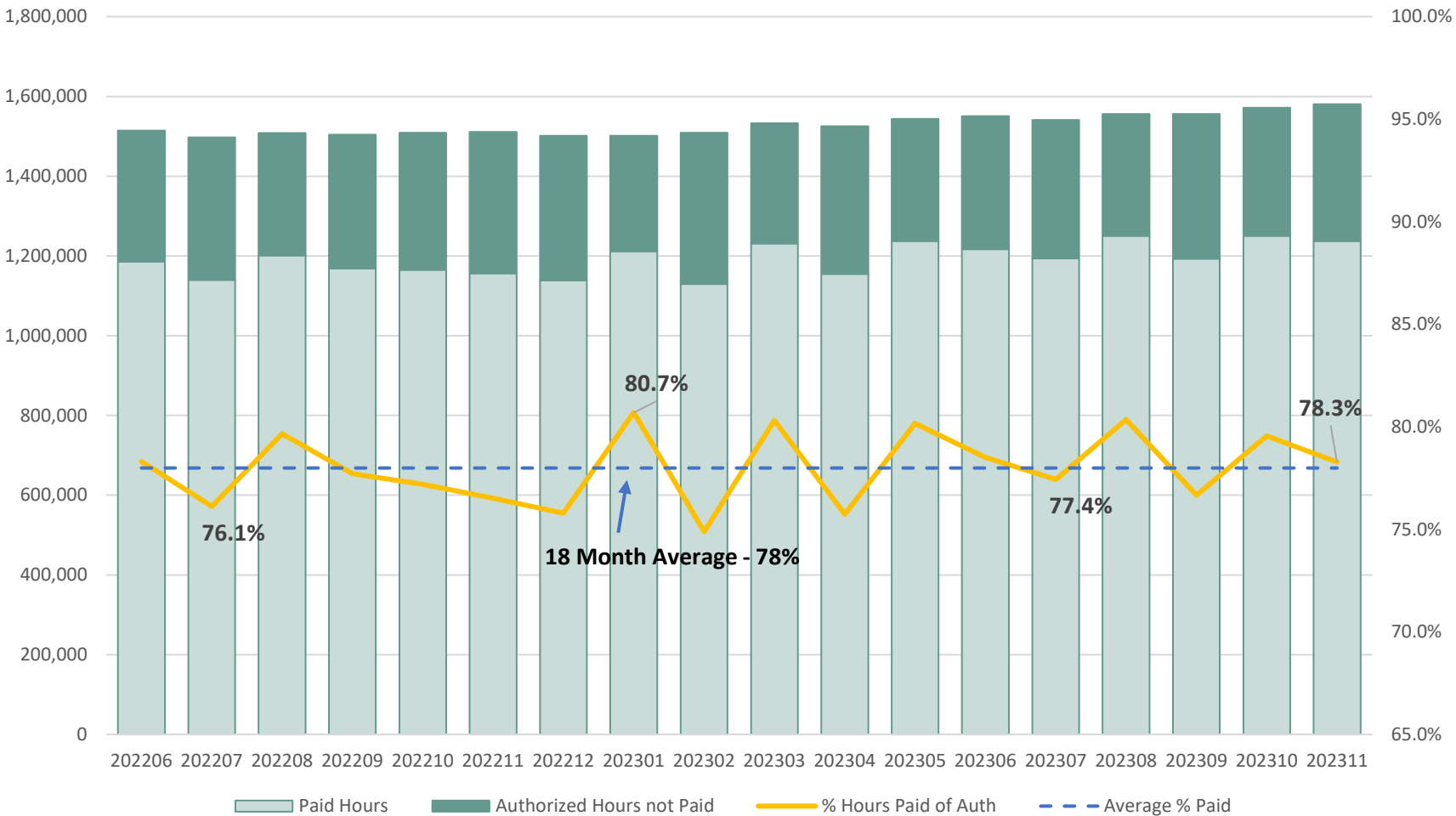
Agency Personal Care Services (PCS) Authorized vs. Paid – Total Hours



MOS	Authorized Hours	Paid Hours	% Hours Paid of Auth
202206	1,585,918	1,187,068	74.9%
202207	1,573,710	1,141,604	72.5%
202208	1,577,123	1,203,217	76.3%
202209	1,572,872	1,169,980	74.4%
202210	1,577,989	1,165,899	73.9%
202211	1,580,048	1,157,310	73.2%
202212	1,577,275	1,139,076	72.2%
202301	1,574,847	1,212,995	77.0%
202302	1,579,090	1,131,003	71.6%
202303	1,601,801	1,232,377	76.9%
202304	1,597,396	1,156,126	72.4%
202305	1,608,697	1,238,000	77.0%
202306	1,614,632	1,217,474	75.4%
202307	1,611,909	1,196,005	74.2%
202308	1,623,806	1,252,311	77.1%
202309	1,621,725	1,194,924	73.7%
202310	1,635,577	1,252,035	76.6%
202311	1,642,961	1,238,575	75.4%

Paid Claims are unlagged. 6 month look-back to account for billing lag.

Agency PCS – Paid Clients Only Authorized vs. Paid – Total Hours



AP personal care clients who have a paid claim have been receiving, on average, 78% of their authorized personal care hours since June 2022.

Clients with no Paid Claims Considerations

- Authorizations are sent to CDWA without an IP being in place. Prior to CDWA, authorizations were only created once the IP was contracted.
- The current hiring process doesn't allow an IP to immediately start with a client. Attestations and O&S training have to be completed first.
- For IPs who are starting the hiring process, it can be time consuming and confusing.
- Clients don't always have an IP selected and the process of finding one is often slow, even with Carina.
- The data interface between ProviderOne and CDWA only sends client information the authorization is created, which causes delays in the CDWA system, especially IP/client match.
- Some hours might not be used due to client not being available for care (for example, hospitalization or refusal of service)

Retirement

Benefits Group and SEIU 775

- Benefits Group – Benefits Group
- Board Discussion
- Union – SEIU 775
- Board Discussion

Break

Training

Benefits Group and SEIU 775

- Benefits Group – Benefits Group
- Board Discussion
- Union – SEIU 775
- Board Discussion

Lunch

Carina

Benefits Group and SEIU 775

- Benefits Group – Benefits Group
- Board Discussion
- Union – SEIU 775
- Board Discussion

Other Benefits

SEIU, Chair, Facilitator

- Union – SEIU 775
- Board Discussion
- Public Comment

Adjourn