

Developmental Disabilities Administration 2020 Caseload and Cost Report October 1, 2020

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Developmental Disabilities Administration

Mission

Transforming lives by providing support and fostering partnerships that empower people to live the lives they want.

Vision

Supporting individuals to live in, contribute to, and participate in their communities;

Continually improving supports to families of both children and adults;

Individualizing supports that will empower individuals with developmental disabilities to realize their greatest potential;

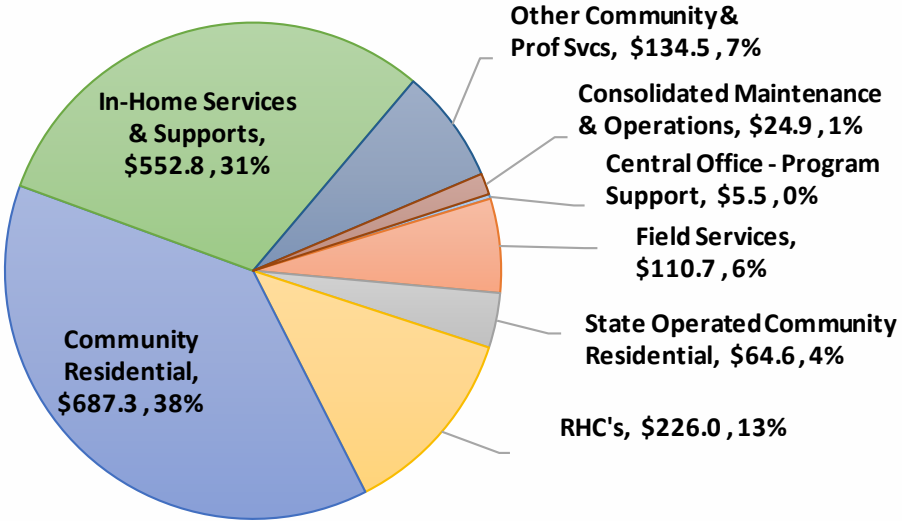
Building support plans based on the needs and the strengths of the individual and the family; and

Engaging individuals, families, local service providers, communities, governmental partners and other stakeholders to continually improve our system of supports.

Values

- Inclusion • Status and Contribution • Relationships
- Power and Choice • Health and Safety •
- Competence

DDA 2019-21 Operating Budget



2019-21 DDA Budget

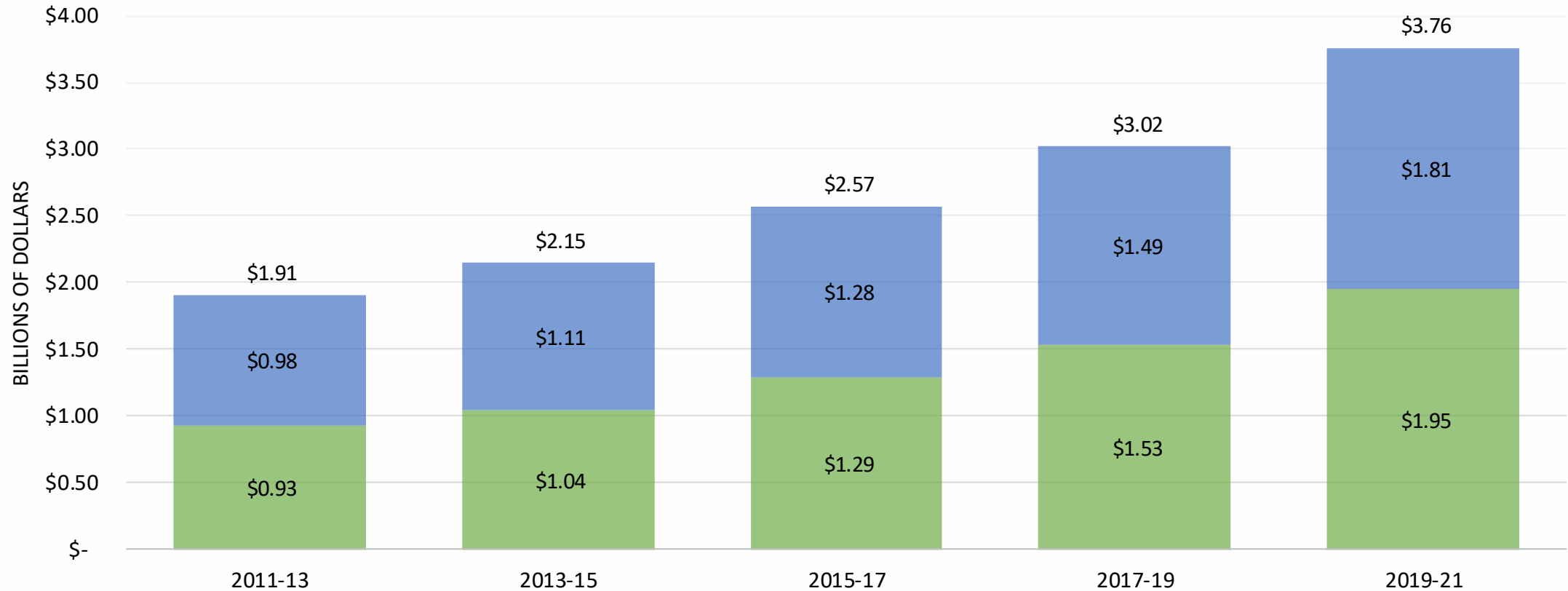
- General Fund State Total: \$1.8 Billion (48.1%)
- Federal/Other Funds Total: \$1.9 Billion (51.9%)
- Total DDA Budget: \$3.8 Billion (100%)

Fund Category	State Funds (millions)	FTE	Clients*
Central Office - Program Support	\$ 5.5	22.7	
Field Services	\$ 110.7	882.4	
State-Operated Community Residential	\$ 64.6	727.3	246
RHC (includes short-term stay)	\$ 226.0	2,455.6	630
Community Residential	\$ 687.3		4,586
In-Home Services & Supports	\$ 552.8		21,668
Other Community & Prof Services	\$ 134.5		
Consolidated Maintenance & Operations	\$ 24.9	193.1	

Total \$ 1,806.3 4,281.0 27,130

* Client counts are the estimated number of unduplicated clients who receive paid services in each fund category.

How has the DDA biennial budget changed over time?



The General Fund-State portion of the DDA budget has grown an average of 15.3% every biennium since 2011-13.

Developmental Disabilities Administration Eligibility

A person with intellectual and developmental disabilities must first be determined eligible to be a client of the DDA before an assessment can be conducted to determine if the person is functionally and financially eligible for the service requested.

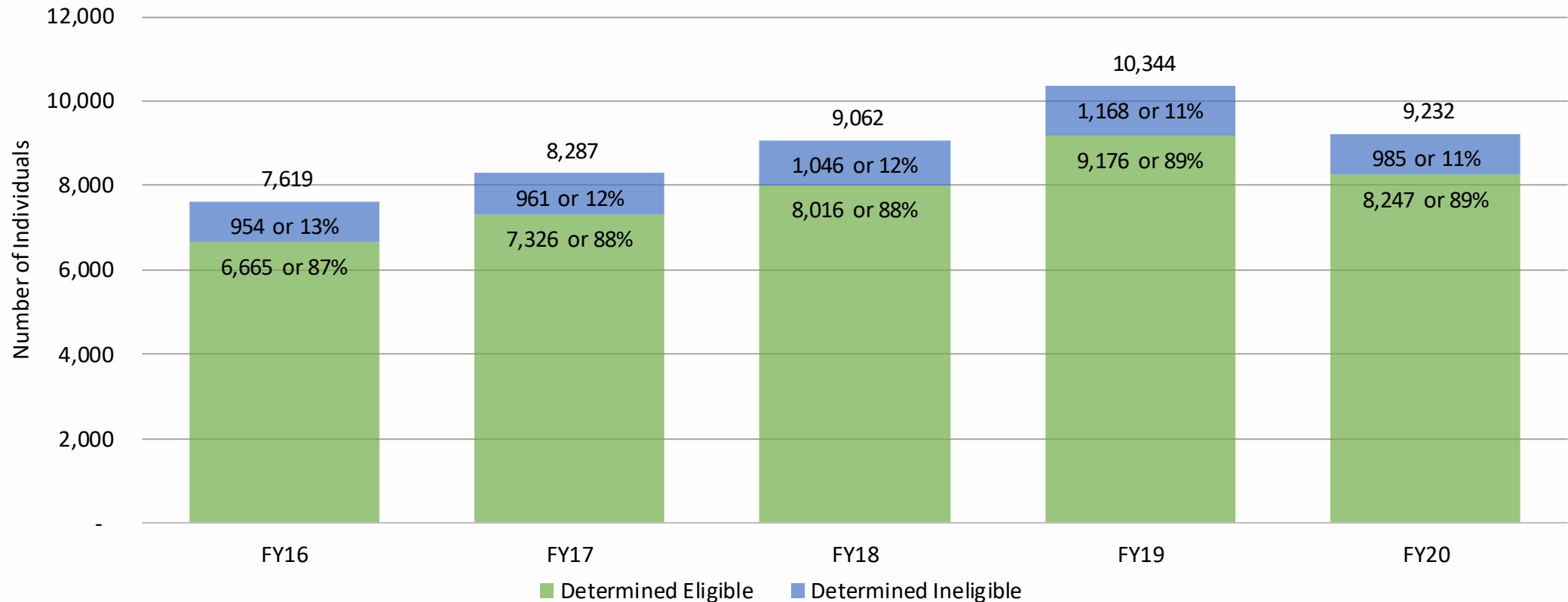
To be found eligible as a client of DDA, a person must:

- Be a Washington State resident;
- Have evidence of a qualifying developmental disability that began before age 18; and
- Have evidence of substantial limitations.

The Revised Code of Washington 71A.10.020(5) defines a developmental disability as:

“a disability attributable to intellectual disability, cerebral palsy, epilepsy, autism, or another neurological or other condition of an individual found by the secretary to be closely related to an intellectual disability or to require treatment similar to that required for individuals with intellectual disabilities, which originates before the individual attains age eighteen, which has continued or can be expected to continue indefinitely, and which constitutes a substantial limitation to the individual.”

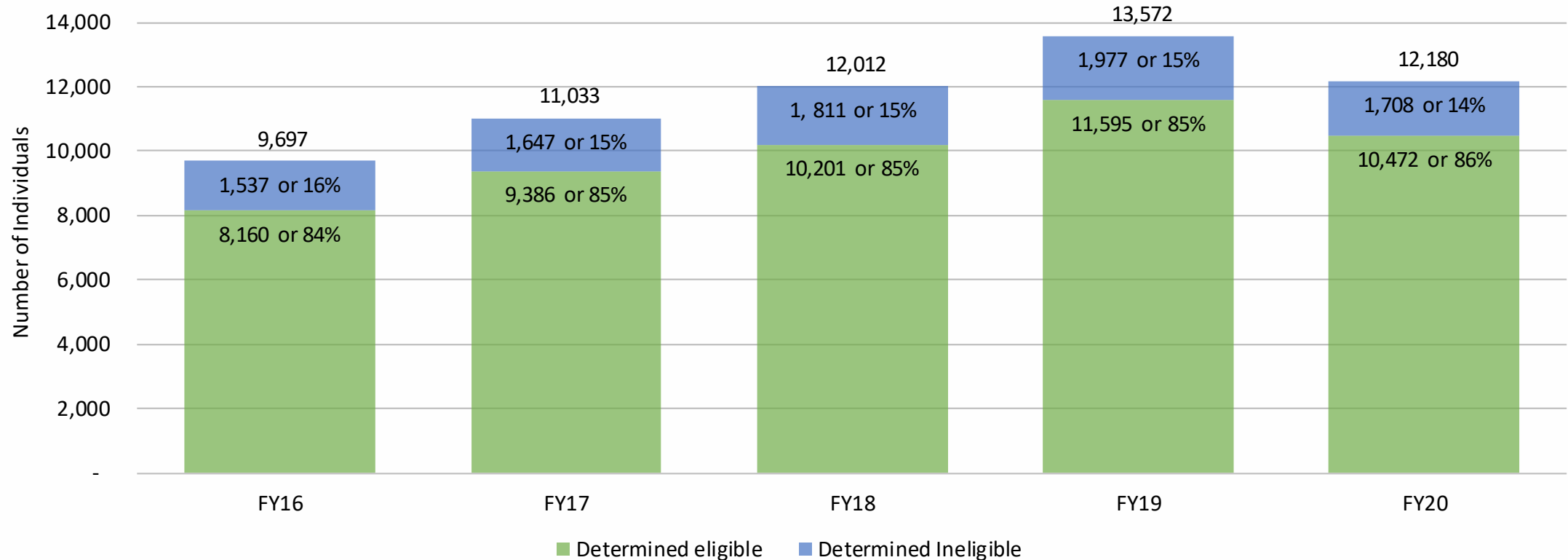
Initial eligibility determinations by fiscal year



The number of initial eligibility applications decreased by 10.75% from FY19 to FY20, which is a significant change from the previous year when initial applications had increase by 14%.

Total eligibility determinations by fiscal year

Includes all application types: Initial, Review, and Re-application.

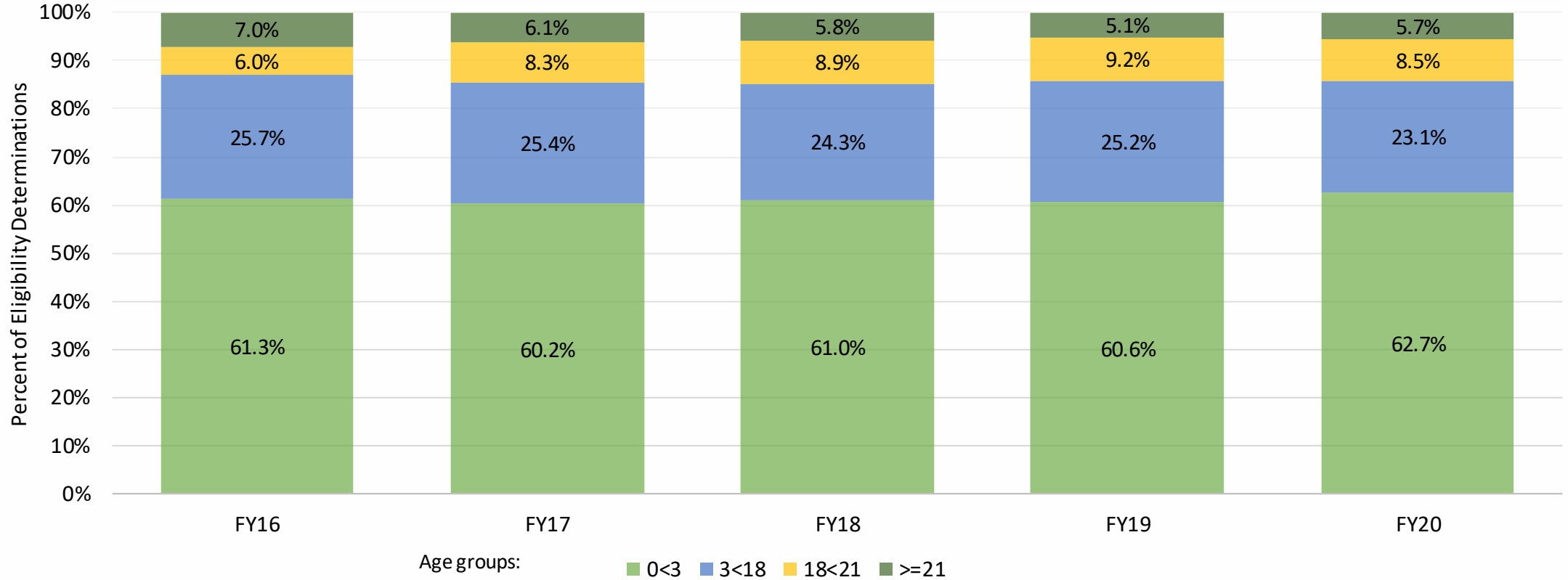


The number of eligibility applications decreased by 10.25% from FY19 to FY20, which is a significant change from the previous year when initial applications had increase by 13%. An average of 85% of applications are determined eligible and 15% determined ineligible.

Eligibility determinations by race and ethnicity

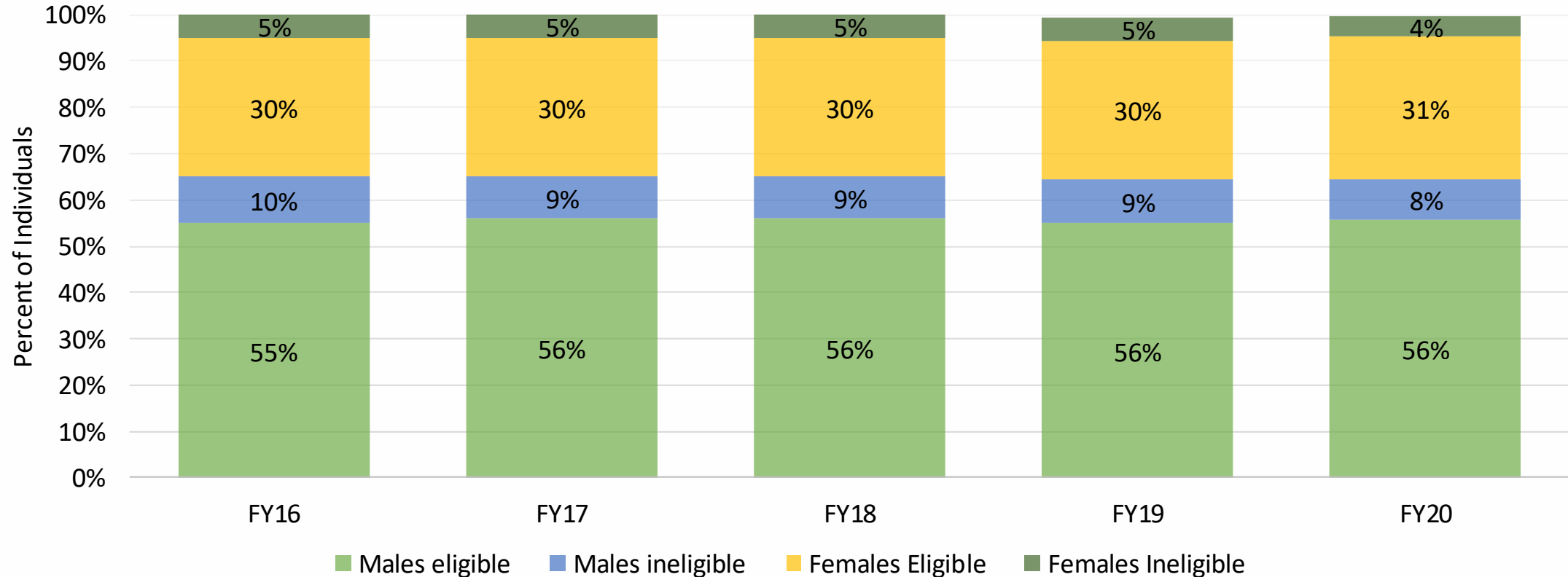
	FY16		FY17		FY18		FY19		FY20	
	Eligible	Ineligible	Eligible	Ineligible	Eligible	Ineligible	Eligible	Ineligible	Eligible	Ineligible
American or Alaska Native	1.3%	0.3%	1.3%	0.4%	1.2%	0.4%	1.0%	0.3%	1.1%	0.4%
Asian	5.9%	0.8%	5.7%	0.6%	6.7%	0.6%	5.9%	0.6%	7.4%	0.6%
Black or African American	4.4%	1.1%	4.5%	1.0%	5.3%	1.0%	4.0%	0.7%	5.2%	0.7%
Native Hawaiian/Other Pacific Islander	1.3%	0.1%	1.4%	0.2%	1.0%	0.1%	1.0%	0.1%	1.3%	0.1%
Unreported	10.4%	1.0%	11.1%	1.2%	10.8%	1.1%	8.0%	3.2%	10.6%	1.1%
White	55.5%	10.5%	55.5%	9.9%	54.1%	10.1%	45.3%	6.4%	54.3%	8.9%
Two or More Races	6.4%	1.1%	6.4%	0.9%	6.5%	1.0%	19.8%	3.8%	7.3%	1.1%
Totals	85.2%	14.9%	85.9%	14.2%	85.6%	14.3%	84.9%	15.1%	87.2%	12.8%
Hispanic or Latino	19.3%	2.6%	18.5%	2.5%	17.8%	2.5%	16.0%	2.2%	19.3%	2.3%

Eligibility determinations by fiscal year and age group



Eligibility determinations increased for the 0<3 age group and decreased for the 3 < 18 and 18 < 21 age groups since the previous year.

Percent of eligibility determinations by gender and fiscal year



Eligible applications on average have been 65% males and 35% females since 2016.

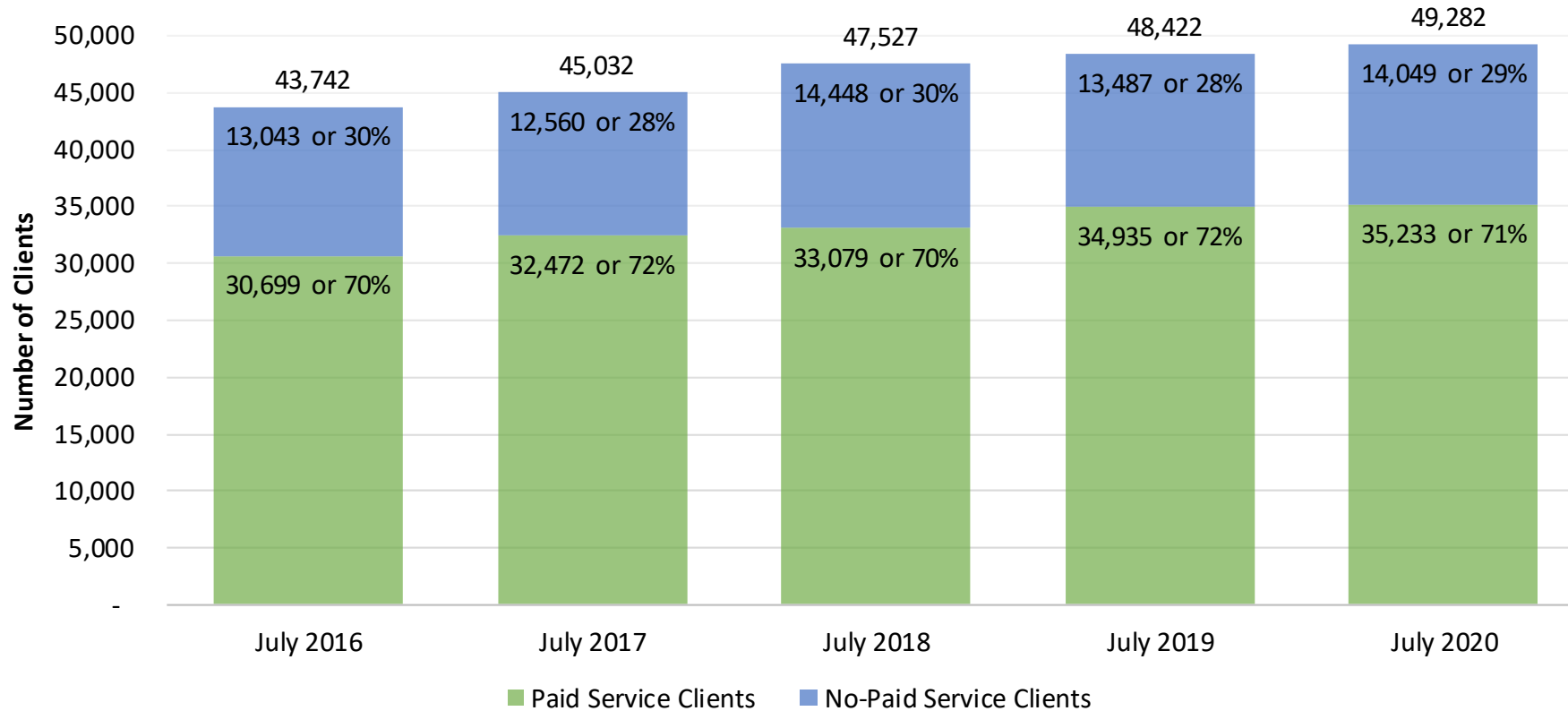
Eligibility determinations by condition and fiscal year

	FY16	FY17	FY18	FY19	FY20	5 Yr. Avg
Developmental Delay	78.6%	78.4%	78.9%	79.6%	80.0%	79.1%
Intellectual Disability	8.1%	7.3%	7.1%	7.0%	6.2%	7.1%
Autism	5.8%	6.1%	5.9%	6.2%	6.6%	6.1%
Two or more disabilities	2.4%	2.7%	2.9%	2.2%	2.6%	2.6%
Cerebral Palsy	2.0%	2.3%	2.3%	1.9%	1.8%	2.1%
Another Neurological or Other Condition	2.0%	2.6%	2.2%	2.5%	2.1%	2.3%
Epilepsy	0.6%	0.5%	0.6%	0.5%	0.6%	0.6%
Medically Intensive Children's Program*	0.4%	0.1%	0.2%	0.1%	0.0%	0.2%

The distribution of eligibility conditions has remained steady since 2015 with a slight growth in the category of Autism.

*As of August 13, 2018, clinical eligibility for the Medically Intensive Children's Program is no longer a separate eligibility category.

Number of persons enrolled by fiscal year and caseload type



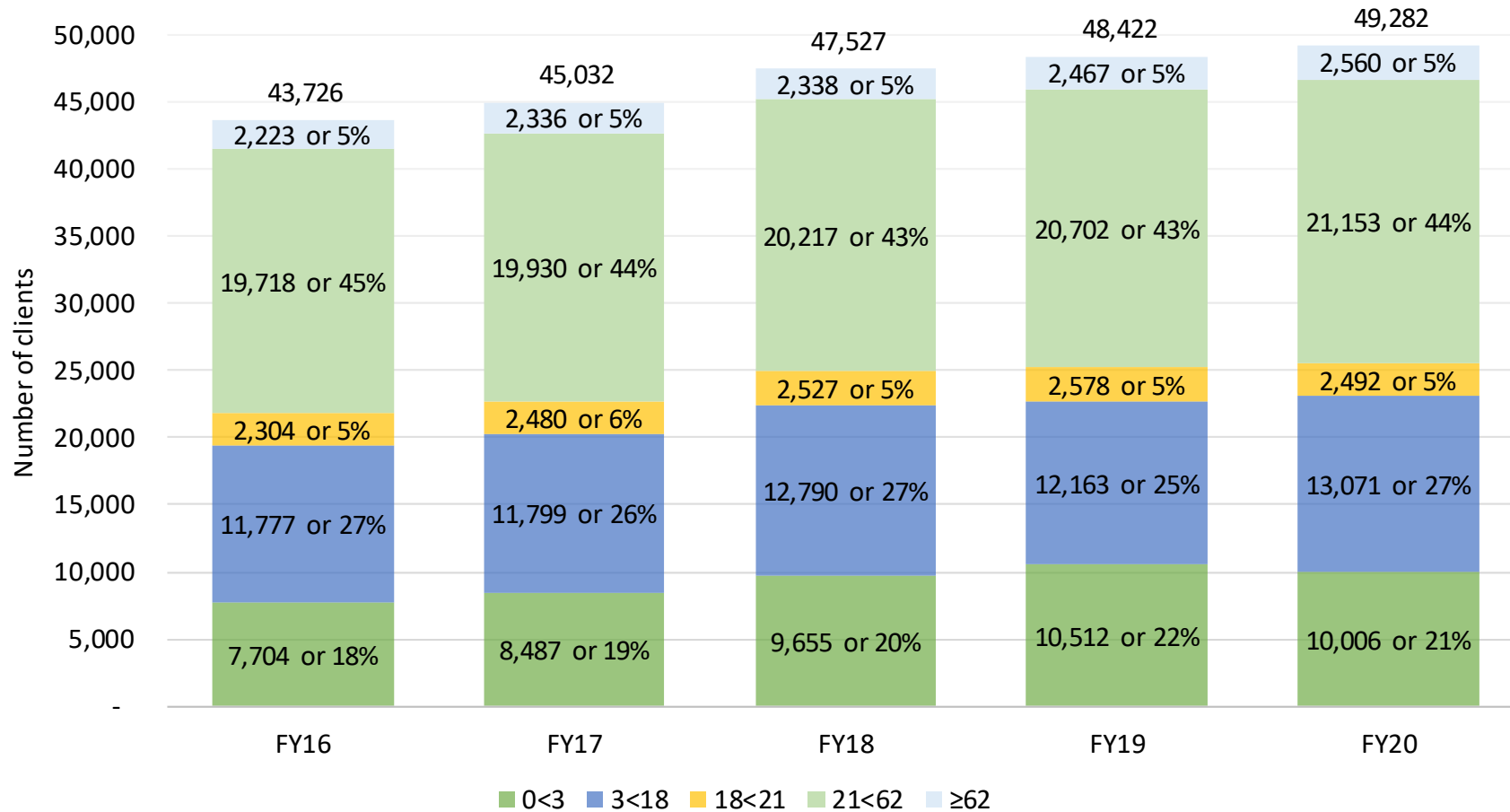
The 2014 legislature created the Individual and Family Services Waiver with funding for 4,000 individuals and 1,000 individuals on the Basic Plus waiver.

Since July 2016

- The DDA caseload has grown at an average annual rate of 3%.
- The paid services caseload has increased by 4,534 clients or 15%.
- The no-paid services caseload has increased by 1,006 clients or 7.7%.

DDA’s caseload is divided into two types called “Paid” and “No-Paid.” Clients approved to receive a paid service are assigned to the paid services caseload and clients who are not approved to receive a paid service are assigned to the no-paid services caseload.

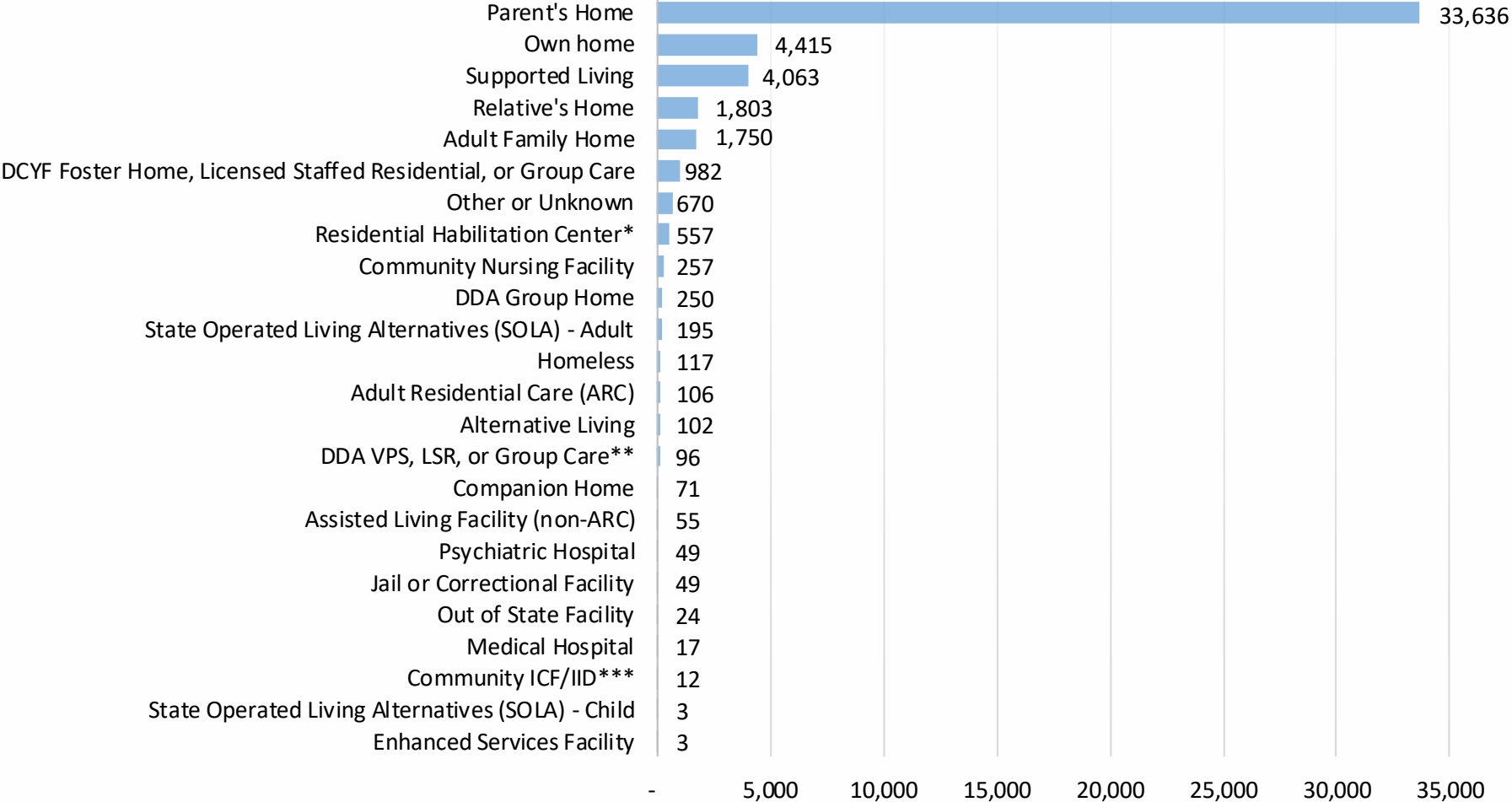
DDA clients by fiscal year and age group



Summary

- Caseload counts reflect number of individuals enrolled as clients of DDA by age group on the last day of the fiscal year.
- Average annual growth rate of DDA caseload is 3%.
- Since FY16, the average annual growth rate for each age group is:
 - 0<3 = 29.9%
 - 3<18 = 11.0%
 - 18<21 = 8.2%
 - 21<62 = 7.3%
 - ≥62 = 15.2%

Where do DDA clients reside?



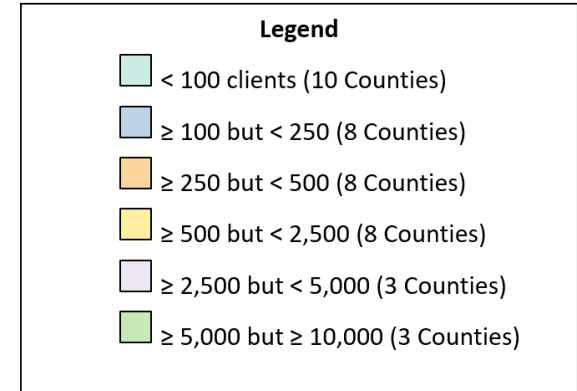
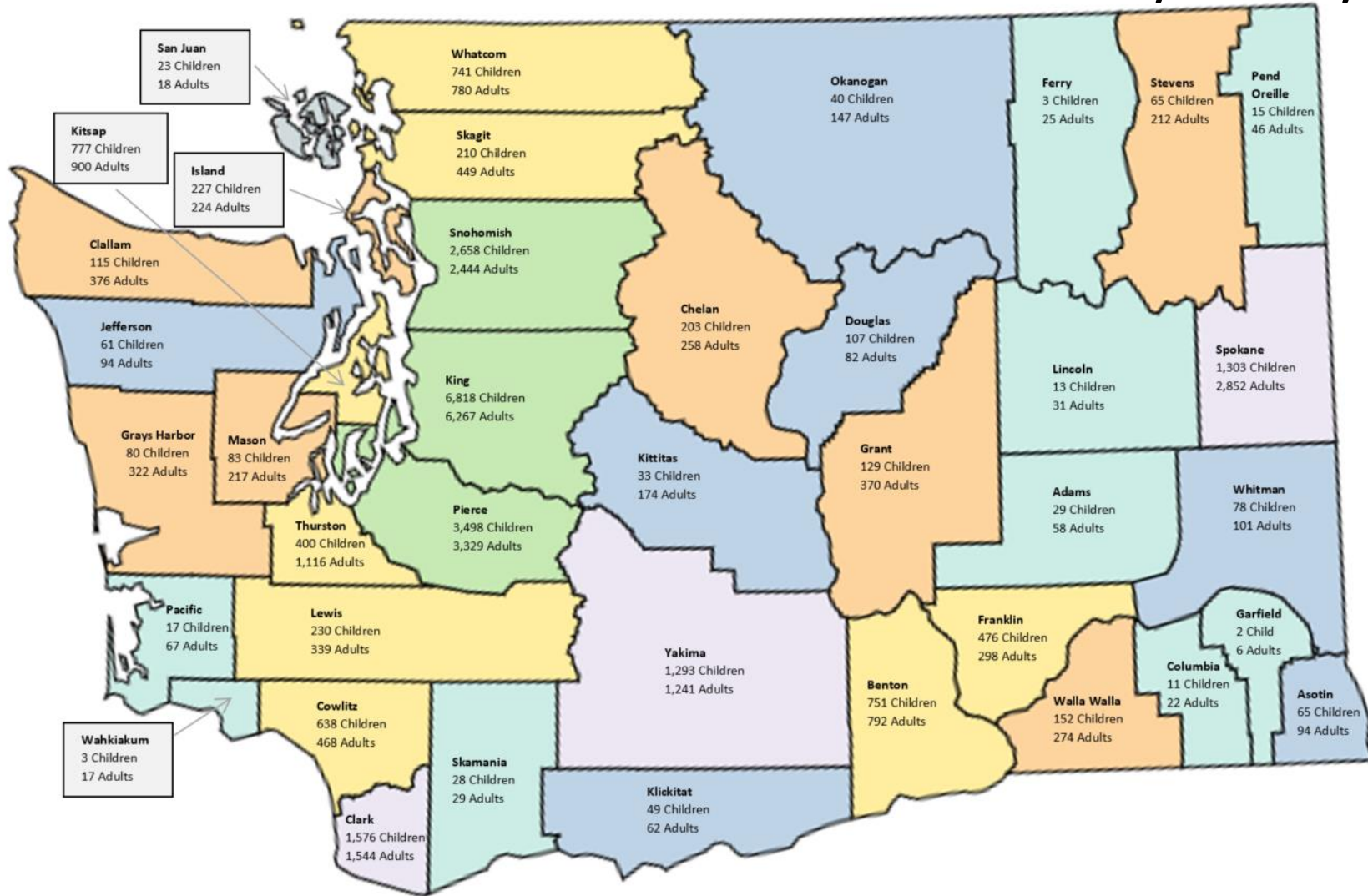
49,282 DDA clients are enrolled as clients of DDA.

Of the 35,439 or 72% of clients receiving care and support from a parent or relative:

- 24,509 clients receive a DDA paid service from DDA
- 10,930 clients do not receive a paid service from DDA
- 21,323 clients are under the age of 18
- 13,376 clients are age 18 or older
- 248 clients are over age 62 and reside with a parent

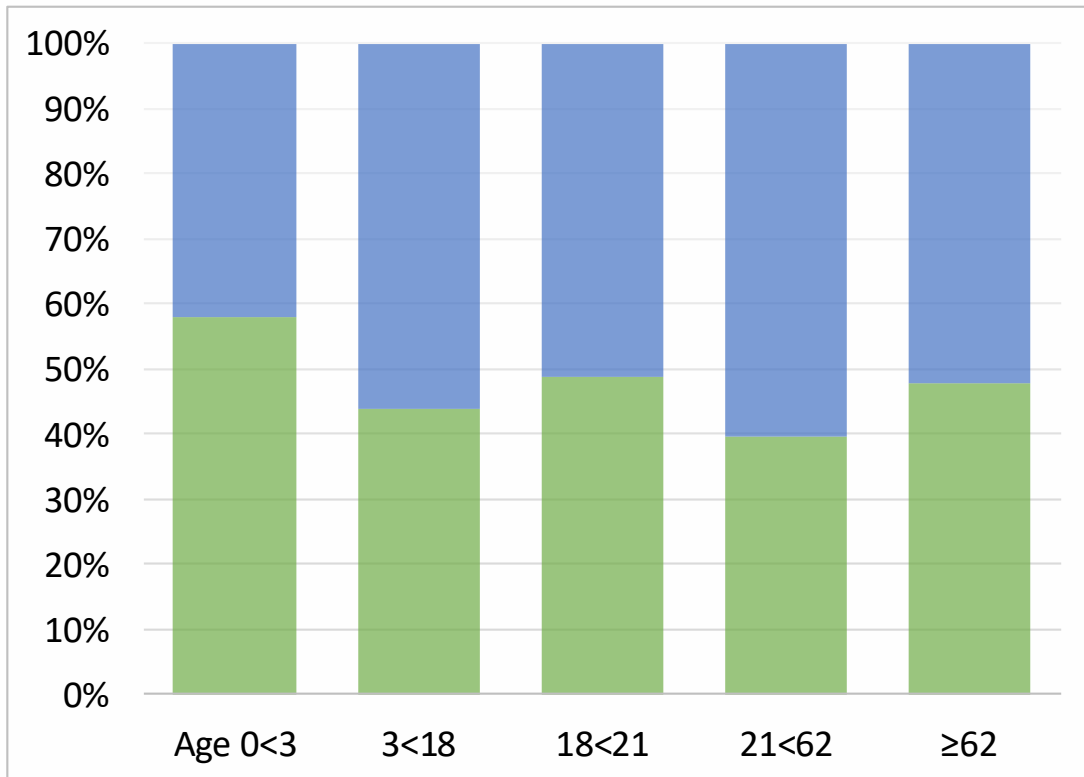
* RHC includes State Operated Nursing Facility and State Operated ICF/IID
 ** VPS means Voluntary Placement Services and LSR means Licensed Staffed Residential
 *** ICF/IID means Intermediate Care Facility for Individuals with Intellectual Disabilities

Children and adults enrolled by county

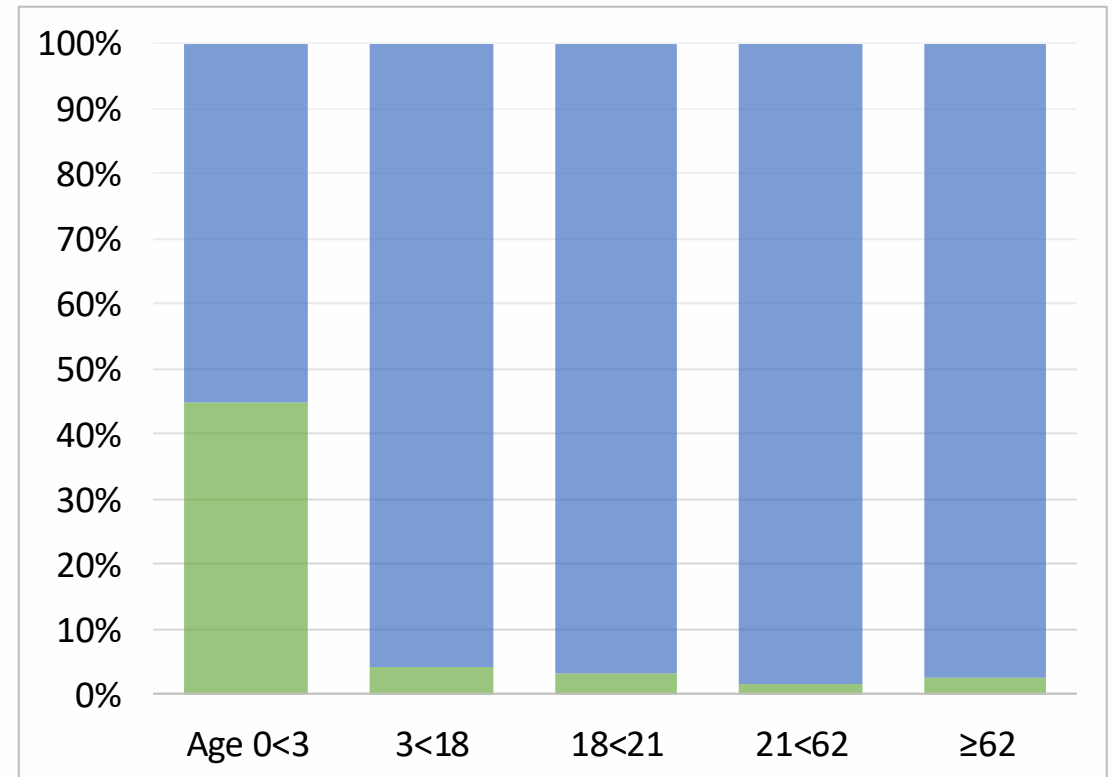


Medicaid, CHIP, and/or food benefit coverage by age group

No Paid Caseload

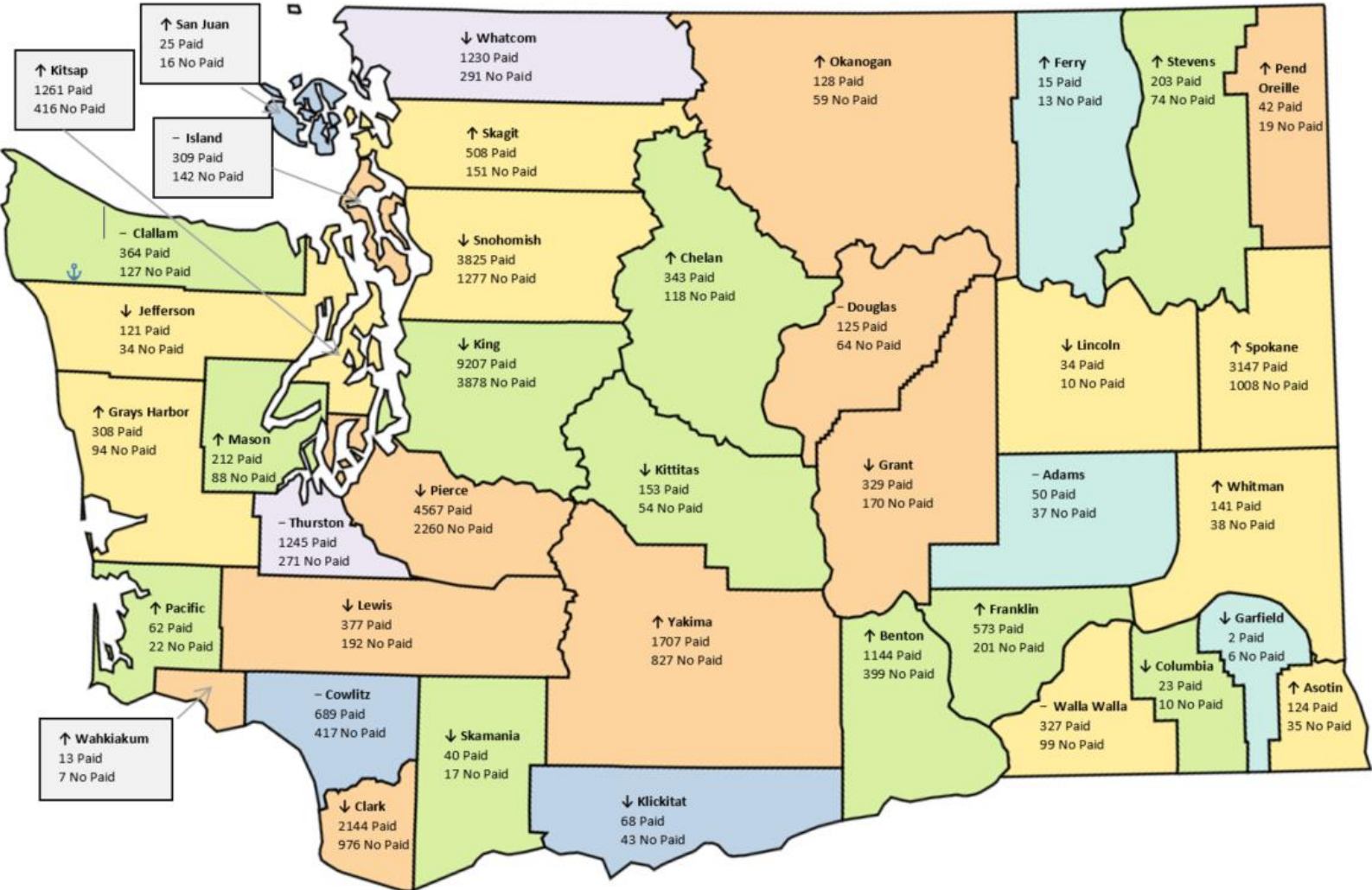


Paid Caseload



- Enrolled in Medicaid, CHIP or Food Benefit
- Not Enrolled in Medicaid, CHIP or Food Benefit

Enrollment by county and caseload type



Legend

Percentage of clients on Paid Caseload

- ≥ 80% (2 Counties)
- ≥ 75% but < 80% (10 Counties)
- ≥ 70% but < 75% (11 Counties)
- ≥ 65% but < 70% (10 Counties)
- ≥ 60% but < 65% (3 Counties)
- < 60% (3 Counties)

Change in Paid services caseload from last year:

- ↑ Increased
- ↓ Decreased
- No change

FY19 Caseload by race/ethnicity and caseload type

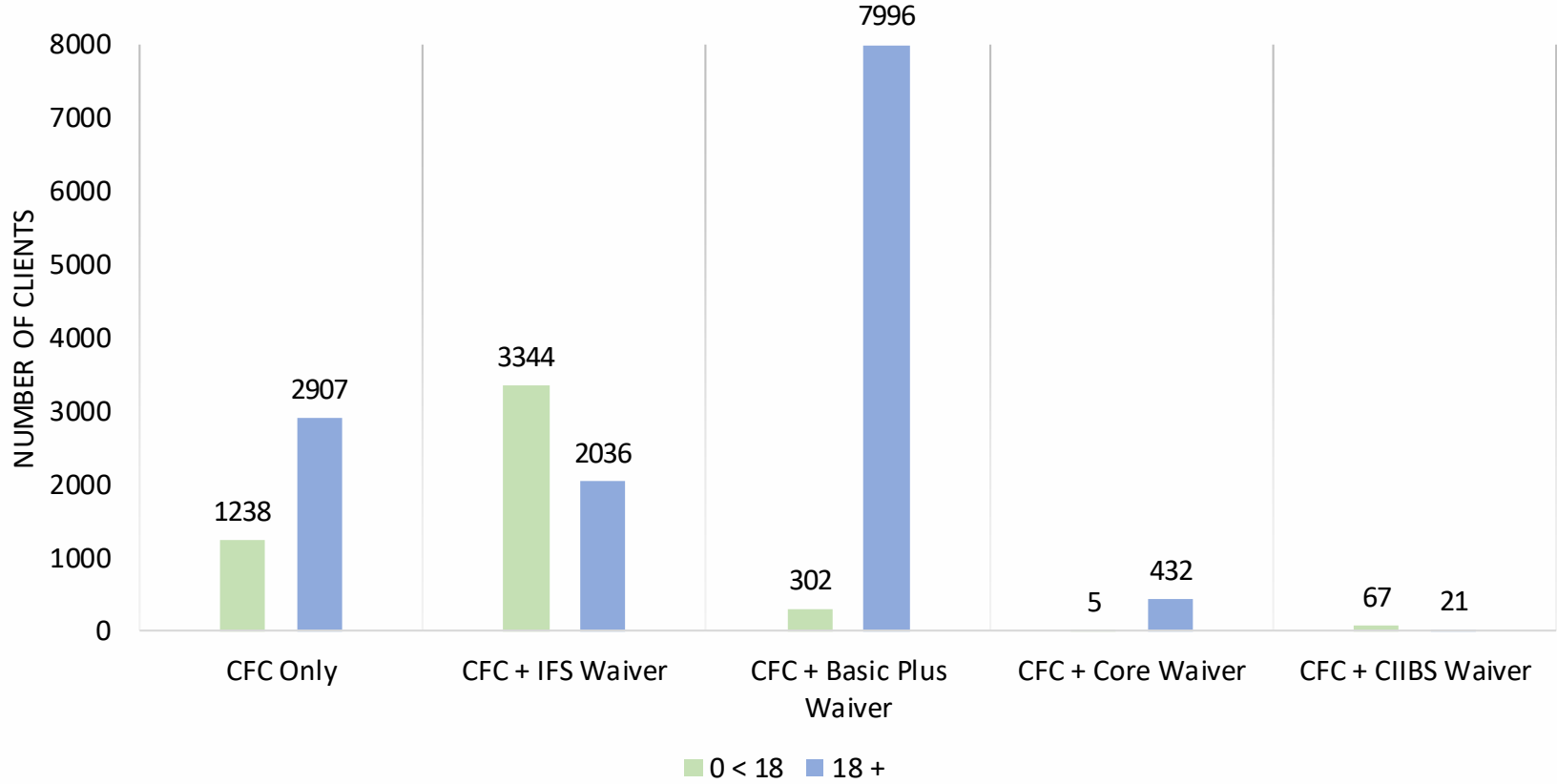
	Paid Caseload		No-Paid Caseload		Total	WA State **	United States***
	Female	Male	Female	Male			
American or Alaska Native	0.6%	0.9%	0.3%	0.4%	2.2%	1.8%	1.3%
Asian	1.7%	2.9%	0.6%	1.2%	6.3%	9.0%	5.9%
Black or African American	1.5%	2.6%	0.6%	1.1%	5.9%	4.2%	13.4%
Native Hawaiian/Other Pacific Islander	0.3%	0.5%	0.2%	0.2%	1.3%	0.8%	0.2%
White	21.0%	32.2%	7.5%	12.0%	72.8%	79.1%	76.3%
Two or More Races	1.2%	2.0%	0.6%	1.1%	4.8%	5.2%	2.8%
Unreported	1.5%	2.5%	0.9%	1.5%	6.4%	0.0%	0.0%
Totals	27.8%	43.7%	10.9%	17.6%	100%	100.0%	100.0%
Hispanic or Latino Ethnicity*	3.7%	6.3%	1.9%	3.2%	15.1%	13.0%	18.5%

* A person of Hispanic or Latino origin can be of any race

** Data source: [Washington State Office of Financial Management, Forecasting and Research Division - 2019](#)

*** Data Source: [United States Census Bureau – July 1, 2019 estimate](#)

Community First Choice (CFC) by waiver type



CFC 1915(k) is a state plan program offering a variety of services to support individuals living in home and community based settings. Services are delivered to children and adults in their own home, an adult family home, or an assisted living facility.

Waivers 1915(c) are capped programs which offer targeted services to children and adults in a variety of home and community based settings.

- 18,348 clients receive CFC services.
- 4,956 children receive CFC services. This is an increase of 5.2% since last year.
- 13,392 adults receive CFC services. This is an increase of 3.3% since last year.

DDA Home and Community-Based Services Waiver enrollment by fiscal year

	FY16			FY17			FY18			FY19			FY20		
	Children	Adults	Total	Children	Adults	Total	Children	Adults	Total	Children	Adults	Total	Children	Adults	Total
Individual and Family Services (IFS)	1924	539	2463	3774	1856	5630	4049	2073	6122	4038	2180	6218	4126	2181	6307
Basic Plus	462	7575	8037	402	7974	8376	423	8434	8857	381	8711	9092	343	9144	9487
Core	100	4472	4572	82	4471	4553	81	4489	4570	76	4515	4591	69	4526	4595
Community Protection	0	415	415	0	411	411	0	407	407	0	407	407	0	408	408
Children's In-home Intensive Behavioral Supports	73	26	99	65	29	94	52	19	71	65	18	83	68	21	89
Totals	2559	13027	15586	4323	14741	19064	4605	15422	20027	4560	15831	20391	4606	16280	20886

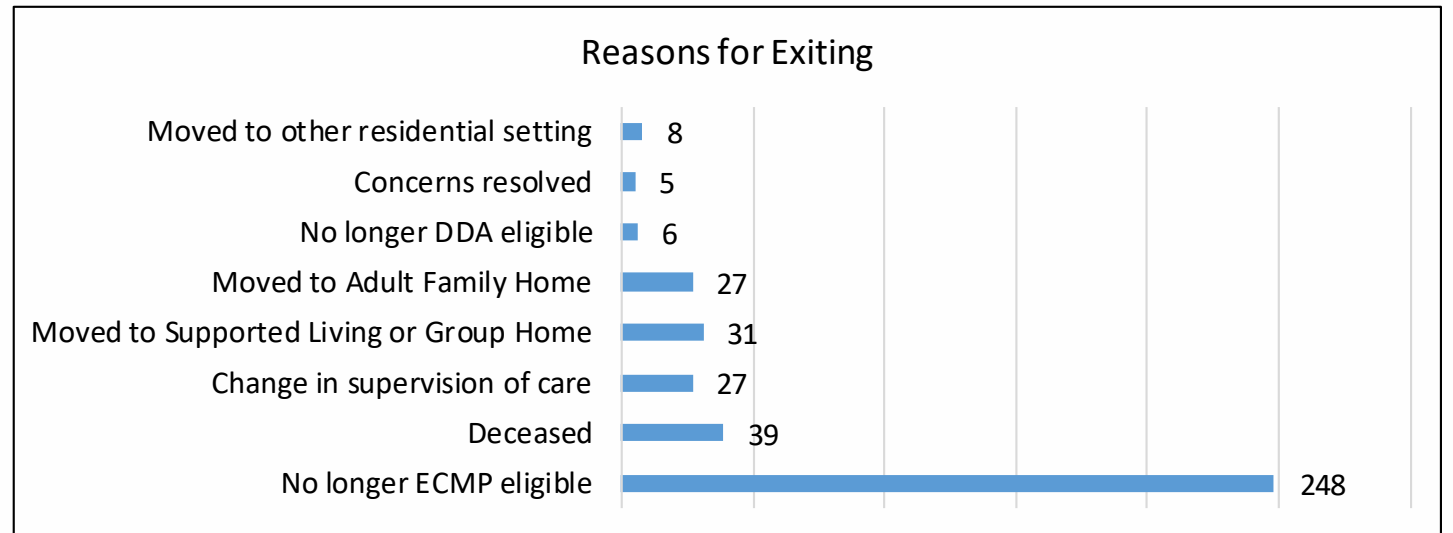
Legislative appropriations have supported an average annual growth rate of 7.9% to DDA's Home and Community Based Service (HCBS) waivers since FY16.

Enhanced Case Management Caseload

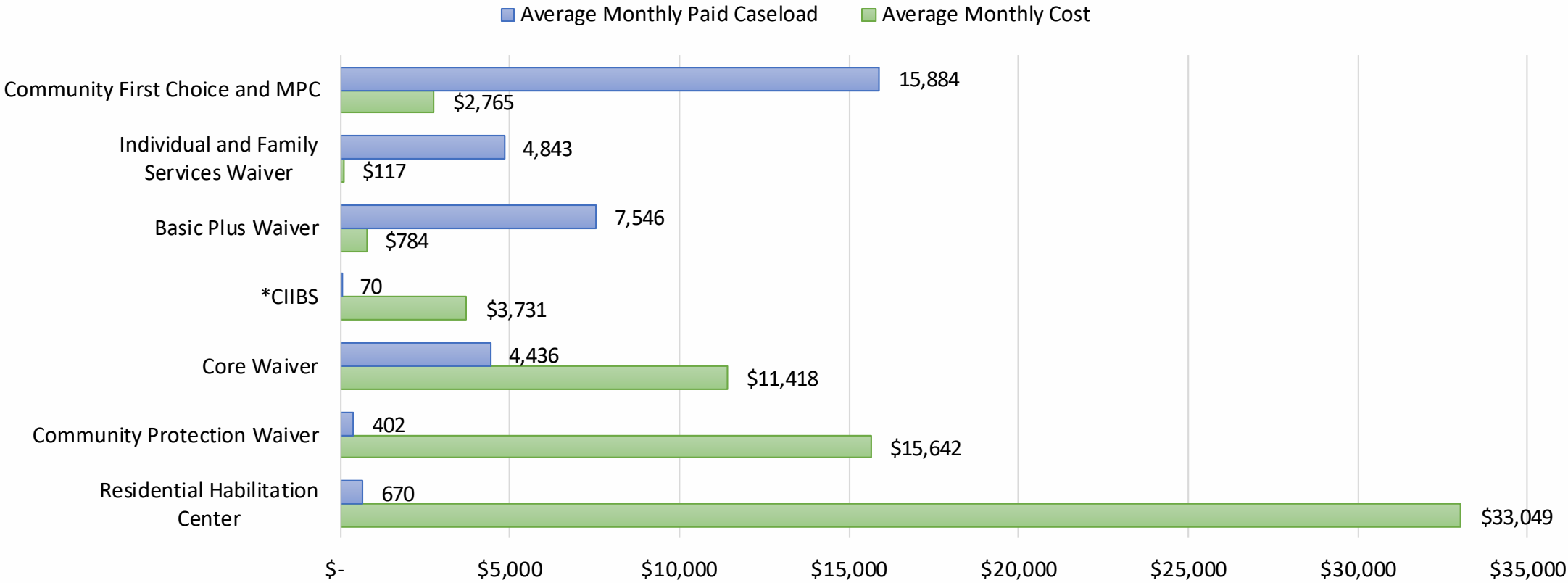
The 2016 Legislature created and funded the Enhanced Case Management Program for clients who may be at high risk for abuse or neglect. These specialized caseloads are 1:40 client/case manager ratio and the case manager visits the client at least once every four months to:

- Ensure quality of care and health and safety needs are met
- Assist the client, family, and providers with access to available resources
- Promote community integration through paid and non-paid supports
- Promote a person-centered, holistic approach to services

	Region 1	Region 2	Region 3	Statewide
Capacity	200	205	284	689
Enrolled as of 7/2020	199	188	269	656
Served since 9/2016	305	301	440	1046

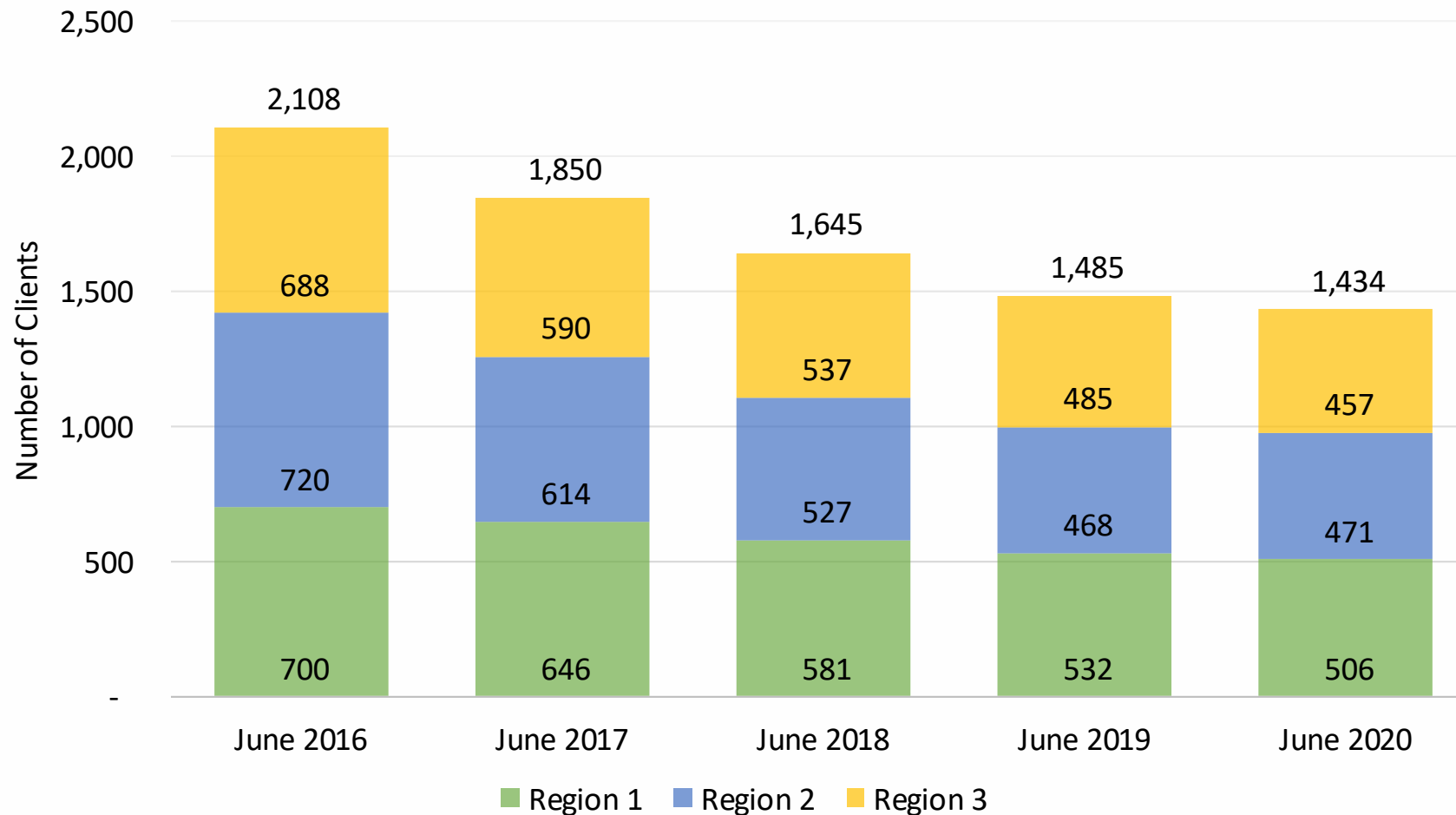


FY20 Average monthly caseload and costs



Note: Residential Habilitation Center includes both long-term and short-term admissions.

DDA clients receiving State Supplementary Payments in lieu of the Individual and Family Services Waiver



Supplemental Security Income (SSI) State Supplementary Payments is a monthly cash disbursement offered by the states to low-income individuals to supplement one's federal unearned income. In 2020, 1,434 individuals received State Supplementary Payments in lieu of the Individual and Family Services waiver. Payments are based on assessed need and range from \$100 to \$300 a month.

Clients enrolled in DDA Out-of-home services for children



DDA offers an array of services to a child residing in a licensed setting outside of the family home.

Based upon the child’s disability, parents/legal guardians may request out-of-home placement. Parents retain custody of their child and work in partnership with a licensed provider in a shared parenting model.

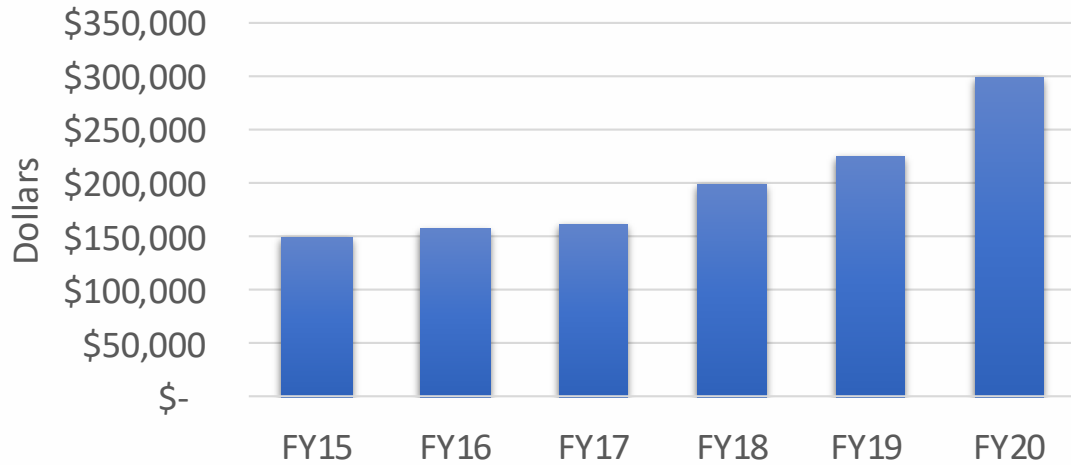
The majority of clients who are approved for DDA Out-of-home services for children receive these services in a licensed staffed residential program. Other settings include State Operated Living Alternatives and Child Foster Homes.

DDA State Operated Living Alternative caseload activity and costs

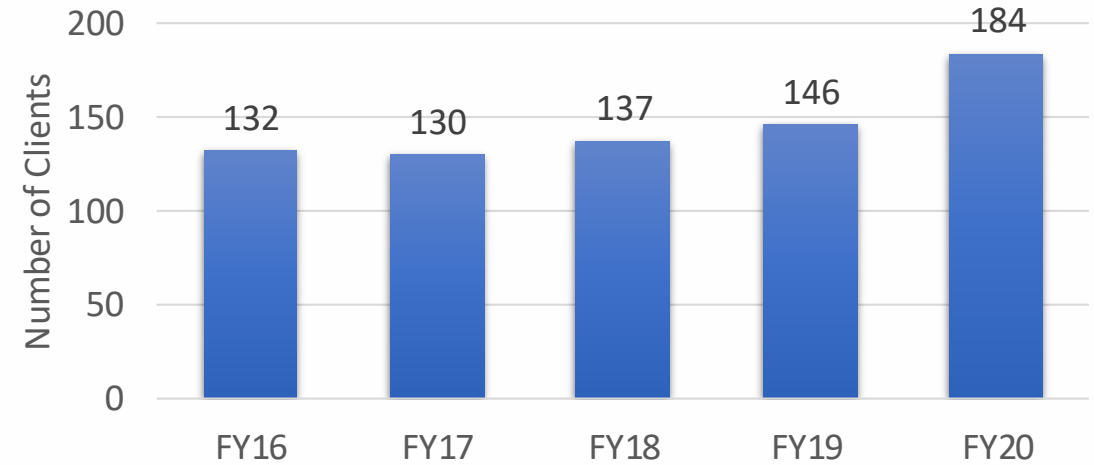
State Operated Living Alternative (SOLA) offers 24-hour supported living services operated by DDA state employees.

- Supports include: maintaining the home, paying bills, preparing meals, assistance with personal tasks, shopping, going into the community, etc.
- Individuals pay their own rent, food, and other personal expenses.
- Capacity for this service is limited and is based on availability of funding appropriated by the Legislature.

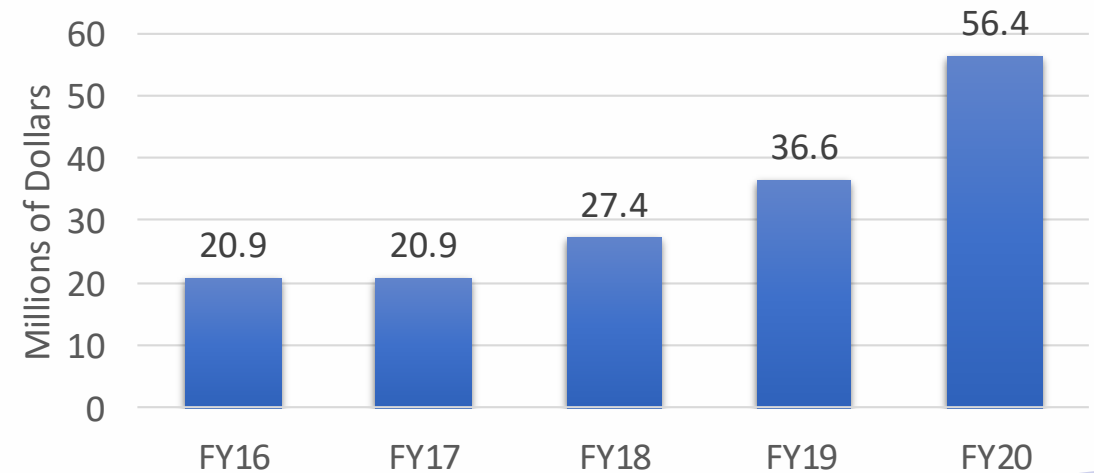
Average Annual Cost Per Client



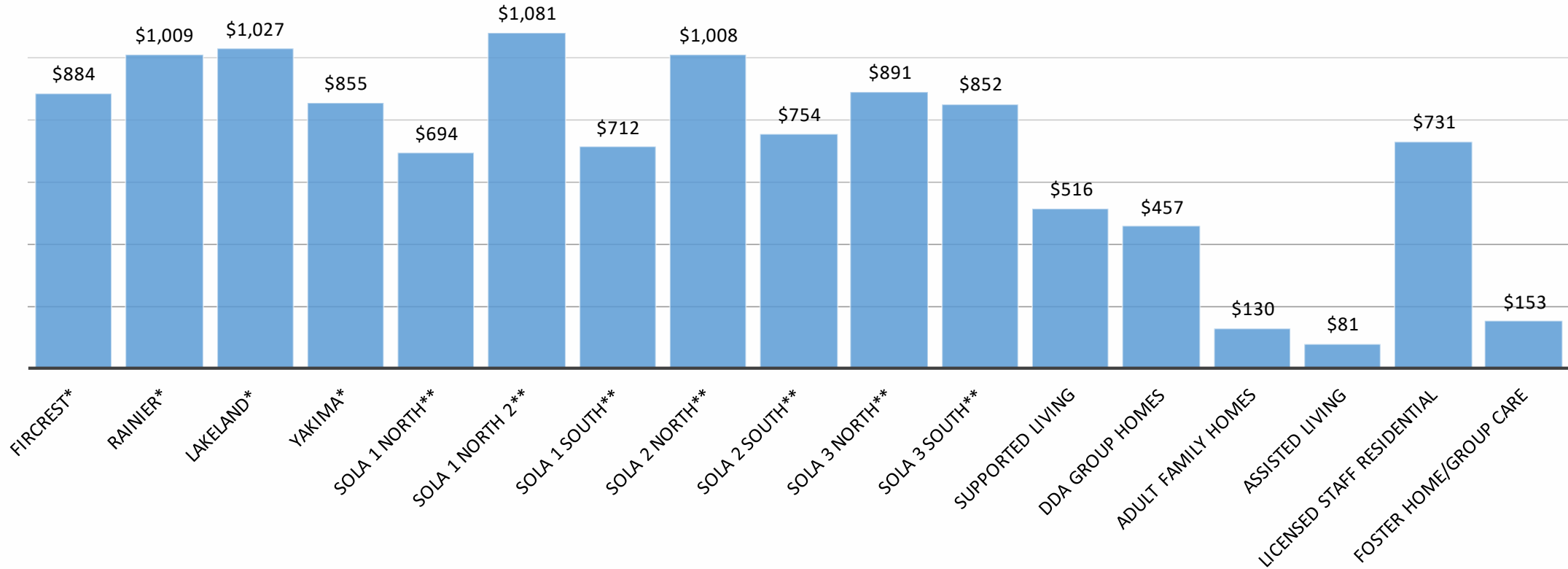
Average SOLA Census by Fiscal Year



Annual SOLA Program Expenditures



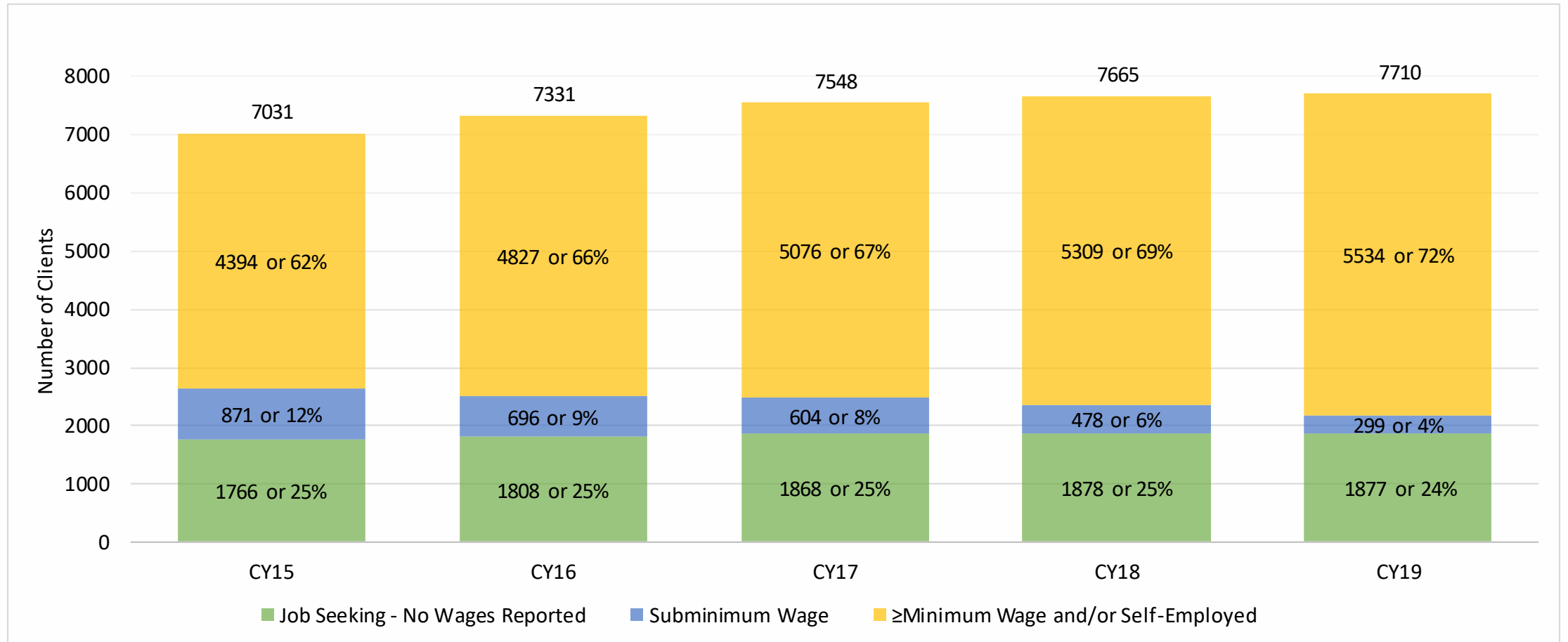
FY20 Average Daily Cost by Residential Setting



*RHC Average daily costs do not include capital costs associated with maintenance and upkeep of facilities.

**SOLA is in the midst of major expansion as clients are being rapidly moved from RHCs and State Hospital settings to this program. FY19 produced two new SOLA sub-regions, 2N and 3S. There was a new 1N Spokane location referred to as 1N2.

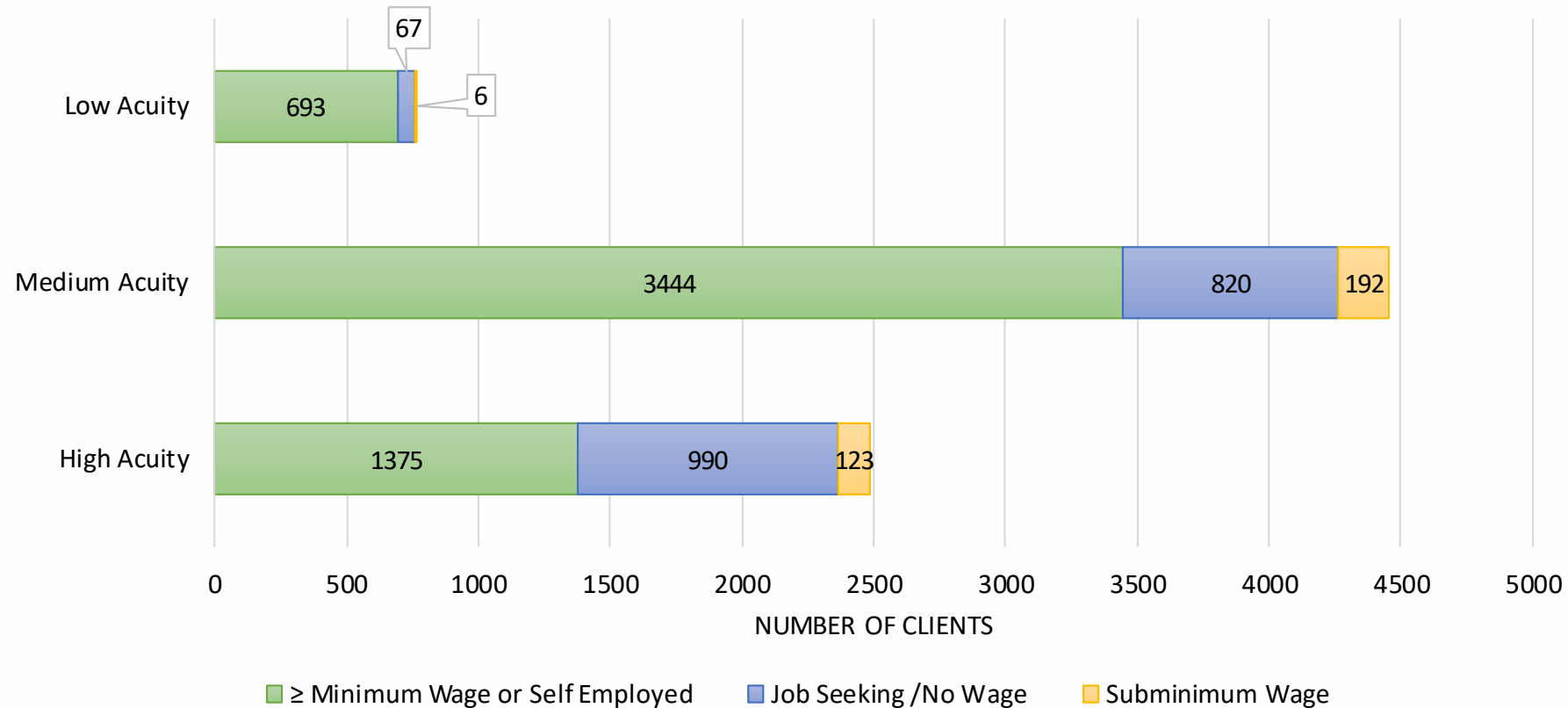
Clients receiving supported employment by wage status



Employment services are the services of Individual Employment and Group Supported Employment.

Employment Services by Wage Status and Acuity Level

Calendar Year 2019



Of those who are assessed as high acuity:

- 55% are earning at least minimum wage or are self employed
- 40% are job seeking or do not have wages, and
- 5% are earning less than minimum wage.

Note: Acuity data excludes Pre-Admission Screening and Resident Review (PASRR).

Calendar Year 2019 Weekly average client support hours, paid work hours and wages

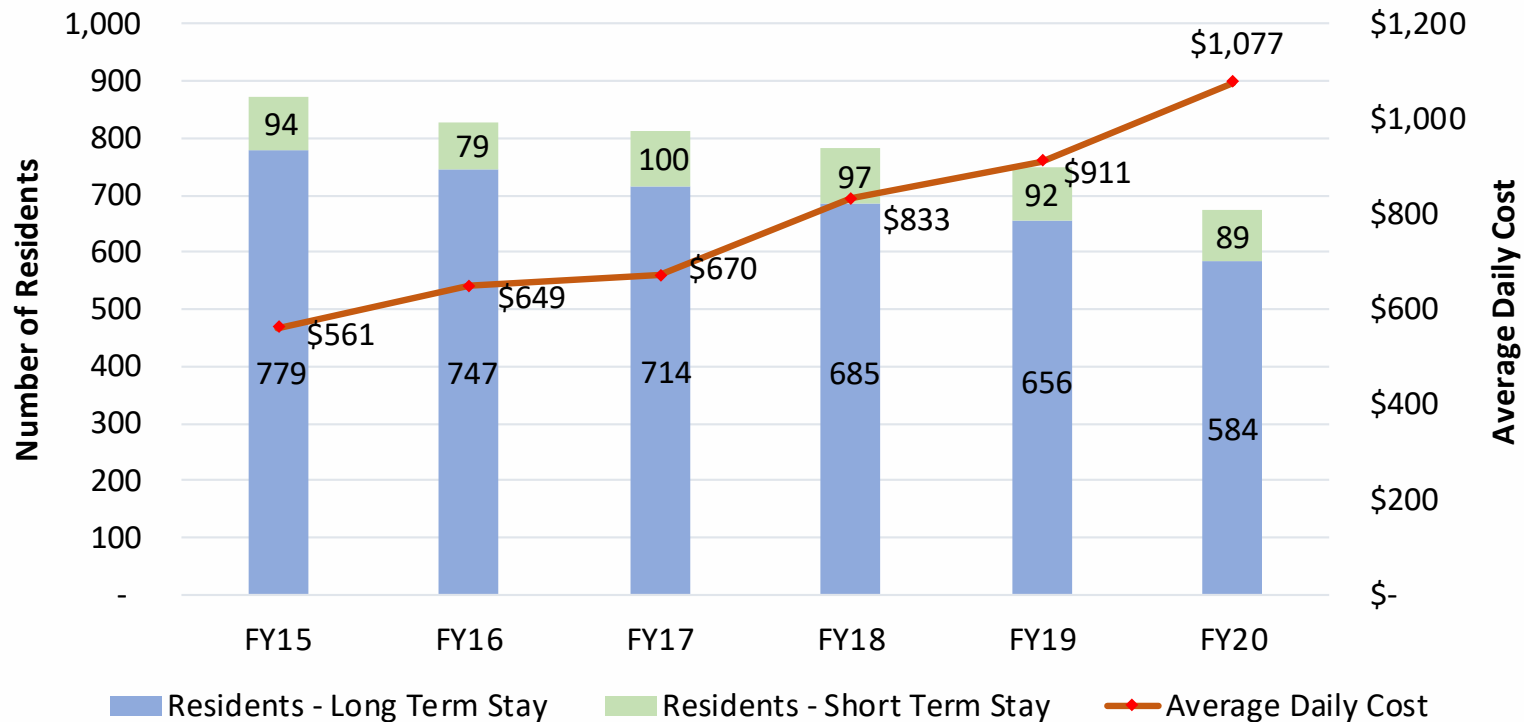
Service	Average Number of Client Support Hours Per Week	Average Number of Client Work Hours Per Week	Average Client Wages Per Week
Individual Employment	2.5	10	\$138.00
Group Supported Employment	2.2	8.5	\$75.50
Community Inclusion	2.75	N/A	N/A

Clients receiving employment and day program services by county

County	Group Supported Employment	Individual Employment	Community Inclusion	Total
Adams	1	6	2	9
Asotin	16	11	6	33
Benton	44	86	48	178
Chelan	8	63	47	118
Clallam		95	36	131
Clark		440	82	522
Columbia		3	5	8
Cowlitz		105	51	156
Douglas	3	16	14	33
Ferry		3	3	6
Franklin	16	22	9	47
Garfield		1		1
Grant	12	39	27	78
Grays Harbor		83	8	91
Island		77	9	86
Jefferson	4	22	9	35
King	19	2206	299	2524
Kitsap		292	35	327
Kittitas	2	36	32	70
Klickitat		1		1

County	Group Supported Employment	Individual Employment	Community Inclusion	Total
Lewis		55	37	92
Lincoln		8	4	12
Mason		66	9	75
Okanogan		18	8	26
Pacific		21		21
Pend Oreille		6	1	7
Pierce	63	723	129	915
San Juan		7		7
Skagit	7	164	41	212
Skamania		13		13
Snohomish		844	131	975
Spokane	46	518	258	822
Stevens		50	15	65
Thurston		420	55	475
Wahkiakum		3		3
Walla Walla	9	49	44	102
Whatcom	42	315	31	388
Whitman	19	23	2	44
Yakima	47	88	118	253
Grand Totals	358	6998	1605	8961

How has the budget and the number of individuals residing at Residential Habilitation Centers (RHCs) changed over time?



Since FY 2014:

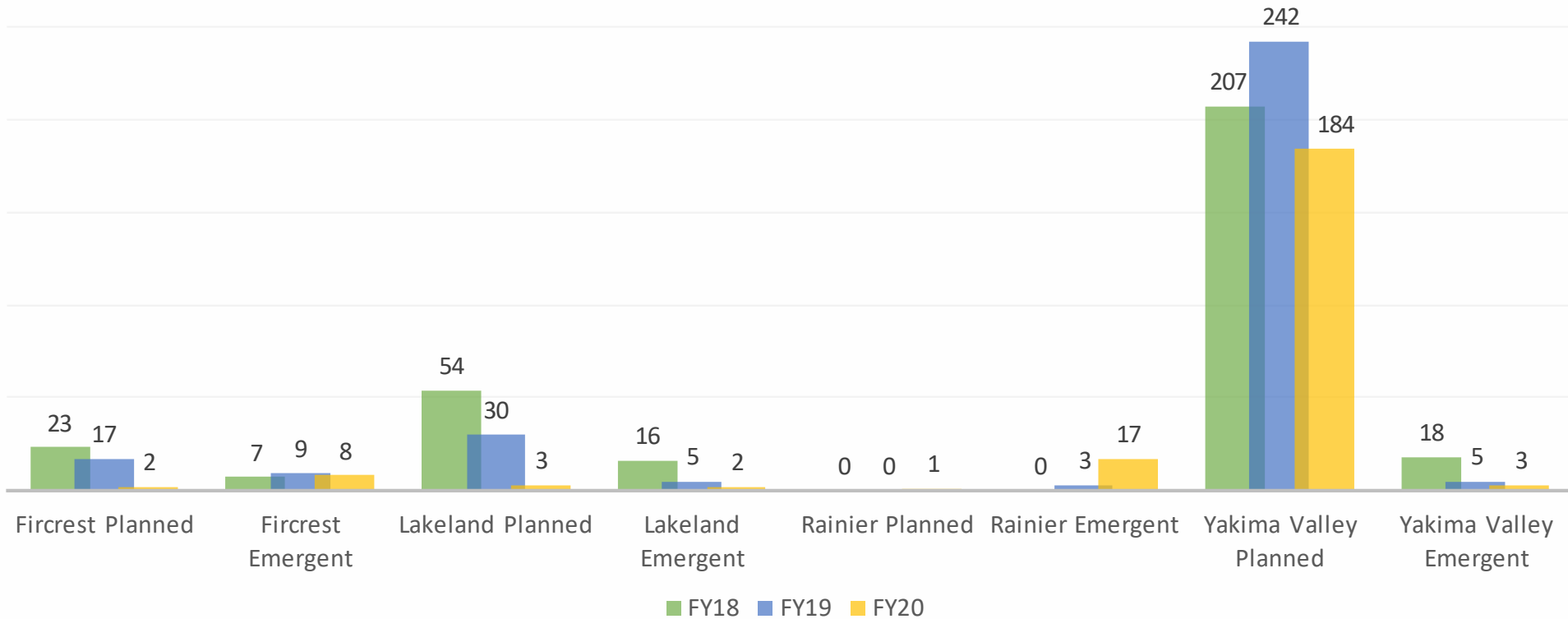
The number of long-term stay residents has decreased by 3.7% per year.

The number of planned or emergent short-term stay residents has increased by 6.6% per year.

The average daily rate has increased 10.8% per year.

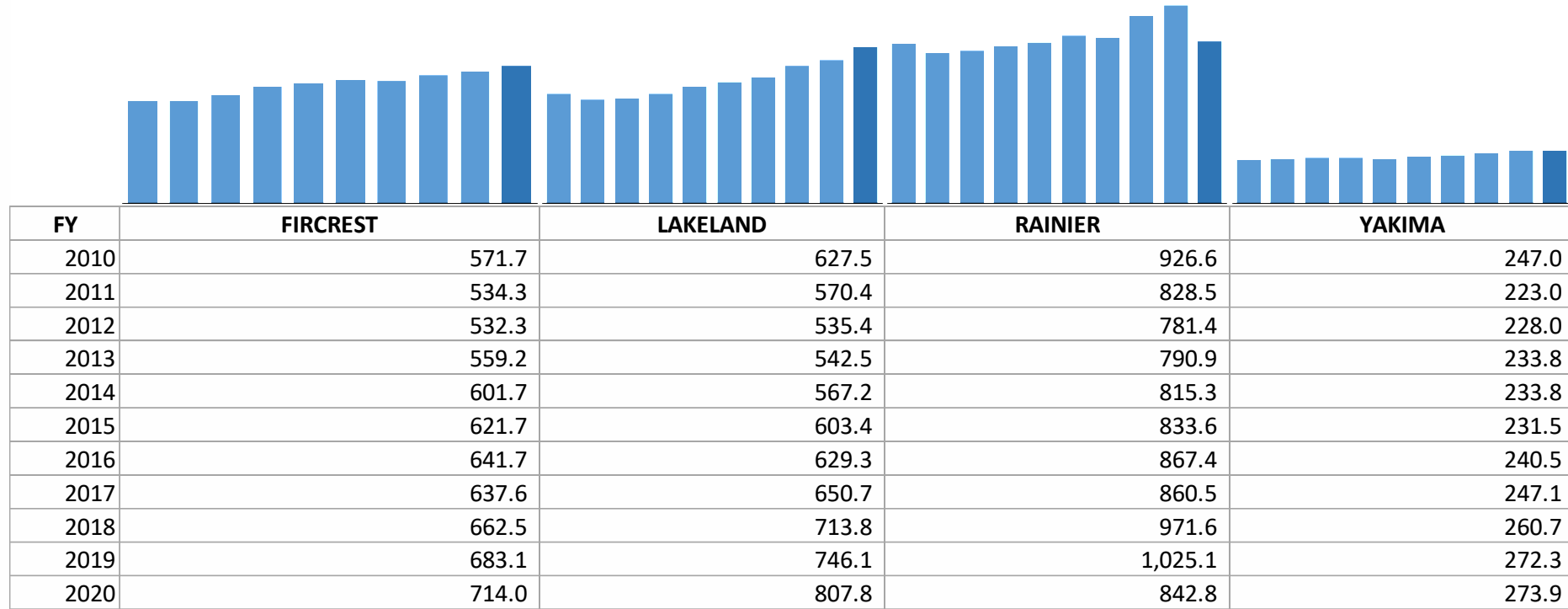
Note: Resident counts in this chart assume the RHC bed was occupied for the entire fiscal year. It does not reflect the actual number of clients who received short-term stay services in RHC for the same period. For example, if 12 residents on short-term stay reside at the RHC for one month each for consecutive months during the fiscal year, the chart displays them as one resident for the fiscal year.

Planned and emergent short-term stays at RHCs by fiscal year



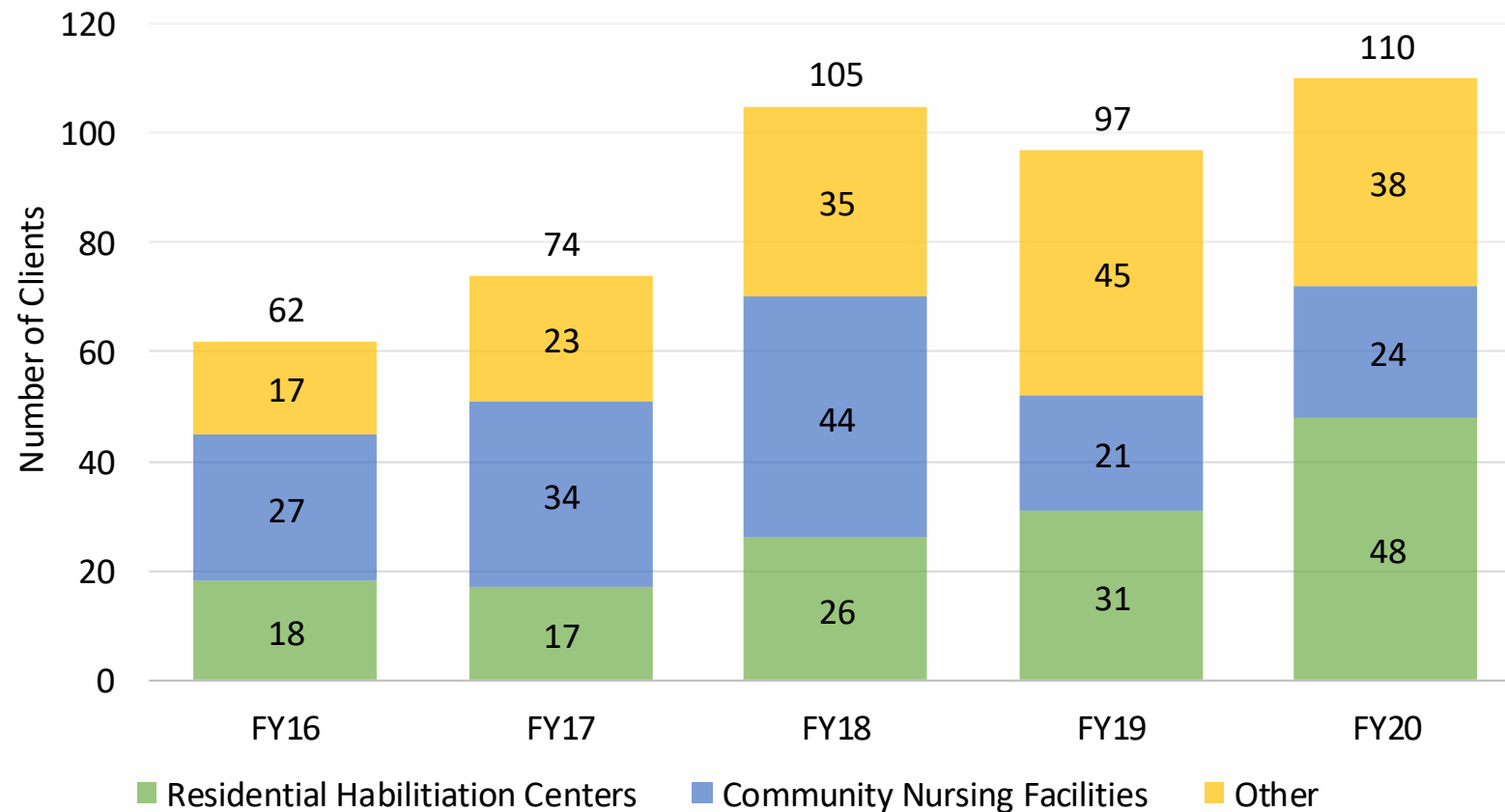
- Planned means a short-term stay with client having predetermined admission and discharge dates. Typically, a client approved for planned respite does not exceed 30 days in a calendar year.
- Emergent means a short-term stay where a client is in crisis and community resources are not currently available to help support the individual's immediate health and welfare needs.

Number of FTEs expended at each RHC by fiscal year



Note: Expended FTEs include amounts associated with Consolidated Maintenance Operations and Consolidated Service and Support.

DDA clients moving to the community via Roads to Community Living (RCL)



The RCL grant funded through the Centers for Medicare and Medicaid Services provides an enhanced federal matching rate of 75%. The enhanced rate is available during the first 12 months after a person moves out of an institution to a qualified community setting.

RCL offers additional services to support a successful transition to community services. Additional RCL services include: person-centered planning, assistive technology, training for families and staff, and environmental modifications.

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