

Spring Tribal Summit 2021



Caregiver Programs



The Primary Caregiver

- A “family caregiver” a spouse, relative or friend who has primary responsibility for the care of an adult with a functional disability* and who does not receive financial compensation for the care provided.

(RCW 74.41)

*The term functional disability refers to any reduction in the adult’s ability to perform essential activities of everyday life. These activities are necessary to maintain health, independence and quality in an adult’s life.

Unpaid Caregivers in Washington

- Unpaid caregivers provide up to 80% of care
- Unpaid caregivers not only help with medical tasks, but also with daily living tasks such as bathing, exercising and running errands
- No one unpaid caregiver is identical to another, but many need support and assistance
- If we look for clues, or ask certain questions, we may be able to identify unpaid caregivers

Family Caregiver Support Program

Majority of caregivers (84%) show significant improvements on key outcomes



Over a 6-month period, caregivers who receive ongoing support show statistically significant improvements in:

- Stress burden
- Relationship burden
- Objective burden
- Depression
- Comfort with caregiving role

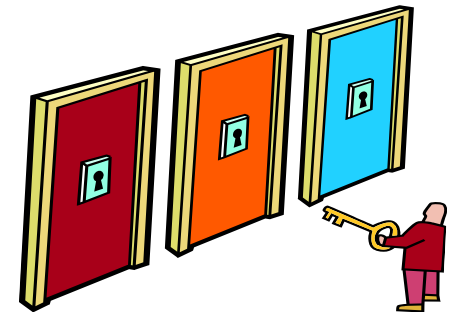
Spousal caregivers also show a decreased “intention to place”

Family Caregiver Support Program

Outcomes for both Caregivers and Care Receivers

When caregivers access support earlier in their caregiver journey, before they are experiencing the highest levels of stress and burden:

- There is a statistically significant delay in the use of Medicaid long term services and support (LTSS) for the care receiver
- The caregiver's health and well-being is improved
- The likelihood of the caregiver needing Medicaid LTSS is reduced



Why New Programs?

- What's different from Family Caregiver Support Program?
- Access to federal support through CMS lets us increase capacity → more people in the pool!



Goals of MAC and TSOA

- Provide the right service at the right time
- Expand person-centered choices
- Support unpaid family caregivers and individuals at risk of institutionalization
- Delay or avoid the need for more intensive Medicaid-funded long term services and supports
 - This may include delaying or avoiding spending down personal funds prior to going on LTSS Medicaid
 - Have the capacity to meet the needs of the population

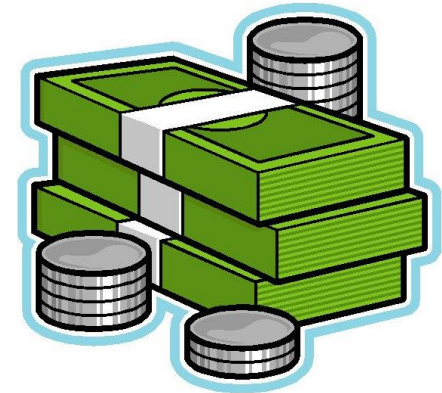
MAC and TSOA

Terminology

- **Mirrored after Family Caregiver Support Program (FCSP)**
- **New terminology for some – Dyad**
 - Care receiver (CR) and unpaid caregiver (CG)
- **Two populations served with Initiative 2:**
 - **Serves unpaid caregivers**
 - Reach them before stress is too high and placement is needed
 - **Individuals without an unpaid caregiver**
 - New population to be served

Estate Recovery & Participation

- **Estate recovery** does not apply to services provided under MAC & TSOA.
- There is no **participation** applied to cost of services.



Who Benefits from MAC/TSOA?

- MAC services benefit older adults and their unpaid family caregivers – called dyads
- TSOA services benefit older adults and their unpaid caregivers – called dyads
- TSOA also serves older adults without a caregiver

Who is Eligible?

MAC	TSOA	FCSP
Care receiver is age 55+		For Caregiver 18 years or older who is caring for a care receiver 18 years or older with a functionality disability or age 60 +
Caregiver is age 18+		
Be receiving categorically needy (CN) or alternative benefit plan (ABP) Apple Health (Medicaid) <i>WAC 182-513-1605</i>	Monthly income less than \$2313 (1/1/19) Resources (single) less than \$53,100 Resources (married) less than \$112,XXX <i>WAC 182-513-1615</i>	No financial eligibility criteria There may be a requirement to pay all or part of the cost of respite care services depending on the monthly income.
Be US citizen or have eligible immigrant status	Be US citizen or have eligible immigrant status	No immigrant status requirements
	Submit TSOA financial application 18-008	

Why Older People Don't Access Services

They may resent subjecting themselves to unnecessary requirements or loss of control.

They may be fearful of giving information to a governmental agency.

They may feel judged or feel services are not specific to their needs.

They may feel that services are not sensitive to their ethnic group.

They may feel guilty or embarrassed about accepting a “hand out”.

They may have difficulty accepting that they need services.

They may resist congregating with “old people”.

They may lack experience in accessing services.

Making Referrals

Contact:

- Local Community Living Connections/AAA office (www.waclc.org or 1-855-567-0252)
- Home and Community Services office (www.dshs.wa.gov/ALTSA/resources)
- CLC Medical Professional referral portal

These intake workers can help you explore all of the available programs and services.

Applying for Services

Apply online at www.washingtonconnection.org

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Completed applications can be mailed to P.O. Box 45826 Olympia, WA 98504.

Intakes



An individual or dyad can request services through either the Area Agency on Aging (AAA) or Home and Community Services (HCS) door.

Presumptive Eligibility?

Presumptive Eligibility (PE) is:

A process that allows us to gather preliminary information, based upon attestation, to decide that the care receiver appears to meet eligibility criteria.

Services can be received while full eligibility is being determined.

No administrative hearing rights.



Financial Eligibility – MAC & TSOA

- **MAC**
 - Already eligible for CN/ABP Medicaid, but would prefer to support unpaid caregiver in lieu of receiving traditional LTSS, like CFC or HCB waivers.
- **TSOA**
 - Not on Medicaid, but “at risk” for spenddown to Medicaid within 6 months. Would like to support unpaid caregiver in lieu of spenddown to traditional LTSS, like CFC or HCB waivers.
- **Spousal impoverishment protections**
 - MAC and TSOA both allow the recipient to allocate the state CSRA (\$53,726 currently) to their well spouse, and the well spouse’s income is not counted.

NURSING FACILITY LEVEL OF CARE

An individual must meet at least one of four sets of functional criteria for nursing facility level of care. The four sets are outlined in 1(a) through (d) of WAC 388-106-0355.

Criteria outlined in 1(b) and (c) of WAC 388-106-0355 is based on ADL Level of Assistance coding and Support provided.

NURSING FACILITY LEVEL OF CARE

1(a)-The individual requires care provided by or under the supervision of a registered nurse or a licensed practical nurse on a daily basis.

***IMPORTANT:**

- The care must be at least **once a day**, and
- Must be provided or supervised by a registered or a licensed practical nurse (including a nurse from a Home Health Agency, Hospice, Clinic Practitioner's Office, Private Duty Nurse, or Nurse Delegation)

NURSING FACILITY LEVEL OF CARE

- 2) In the last 7 days, did the care receiver have a cognitive impairment and require supervision due to one or more of the following?
- Disorientation
 - Memory Impairment
 - Impaired Decision-making
 - Wandering
 - None Apply

ACTIVITIES OF DAILY LIVING (ADLS)

What are the ADL's?

- **Ambulating**
- **Bed Mobility**
- **Transfer**
- **Toileting**

*Toileting has to do with elimination rather than using a toilet.

- **Eating**
- **Bathing**
- **Medication Management**

NFLOC is a Pre-Screen in time

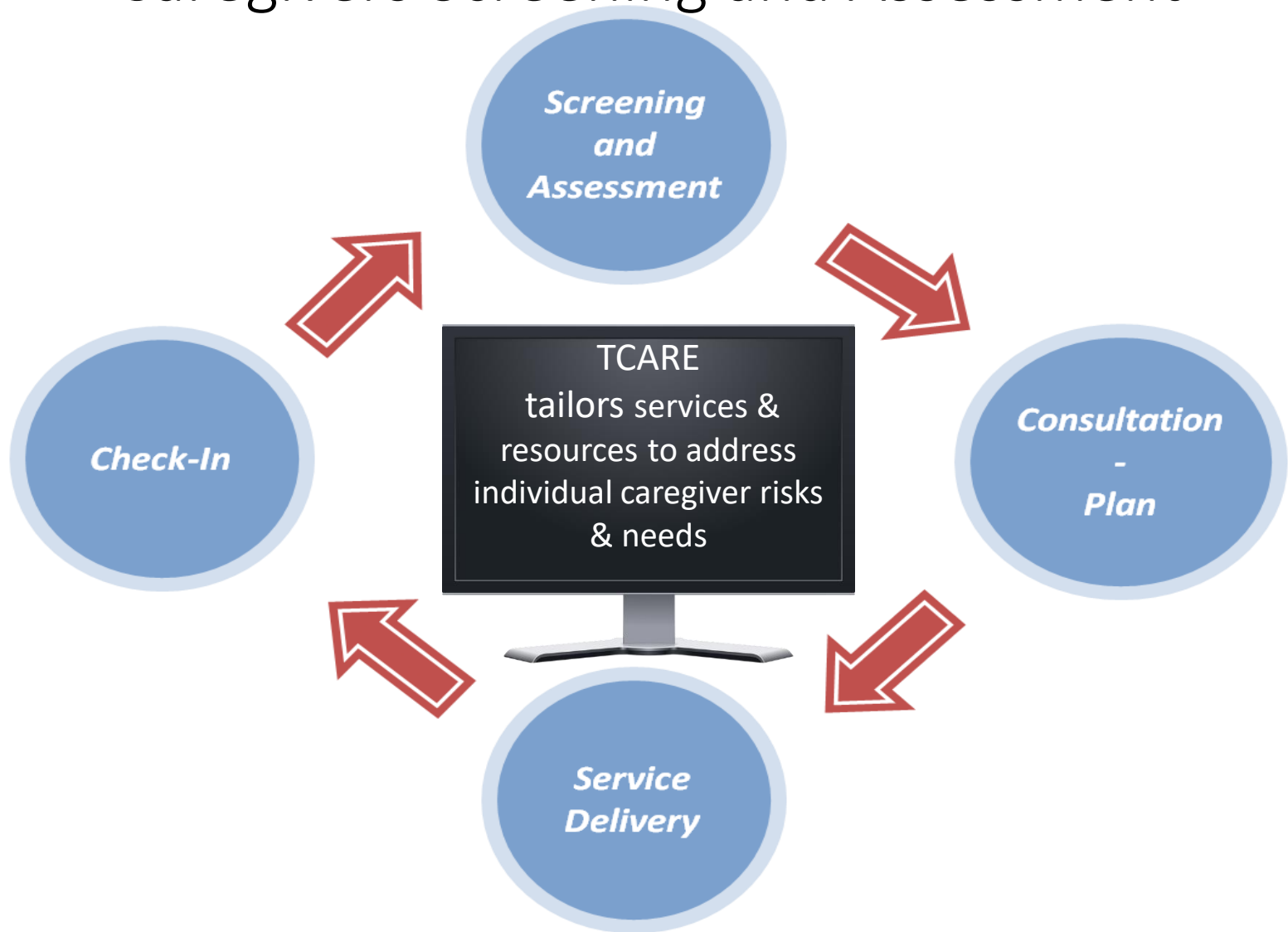
- NFLOC eligibility has a 7 day “look back” period (with the exception of Medication Management)
- Type of assistance the individual received
(Oversight, cueing, non-weight bearing, weight bearing, full caregiver performance)
- It’s important to know what ***actually*** occurred in the last 7 days/24 hours a day.
No need to determine how a client’s needs may vary on a “good” or “Bad” day as well as “what was” versus “what might be or should be”.

Review - Level of assistance

Must have occurred 3 or more times:

- **Independent:** None OR (any type of assistance only 1 or 2 times) in last 7 days
- **Minimum (Supervision):** Verbal, no physical contact
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- **Maximum (Extensive):** Caregiver bears some weight **OR** full caregiver performance of one or more sub-tasks of ADL (but not all)
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Caregivers Screening and Assessment



HCS & AAA Roles

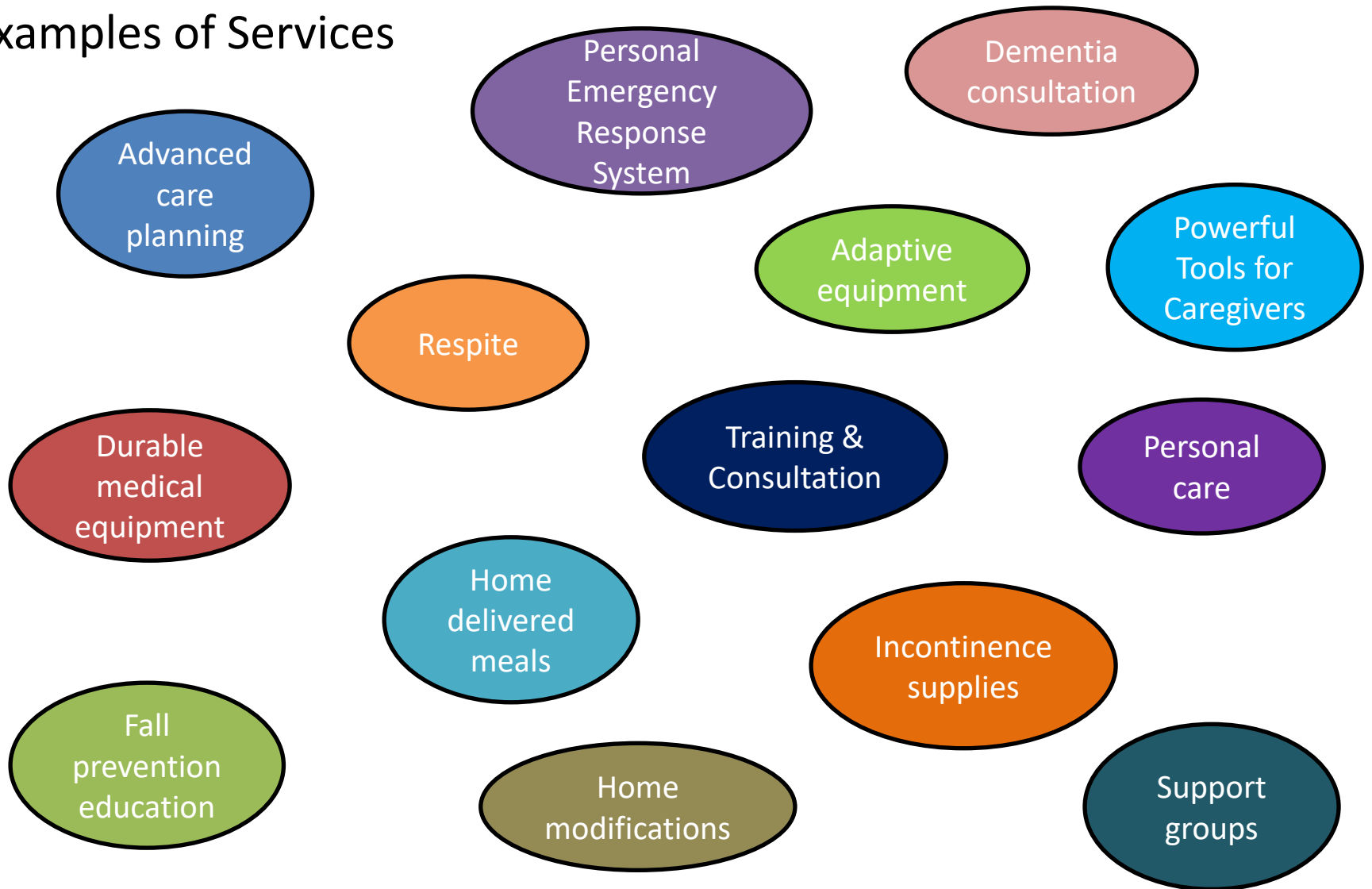
Home & Community Services

- Intake
- Presumptive Eligibility
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- Annual financial eligibility review

Area Agency on Aging

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Examples of Services





Carol M.
Spokane, WA

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- DSHS Medicaid Transformation website:
www.dshs.wa.gov/altsa/stakeholders/medicaid-transformation-project-demonstration
- HCA Medicaid Transformation website:
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Thank you!

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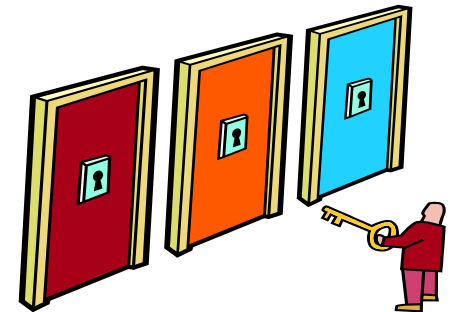
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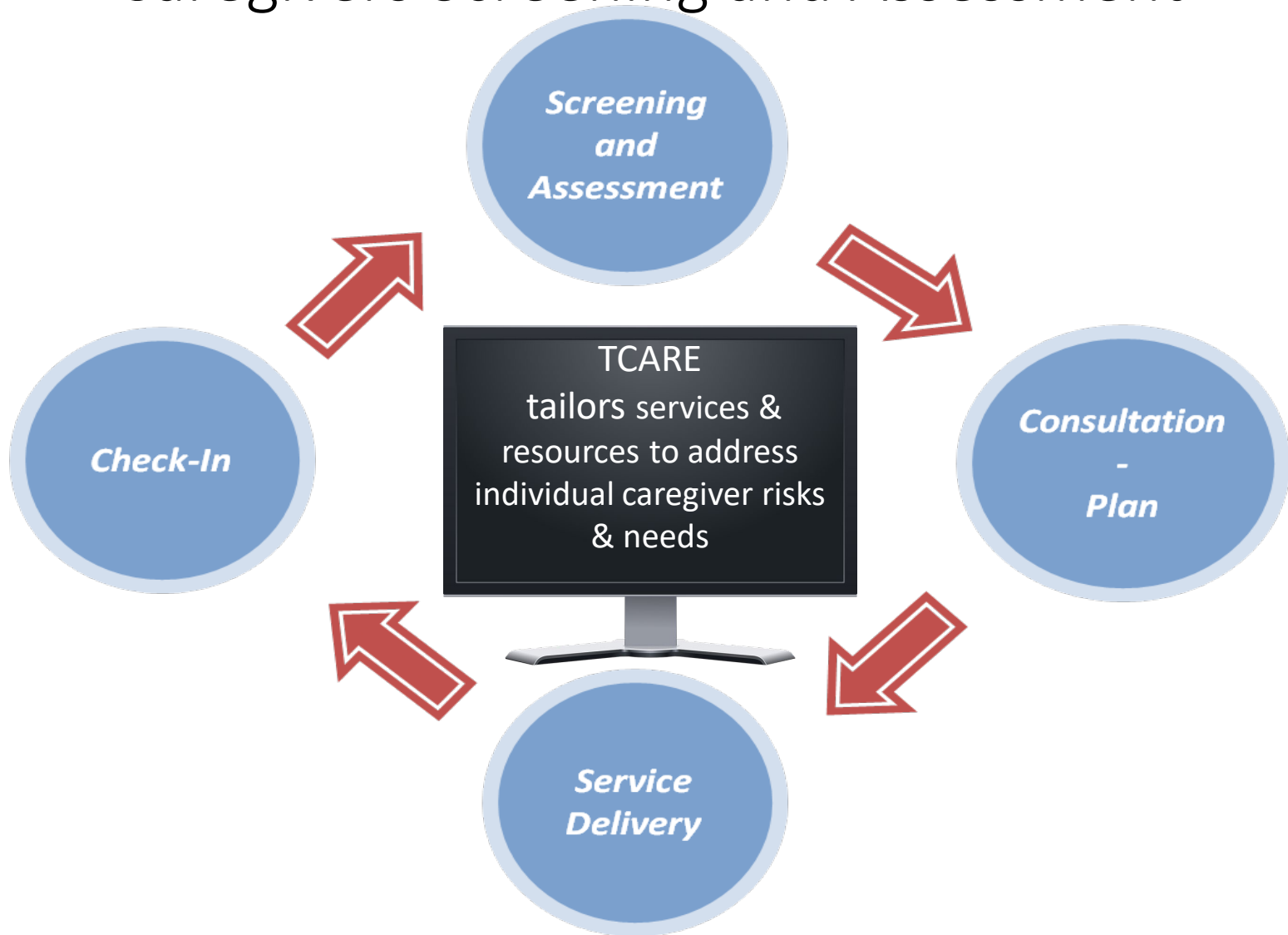
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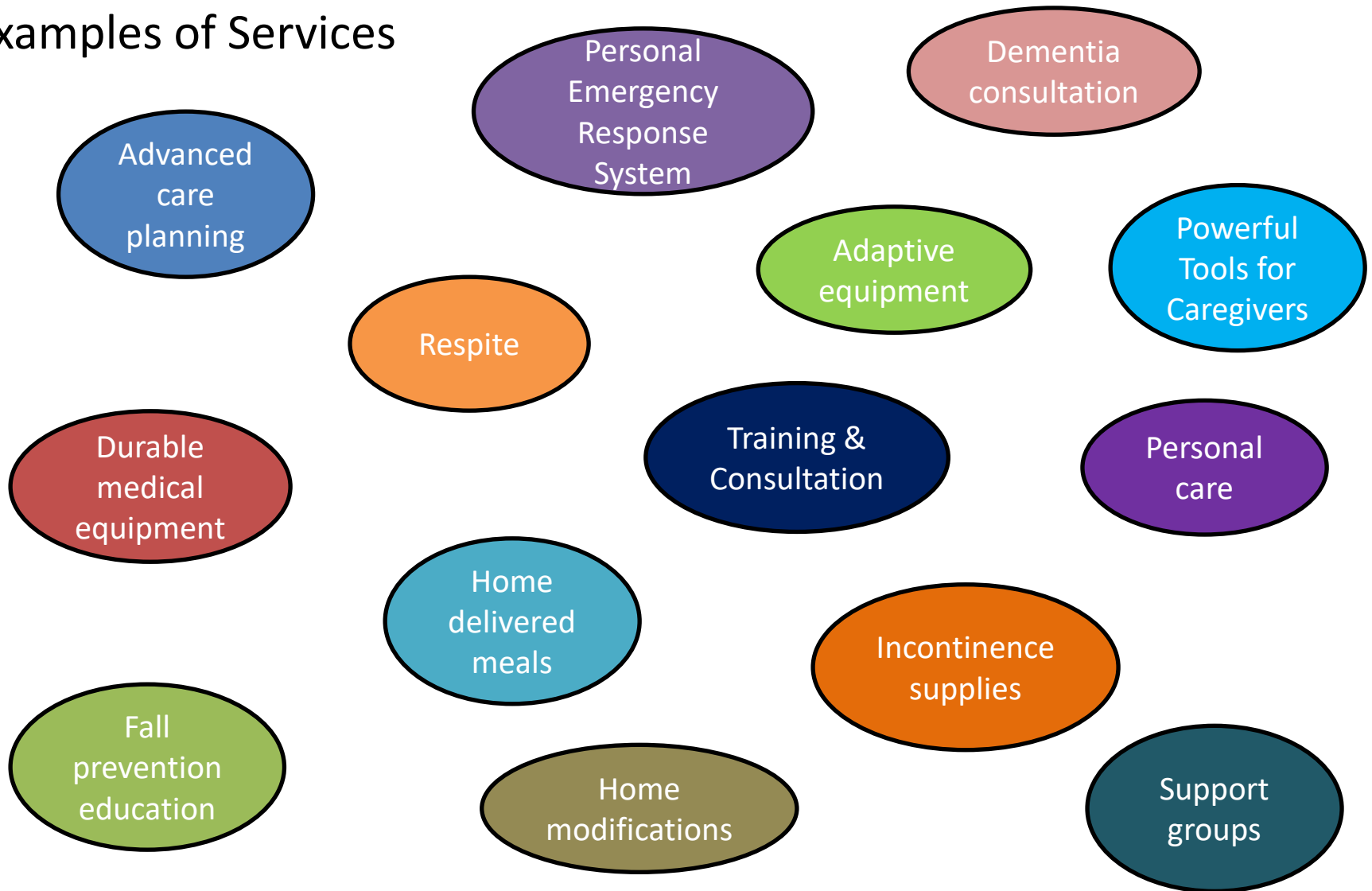
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How Caregiver Programs Have Helped Caregivers

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