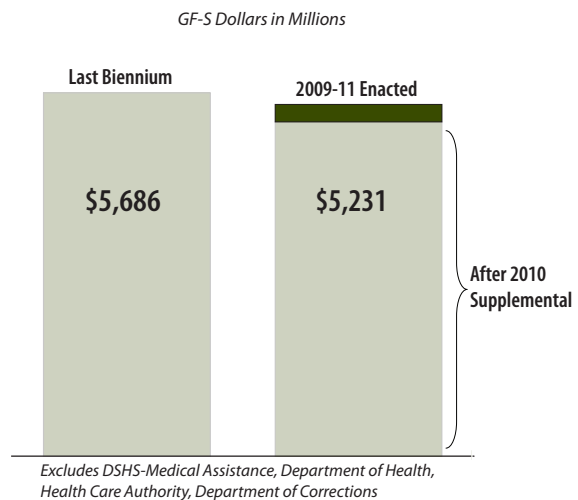


# HUMAN SERVICES

Of all the services that state government provides, none is as important as helping those who are not able to take care of themselves. Whether for a child in foster care, an elderly person needing assistance or a person with disabilities who requires specialized care, state government has provided a helping hand.

Washington state has provided services not required by the federal government as a safety net for vulnerable children and adults, such as public health nurses for at-risk families, cash assistance for adults without children who are unable to work and volunteer chore services for the elderly. This has been possible, in large part, due to revenues available before the recession. Governor Gregoire proposes to pare back or eliminate a number of these discretionary programs. She has made these difficult decisions to preserve safety nets for our most vulnerable citizens.



## Actions

Eliminate the General Assistance Unemployable program, which provides cash grants to about 29,210 adults. General Assistance grants will continue for individuals with pending applications for federal Supplemental Security Income. General Assistance grants also will continue for individuals on the General Assistance Aged, Blind and Disabled programs. *(\$88.5 million General Fund-State)*

Eliminate housekeeping and off-site laundry services to 42,000 elderly clients or people with developmental disabilities, which will result in an average of six fewer hours of services per month. *(\$18.3 million GF-S, \$23.9 million General Fund-Federal)*

Eliminate outpatient services for chemical dependency and detoxification treatment for more than 3,600 low-income adults. *(\$8.7 million GF-S)*

Eliminate funding to the Superintendent of Public Instruction for chemical dependency prevention grants. *(\$970,000 GF-S)*

Limit new subsidies for child care from 3,800 cases per month to 1,400 cases per month, prioritizing services to families on the Temporary Assistance for Needy Families Program and those with the lowest income. *(\$88.5 million GF-S)*

Reduce home care agency funding by ending parity with individual providers for wages and benefits, as well as reducing health benefit contributions. *(\$14.1 million GF-S; \$18.2 million GF-F)*

Reduce non-Medicaid funding for community mental health services, which include counseling, case management, acute care, the program for adaptive living skills and jail services. *(\$15 million GF-S)*

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Reduce in-home Medicaid personal care services by changing eligibility levels to match the standard for admission to a nursing home. (*\$5.4 million GF-S, \$9.3 million GF-F*)

Reduce the Senior Citizens Services Act state-funded optional services while preserving core activities provided by 13 local Area Agencies on Aging related to information and referrals to those considering elder care. (*\$7 million GF-S*)

Reduce family preservation services, which help keep children at risk of abuse safely in their own homes, by 50 percent, or funding for 2,400 families. (*\$5.9 million GF-S*)

Reduce chemical dependency and detoxification treatment for 3,800 low-income adults. (*\$5.4 million GF-S*)

Reduce reimbursements paid to foster care parents by an average of 8 percent. (*\$4.1 million GF-S*)

Reduce funding for General Assistance Unemployable for chemical dependency treatment for 1,200 low-income adults. (*\$2.7 million GF-S*)

Reduce Medicaid rates paid to Regional Support Networks, which deliver community mental health services under the state and federal Medicaid program, by 1 percent. (*\$1.2 million GF-S; \$1.5 million GF-F*)

Suspend state subsidy of child support funds to approximately 12,000 families on public assistance. (*\$6.1 million GF-S; \$6.1 million other funds*)

Suspend the Volunteer Chore program, which coordinates 288,000 hours of volunteer services to help elderly people who remain in their homes. (*\$1.9 million GF-S*)

Revise the Individual and Family Support program so families earning more than \$30,000 per year will no longer be eligible for benefits, and reduce the annual benefit from \$3,000 to \$2,250. (*\$5.2 million GF-S*)

Delay new mandatory training for long-term care workers from January 2011 to January 2012. (*\$2.8 million GF-S; \$3.7 million GF-F*)

Transfer services of the Council on Children and Families to be more efficient and to align similar functions. The nurse home visitation program is transferred to the Department of Early Learning; child abuse and neglect prevention programs are transferred to the Department of Social and Health Services' Children's Administration. The council is disbanded and staffing is reduced. (*\$235,000 GF-S*)