

IN THE NARRATIVES THAT FOLLOW:

(★) Indicates that Governor Gregoire has tentatively chosen to include the item in her 2012 supplemental budget proposal in November.

ALSO NOTE:

- ▶ Many items will require notice to clients or providers.
- ▶ Many items will require legislation.
- ▶ Impact descriptions, dollar amounts and effective dates are preliminary and subject to revision due to caseload forecast changes and other adjustments. Numbers have been rounded and may not exactly match numbers in the listing of *General Fund Reduction Alternatives* beginning on page 27.
- ▶ Unless otherwise noted, all dollar amounts are General Fund-State.
- ▶ Dates for eliminations and reductions in services vary. Dates may vary for elimination and an alternative reduction, too, for the same program or service.

SOCIAL AND HUMAN SERVICES

CHILDREN'S ADMINISTRATION

Maximize federal funding (★) \$14.5 million
 Identifies adoption- and foster care-related costs that can be covered with federal funds. The state provides adoption and foster care services to about 24,000 children monthly.

Reduce use and rates of contracted services (★) \$13.0 million
 Cuts the number of placements in group homes and reduces fees paid to child placement agencies. Prevents overpayments to improve program accountability.

Eliminate state funds for domestic violence programs \$9.4 million
 Terminates state funds for domestic violence shelters that serve about 16,700 individuals annually. Retains funding for non-shelter services.

Alternative: Reduce by 10 percent (★) \$946,000

Increase client-to-social worker ratio (★) \$8.2 million
 Changes the average ratio of children to social worker. Affects only those social workers, associated supervisors and support staff employed in child welfare. Does not reduce the number of social workers in Child Protective Services.

Eliminate child welfare programs (★) \$7.3 million
 Terminates specialized child welfare programs such as receiving care centers, continuum of care, sex abuse recognition training, children's advocacy centers, educational coordinators, foster care assessment, adoption support recruitment and street youth. Approximately 5,700 children receive these services annually.

Reduce services (★) \$4.7 million
 Reduces the Pediatric Interim Care Center, foster parent child care and support services, receiving care services, maintenance overpayments, evaluation and treatment, sexually aggressive youth services, family preservation training and the responsible living skills program for adolescents.

Eliminate family reconciliation services (★) \$4.7 million
 Stops intake and referral services aimed at keeping families intact and promoting positive behaviors for about 525 families who seek assistance each year.

Reduce foster care length-of-stay (★) \$876,000
 Shortens the length of stay for 200 hard-to-place foster children now in care.

CHEMICAL DEPENDENCY

Reduce chemical dependency services (★) \$14.5 million

Reduces out-patient and detoxification chemical dependency services for 11,000 low-income clients.

Eliminate Disability Lifeline and ADATSA (★) \$5.2 million

Terminates the Disability Lifeline and ADATSA (Alcohol and Drug Abuse Treatment and Services Act) medical programs, affecting 15,000 clients who receive chemical dependency services.

Eliminate long-term residential and recovery house services (★) \$2.7 million

Ends funding for long-term residential services in excess of 90 days for 223 clients who are chronically chemically dependent or disabled. Terminates funding for five recovery houses, which serve 299 clients after they have finished their residential treatment program.

Close Pioneer Center East (★) \$2.1 million

Halts funding for this Spokane chemical dependency treatment facility that annually serves 283 acute-care clients.

Convert funding to county block grant (★) \$2.1 million

Introduces flexibility for funding chemical dependency services, which will be distributed to counties in a block grant to maximize the efficient and flexible use of resources.

Capture Criminal Justice Treatment Account underexpenditure (★) \$2.1 million

Uses underspent Criminal Justice Treatment Account funds to offset state chemical dependency costs for drug courts.

Limit detoxification visits (★) \$1.9 million

Reduces the number of admissions to two per year, which will eliminate 2,020 visits annually.

Limit chemical dependency assessments (★) \$188,000

Reduces the number of assessments to two per year, which will eliminate 251 assessments annually.

DEVELOPMENTAL DISABILITIES AND LONG-TERM CARE

Change eligibility requirements \$204.3 million

Raises eligibility requirements and eliminates services for 25,000 developmentally disabled and elderly clients who now receive services ranging from in-home assistance with eating, bathing, medication management and toileting, to extensive hands-on assistance in a nursing home.

Alternative: Reduce eligibility for services (★) \$35.0 million

Changes the eligibility for Medicaid personal care, nursing facility services and residential habilitation institutional services. Eliminates services for 5,000 elderly clients and 800 individuals with developmental disabilities.

- Eliminate health care insurance for home care providers** **\$74.4 million**
Terminates health care insurance for agency providers and individual providers, who assist individuals with developmental disabilities and in long-term care with activities of daily living. This affects 12,000 agency providers and 32,600 individual providers.
- Create a new provider classification** **\$59.9 million**
Creates a third classification of in-home care provider — the family member provider — to allow eligible long-term care and developmental disability clients to receive help with personal care and household tasks when other resources are not available. The two current classifications are agency provider and individual provider.
- Consolidate developmental disability waivers (★)** **\$12.0 million**
Merges the Basic and Basic Plus waivers into a single waiver based on a flexible model instead of the current service allocation model. About 7,000 clients will be authorized to spend a pre-determined amount on services at an aggregate level rather than by the specific service. Clients can select their own mix of services within the determined amount.
- Eliminate rate add-ons for nursing homes and assisted living (★)** **\$9.9 million**
Stops rate add-ons given to providers to take more Medicaid clients, reduce staffing ratios and increase wages. Monthly, nursing homes serve more than 10,000 elderly individuals and assisted living facilities serve more than 4,500 individuals.
- Eliminate state-only employment and day services (★)** **\$9.1 million**
Terminates supported employment services for 488 clients with developmental disabilities who have not been placed in a Medicaid waiver program.
- Reduce administrative rates for home care agencies** **\$8.8 million**
Cuts the administrative payment that agency providers receive for overhead expenses from \$5.00 per hour to \$4.00.
- Suspend Individual and Family Service program (★)** **\$8.4 million**
Suspends services to nearly 1,000 families for respite care, therapies and other activities which help them keep loved ones with developmental disabilities in their homes.
- Reduce Senior Citizens Services Act funding** **\$7.8 million**
Reduces funding to the minimum level necessary to satisfy the maintenance-of-efforts requirements (minimum match required by the state to accept federal funds) of the Older Americans Act.
- Alternative: Reduce funding by 20 percent (★)** **\$1.6 million**
Cuts funding to the Area Agencies on Aging, which provide case management services and other services, such as Meals on Wheels, to elderly individuals to help them remain in their homes.
- Eliminate Adult Day Health program (★)** **\$4.1 million**
Makes ineligible nearly 1,000 individuals with developmental disabilities or in long-term care who now receive assistance with medication management, cognitive and physical therapies, and group interactions.

Eliminate Volunteer Chore Services program **\$2.8 million**

Terminates program that each year enables more than 295,000 individuals with functional or cognitive impairments to receive assistance with household tasks, yard work, transportation, minor home repairs and other activities.

Alternative: Reduce funding by 20 percent (★) \$560,000

Close one residential habilitation center (★) \$2.0 million

Shutters the Rainier School residential habilitation center through the use of federal grants and one-time funding to transition approximately 350 clients to community-based settings or other residential habilitation centers. Because the average monthly cost in an institution is more than \$15,000 per client, significant future biennia savings are expected.

ECONOMIC SERVICES

Reduce state funding for subsidized child care by 18 percent **\$75.0 million**

Affects 6,000 children whose low-income families now receive subsidized child care while parents are working.

Alternative: Reduce by 12 percent (★) \$50.0 million
Affects 4,000 children.

Eliminate aged, blind or disabled grants **\$29.7 million**

Terminates monthly grants to more than 15,000 individuals who are aged, blind or disabled, or who are qualified to seek Social Security Income assistance. Current maximum monthly grant is \$197.

Reduce TANF time limit **\$26.5 million**

Shrinks maximum time a family can receive a TANF (Temporary Assistance to Needy Families) grant from 60 to 36 months, which eliminates eligibility for nearly 4,600 families.

Alternative: Reduce time limit to 48 months (★) \$18.3 million
Affects 1,900 families.

Reduce TANF grants by 5 percent **\$19.4 million**

Cuts TANF grants by 5 percent, which for a family of three will shrink the monthly amount by \$23 — to \$454.

Alternative: Reduce grant amounts by 2 percent (★) \$7.7 million
Shrinks monthly grant to \$468.

Earn federal TANF contingency funds (★) \$17.6 million

Awaiting receipt of new federal funds.

Eliminate State Food Assistance program (★) \$14.5 million

Halts food assistance to an estimated 13,000 individuals each month who are not eligible for federal food assistance due to lack of documentation of citizenship.

Eliminate Disability Lifeline medical program (★) Terminates medical services to 21,000 clients.	\$8.7 million
Eliminate State Family Assistance program (★) Stops cash assistance to 1,200 families who do not meet TANF eligibility criteria due lack of documentation of citizenship. The average monthly payment is \$240.	\$6.0 million
Eliminate naturalization services (★) Ends naturalization services to legal immigrants attempting to become U.S. citizens. The program serves about 4,400 individuals annually.	\$2.6 million
Reduce funding for refugee and limited English proficiency services (★) Cuts 15 percent of program that will now target clients with the lowest level of English-as-a-Second language proficiency. Serves 4,900 clients annually, of whom 735 will become ineligible.	\$1.8 million
Restrict replacement of electronic benefits transfer cards (★) Halts replacement of EBTs in DSHS Community Service Offices, except in case of emergency, effective July 1, 2012. Cards are used for cash and food for low-income clients.	\$752,000

JUVENILE REHABILITATION ADMINISTRATION

Eliminate parole services for juveniles Terminates all parole treatment and services for youths. Parole services are now provided to approximately 400 juveniles each month.	\$19.1 million
Alternative: Reduce parole services by 20 percent (★) Cuts will reduce the time in which parole is provided or reduce the number of juveniles served.	\$3.8 million
Reduce juvenile court county funds by 20 percent (★) Cuts funding sent to counties for evidence-based programming that serves juveniles, affecting approximately 1,900 youths.	\$5.5 million
Close a youth camp (★) Shutters one facility and transfers youths to other state facilities.	\$3.8 million
Reduce caseload and increase efficiencies in facility transitions (★) Releases juveniles with non-violent offenses and a low-risk score on the minimum release date. Achieves additional savings by delaying new hires and services during facility transitions.	\$3.3 million
Eliminate expansion of juvenile behavioral therapy programs (★) Terminates therapy for approximately 200 aggressive youths and their families.	\$750,000

MENTAL HEALTH

Close hospital wards and change eligibility standards **\$57.8 million**
 Closes four state hospital wards and places 120 patients in community settings. Eligibility and benefits changes will limit the use and cost of community-based Medicaid services.

Alternative: Close two civil wards at Western State Hospital (★) **\$1.5 million**
 Closes two wards and places 60 patients in community settings.

Delay implementation of Involuntary Treatment Act changes (★) **\$22.6 million**
 Changes implementation date of House Bill 3076 from Jan. 1, 2012, to July 1, 2015. This postpones the expected increase in utilization of community-based and institutional mental health services.

Reduce regional support network Medicaid rates **\$11.6 million**
 Reduces Medicaid payments by 4 percent. About 43,000 Medicaid recipients per month receive services through these organizations that deliver mental health services for Medicaid and non-Medicaid clients in communities across the state.

Alternative: Implement utilization management (★) **\$9.5 million**
 Institutes process to reduce excessive use of mental health services.

Close state hospital wards for dementia and traumatic brain injury clients (★) **\$5.1 million**
 Shuts down two wards at Western State Hospital and places 52 patients in long-term care community settings.

Reduce non-Medicaid funding for regional support networks (★) **\$4.9 million**
 Cuts funding for mental health services provided by regional support networks to 8,000 non-Medicaid clients per month.

Capture savings in ITA and offender reentry program (★) **\$3.2 million**
 Lowers funding to match expected spending for pharmaceuticals, equipment and professional fees for individuals who are involuntarily committed to a community mental health hospital. Also trims funding for mental health services to dangerously mentally ill offenders released from correctional institutions.

Use federal block grant for waived mental health services (★) **\$2.1 million**
 Replaces state funds with federal funds for such services as supported employment, Club House for adult services and respite care.

Consolidate regional support networks (★) **\$1.8 million**
 Reduces number of regional support networks from 13 to six by Jan. 1, 2013.

Eliminate Spokane acute care diversion proviso **\$1.7 million**
 Removes funding for services that divert mental health patients from the state hospital system. This funding is now provided only to the Spokane regional support network.

Alternative: Reduce by 50 percent (★) **\$844,000**

Eliminate hospital bed penalty charged to regional support networks (★) **\$1.5 million**
Terminates the penalties charged to regional support networks that excessively direct their clients to the state hospital system.

ADMINISTRATION

Reduce payments to other agencies by 10 percent (★) **\$5.4 million**

Eliminate non-core mental health programs (★) **\$1.4 million**
Terminates the TeamChild, Juvenile Detention Alternatives Initiative and Washington Mentoring programs.

Reduce administration (★) **\$841,000**

Eliminate community initiative funding (★) **\$700,000**
Terminates funding for a public/private partnership that supports at-risk youth and families.