Get Ready: Enrollments to Open Soon in Key DDA Programs

We’ve been talking about this for close to a year, and it’s almost here: several thousand new enrollments will open for individuals on the No Paid Services Caseload.

A couple of program changes are taking place that make this possible. Each has a different process and timeline, but both are likely to affect most individuals who are applying for these new programs.

**Personal Care & Community First Choice**

Personal care is moving into a program that includes additional services to enhance independence, such as assistive technology and skills acquisition. The new program is called Community First Choice. A refinancing of the current personal care program brings in new federal funding that will add capacity to DDA’s Basic Plus waiver and the new planned Individual and Family Services waiver.

**Individual and Family Services (IFS)**

IFS is moving to a federal waiver, which brings in federal funding to double the program’s enrollment. It also comes with more regulations and less flexibility than the existing IFS program, but will basically offer the same type of services, plus a few more.

Clients who transition to the IFS Waiver will receive Medicaid coverage in addition to any other insurance they already receive.

A few things have to happen first, before the new programs take effect:

1. **Federal Approval**
   The federal government must approve our state’s application for an IFS waiver, as well as the Community First Choice. If this happens (and it looks like it will), the transition will begin in May of this year for IFS and July for CFC.

2. **DDA Transitions to New Programs**

Existing IFS recipients will be transitioned at their annual assessment or earlier if they are already eligible for SSI. New enrollments will be added beginning May 2015.

Transitioning from personal care to CFC will happen automatically on July 1st.

(Con’t inside)

_www.communitysummit.ws_
**Saving for the Future: What’s the Difference?**

This past December, Congress passed the ABLE (Achieving Better Life Experience) Act, which allows individuals with disabilities to save money beyond the current resource limit, without losing federal benefits. It’s has some similarities to our state’s special needs trust, the DD Endowment, but it also has significant differences. As our state works to implement planning for ABLE in Washington State, the following side-by-side chart offers a comparison of the two programs based on what we know now.

### DD Endowment Trust

**Who is it for?**
- A person with a developmental disability, under age 65, who has been determined eligible for state DDA services.
- The condition happened at or before age 18.
- Resident of Washington State at the time of enrollment.

**What is it?**
- A special needs trust set up by a third party (Trust 1) and/or by the individual (Trust 2).
- A way to save without losing eligibility for government benefits.
- Established in state law in 1999; 7 citizen governing board (6 appointed by Governor).

**Is it available now?**
Yes.

**Are there limitations in contributions & spending?**
- No limits on contributions.
- No limits on spending, except room & board for those on SSI.
- Does not affect SSI or Medicaid eligibility.

**Are taxes involved?**
- Earnings from investments are taxed when spent if the person has taxable income.
- Returns are provided each year.

**Is there a Medicaid Payback?**
Trust 1: No payback after the beneficiary’s death.
Trust II: Remaining funds in the account will be spent to payback the cost of Medicaid services.

**Can I rollover my account? What if I move?**
- No rollover except to another Special Needs Trust.
- May maintain the ETF account here in Washington, even if moving to another state.

**How are account funds invested?**
Funds invested by the State Investment Board.

**What does it cost to enroll?**
$600 enrollment fee; min. $75 yearly management fee; $75 tax prep fee. Fees are offset by a state match.

### ABLE Account

**Who is it for?**
- A person eligible for SSI benefits or Social Security Disability, Retirement, and Survivor’s program; OR, submits certification that meets the criteria for a disability certification.
- Condition happened before age 26.
- Resident of Washington State.

**What is it?**
- A form of 529A Account Tax Favored Qualified ABLE program in IRS code.
- A tax-free way to save without losing eligibility for government benefits.
- Passed by Congress. Requires State Legislative action to establish accounts in this state.

**Is it available now?**
Not yet. Federal regulations to be created mid-June.

**Are there limitations in contributions & spending?**
- $14,000 a year, but not to exceed State 529 limits.
- Spending is approved for qualified disability-related expenses.
- First $100,000 does not affect SSI eligibility.

**Are taxes involved?**
- ABLE accounts are not taxed.
- 10% federal tax penalty if not used for qualified disability expenses.

**Is there a Medicaid Payback?**
Yes. After the account holder’s death, remaining funds in the account will be spent to payback the cost of Medicaid services that were used by the individual.

**Can I rollover my account? What if I move?**
- Yes. Rollover to a non-ABLE account is allowed.
- If moving to another state, you must transfer the account to your new state.

**How are account funds invested?**
Person directs investment. Up to two changes per year.

**What does it cost to open an account?**
Fees for opening and managing an ABLE account are to be determined.
...Enrollments to Open Soon in Key DDA Programs

(con’t from front page)

3. DDA Goes Through Service Request List (aka wait list)

Individuals not receiving a paid service who have requested IFS services will be contacted by DDA. Individuals who have not yet requested IFS or other waiver services can contact DDA to request services.

4. Assessment for Services and Service Planning

An assessment will determine the amount of service. During the person centered services planning assessment meeting, case managers will discuss available supports and work with individuals to identify which available programs and services will best meet her/his needs (respite, personal care, behavior support, skills acquisition, specialized medical equipment, skilled nursing services, etc.).

5. Waiver Eligibility Determination

A determination of functional and financial eligibility for the waiver will take place. DDA will send waiver eligibility paperwork to individuals who are approved for Basic Plus or IFS Waivers.

It typically takes about 60 days for a client to be active on a waiver after submitting this paperwork.

NOTE: Because it’s a waiver program, the parent’s income for minors is waived. Only the individual’s income is considered.

6. Services are Approved

Once an individual is approved for either the IFS waiver or the state CFC personal care plan, case managers will work with individuals and families to identify providers and/or services needed as quickly as possible.

Changes Ahead: Six Steps of Transitioning to IFS Waiver and Community First Choice

1. Federal Approval of IFS Waiver & CFC
2. DDA Transitions to New Programs
3. Individuals on Service Request List Notified
4. Assessment & Person-Centered Service Planning
5. Waiver Eligibility Determination
6. Approved for Services

What to Do if You’re on the No Paid Services Caseload

Start Planning

My Life Plan, a new online tool created by the DDC and The Arc of Washington State, can help you start thinking about goals and support needs at home, school, work, and in the community.

As enrollments open at DDA, you’ll be ready to see where services might fit into life’s bigger picture, making sure your son/daughter’s interests, skills, and needs are at the forefront.

Begin your journey here:
www.mylifeplan.guide

Raise Your Hand for Services!

If you are not on a wait list for DDA services, call the DDA NPS caseload number in your region and request the service you feel best meets your son/daughter’s needs.

Region 1 North: 1-800-319-7116
Region 1 South: 1-866-715-3646
Region 2 North: 1-800-974-4428
Region 2 South: 1-800-567-5582
Region 3 North: 1-800-735-6740
Region 3 South: 1-888-707-1202
Early results from a recent survey of senior families have been coming in, and they provide a telling snapshot of what families with individuals age 40+ are facing.

**Primary Caregivers Across the Lifespan**

One of the most striking results, though not surprising, is that 93% of respondents are the primary caregiver for their family member. Considering that 92% of these family caregivers are over age 60, the results further underscore the major role of families in providing support throughout an individual’s life.

**Unmet Need**

Although 70% of respondents receive services from DDA, 58% report that they are still in need of supports to continue care giving/supporting their family member to live at home.

**Planning**

Although the majority (70%) have plans in place for their family member’s support when they are no longer able to do so, 63% would like additional help planning for the future.

**Information**

The need for more information continues to be expressed, and with the increase in technology as a support aide, it’s not surprising that 67% would like to learn more about what’s available and how to obtain it.

**Priorities for Support**

Respondents report that their priorities are for their family member: to have support to live at home (70%), be safe and healthy (51%), and have a social life (51%).

Although we continue to receive responses to the survey, what we’ve learned so far is that while some needs change or intensify, one thing remains the same: the importance of continuing to live at home and be part of the community.