

HB 2668 - DIGEST

(SUBSTITUTED FOR - SEE 2ND SUB)

Finds that Washingtonians sixty-five years of age and older will nearly double in the next twenty years, from eleven percent of our population today to almost twenty percent of our population in 2025. Younger people with disabilities will also require supportive long-term care services.

Finds that to address this increasing need, the long-term care system should: support autonomy and self-determination, and support the role of informal caregivers and families; promote personal planning and savings combined with public support; include culturally appropriate, high quality information, services, and supports delivered in a cost-effective and efficient manner; and utilize evidence-based practices for the prevention and management of chronic disease to improve the general health of Washingtonians over their lifetime and reduce health care and long-term care costs related to ineffective chronic care management.

Requires that agencies conducting family caregiver long-term care information and support services develop an evidence-based tailored caregiver assessment and referral tool and provide the option of a one-time voucher benefit per caregiver screened to meet the needs critical to health or safety of either the adult care recipient or the caregiver.

Provides that the community based services for low-income eligible persons shall include long-term care planning and options counseling, information and crisis intervention, and streamlined assistance to access a wide array of public and private community-based services.

Requires that the department of health shall develop a statewide fall prevention program to include networking community services, identifying service gaps, making affordable senior-based, evaluated exercise programs more available, providing consumer education to older adults, their adult children, and the community at large, and conducting professional education on fall risk identification and reduction.

Requires additional support for residents in community settings who exhibit challenging behaviors that put them at risk for institutional placement.

Establishes two seniors dental access projects.

Provides that if specific funding for the purposes of this act is not provided by June 30, 2008, this act is null and void.