# Washington State House of Representatives Office of Program Research

### BILL ANALYSIS

## **Human Services & Early Learning Committee**

#### **ESSB 5536**

**Brief Description**: Concerning intermediate care facilities for individuals with intellectual disability.

**Sponsors**: Senate Committee on Ways & Means (originally sponsored by Senators Braun, Keiser, Darneille and Honeyford).

#### **Brief Summary of Engrossed Substitute Bill**

- Requires the Department of Social and Health Services (DSHS) to assess all residents receiving services from an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/ID) to determine if the resident is benefiting from active treatment by January 1, 2020, and quarterly thereafter.
- Requires the DSHS to work with the resident on transitioning to an alternative setting that more appropriately meets the resident's needs if the assessment determines that the resident is no longer benefiting from active treatment provided by the ICF/ID.
- Requires the DSHS to develop a plan to preserve supported living and expand SOLAs to ensure residents of residential habilitation centers can transition to these settings when necessary.

**Hearing Date:** 3/27/19

**Staff**: Luke Wickham (786-7146).

#### **Background:**

Developmental Disabilities Administration.

The Department of Social and Health Services (DSHS) Developmental Disability Administration (DDA) assists individuals with developmental disabilities and their families to obtain services and support based on individual preferences, capabilities, and needs. The DDA clients live in residential habilitation centers (RHCs), an institutional setting, as well as in the community.

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Eligibility for DDA services depends on whether the client has a qualified developmental disability, has a functional need, and meets certain income and asset standards.

The services provided to clients are designed to promote everyday activities, routines, and relationships common to most citizens, and they include employment services and community access services, which are contracted with counties.

#### Residential Habilitation Centers.

The Department of Social and Health Services operates four RHCs for individuals with developmental disabilities:

- The Fircrest RHC in Shoreline supports about 200 long-term residents and includes both a nursing facility and an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/ID).
- The Lakeland Village in Medical Lake RHC supports about 150 long-term residents and includes both a nursing facility and an ICF/ID.
- The Rainier School RHC in Buckley supports about 250 long-term residents and includes an ICF/ID.
- The Yakima Valley School RHC supports about 50 long-term residents in a nursing facility and also provides planned respite services and crisis stabilization stays.

The ICF/ID facilities are offered as an option to Medicaid recipients that meet the ICF/ID level of care criteria. In addition to meeting the level of care criteria, to be eligible for an ICF/ID, an individual's need for active treatment in an ICF/ID must arise from an intellectual disability. Federal law requires that ICF/ID services be provided to individuals needing and receiving active treatment services. Active treatment is a continuous, aggressive, and consistently implemented program of specialized and generic treatment, and health or related services directed toward helping the client function with as much self-determination and independence as possible. Active treatment does not include services to maintain generally independent clients who are able to function with little supervision or in the absence of a continuous active treatment program.

Nursing facilities provide 24-hour nursing care to aging individuals and individuals with developmental disabilities.

#### **Summary of Bill:**

By January 1, 2020, and quarterly thereafter, the DSHS must assess all residents receiving services from an ICF/ID to determine if the resident is benefiting from active treatment. Active treatment is defined as a continuous, aggressive, and consistently implemented program of specialized and generic training, treatment, and health or related services directed toward helping the client function with as much self-determination and independence as possible.

If the assessment determines that the resident is no longer benefiting from active treatment provided by the ICF/ID, the DSHS must work with the resident on transitioning to an alternative setting that more appropriately meets the resident's needs.

The DSHS must conduct these assessments within the DSHS's appropriations.

The DSHS must develop a plan to preserve supported living and expand SOLAs to ensure residents of RHCs can transition to these settings when necessary.

Appropriation: None.

Fiscal Note: Available.

**Effective Date**: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

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