

## Cabinet Agencies' Performance Audit Action Item(s) & Status

### New Freedom Consumer-Directed Services

(See also [cabinet agency response](#) for full context to Washington State Auditor's Office (SAO) [report](#), December 2014)

Agencies included in the performance audit: the Department of Social and Health Services.

**SAO Findings Summary:**

1. New Freedom participants take advantage of the program's benefits, and give the program high marks.
2. New Freedom and COPES in-home services produce comparable participant health outcomes at a similar cost.
3. New Freedom's participant-directed service budget model is not suitable for all long-term care clients and creates unique operational challenges.
4. DSHS has an opportunity to put into practice the lessons learned from New Freedom.

**SAO Recommendations (Rec):**

1. Build flexibility into the Community First Choice Option (CFCO) program by allowing clients to use some personal care hours each month to purchase eligible services, training, and devices to assist with activities of daily living.
2. Continue efforts to increase New Freedom enrollments in King and Pierce counties until the CFCO consumer-directed care program is evaluated. Determine if the demand for services unique to New Freedom and New Freedom enrollment levels warrant continuing the program.
3. To increase New Freedom enrollments in King and Pierce counties:
  - Focus efforts on informing new long-term care clients about New Freedom benefits and participant responsibilities.
  - Share successful practices for identifying and converting clients in other programs who can benefit from New Freedom.
4. Use New Freedom care consultants' experience with consumer-directed care to train case managers statewide on how to help clients take advantage of the increased flexibility under CFCO.

The table below shows the current status of action items the agency initiated to address issues identified in the performance audit report. Please see the [cabinet agency response](#) for additional context and any additional steps already taken.

For an explanation of the columns below, [see the legend](#).

Issue/ Rec	Status	Action Steps	Lead Agency	Due Date	Current Resources ?	Budget Impact?	Legislation Required?	Notes
Rec-1	Complete	Conclude design consultations with Centers for Medicare and Medicaid Services (CMS).	DSHS	1/31/2015	Yes	No new impacts	No	The design and implementation counsel completed their work on October 10, 2015.
Rec-1	Complete	Complete the CFCO State Plan Amendment and submit to CMS.	DSHS	2/15/2015	Yes	No	No	Washington's initial CFC State Plan Amendment was submitted in January 2015 for CMS consideration.

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Rec-1	Complete	Complete responses to CMS inquiries and requests for revisions.	DSHS	4/30/2015	Yes	No	No	CMS inquired about sections of the SPA, primarily pertaining to settings, and we were able to successfully respond to their inquiries. The CFC SPA was approved on 6/30/15. CFC was implemented on 7/1/15.
Rec-2	Complete	Meet with field staff to discuss the audit results and emphasize strengthening efforts to increase waiver enrollment.	DSHS	2/15/2015	Yes	No	No	Meetings with field staff were held in January 2015. Starting 7/1/15, performance measures for net caseload growth were added to the AAA contracts to incent caseload growth using a rate enhancement when targets are achieved.
Rec-2	Complete and Ongoing	Track and trend enrollment numbers at the end of each New Freedom waiver year, which occurs each February	DSHS	On-going	Staff Time	Use of staff time	No	Enrollment numbers are tracked regularly. Reports were pulled in February 2015 and continue to be analyzed.
Rec-2	Complete	Track and analyze data on the purchase of goods and services that are not available in COPES or CFCO, determine significance to program outcomes.	DSHS	6/18	Staff Time	Use of staff time	No	This is due next fall, and data continues to be tracked and analyzed. <b>7/16 Update:</b> Still on track for 9/16 7/17: New FMS vendor is starting 1/18. We will analyze for what is and is not available in COPES or CFCO. 7/12/18: After reviewing New Freedom Waiver purchase types between January 2018 – June 2018, many of the top ten purchase types each month are services that are not available in COPES or CFC. Some of the top ten purchases, by number of participants receiving them during this time frame, were Herbal OTC Remedies, Bus passes, Massages, and costs associated with obtaining or maintaining service animal. Other New Freedom services, that were in the top ten at least

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								once during this time frame, were exercise membership, eyeglasses, dental and Naturopathic Medical care. These also are not services available in COPES or CFC.
Rec-2	Complete	Determine whether program data warrants continuation of New Freedom waiver.	DSHS	6/18	Staff Time	Use of staff time	No	<p>Data will be analyzed and program comparisons will be made between COPES and CFC in the last half of 2016 in order to determine the continuation of the New Freedom waiver.</p> <p><b>7/16 Update:</b> Still on track for 1/17</p> <p>7/17: New FMS vendor is starting 1/18.</p> <p>Data will be reviewed to determine if New Freedom waiver will continue.</p> <p>7/12/18: Though utilization remains low, the department believes the data and consumer feedback warrants the continuation of the New Freedom Waiver. The New Freedom Waiver offers a philosophy and orientation to home and community-based services that gives participants the authority to make choices about services and supports that work best for them, regardless of the nature or extent of their disability. Participant feedback shows this flexibility is highly valued. According to the LTC Caseload report, New Freedom Waiver currently has 460 participants enrolled. Between January 2018 – June 2018, 287 of these participants (62%) have used their budget to purchase a good and service that is not available under COPES or CFC.</p>

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Rec-3	Complete	Gather and compile successful practices from DSHS' Home and Community Services Div. (HCS) and Area Agency on Aging staff.	DSHS	3/31/2015	Staff Time	Use of staff time	No	Although this activity is complete, HCS is involved in continuous quality improvement activities in this area.
Rec-3	Complete	Disseminate information to field staff through training.	DSHS	8/31/2015	Staff Time	Use of staff time	No	Although this activity is complete, monthly meetings continue to occur to disseminate information as needed.
Rec-4	Complete	Develop CFCO training curriculum.	DSHS	3/31/2015	Yes	No	No	Curriculum for CFC was developed and completed in April of 2015.
Rec-4	Complete	Deliver CFC training to field staff.	DSHS	6/30/2015	Yes	No	No	Field staff members were trained at 39 training locations throughout the state between June 1 and June 30, 2015.