PERFORMANCE AUDIT Report Highlights



Office of the Washington State Auditor Pat McCarthy

Assessing Extended Family Exemptions for Individual Providers

This audit examined how exemptions from some statutory training requirements and certification for Medicaid-funded in-home care workers, called "individual providers," might affect the availability of those workers, and the risks and benefits of broadening those exemptions. The 2008 voter-approved Initiative 1029 required long-term care workers to be certified by the Washington State Department of Health as "home care aides" after completing specific training and passing an examination. Budget concerns delayed its implementation. Initiative 1163, passed in 2011, hastened the effective date and required biennial audits on long-term in-home care. This audit is the fifth of those mandated audits.

What is the extent of unmet need for individual providers in Washington?)

The state has insufficient data to determine the extent of Washington's unmet need for individual providers, because the demand for providers can only be loosely estimated from population data. Though the extent of unmet need is difficult to quantify, Washington's policy decisions and national studies point to a significant and growing shortage of long-term care workers, as growth in the population of elderly people is outpacing growth in the labor force. In addition, Washington is experiencing a shift in long-term care from institutions to in-home and community-based care.

What are the benefits and risks of broadening exemptions from full training and certification for individual providers who are extended family members?

One policy option for addressing the unmet need for individual providers is to expand the training and certification exemptions for extended family members. Exempted family members must complete some training, but less than non-exempt home care aides, and are not required to become certified. Expanding exemptions to extended family members could increase the amount of long-term care available to people in home settings, though the impact is difficult to quantify.

Broadening the exemptions would likely increase some state program costs, though it is difficult to know how much. The impact expanding exemptions would have on the quality of care would depend on the experience and training of family members who become individual providers. Finally, expanding exemptions would place exempt individual providers outside the Department of Health's licensing and disciplinary umbrella.

State Auditor's Conclusions

Broad demographic trends and various studies suggest a growing need for long-term care, though it is difficult to quantify. Those trends and studies also suggest there will be an insufficient number of caregivers to meet that need. Potential caregivers come from a variety of sources, including informal personal arrangements, charitable organizations, private companies and government programs. Consistent with the voters' mandate in Initiative 1163, this audit focused on one specific source of caregivers: home care aides working as individual providers and paid through the Medicaid program, and the training requirements that apply to them.

One option stakeholders have suggested as a way of getting more people to serve as caregivers is to broaden the family exemption from full training requirements for extended family members. Broadening the exemption would make it easier for extended family members to qualify as individual providers and be paid through Medicaid. Relaxing the requirements has the potential to make more family care available in situations where full training requirements keep family members from being paid and the lack of payment limits the care a family member can provide.

While broadening the training exemption could potentially make more care available, there is no good way of quantifying the potential impact. It depends on how many extended family members would be willing to provide more care if the training requirements were reduced, and that is not easily known. Though broadening the exemptions might prove helpful in attracting more caregivers, we stop short of recommending this option given our inability to reasonably estimate the potential impact.

Recommendations

This audit did not produce recommendations.