

## WA Cares Fund Eligibility Criteria Initial Draft Based on RCW 50B.04.060(2)<sup>1</sup>

On a typical day over the last 7 days (or last month), if you needed help with at least three activities of daily living, you can access WA Cares Fund. Assistance may include supervision, monitoring, stand-by, encouragement, cueing, or physical help with any part of the activity. You may need assistance if you experienced great difficulty in completing an activity of daily living or the activity did not occur at all because you had no help. If you need help with daily living activities temporarily due to a severe accident or major surgery, you may be eligible for six months of care based on anticipated needs verified by your doctor.

### ***Activities of Daily Living***

<i>Bathing</i>	<b>Bathing</b> is defined as how you took a full-body bath/shower, sponge bath, and transferred in/out of tub/shower.
<i>Toileting</i>	<b>Toileting</b> is how you eliminated or toileted, used a commode, bedpan, or urinal, transferred on/off toilet, cleansed, changed pads, managed ostomy or catheter, and adjusted clothes.
<i>Transferring</i>	<b>Transferring</b> is defined as how you moved between surfaces, e.g., to/from bed, chair, wheelchair, standing position. Transferring does not include how you moved to/from the bath or toilet, which are evaluated under bathing or toileting. A history of falls while transferring may indicate you need assistance.
<i>Ambulation</i>	<p><b>Ambulation</b> includes:</p> <ol style="list-style-type: none"> <li>1. Walk in room, which is how you walked between locations in your room and immediate living environment; OR</li> <li>2. Locomotion in room, which is how you moved between locations in your room and immediate living environment. If you are in a wheelchair, locomotion includes how self-sufficient you were once in your wheelchair; OR</li> <li>3. Locomotion outside, which includes how you moved to and returned from your immediate living environment, outdoors, and more distant areas. If you are living in a contracted assisted living, enhanced services facility, adult residential care, enhanced adult residential care, enhanced adult residential care-specialized dementia care facility or nursing facility (NF), this includes areas set aside for dining, activities, etc. If you are living in your own home or in an adult family home, locomotion outside immediate living environment including outdoors, includes how you moved to and returned from a patio or porch, backyard, to the mailbox, to see the next-door neighbor, or when accessing your community.</li> </ol> <p>A history of falls while ambulating may indicate you need assistance.</p>
<i>Eating</i>	<b>Eating</b> is defined as how you ate and drank, regardless of skill. Eating includes any method of receiving nutrition, e.g., by mouth, tube or through a vein. Assistance with eating may include cutting up prepared food, but does not include preparing meals.
<i>Medication Management</i>	<b>Medication management</b> includes assistance with taking prescription medications including reminding, coaching, or cueing to take the medication, handing the medication to you, opening the medication container, using an enabler to get the medication in your mouth, placing the medication in your hand or pouring liquid medication into a spoon.
<i>Bed Mobility</i>	<b>Bed mobility</b> is how you moved to and from a lying position turned side to side, and positioned your body while in bed, in a recliner, or other type of furniture you slept in. Also includes skin care item turning/repositioning a continuous, consistent program for changing your position & realigning your body
<i>Dressing</i>	<b>Dressing</b> means how you put on, fastened, and took off all items of clothing, including donning/removing prosthesis, splints, either braces or orthotics, or both.

<sup>1</sup> DSHS is seeking additional stakeholder feedback on these definitions, which will be formally defined in WAC. WAC development will begin in 2023.

<i>Personal Hygiene</i>	<b>Personal hygiene</b> means how you maintain personal hygiene tasks, such as combing hair, brushing teeth, shaving, applying makeup, washing/drying face, hands (including nail care), and perineum, including menses care.
<i>Body Care</i>	<b>Body care</b> includes application of ointment or lotions; trimming of toenails; dry bandage changes or passive range of motion treatment.
<i>Cognition</i>	<b>Cognition</b> refers to how you are able to use information, make decisions, and ensure your daily needs are met. This includes when you require supervision or cueing due to disorientation to person, place or time, short-term or long-term memory problem, impaired decision making, or wandering.
	<b>OR</b>
	<b>Cognition</b> refers to how you are able to use information, make decisions, and ensure your daily needs are met. Assistance with cognition includes any of the following components. <ol style="list-style-type: none"> <li>1. <b>Self-preservation</b>, including understanding your health and safety needs and how to meet those needs, your ability to recognize and take action in a changing environment or potentially harmful situation. For example, you need assistance to find your way home, safely use appliances, understand how to take meds, and understand how to protect yourself from abuse, neglect, and exploitation</li> <li>2. <b>Decision making</b>, including your ability to make everyday decisions about activities of daily living. You may need assistance if you are unable to make decisions, need help understanding how to accomplish a task necessary to complete a decision, or do not understand the consequences of your decisions</li> <li>3. <b>Ability to make self-understood</b>: Your cognitive ability to communicate or express needs, opinions, or urgent problems, whether in speech, writing, sign language, body language, symbols, pictures, or a combination of these including use of assistive technology. If you are unable to express yourself clearly to the point your needs cannot be met independently, you may need assistance with cognition.</li> <li>4. <b>Challenging behaviors</b>: You exhibit behaviors that negatively impact your own or others health or safety. You don't understand the impact or outcome of your decisions or actions. You have behaviors that are verbally or physically aggressive and socially inappropriate or disruptive. This does not include behaviors when you understand the potential risks and consequences of your actions.</li> </ol>

Additional considerations to add as ADL may include:

- Daily treatment need overseen by a nurse, such as chemo, radiation, dialysis, and other specialty care
- Financial management or transportation for people with cognitive impairment or another instrumental activity of daily living

***WA Medicaid LTSS Instrumental Activities of Daily Living***

<i>Meal preparation:</i>	How meals were prepared (e.g., planning meals, cooking, assembling ingredients, setting out food, utensils, and cleaning up after meals). NOTE: Under Medicaid programs, the department will not authorize this IADL to only plan meals or clean up after meals. You must need assistance with other tasks of meal preparation.
<i>Ordinary housework:</i>	How ordinary work around the house was performed (e.g., doing dishes, dusting, making bed, cleaning the bathroom, tidying up, laundry).

<i>Essential shopping:</i>	How shopping was completed to meet your health and nutritional needs (e.g., selecting items). Shopping is limited to brief, occasional trips in the local area to shop for food, medical necessities and household items required specifically for your health, maintenance or well-being. This includes shopping with or for you.
<i>Wood supply:</i>	How wood or pellets were supplied (e.g., splitting, stacking, or carrying wood or pellets) when you use wood, pellets, or a combination of both, as the only source of fuel for heating and/or cooking.
<i>Travel to medical services:</i>	Travel to medical services: How you traveled by vehicle to a physician's office or clinic in the local area to obtain medical diagnosis or treatment. This travel includes driving vehicle yourself or traveling as a passenger in a car, bus, or taxi.
<i>Managing finances:</i>	How bills were paid, checkbook is balanced, household expenses are managed. The department cannot pay for any assistance with managing finances.
<i>Telephone use:</i>	How telephone calls were made or received on your behalf (with assistive devices such as large numbers on telephone, amplification as needed).

**WA Medicaid LTSS Specialty Care/Treatments**

*Person needs daily care<sup>i</sup>, provided or supervised by a registered nurse or a licensed practical nurse. Daily care is indicated by a need for at least one of the following treatments.*

Wound/skin care	Ulcer care	Dialysis
Nebulizer	Oxygen therapy	Radiation
Transfusions	Tube feedings	Ventilator or respirator
Bowel program	Enemas/irrigation	Intermittent catheter
Urinary catheter care	Blood glucose monitoring	Chemotherapy
Routine lab work	Monitoring of an acute condition	Application of dressing
Management of IV lines	Tracheostomy care	Intravenous medications
Suctioning	Application of medication	Injections
Ostomy care	IV nutritional support	

<sup>i</sup> Daily care based on WAC 388-106-0355(a) and DSHS/ALTSA Home and Community Services Long-Term Care Manual