



WA CARES BASICS: What Providers Need to Know

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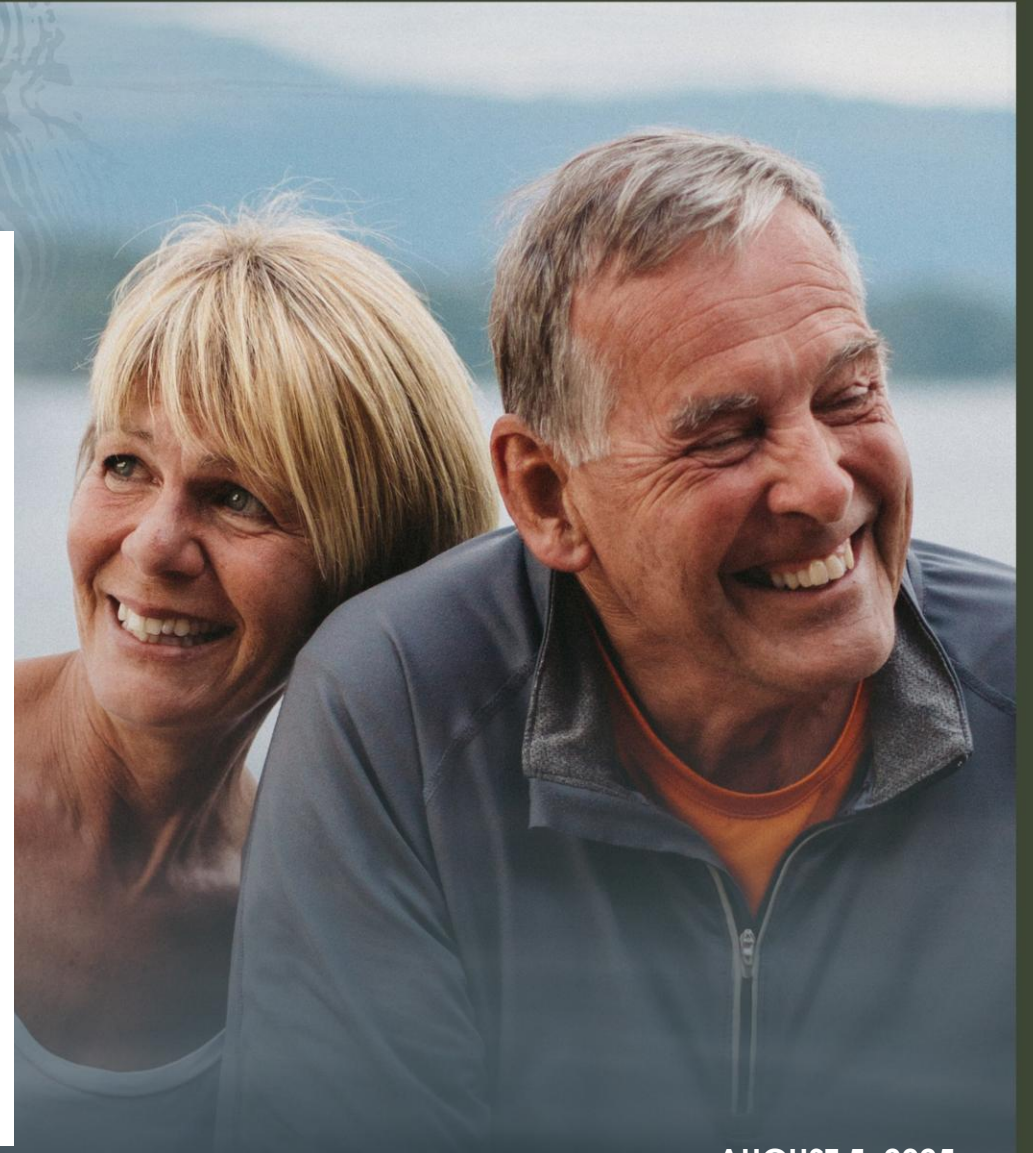


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AUGUST 5, 2025

Get slides and recording at wacaresfund.wa.gov/webinars

Program timeline

2014

Research on policy options for long-term care

2019

Legislature passes LTSS Trust Act and governor signs into law

2022

Legislature adds pathway to partial benefits for near-retirees, establishes voluntary exemptions for certain groups

2023

July 1

Workers begin contributing

2024

Legislature gives workers the ability to take their benefit out of state

2025

Legislature creates supplemental private insurance market, gives workers with private insurance exemptions window to join WA Cares

2026

July 1

Benefits become available for qualified, eligible individuals



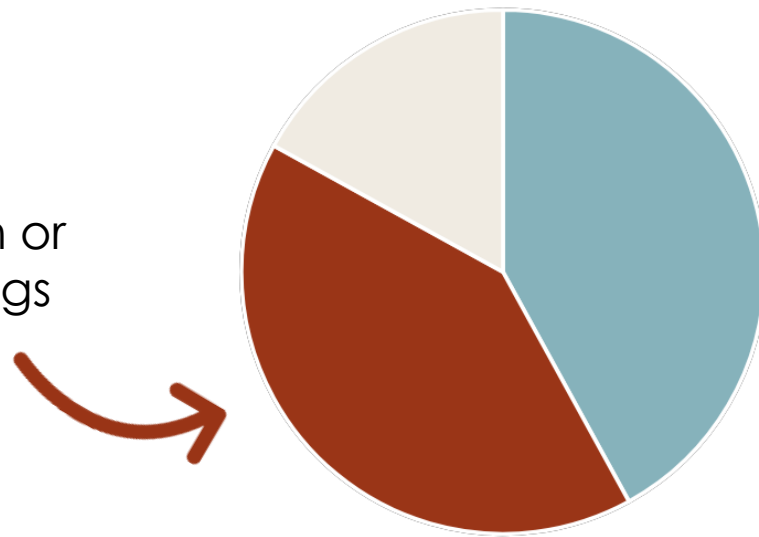
Many need help paying for long-term care

\$56,000/year

Median household income for Washington seniors⁴

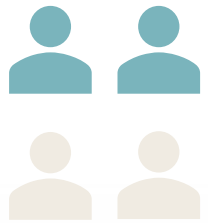
AMONG WASHINGTON WORKERS AGE 55-64⁵

41%
have no pension or
401(k)/IRA savings

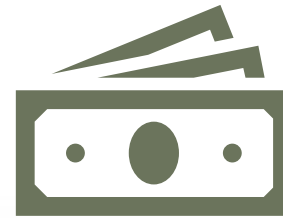


Another **42%**
have no pension & only
enough 401(k)/IRA savings
to replace 10% of their
pre-retirement income

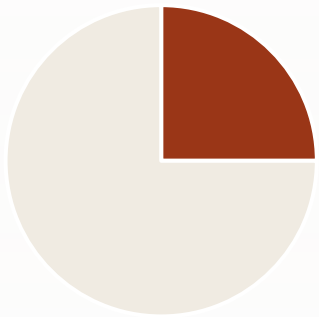
Impact of family caregiving



Almost half
of family caregivers report a
related financial setback⁷



\$303,880
average lost wages and
benefits for caregivers 50+
who leave workforce early⁸



25%
Average amount of their
own income caregivers
spend on related expenses⁷



2 in 3
working caregivers say a
program that pays
caregivers would help⁹

How WA Cares works

- Earned benefit
- Nearly all Washington workers contribute
- Meet contribution requirement + care needs requirement
- Works like an insurance program
- Everyone covered at same rate regardless of pre-existing conditions

Contributions

0.58%

Amount workers
contribute from wages



Contributions began

Benefits

\$36,500

Lifetime maximum benefit
(adjusted annually up to
inflation)

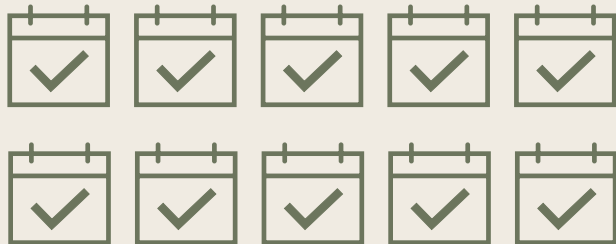


Benefits available

Contribution requirement

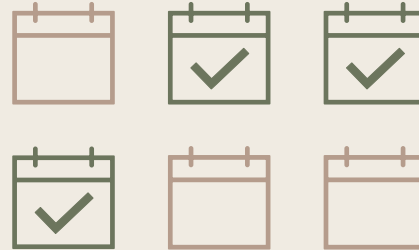
Lifetime access to full benefit

Contributed **at least
10 years**



Early access to full benefit

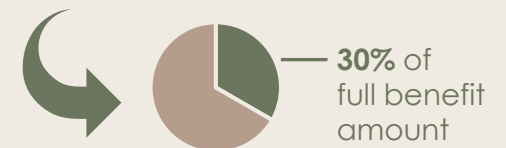
Contributed at least
3 of the last 6 years
at the time you apply
for benefits



FOR NEAR-RETIREES

Lifetime access to partial benefit

People born
before 1968 earn
10% of benefit amount
for each year worked



To earn benefits, must work at least 500 hours per year (about 10 hours per week)

Care needs requirement

Must need help with 3 activities of daily living for at least 90 days.



Mobility

Getting from one place to another within your immediate environment and from outside your home to inside your home.



Transferring

Moving between surfaces such as to and from a bed, a chair, wheelchair or standing position.



Bed mobility

Moving to and from a lying position, turning side-to-side and positioning your body while in bed, in a recliner or other furniture used for sleeping.



Bathing

Washing your body, including showers, baths, sponge baths or bed baths. Getting into and out of a shower or bathtub.



Eating

How you eat and drink, including any method of receiving nutrition by mouth, tube or through a vein. It does not include any set-up help received.



Medication management

Organizing and taking prescription medications, over the counter medications or supplements.



Toileting

How you use a toilet, commode, bedpan, or urinal to eliminate, and how you transfer on and off a toilet, perform associated hygiene and adjust clothing.

Taking WA Cares benefits out of state

- In 2024, a law was passed to allow workers to use their benefit outside Washington
- **Starting in July 2026**, workers can choose to continue participating in WA Cares if they move out of state
- Must have contributed to WA Cares for **at least 3 years** (working 500+ hours per year) and must opt in **within a year of leaving WA**
- Like other workers, out-of-state participants keep contributing during working years
- Benefits available **starting July 2030**



Expanding long-term care support

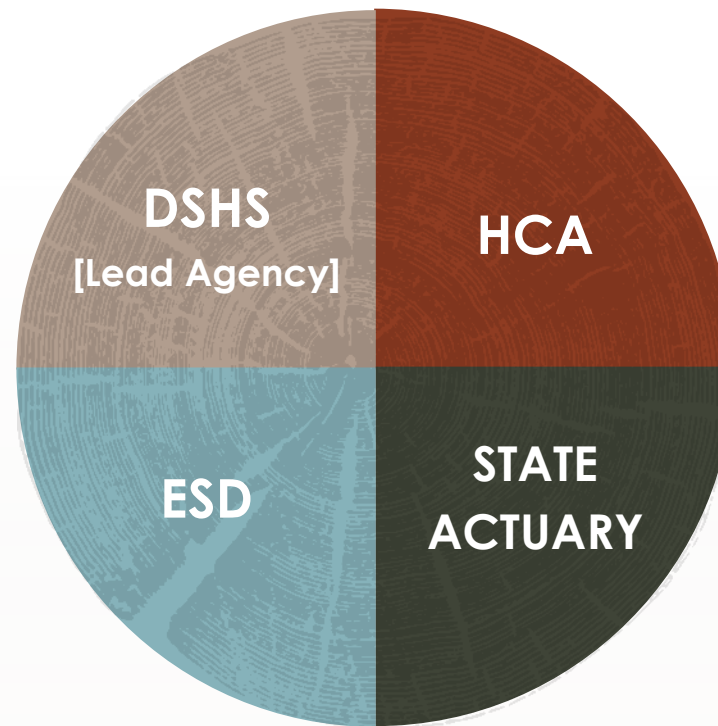
Program updates	Effective date
Creating supplemental private long-term care insurance	May 1, 2026*
Opportunity for exempt workers to participate	January 1, 2026
Simplifying 10-year contribution requirement	January 1, 2026
Automating exemptions for non-immigrant visa holders	January 1, 2026
Creating an optional exemption for active-duty service members working civilian jobs in Washington	January 1, 2026

**This is the date that Office of the Insurance Commission is required to complete rulemaking not the date policies will be available.*

Cross agency responsibilities

- Process applications
- Perform care needs assessments & determine eligibility
- Manage providers

-
- Collect premiums and wage reports
 - Determine vesting status
 - Process exemptions
 - Process requests from self-employed individuals opting in



- Pay providers
- Track benefit usage

-
- Provide actuarial analysis to assess ongoing Trust Fund solvency

Becoming a WA Cares provider

Step 1

Apply & meet minimum qualifications

Step 2

Contract with DSHS or AAA

Step 3

DSHS issues your registration

Depending on service and location, **DSHS** or an **Area Agency on Aging** may be responsible for:

- Processing applications
- Managing contracts
- Monitoring providers

DSHS has sole responsibility for registration and termination of registration

Covered services

DSHS-contracted

- Adaptive equipment & technology
- Adult family home
- Assisted living facility
- Care transition coordination
- In-home personal care and respite care with Consumer Direct Care Washington (CDWA)
- Individual providers
- Memory care (in assisted living facility)
- Nursing home
- Professional services , specifically nurse delegation & private duty nursing
- Respite care in an adult family home, assisted living facility, or nursing home.

AAA-contracted

- Adult day services (adult day care, adult day health)
- Dementia and behavioral support (community-based)
- Education and consultation
- Environmental modification
- Home delivered meals
- Home safety evaluation
- In-home personal care and respite care with home care agencies
- Personal emergency response system (PERS)
- Professional services, specifically skilled nursing
- Services that assist paid and unpaid caregivers, specifically:
 - Housework and errands
 - Yard work and snow removal
 - Transportation

DSHS holds contracts for all providers who serve the entire state

Provider application detail documents

For each service:

- Service definition
- Minimum qualifications
- Example client service contract
- Documentation you need to apply

wacaresfund.wa.gov/providers/toolkit

PROVIDER TOOLKIT

RESOURCES FOR YOUR APPLICATION

Provider application details

Learn about the service definition, minimum qualifications and the documentation you need to apply.

- Adaptive equipment and technology
- Adult day services
- Adult family home
- Assisted living facility
- Care transition coordination
- Dementia and behavior supports
- Education and consultation
- Environmental modifications
- Home care agency
- Home-delivered meals
- Home safety evaluation
- Housework and errands
- Nursing home
- Personal emergency response system
- Professional nursing services
- Transportation
- Yardwork and snow removal

AREA AGENCIES ON AGING

Depending on the service and location, the Department of Social and Health Services or an Area Agency on Aging may be responsible for processing your application and contracting with you, including ongoing monitoring.

- Contact information

Application process

- Apply through online form – no paper application
- Routed to appropriate agency to process
- Be ready to respond quickly to requests for more info from DSHS or AAA
 - Must submit within 30 calendar days or application may be denied
- Can withdraw at any time
- Contact info available to request assistance

Application form goes live Oct. 1, 2025

If application is denied

- Administrative hearing rights to appeal
- Will receive information along with determination notice on application
- May be able to reapply depending on reason for denial
- Permanent disqualifiers include:
 - Failed background checks with barred offenses or substantiated findings
 - Contracts terminated for cause

Contracting and registration

Contracting

- Next step after application approved
- Will receive new client service contract for signature
- Contract length is either 2 or 4 years depending on service
 - Services with standard 4-year contract – can sign 2-year instead
 - Can't extend if standard is 2 years

Registration

- Officially a registered provider once contract is complete
- Must have valid contract to be registered
- Removed if contract terminated/ends
- Automatically added to WA Cares Provider Directory

Requirements for registration

You must:

- Comply with all service specific statutes and rules (federal, state, local)
- Comply with background check requirements
- Meet minimum qualifications (must hold all current licenses, credentials, certifications, trainings, and other requirements for your service type)
- Meet insurance requirements (aligned with Medicaid)
- Not have a contract terminated with DSHS for cause/default

WA Cares Provider Directory

- No case managers—beneficiaries find and contact providers
- Online WA Cares Provider Directory
 - Hosted by CLC
- Your listing includes:
 - Your name
 - Service(s) you provide
 - Your contact information
 - Additional languages you offer

Rates

- Beneficiaries and providers agree to terms and rate
- We pay within your usual, customary and reasonable rate range up to maximum rate for that service—currently in rulemaking
- DSHS will maintain a rate sheet

ProviderOne

- Use for pre-authorizations and claims for payment
- Will receive enrollment packet after contract completed
- Do not need to re-enroll if you have an account

Pre-authorizations

Cannot begin providing/billing until approved

- You must discuss rates/services with beneficiary before drafting pre-authorization
- You draft pre-authorization in ProviderOne
- Beneficiary receives notification in their WA Cares account
 - 30 days to take action on a pre-authorization
 - Must resubmit if no action taken

Pre-authorization length

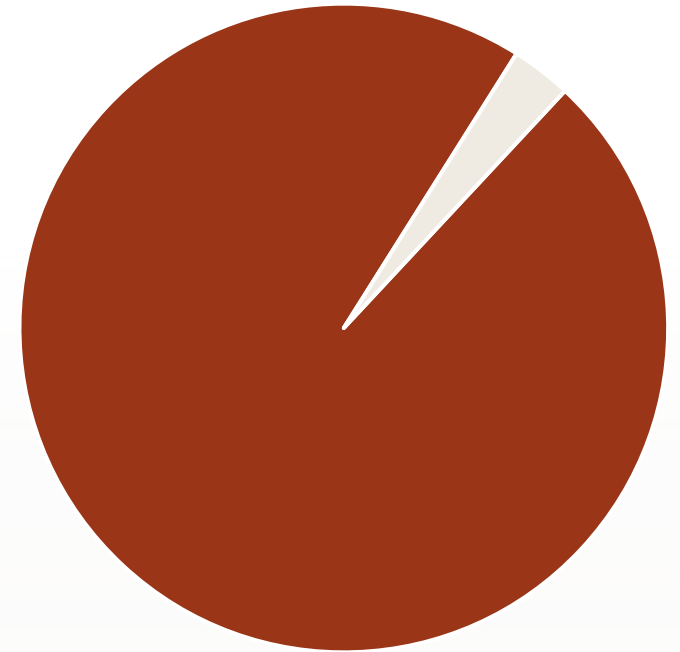
- Good for up to 90 days, except for:
 - Care transition coordination: up to 60 days
 - Environmental modifications: up to 6 months
- To continue services after, submit new pre-authorization

Claims for payment

- Submit in ProviderOne for processing
- Must submit clean claim by 60 calendar days from end date of pre-authorization
- Claims submitted after this deadline will be denied and funds will return to beneficiary's balance

97%

97% submitted
within 60 days of service



Current provider rulemaking topics

- Approved service definitions
- Requirements to provide approved services
- Payment and reimbursement for approved services
- Administrative hearings
- Provider registration and termination of provider registration
- Notice of department determinations

Status and draft rules: wacaresfund.wa.gov/rulemaking

[Sign up for our newsletter](#) (select rulemaking)

Pilot

Timeline and location

- Jan. 6 , 2026
- Only in Lewis, Mason, Thurston, Spokane counties
- If you choose to be a statewide provider, you can participate in the pilot areas

Pilot providers

- **Oct. 1, 2025:** Prioritized for processing when application opens
- **Jan. 6, 2026:** Can begin providing services

Other providers

- Start services in July 2026

Major milestones



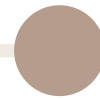
**OCTOBER
2025**

Application opens
for all providers



**JAN
2026**

Pilot in Lewis,
Mason, Thurston,
Spokane counties



**MAY
2026**

Beneficiaries can
begin applying
for benefits



**JULY
2026**

All providers can
begin services


Questions & answers



Email updates

- [WA Cares email newsletter](#) with monthly updates, event announcements, notifications when new resources are available.

Join the provider information subset to receive communications specifically for providers.



Join us for an upcoming WA Cares Basics webinar

WA Cares Basics: What Providers Need to Know webinar from 11 a.m. August 5

Before benefits begin in July 2026, the WA Cares Fund will work to register a diverse range of qualified providers for each covered service. To ensure care, providers, including paid family caregivers, must meet minimum qualifications to participate. Once registered, beneficiaries can choose the services that best meet their needs within their own communities.

We will cover:


- How the program works
- Types of providers that will be able to register
- Minimum qualifications and requirements providers will have to meet
- How to register as a qualified provider

[Register here](#)

All webinars will include an opportunity for audience Q&A. Live captioning and ASL interpretation will be available.

After registering, you will receive a confirmation email with information about joining the webinar.

Learn more about [WA Cares webinars](#) or [sign up for the WA Cares mailing list](#) to



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Which county are you located in?

How would you describe yourself (select all that apply)

- ☐ Employer/HR/Payroll professional
- ☐ Near-retiree born before 1968
- ☐ Retired
- ☐ Self-employed
- ☐ W-2 employee

What types of email updates are you interested in? (Select all that apply)

- ☐ General program news and updates
- ☐ Announcements of webinars and events
- ☐ Notifications when new resources become available
- ☐ Updates on LTSS Trust Commission meetings and recommendation
- ☐ DSHS Rulemaking

What topics are you interested in? (Select all that apply)

- ☐ Contributions
- ☐ Benefits
- ☐ Employer information
- ☒ Provider information
- ☐ Exemptions

How did we do?

We value your feedback! Please take a few minutes to share your thoughts about today's presentation by completing a short survey.



Thank you

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