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**WEST VIRGINIA LEGISLATURE**  
*Performance Evaluation and Research Division*

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John Sylvia  
Director

August 6, 2006

The Honorable Edwin J. Bowman  
State Senate  
129 West Circle Drive  
Weirton, West Virginia 26062

The Honorable J.D. Beane  
House of Delegates  
Building 1, Room E-213  
1900 Kanawha Boulevard, East  
Charleston, West Virginia 25305-0470

Dear Chairs:

Pursuant to the West Virginia Sunset Law, we are transmitting a Preliminary Performance Review of The Ron Yost Personal Assistance Services Program, which will be presented to the Joint Committee on Government Operations on Sunday, August 6, 2006. The issues covered herein are "The Ron Yost Personal Assistance Services Program Increases the Availability of Personal Care Services Within West Virginia and Should Be Continued;" "If Each Ron Yost Personal Assistance Services Recipient Used All Personal Assistance Hours Awarded, Annual Expenditures Would Exceed The Program's Appropriated Funding;" "The Legislature Should Consider Requiring That the Ron Yost Personal Assistance Services Program Conduct Site Visits to Recipients' Homes to Assure That They Receive Quality Care;" and "The Submission of Documentation Required From Recipients Has Improved, But the Ron Yost Personal Assistance Services Program Should Request Copies of W-2 Forms Issued to Personal Assistants."

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*Joint Committee on Government and Finance*

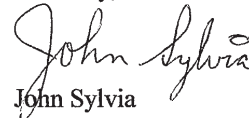
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We transmitted a draft copy of the report to The Ron Yost Personal Assistance Services Program on July 26, 2006. We held an Exit Conference with the agency on August 1, 2006. We received the agency response on August 3, 2006.

Let me know if you have any questions.

Sincerely,

  
John Sylvia

JS/jda

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# Executive Summary

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## **Issue 1: The Ron Yost Personal Assistance Services Program Increases the Availability of Personal Care Services Within West Virginia and Should Be Continued.**

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*The program's primary objective is to increase the availability of personal assistance services for persons with disabilities, allowing them to continue living in their homes instead of entering nursing homes.*

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The Legislature created the Ron Yost Personal Assistance Services Program (RYPAS) in 1999. The program's primary objective is to increase the availability of personal assistance services for persons with disabilities, allowing them to continue living in their homes instead of entering nursing homes. The legislation created a consumer-directed personal assistance services program to meet the needs of individuals with disabilities, who were not receiving services from any other program. A recipient is considered the employer of his or her personal assistant and has the responsibilities of hiring, training, supervising, paying and if necessary terminating his or her assistant. The RYPAS Program is similar to many other state-funded personal assistance programs. Eighty-nine (89) similar programs exist in all but 3 states.

The program is organized under the Department of Education and the Arts as part of the Division of Rehabilitation Services (DRS). The Division has contracted with the Statewide Independent Living Council (SILC) to provide administrative services for the program. A seven-member board, composed of individuals with severe disabilities, directs the program. The RYPAS Board is responsible for making all decisions about the program, including the eligibility of applicants for services.

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*Currently, there are 26 recipients from 14 counties receiving services. Since the program's creation, it has provided funding for personal assistance services for an additional 26 individuals who are no longer enrolled in the program.*

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Program eligibility is based on a functional need rather than on a medical basis. Recipients receive weekly personal assistance hours as determined through a functional assessment conducted by an approved provider. After the functional assessment, the RYPAS Board reviews an application. If there are funds available, and the person is eligible for services, the RYPAS Board contacts the DRS and the recipient in writing. Currently, there are 26 recipients from 14 counties receiving services. Since the program's creation, it has provided funding for personal assistance services for an additional 26 individuals who are no longer enrolled in the program. They no longer receive assistance from the program due to death or obtaining services from other programs.

Without the assistance of the program, current recipients would have to seek assistance by other means. This could result in the need to enter a nursing home. The Legislative Auditor, therefore, has recommended continuing the Ron Yost Personal Assistance Services Program.

## **Issue 2: If Each Ron Yost Personal Assistance Services Recipient Used All Personal Assistance Hours Awarded, Annual Expenditures Would Exceed The Program's Appropriated Funding.**

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*Recipient reimbursements totaled \$321,562 during FY 2006, but the value of the total number of awarded hours was \$441,324. An agency representative indicated that not all recipients use the total number of hours available to them. While the program has never spent its entire budget before the end of the fiscal year and been forced to temporarily cease or reduce recipient reimbursements, this could happen if enough recipients began to use more hours than usual.*

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*Most states use client satisfaction surveys but programs in seven states use periodic site visits to recipients' homes as a means to assess the quality of care they receive. Site visits have never been part of the RYPAS program.*

Initially funded at \$150,000 during FY 1999, the program now receives \$340,000 in appropriations annually. Recipient reimbursements totaled \$321,562 during FY 2006, but the value of the total number of awarded hours was \$441,324. An agency representative indicated that not all recipients use the total number of hours available to them. While the program has never spent its entire budget before the end of the fiscal year and been forced to temporarily cease or reduce recipient reimbursements, this could happen if enough recipients began to use more hours than usual. If current recipients began to use all of their awarded hours for an entire fiscal year, the program would not have adequate funds to cover the additional cost. Historically, the RYPAS Board has separated the awarding of personal assistance hours from budgetary decision-making. The Legislative Auditor recommends that the program award a total number of personal assistance hours that accurately reflect the program's appropriated funding.

One recipient has failed to hire a personal assistant long enough to request payment. The recipient has been enrolled in the program for two years and was awarded annual personal assistance hours valued at \$13,572. This individual has never received a reimbursement payment but the program continues to make funds available for his or her care. The recipient, according to the *West Virginia Code*, is not eligible for services due to an inability to comply with an employer's responsibilities. While recipients should have adequate time to advertise, interview and hire a personal assistant, the program should place limits on the length of time recipients can continue to be enrolled in the program without hiring an assistant. The program currently has a waiting list of applicants who need services. The RYPAS Board should consider amending its legislative rules to establish a time frame for discontinuing services to recipients who do not hire a personal assistant.

**Issue 3: The Legislature Should Consider Requiring That the Ron Yost Personal Assistance Services Program Conduct Site Visits to Recipients' Homes to Assure That They Receive Quality Care.**

The need to ensure that disabled long-term care services recipients receive quality care is a concern that many states with programs similar to the RYPAS Program have addressed. Currently, the RYPAS Program uses an annual consumer satisfaction survey and responds to telephone inquiries from recipients as means to gauge the quality of care they receive. Most states use client satisfaction surveys but programs in seven states use periodic site visits to recipients' homes as a means to assess the quality of care they receive. Site visits have never been part of the RYPAS program. Programs in Minnesota, Nevada, New York, Ohio, Pennsylvania, South Dakota and Utah conduct site visits. Monthly home visits are a part of Nevada's Community Home-Based Initiatives Program. South Dakota's Long-Term Care Alternatives Program conducts visits biannually.

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As of March 6, 2006, 8 out of the 26 current recipients live in Kanawha County. It would not be difficult to conduct site visits to these recipients' homes given the proximity of the program's offices. The RYPAS Program has a small number of recipients relative to similar programs in other states that conduct site visits, therefore, conducting more than one site visit annually might be possible. The Legislative Auditor recommends that the Legislature consider amending *West Virginia Code* Chapter 18, Article 10L to require site visits to each recipient's home on at least an annual basis.

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While the Legislative Auditor does not wish to limit the RYPAS Program with respect to the manner in which it can conduct site visits, there are two methods that would utilize staff members of local centers for independent living or the DRS. The RYPAS Program could conduct the site visits with either staff members of the 4 local centers for independent living, 4 satellite centers for independent living or Rehabilitation Counselors employed at the Division of Rehabilitation Services' 7 district and 29 branch offices. According to CSR §198-1-6, 7% of appropriated funds may be designated for administrative costs. Staff site visits could result in additional administrative costs to the program. The Legislative Auditor, therefore, recommends that the Legislature consider amending CSR §198-1-6 to increase the percentage of funds allocated by the Legislature for administrative costs.

#### **Issue 4: The Submission of Documentation Required From Recipients Has Improved, But the Ron Yost Personal Assistance Services Program Should Request Copies of W-2 Forms Issued to Personal Assistants**

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*The RYPAS Program could conduct the site visits with either staff members of the 4 local centers for independent living, 4 satellite centers for independent living or Rehabilitation Counselors employed at the Division of Rehabilitation Services' 7 district and 29 branch offices.*

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The Performance Evaluation and Research Division completed a Preliminary Performance Review of the RYPAS Program in June 2001. The report stated that all current recipients were approved for services before the DRS knew if they were eligible to receive services through another program. As of June 27, 2006, 24 out of a total of 26 recipients had provided documentation denying them services through other programs. The remaining two recipients were newly-enrolled in the RYPAS Program and were still in the process of applying for the Medicaid Waiver Program, but had not yet received documentation from Medicaid either denying them services or placing them on a waiting list for services. Clearly, the RYPAS Program's staff now makes a serious effort to require documentation denying its applicants services from other programs, as soon as it is available. The Legislative Auditor now finds the program in full-compliance with Recommendation 1 of the June 2001 report.

One of the responsibilities of recipients is to provide the RYPAS Board with copies of quarterly state and federal tax documents related to their function as employers. A recipient's responsibility to provide such documentation is not a requirement of the West Virginia Code or legislative rules, but serve to verify compliance with the legal obligations of employers. The June 2001 Preliminary Performance Review stated that

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the program did not have documentation that recipients were carrying out these responsibilities. Twenty-two (22) recipients had submitted the appropriate documents as of June 2006. The four recipients who had not submitted the appropriate forms had just started the program within the year and will be required to comply. The RYPAS Program is now in full-compliance with Recommendation 3 of the June 2001 report.

*The program's staff should begin requesting copies of W-2 forms in order to confirm that recipients actually pay personal assistants and that recipients are fulfilling their responsibility as employers to provide personal assistants with adequate documentation to file income tax returns as required by law.*

The RYPAS Program does not directly issue paychecks to personal assistants. The program reimburses recipients for the number of hours worked by their personal assistants during the last two-week pay period. The program's staff should begin requesting copies of W-2 forms in order to confirm that recipients actually pay personal assistants and that recipients are fulfilling their responsibility as employers to provide personal assistants with adequate documentation to file income tax returns as required by law. W-2 forms can also serve as confirmation that a personal assistant has actually received the funds for which the recipient has received reimbursement from the program. This is necessary since the program does not directly issue paychecks to personal assistants, but rather reimburses recipients for the number of personal assistance hours worked during the last two-week pay period. A recipient who is claiming that a particular assistant is working for them should be able to provide an income statement verifying the assistant's employment. The Legislative Auditor recommends that the RYPAS Board begin requesting copies of W-2 Wage and Tax Statements issued to each personal assistant or assume a more active role in assisting recipients with the completion of the forms legally required from employers.

### **Recommendations:**

1. *The Legislative Auditor recommends that the Legislature continue the Ron Yost Personal Assistance Services Program.*
2. *The Ron Yost Personal Assistance Services Board should award a total number of personal assistance hours that accurately reflect the program's available funding.*
3. *The Ron Yost Personal Assistance Services Board should consider amending the program's legislative rules to establish a time frame for discontinuing services to recipients who do not hire a personal assistant.*
4. *The Legislative Auditor recommends that the Legislature consider amending West Virginia Code Chapter 18, Article 10L, to require site visits to each recipient's home, on at least an annual basis.*
5. *The Legislative Auditor recommends that the Legislature consider amending CSR §198-1-6 to increase the percentage of appropriated funds available for administrative costs.*



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6. *The Legislative Auditor recommends that the Ron Yost Personal Assistance Services Board begin requesting copies of W-2 Wage and Tax Statements issued to each personal assistant or assume a more active role in assisting recipients with the completion of the forms legally required from employers.*

**Objective**



# Review Objective, Scope and Methodology

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The Preliminary Performance Review, authorized under West Virginia Code §4-10-11, addresses six questions:

1. Has the agency been created to solve a problem?
2. Has the problem been solved?
3. The extent to which past agency activities and accomplishments, current projects and operations, and planned activities and goals for the future are or have been effective.
4. The extent to which there would be significant and discernable adverse effects on the public health, safety or welfare if the agency were abolished.
5. Does the agency operate in a sound fiscal manner?
6. Is a full performance evaluation on the agency in the public interest?

## Scope

The scope of this review focuses on the period since the Update to the Preliminary Performance Review in October 2002 to June 2006.

## Methodology

The Ron Yost Personal Assistance Services Program provided annual reports for each year from FY 2000 to 2005 which was the source of the report's budget information. The program also provided a list of the current recipients, their ages, genders, disabilities, the numbers of assistants they use, the number of hours they were awarded per two-week pay period and their respective counties of residence. A list of all past recipients was provided as well. The Legislative Auditor's staff conducted a site visit at the Statewide Independent Living Council in order to review each current recipient's file.

The Legislative Auditor's staff used two sources of information to compare the Ron Yost Personal Assistance Services Program to all similar state-funded long-term care programs across the country. One source was web site data compiled by the Center for Personal Assistance Services at the University of California at San Francisco. The other source was an October 2004 report entitled, *State-Funded Home and Community-Based Service Programs for Older People*, published in October 2004 by the Georgetown University Health Policy Institute Center on an Aging Society. All aspects of this review complied with Generally Accepted Government Auditing Standards (GAGAS)



# Issue 1:

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## **The Ron Yost Personal Assistance Services Program Increases the Availability of Personal Care Services Within West Virginia and Should Be Continued.**

### **Issue Summary**

The Legislature created the Ron Yost Personal Assistance Services Program (RYPAS) in 1999. The program's primary objective is to increase the availability of personal assistance services for persons with disabilities, allowing them to continue living in their homes instead of entering nursing homes. The legislation created a consumer-directed personal assistance services program to meet the needs of individuals with disabilities, who were not receiving services from any other program. A consumer-directed program gives recipients the responsibility for hiring, supervising and terminating their own personal assistants. Eligibility for services is based on functional need rather than on a medical diagnosis. A recipient is considered the employer of his or her personal assistant and has the responsibilities of hiring, training, supervising, paying and if necessary terminating his or her assistant. The RYPAS Program is similar to many other state-funded personal assistance programs. Eighty-nine (89) similar programs exist in all but 3 states.

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*The Legislature created the Ron Yost Personal Assistance Services Program (RYPAS) in 1999. The program's primary objective is to increase the availability of personal assistance services for persons with disabilities, allowing them to continue living in their homes instead of entering nursing homes.*

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Currently, there are 26 recipients from 14 counties receiving services. Initially funded at \$150,000, the program now is funded at \$340,000. Without the RYPAS Program, many current recipients would be forced to enter nursing homes. **The Legislative Auditor therefore recommends that the Legislature continue the Ron Yost Personal Assistance Services Program.**

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*The program provides funding for individuals with severe disabilities to hire personal assistants to help them perform essential daily tasks. Personal assistance services may include bathing, meal preparation, dressing, paying bills and housekeeping.*

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### **The Ron Yost Personal Assistance Program Provides a Valuable Service to Disabled Individuals Who Do Not Receive Similar Services From Other Programs**

The Legislature created the RYPAS Program during the 1999 Regular Legislative Session with the intention of increasing the availability of personal assistance services in West Virginia, thereby enabling disabled recipients to continue living in their homes. The program provides funding for individuals with severe disabilities to hire personal assistants to help them perform essential daily tasks. Personal assistance services may include bathing, meal preparation, dressing, paying bills and housekeeping. The legislation created a consumer-directed personal assistance services program to meet the needs of individuals with disabilities who were not receiving services from any other program. A consumer-directed program gives recipients the responsibility for hiring, supervising and terminating their own personal assistants. Recipients also are responsible for income tax and other withholdings made from the paychecks of personal assistants,

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as well as issuing W-2 income statements. To be eligible for services, a disabled applicant must meet the following criteria:

1. Must not be receiving personal assistance through other services;
2. Has had a disability for twelve months;
3. Needs assistance to take care of essential tasks;
4. Can meet the responsibilities of an employer.

The program is organized under the Department of Education and the Arts as part of the Division of Rehabilitation Services (DRS). The Division has contracted with the Statewide Independent Living Council (SILC) to provide administrative services for the program. A seven-member board, composed of individuals with severe disabilities, directs the program. The RYPAS Board is responsible for making all decisions about the program, including the eligibility of applicants for services.

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*Eligible recipients hire their own assistants. They may directly hire an assistant or purchase services elsewhere. Each recipient receives a check every two weeks for the number of hours the assistant has worked that pay period, not to exceed the number of approved hours.*

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Program eligibility is based on a functional need rather than on a medical basis. Recipients receive weekly personal assistance hours as determined through a functional assessment conducted by an approved provider. After the functional assessment, the RYPAS Board reviews an application. If there are funds available, and the person is eligible for services, the RYPAS Board contacts the DRS and the recipient in writing.

The written notification includes the number of personal assistance hours the person is eligible to receive, the approved start date, the rate at which the recipient is to be reimbursed, and a statement requiring that the recipient agree to obtain services from other entities if he or she becomes eligible for personal assistance services from another program.

Eligible recipients hire their own assistants. They may directly hire an assistant or purchase services elsewhere. Each recipient receives a check every two weeks for the number of hours the assistant has worked that pay period, not to exceed the number of approved hours.

The rate of reimbursement is calculated on a sliding scale based on a recipient's annual income. The sliding fee schedule is designed to permit people with disabilities to contribute to the cost of their services based on their ability to do so. A recipient who has a higher annual income will have a lower percentage of services funded by the program. If a recipient's assistant works more hours than the RYPAS Board has awarded per pay period, the recipient pays the excess cost. The RYPAS Board has established an hourly rate of \$6.00 per hour for personal assistants.

### **The Ron Yost Personal Assistance Services Program is Similar To Most State-Funded Personal Assistance Programs**

Nearly ten million people age 65 or older in the United States needed long-term supportive services during calendar year 2004. Appendix C illustrates that nearly all states have state-funded home or community-

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based, long-term care services independent of Medicaid. State-funded, long-term programs provide services to those who are not eligible for the Medicaid Program as well as services that may not be available under Medicaid. Three states with no programs of this type include Missouri, Mississippi and Montana.

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The Legislative Auditor used two sources of information to compare the RYPAS Program with similar programs in other states. These included web site data compiled by the Center for Personal Assistance Services at the University of California at San Francisco. The other source was an October 2004 report entitled, "State-Funded Home and Community-Based Service Programs for Older People," published in October 2004 by the Georgetown University Health Policy Institute Center on an Aging Society. State-funded programs such as the RYPAS Program are valuable because they can not only deliver long-term care but they can expand the definition of a care giver in that care givers can include family members.

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*Funding for most states' programs comes from general revenue appropriations. General revenue appropriations fund 106 (71%) of state-funded programs, including the RYPAS Program. Twenty-two (22) or 15% of state-based programs are funded by other means.*

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Funding for most states' programs comes from general revenue appropriations. General revenue appropriations fund 106 (71%) of state-funded programs, including the RYPAS Program. Twenty-two (22) or 15% of state-based programs are funded by other means. Arkansas uses a tobacco tax to fund its long-term care while New Jersey uses casino revenues. The Center for Personal Assistance Services was unable to identify funding sources for 16 (11%) of state programs.

According to the report published by the Center for Personal Assistance Services:

*...most state-only funded programs are relatively small in terms of the amount spent and population served.*

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*Information from the Center for Personal Assistance Services at the University of California at San Francisco indicates that 89 (60%) of state programs provide services related to daily living activities such as personal care services, homemaker services, and meal preparation.*

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Those who are eligible for the majority of state-funded programs include individuals who either are not eligible for Medicaid due to their incomes, functional criteria or are on the Medicaid Waiver wait list. The Georgetown University Health Policy Institute Center on an Aging Society identified a smaller number of state-funded programs. According to its data, 43 (84%) of programs provide services to people who are not eligible for Medicaid based on financial criteria, 33 programs (65%) provide services to people who are ineligible for Medicaid services based on functional criteria and 29 (57%) serve people awaiting placement in the respective state's Medicaid waiver program. The RYPAS Program is similar to these other states in that there are examples of individuals who do not receive Medicaid services due to their income level, functional criteria and three who are currently on the Medicaid Waiver waiting list.

Information from the Center for Personal Assistance Services at the University of California at San Francisco indicates that 89 (60%) of state programs provide services related to daily living activities such as personal care services, homemaker services, and meal preparation. The remaining 40% of state programs provide other types of long-term care services such

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as respite care or transportation, that are unrelated to personal assistance services. Programs like the RYPAS Program provide assistance to severely disabled persons who need assistance in performing daily activities.

### **Twenty-six Individuals Are Currently Enrolled in the Program**

The RYPAS Program currently provides services to 26 recipients. Table 1 provides an overview of program recipients, including information on age, gender, disability and the number of personal assistant hours per two-week pay period that the program has awarded each of them. The program has made it possible for recipients from 14 counties to remain living in their homes. There is a waiting list that includes six individuals from four counties. Since the program's creation, it has provided funding for personal assistance services for an additional 26 individuals, who are no longer enrolled in the program. They no longer receive assistance from the program due to death or obtaining services from other programs.

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*The program has made it possible for recipients from 14 counties to remain living in their homes. There is a waiting list that includes six individuals from four counties.*

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As of March 15, 2006, the median age of recipients was 56.5. The median number of weekly hours awarded for personal assistance services was 44.5. Sixteen (16) recipients were female and the median number of personal assistants was 2. The median total paid to each program recipient during FY 2006 was \$11,388, although not all recipients used the total number of awarded hours. Kanawha County had the highest number of recipients in one county with 8, followed by Wood County with 3.





**Table 1**

**Overview of Program Recipients: FY 2006**

Recipient	Age	Weekly Hours Awarded	County	Disability	Number of Personal Assistants	*Medicaid Waiver	Total Annual Award	Actual Expenditures FY 2006	Percentage of the Annual Award Amount Used
1	58	27.5	Wood	Multiple Sclerosis	2	A	\$8,658	\$3,957	**95%
2	79	39.5	Harrison	Lung Cancer	2	D	\$12,324	\$12,324	100%
3	66	56	Kanawha	Blind, Diabetic	1	D	\$17,472	\$17,472	100%
4	48	83.5	Wood	Kuelberg-Wellander	6	D	\$26,052	\$26,052	100%
5	44	36.5	Wetzel	Multiple Sclerosis	3	D	\$11,388	\$11,388	100%
6	71	31.75	Kanawha	Cerebral Palsy	3	D	\$9,906	\$8,568	83%
7	53	43.5	Kanawha	Stroke	0	D	\$13,572	\$0	0%
8	88	40	Greenbrier	Alzheimer's	1	D	\$12,480	\$12,480	100%
9	74	63	Kanawha	Alzheimer's	3	A	\$21,528	\$6,852	**66%
10	61	5	Upshur	Stoke, Chronic Liver Disease	1	D	\$1,560	\$1,560	100%
11	49	32.5	Wayne	Quadriplegic	1	D	\$10,140	\$9,828	97%
12	83	37.5	Ritchie	Hearing and Visual Impairment	1	D	\$11,700	\$11,388	97%
13	46	19	Kanawha	Spinal Cord Injury, Amputee	1	D	\$5,928	\$2,820	**98%

14	56	17	Summers	Farby's Disease, Deaf, Vision	1	D	\$5,304	\$1,279.50	**83%
15	51	76.5	Roane	Quadriplegic	2	N/A	\$23,868	\$2,001	**21%
16	57	28.5	Harrison	Multiple Sclerosis	1	D	\$8,892	\$8,892	100%
17	74	65.5	Cabell	Parkinson's Disease	2	D	\$20,436	\$20,436	100%
18	41	85.5	Wood	Multiple Sclerosis	4	D	\$26,676	\$24,624	99%
19	39	58	Mercer	Multiple Sclerosis	2	D	\$18,096	\$1,869	**36%
20	34	45.5	Mercer	Multiple Sclerosis	2	D	\$14,196	\$14,196	100%
21	83	168	Cabell	Parkinson's Disease	2	D	\$52,416	\$32,976	63%
22	84	112	Kanawha	Blind	3	D	\$34,944	\$34,944	100%
23	46	66	Jackson	Paraplegic	2	N/A	\$20,592	\$4,962	**62%
24	67	62	Mineral	Rheumatoid Arthritis and legally blind	1	D	\$19,344	\$19,344	100%
25	53	39	Kanawha	Quadriplegic	1	D	\$12,168	\$12,168	100%
26	52	69.5	Kanawha	Quadriplegic	1	A	\$21,684	\$19,182	88%
<b>Total</b>								<b>\$321,562.50</b>	<b>Median 98.5%</b>

Source: The Statewide Independent Living Council.

\*D: Denied with Documentation; A: Approved for Medicaid Waiver but on the waiting list; N/A: Applied for Medicaid but have no documentation

\*\*Indicates individuals enrolled in the RYPAS Program for only part of FY 2006. Percentage of personal assistance hours used are prorated accordingly.

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The need for personal assistance arises from a wide variety of disabilities (see Table 1). The most common disability among recipients is Multiple Sclerosis. Six (6) recipients have this disease which affects the central nervous system. Four (4) recipients are quadriplegic, in which a traumatic event to the spinal cord has led to confinement to a wheelchair.

Without the assistance of the program, current recipients would have to seek assistance by other means. This could result in the need to enter a nursing home. According to CSR §198-4.3.a, the RYPAS Board is to do the following:

*...provide services to a person who would be placed in an institutional setting not of his or her choice if he or she did not receive services under this program.*

The RYPAS Program allows each disabled recipient to live in his or her own community and home, and receive the services for which he or she could not qualify for through Medicaid. **The Legislative Auditor therefore recommends that the Legislature continue the Ron Yost Personal Assistance Services Program.**

## **Conclusion**

The RYPAS Program is a consumer-directed program that has assisted many individuals with severe disabilities to continue living in their own homes and communities. Personal assistance services are essential services for daily living such as bathing, cooking, cleaning or paying bills. The RYPAS Program provides personal assistance services to those who are not currently receiving services through other programs. It fills a need for long-term care services that most states have recognized. Only 3 states have no long-term care programs. The Legislative Auditor recommends that the Legislature continue the Ron Yost Personal Assistance Services Program.

## **Recommendation:**

1. *The Legislative Auditor recommends that the Legislature continue the Ron Yost Personal Assistance Services Program.*

## Issue 2:

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### **If Each Ron Yost Personal Assistance Services Recipient Used All Personal Assistance Hours Awarded, Annual Expenditures Would Exceed The Program's Appropriated Funding.**

#### **Issue Summary**

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*Initially funded at \$150,000 during FY 1999, the program now receives \$340,000 in appropriations annually. Recipient reimbursements totaled \$321,562 during FY 2006, but the value of the total number of awarded hours was \$441,324.*

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Initially funded at \$150,000 during FY 1999, the program now receives \$340,000 in appropriations annually. Recipient reimbursements totaled \$321,562 during FY 2006, but the value of the total number of awarded hours was \$441,324. An agency representative indicated that not all recipients use the total number of hours available to them. While the program has never spent its entire budget before the end of the fiscal year and been forced to temporarily cease or reduce recipient reimbursements, this could happen if enough recipients began to use more hours than usual. **The Ron Yost Personal Assistance Services Board should award a number of personal assistance hours that accurately reflect the program's appropriated funding.**

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*While the program has never spent its entire budget before the end of the fiscal year and been forced to temporarily cease or reduce recipient reimbursements, this could happen if enough recipients began to use more hours than usual.*

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One recipient has failed to hire a personal assistant long enough to request payment. The recipient has been enrolled in the program for two years and was awarded annual personal assistance hours valued at \$13,572. This individual has never received a reimbursement payment but the program continues to make funds available for his or her care. The recipient, according to the *West Virginia Code*, is not eligible for services due to an inability to comply with an employer's responsibilities. The program previously eliminated another recipient for failing to hire a personal assistant. **The RYPAS Board should consider amending its legislative rules to establish a time frame for discontinuing services to recipients who do not hire a personal assistant.**

### **The Program's Budget Is Inadequate to Fund the Number of Personal Assistance Hours Allocated to Recipients If Recipients Utilized All Available Hours**

Initially funded at \$150,000 during FY 1999, the program now receives \$340,000 in annual appropriations. Recipient reimbursements totaled \$321,562 during FY 2006 (see Table 2), but the value of the total number of awarded hours was \$441,324. An agency representative indicated that not all recipients use the total number of hours available to them. While the program has never spent its entire budget before the end of the fiscal year and been forced to temporarily cease or reduce recipient reimbursements, this could happen if enough recipients began to use more hours than usual. Table 2 illustrates that the value of the total number of personal assistance hours, awarded to all recipients for an entire fiscal year, actually exceeds the program's annual appropriated funding.

<b>Table 2</b>				
<b>Comparison of Program Budget and Personal Assistance Hours: FY 2001-2006</b>				
<b>Fiscal Year</b>	<b>Budget Appropriation</b>	<b>Actual Funds Available*</b>	<b>Recipient Reimbursement</b>	<b>Value of Total Annual Personal Assistance Hours Awarded</b>
2001	\$300,000	\$291,000	\$284,630	\$352,264
2002	\$300,000	\$289,754	\$269,384	\$375,484
2003	\$300,000	\$289,800	\$246,636	\$365,586
2004	\$340,000	\$330,140	\$274,152	\$447,432
2005	\$340,000	\$349,860	\$289,682	\$349,479
2006	\$340,000	\$341,926	\$321,562	\$441,324
<i>Source: The Ron Yost Personal Assistance Services Program</i>				
<i>*Actual funds received by the program totaled less than its budget appropriation due to temporary budget cuts during fiscal years 2001 through 2004. The re-appropriation of unspent funds accounts for the amount in excess of appropriations for FY 2005.</i>				

Table 1 in Issue 1 provided data on the percentage of each recipient's annual award amount actually used during FY 2006. The RYPAS Board enrolled seven (7) new individuals in the program from January to March of 2006. The data in Table 1 indicate that 6 of the 26 recipients at the time of this report, failed to use at least 80% of the value of personal assistance hours awarded to them by the RYPAS Board. Of these seven, four were recipients newly-enrolled in the program during FY 2006. Long-term program recipients tended to use nearly all of their awarded personal assistance hours. Three (3) recipients were approved for the Medicaid Waiver Program waiting list and were received services from the RYPAS Program in the meantime. These three individuals may not be enrolled in the RYPAS Program for an extended period of time due to their eligibility for services from another program. The remaining 23 recipients were not eligible to receive services from another program, and therefore were, or could become, long-term RYPAS Program recipients. The RYPAS Board should be aware of this trend when awarding personal assistance hours.

If current recipients began to use all of their awarded hours for an entire fiscal year, the program would not have adequate funds to cover the additional cost. Historically, the RYPAS Board has separated the awarding of personal assistance hours from budgetary decision-making. **The Legislative Auditor recommends that the program award a total number of personal assistance hours that accurately reflect the program's appropriated funding.**

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## The Ron Yost Personal Assistance Services Program Should Discontinue Funding for Recipients Who Do Not Hire Personal Assistants

The RYPAS Program provided the Legislative Auditor's Office with a list of all current recipients and the number of personal assistants each of them employs. One recipient has failed to hire a personal assistant long enough to request payment. The recipient has been enrolled in the program for two years and was awarded annual personal assistance hours valued at \$13,572. This individual has never received a reimbursement payment but the program continues to make funds available for his or her care.

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*The RYPAS Program provided the Legislative Auditor's Office with a list of all current recipients and the number of personal assistants each of them employs. One recipient has failed to hire a personal assistant long enough to request payment. The recipient has been enrolled in the program for two years and was awarded annual personal assistance hours valued at \$13,572.*

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According to WVC §18-10L-4(f), recipients shall:

*Comply with the employer responsibilities of hiring, supervising and, if needed terminating the employment of a personal assistant.*

The recipient, according to the West Virginia Code, is not eligible for services due to an inability to comply with an employer's responsibilities. The program previously eliminated another recipient for failing to hire a personal assistant. The Legislative Auditor's staff was unable to determine how long this individual was enrolled in the program without hiring an assistant.

While recipients should have adequate time to advertise, interview and hire a personal assistant, the program should place limits on the length of time recipients can continue to be enrolled in the program without hiring an assistant. The program currently has a waiting list of applicants who need services. Making funds available for recipients who do not hire a personal assistant for a prolonged period of time is a waste of resources. **The Legislature should consider amending the Ron Yost Personal Assistance Services Program's legislative rules to establish a time frame for discontinuing services to recipients who do not hire a personal assistant.**

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*While recipients should have adequate time to advertise, interview and hire a personal assistant, the program should place limits on the length of time recipients can continue to be enrolled in the program without hiring an assistant.*

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### Conclusion

The number of personal assistance hours awarded to, and actually used by recipients should reflect the funds actually available to the RYPAS Program. The RYPAS Board should award a number of hours to recipients that reflect the size of the program's budget if all available hours were used. The program currently has a waiting list of applicants who need services. Making funds available for recipients who do not hire a personal assistant for a prolonged period of time denies services to others unnecessarily.

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**Recommendations:**

2. *The Ron Yost Personal Assistance Services Board should award a total number of personal assistance hours that accurately reflect the program's available funding.*
3. *The Ron Yost Personal Assistance Services Board should consider amending the program's legislative rules to establish a time frame for discontinuing services to recipients who do not hire a personal assistant.*



## Issue 3:

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### **The Legislature Should Consider Requiring That the Ron Yost Personal Assistance Services Program Conduct Site Visits to Recipients' Homes to Assure That They Receive Quality Care.**

#### **Issue Summary**

The need to ensure that disabled long-term care services recipients receive quality care is a concern that many states with programs similar to the RYPAS Program have addressed. Currently, the RYPAS Program uses an annual consumer satisfaction survey and responds to telephone inquiries from recipients as means to gauge the quality of care they receive.

Most states use client satisfaction surveys but programs in 7 states use periodic site visits to recipients' homes as a means to assess the quality of care they receive. Site visits have never been part of the RYPAS program. Currently, the program does not verify that quality care is provided, although nursing homes, which care for similarly disabled individuals, are subject to state inspections. **The Legislative Auditor recommends that the Legislature amend West Virginia Code Chapter 18, Article 10L, to require site visits to each recipient's home on at least an annual basis.**

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*Site visits have never been part of the RYPAS program. Currently, the program does not verify that quality care is provided, although nursing homes, which care for similarly disabled individuals, are subject to state inspections.*

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The RYPAS Program could conduct the site visits with either staff members of local centers for independent living or Rehabilitation Counselors employed at the Division of Rehabilitation Services' 7 district and 29 branch offices. According to CSR §198-1-6, 7% of funds appropriated funds may be designated for administrative costs. Staff site visits could result in additional administrative costs to the program. **The Legislative Auditor, therefore, recommends that the Legislature consider amending CSR §198-1-6 to increase the percentage of funds allocated by the Legislature for administrative costs.**

#### **Personal Assistance Programs in Other States Assign Case Managers and Conduct Site Visits to Recipients' Homes to Ensure the Quality of Care**

State-funded long-term care programs use a number of different methods to measure the quality of care that participants receive. Periodic client satisfaction surveys are the most common. The RYPAS Program conducts such annual surveys of its recipients.

In some states, case managers assure the quality of services. Case management services assist individuals in gaining access to needed medical, social, educational and other social services. Case managers perform different functions, and according to the Georgetown University Center on an Aging Society, these can include coordinating the provision of services, monitoring the appropriateness of services, determining service needs, approving changes in care plans, arranging changes in care plans and

*Site visits have never been part of the RYPAS Program. Site visits could provide first-hand evidence of the recipient's condition and confirm that quality care is taking place. Such visits could also assist individuals with any questions they may have in a face-to-face manner.*

determining financial eligibility for the program. The RYPAS Program does not have a case manager on staff but does have a program assistant whose role is to assist recipients with any questions they may have after they start the program. Thirty-eight (38) personal assistance services located in 29 states utilize case managers as a means to proactively initiate contact with recipients, rather than using the reactive approach of the RYPAS Program.

Some programs also use staff site visits to assess the quality of care. Periodic visits occur monthly, every six months, annually or biannually. Table 3 provides data on the programs in other states that conduct staff site visits. Programs in Minnesota, Nevada, New York, Ohio, Pennsylvania, South Dakota and Utah conduct site visits. Monthly home visits are a part of Nevada's Community Home-Based Initiatives Program. South Dakota's Long-Term Care Alternatives Program conducts visits biannually.

Site visits have never been part of the RYPAS Program. Site visits could provide first-hand evidence of the recipient's condition and confirm that quality care is taking place. Such visits could also assist individuals with any questions they may have in a face-to-face manner. As Table 2 illustrates, programs with enrollments much higher than that of the RYPAS Program conduct site visits.

State	Number Enrolled	Program	Type of Visit
Minnesota	FY 2003: 11,709	Alternative Care Program	Annual
Nevada	FY 2002: 241	Community Home-based Program	Monthly
New York	FY 2002: 34,545	Expanded In-Home Services for the Elderly Program	Annual
Ohio	FY 2003: 6,355	Senior Community Services Block Grant	Annual
Pennsylvania	FY 2002: 802	Family Caregiver Support Program	Annual
	FY 2002: 229,506	Options Program	Annual
South Dakota	FY 2002: 1,308	Long-Term Care Alternatives Program	Bi-Annual
Utah	FY 2003: 1,803	Home and Community-Based Alternatives Program	Annual

*Sources: The Georgetown University Health Policy Institute Center on an Aging Society and The Center for Personal Assistance Services at the University of California at San Francisco.*

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Site visits to recipients' homes would help to ensure that disabled recipients who remain in their homes still receive high-quality long-term care and that the program spends state funds effectively. One current RYPAS recipient is receiving state-funded services valued at \$52,000 annually. A determination should be made regarding the quality of care received considering the large cost of that individual's care. The severity of recipient disabilities is another reason to conduct site visits. Each recipient has severe disabilities that range from multiple sclerosis to lung cancer. The program should seek to assess first-hand the performance of each assistant in the home setting. Representatives of the RYPAS Program could assess a personal assistant during a working day and discuss his or her quality of care with the recipient, as well as any other questions the recipient may have.

*As of March 6, 2006, 8 out of the 26 current recipients live in Kanawha County. It would not be difficult to conduct site visits to these recipients' homes given the proximity of the program's offices.*

As of March 6, 2006, 8 out of the 26 current recipients live in Kanawha County. It would not be difficult to conduct site visits to these recipients' homes given the proximity of the program's offices. The RYPAS Program has a small number of recipients relative to similar programs in other states that conduct site visits, therefore, conducting more than one site visit annually might be possible. The Legislative Auditor recommends that the Legislature consider amending West Virginia Code Chapter 18, Article 10L to require site visits to each recipient's home on at least an annual basis.

While the Legislative Auditor does not wish to limit the RYPAS Program with respect to the manner in which it can conduct site visits, there are two methods that would utilize staff members of local centers for independent living or the DRS. The Statewide Independent Living Council is located in Institute, West Virginia. The SILC has four (4) centers and four (4) satellite offices located throughout West Virginia, which provide services in 27 counties. A staff member of the local center for independent living could travel to each recipient's home on a random basis and conduct a site visit at least one time each year, more often if the program's management wishes. The Division of Rehabilitation Services could also assist in site visits. The Division of Rehabilitation Services has 7 district offices and 29 branch offices throughout the state. The district offices could serve as a local link to those recipients living in parts of the state farthest away from Institute. The program could contract with the DRS to engage the services of local Rehabilitation Counselors who are experts in the rehabilitation field to conduct site visits on behalf of the RYPAS Program. Given that the program only has 26 current recipients, a large proportion of whom live in one county, and that agencies with offices throughout the state could conduct site visits, the cost of annual site visits would be minimal.

Site visits conducted by the RYPAS Program could be limited by the small percentage of appropriated funds that can be spent on administrative costs. According to CSR §198-1-6, a total of 7% of appropriated funds is available for the program's administrative costs (see Table 4). During the period from FY 2001 to FY 2006, the RYPAS Program exceeded the 7% limit on administrative costs during FY 2005

due to re-appropriated funds from FY 2004. Site visits conducted by either staff members of the SILC or Rehabilitation Counselors would increase administrative costs for a program that already operates at the edge of its legal limit. The RYPAS Program consistently spends close to the 7% limit on administrative costs. The program has one paid staff member and pays only half of that individual's salary. Administrative costs total less than \$30,000 annually, so the program clearly does not have large administrative costs. The Legislative Auditor recommends that the Legislature consider amending CSR §198-1-6 to increase the percentage of appropriated funds available for administrative costs.

<b>Table 4</b>		
<b>Program Administrative Costs as a Percentage of Appropriations: FY 2001-2006</b>		
<b>Fiscal Year</b>	<b>Administrative Costs</b>	<b>Percentage of Budget App- ropriation</b>
2001	\$6,370	2.1
2002	\$20,370	6.8
2003	\$17,475	5.8
2004	\$16,747	4.9
2005*	\$26,487	7.7
2006	\$20,450	6.0

*Source: The Statewide Independent Living Council*

*\*During FY 2005 there were funds designated for administrative costs carried over from FY 2004 and re-appropriated, therefore the percentage is above 7%.*

## **Conclusion**

Site visits to recipients homes, which serve as a means to verify the quality of long-term care services in 7 states, is not part of the RYPAS Program. There are two methods of conducting site visits that are available to the RYPAS Program that would utilize staff members of local centers for independent living or the DRS. Site visits conducted by the RYPAS Program could be limited by the small percentage of appropriated funds (7%) that can be spent on administrative costs. Administrative costs total less than \$30,000 annually, so the program does not have large administrative costs.

## **Recommendations:**

4. *The Legislative Auditor recommends that the Legislature consider amending West Virginia Code Chapter 18, Article 10L, to require site visits to each recipient's home, on at least an annual basis.*

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5. *The Legislative Auditor recommends that the Legislature consider amending CSR §198-1-6 to increase the percentage of appropriated funds available for administrative costs.*



## Issue 4:

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### **The Submission of Documentation Required From Recipients Has Improved, But the Ron Yost Personal Assistance Services Program Should Request Copies of W-2 Forms Issued to Personal Assistants.**

#### **Issue Summary**

The Performance Evaluation and Research Division completed a Preliminary Performance Review of the RYPAS Program in June 2001. The report stated that all current recipients were approved for services before the DRS knew if they were eligible to receive services through another program. As of June 27, 2006, 24 out of a total of 26 recipients had provided documentation denying them services through other programs. The remaining two recipients were newly-enrolled in the RYPAS Program and were still in the process of applying for the Medicaid Waiver Program, but had not yet received documentation from Medicaid either denying them services or placing them on a waiting list for services. Representatives of the RYPAS Program indicated that in some instances it has taken considerable periods of time to receive the required documentation from Medicaid. The delay in obtaining documentation was through no fault of the recipient or the RYPAS Program. The management of the RYPAS Program has decided that it is better to offer services to needy individuals instead of penalizing them by refusing to offer services in such a situation. Clearly, the RYPAS Program's staff now makes a serious effort to require documentation denying its applicants services from other programs, as soon as it is available. The Legislative Auditor now finds the program in full-compliance with Recommendation 1 of the June 2001 report.

A recipient assumes the obligations of an employer when he or she enrolls in the program. The recipient then hires a personal assistant of his or her choice. A recipient fills the role of an employer and this entails various legal and financial responsibilities. One of the responsibilities of each recipient is to provide the RYPAS Board with copies of quarterly state and federal tax documents related to their function as employers. Recipients also provide copies of unemployment and workers compensation insurance documents and a copy of their West Virginia Business Certificate. A recipient's responsibility to provide such documentation are not requirements of the West Virginia Code or legislative rules, but serve to verify compliance with the legal obligations of employers. The June 2001 Preliminary Performance Review stated that the program did not have documentation that recipients were carrying out these responsibilities. Twenty-two (22) recipients had submitted the appropriate documents as of June 2006. The four recipients who had not submitted the appropriate forms had just started the program within the year and will be required to comply. The RYPAS Program is now in full-compliance with Recommendation 3 of the June 2001 report.

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*By the time of the October 2002 Update to the Preliminary Performance Review, 21 out of a total of 23 recipients had provided documentation denying them services through some other program. The program was in partial-compliance with Recommendation 1 from the original June 2001 report.*

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*Clearly, the RYPAS Program's staff now makes a serious effort to require documentation denying its applicants services from other programs as soon as it is available. The Legislative Auditor now finds the program in full-compliance with Recommendation 1 of the June 2001 report.*

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The RYPAS Program does not directly issue paychecks to personal assistants. The program reimburses recipients for the number of hours worked by their personal assistants during the last two-week pay period. The program's staff should begin requesting copies of W-2 forms in order to confirm that recipients actually pay personal assistants and that recipients are fulfilling their responsibility as employers to provide personal assistants with adequate documentation to file income tax returns as required by law. **The Legislative Auditor recommends that the RYPAS Board begin requesting copies of W-2 Wage and Tax Statements issued to each personal assistant.**

### **The RYPAS Program Requires Applicants for Services to Provide Documentation That They Have Applied for Personal Assistance Services From Other Programs**

The Performance Evaluation and Research Division completed a Preliminary Performance Review of the RYPAS Program in June 2001. The report stated that all current recipients were approved for services before the DRS knew if they were eligible to receive services through another program. Recommendation 1 stated:

*Applicants should be required to apply for other programs they may be eligible for and return the eligibility determination to DRS before an application for Ron Yost funding is processed or in order for Ron Yost funding to continue.*

By the time of the October 2002 Update to the Preliminary Performance Review, 21 out of a total of 23 recipients had provided documentation denying them services through some other program. The program was in partial-compliance with Recommendation 1 from the original June 2001 report.

As of June 27, 2006, 24 out of a total of 26 recipients had provided documentation denying them services through other programs. The remaining two recipients were newly-enrolled in the RYPAS Program and were still in the process of applying for the Medicaid Waiver Program, but had not yet received documentation from Medicaid either denying them services or placing them on a waiting list for services. Two Medicaid programs can provide personal assistance services to Medicaid-eligible individuals, the Medicaid Waiver Program and the Medicaid Personal Care Option. Representatives of the RYPAS Program indicated that in some instances it has taken considerable periods of time to receive the required documentation from Medicaid. The delay in obtaining documentation was through no fault of the recipient or the RYPAS Program. The management of the RYPAS Program has decided that it is better to offer services to needy individuals instead of penalizing them by refusing to offer services in such a situation. Clearly, the RYPAS Program's staff now makes a serious effort to require documentation denying its applicants services from other programs as soon as it is available. The Legislative Auditor now finds the program in full-compliance with Recommendation 1 of the June 2001 report.



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## Recipients' Submission of Employer Documentation to the Board Has Improved

A recipient assumes the obligations of an employer when he or she enrolls in the program. The recipient then hires a personal assistant of his or her choice. A recipient fills the role of an employer and is responsible for various legal and financial responsibilities. In the program application, applicants indicate that they will either self-manage the responsibilities of these services or appoint someone to be their financial manager. Currently, 18 recipients manage their own financial services and 8 use someone else as a financial manager.

The RYPAS Board requests that each recipient view a training video and review a 28-page booklet which describes the financial obligations of an employer. The RYPAS Board also requests that the applicant sign and return a verification form after an applicant reviews the technical assistance guide. According to WVC §18-10L-4(f)(3) recipients are to do the following:

*Manage his or her own financial and legal affairs regarding the Ron Yost personal assistance program.*

One of the responsibilities of each recipient is to provide the RYPAS Board with copies of quarterly state and federal tax documents related to their function as employers. Recipients also provide copies of unemployment and workers compensation insurance documents and a copy of their West Virginia Business Certificate. A recipient's responsibility to provide such documentation is not a requirement of the West Virginia Code or legislative rules, but is the program's way of ensuring that recipients comply with their legal obligations as employers.

The June 2001 Preliminary Performance Review stated that the program did not have documentation that recipients were carrying out these responsibilities. Recommendation 3 of that report focused on the need for recipients to provide this documentation:

*The Division of Rehabilitation Services should require recipients to provide documentation that shows compliance with applicable employment laws.*

At the time of the October 2002 Update to the Preliminary Performance Review of the RYPAS Program, only three recipients had submitted the required tax information. The Legislative Auditor determined that the RYPAS Program was in partial-compliance with the recommendation. Twenty-two (22) recipients had submitted the appropriate documents as of June 2006. The four recipients who had not submitted the appropriate forms had just started the program within the year and will be required to comply. The RYPAS Program is now in full-compliance with Recommendation 3 of the June 2001 report.

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*At the time of the October 2002 Update to the Preliminary Performance Review of the RYPAS Program, only three recipients had submitted the required tax information. The Legislative Auditor determined that the RYPAS Program was in partial-compliance with the recommendation. Twenty-two (22) recipients had submitted the appropriate documents as of June 2006. The four recipients who had not submitted the appropriate forms had just started the program within the year and will be required to comply. The RYPAS Program is now in full-compliance with Recommendation 3 of the June 2001 report.*

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Many recipients have expressed the opinion that completing the required paperwork is the part of the program they least enjoy, according to annual client satisfaction surveys. Virginia's Personal Assistance Program employs a bookkeeper whose role is to be responsible for receiving electronic payroll, printing payroll checks and mailing checks to assistants, withholding Social Security and Medicare from paychecks, paying state and federal unemployment taxes covering the assistants, mailing quarterly earnings statements to assistants and mailing W-2 forms to assistants by January 31. A Virginia recipient is responsible for hiring, training and terminating personal assistants, but assistants are essentially employees of the program, unlike the RYPAS Program.

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*Fulfilling an employer's responsibilities is not easy for some recipients. The median age of the recipients is 56.5 and all have severe disabilities. Ten (10) recipients are above 65 years of age. If the Legislature considers future changes to the RYPAS Program, it might want to study Virginia's program as a model for simplifying the administrative burden placed on recipients.*

Fulfilling an employer's responsibilities is not easy for some recipients. The median age of the recipients is 56.5 and all have severe disabilities. Ten (10) recipients are above 65 years of age. If the Legislature considers future changes to the RYPAS Program, it might want to study Virginia's program as a model for simplifying the administrative burden placed on recipients. Even if this aspect of the program remains unchanged, the program should provide more assistance to recipients in completing the various forms necessary to meet their obligations as employers.

### **Obtaining Copies of W-2 Forms Issued to Personal Assistants Should Be Part of the Program**

Since the October 2002 Update to the Preliminary Performance Review of the RYPAS Program, the program has placed a higher priority on obtaining employer tax documents but still does not request copies of the W-2 Wage and Tax Statements issued by recipients to their personal assistants. The program's staff should begin requesting copies of W-2 forms in order to confirm that the recipients are fulfilling their responsibility as an employer to provide personal assistants with adequate documentation to file income tax returns as required by law. W-2 forms can also serve as confirmation that a personal assistant has actually received the funds for which the recipient has received reimbursement from the program. This is necessary since the program does not directly issue paychecks to personal assistants, but rather reimburses recipients for the number of personal assistance hours worked during the last two-week pay period. Recipients who are claiming that a particular assistant is working for them should be able to provide an income statement verifying the assistant's employment. **The Legislative Auditor recommends that the RYPAS Board begin requesting copies of W-2 Wage and Tax Statements issued to each personal assistant or assume a more active role in assisting recipients with the completion of the forms legally required from employers.**

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*The program's staff should begin requesting copies of W-2 forms in order to confirm that the recipients are fulfilling their responsibility as an employer to provide personal assistants with adequate documentation to file income tax returns as required by law.*

### **Conclusion**

Since the October 2002 Update to the Preliminary Performance Review of the RYPAS Program, the program has improved its compliance

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with respect to obtaining employer documentation from recipients to ensure their compliance with legal requirements. If the RYPAS Board also began requesting copies of W-2 Wage and Tax Statements issued to each personal assistant, this would further improve the program's ability to document that recipients issue W-2 forms to their personal assistants. W-2 forms are necessary to file income tax returns and document that personal assistants actually received the payments for which the program reimbursed recipients.

**Recommendation:**

6. *The Legislative Auditor recommends that the Ron Yost Personal Assistance Services Board begin requesting copies of W-2 Wage and Tax Statements issued to each personal assistant or assume a more active role in assisting recipients with the completion of the forms legally required from employers.*



# Appendix A: Transmittal Letter to Agency

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## WEST VIRGINIA LEGISLATURE *Performance Evaluation and Research Division*

Building 1, Room W-314  
1900 Kanawha Boulevard, East  
Charleston, West Virginia 25305-0610  
(304) 347-4890  
(304) 347-4939 FAX



John Sylvia  
Director

July 26, 2006

Deborah Lovely, Acting Director  
Division of Rehabilitation Services  
P.O. Box 50890  
Charleston, WV 25305

Dear Ms. Lovely:

This is to transmit a copy of the Preliminary Performance Review of the Ron Yost Personal Assistance Services Program. This report is scheduled to be presented during the August 6-8, 2006 interim meeting of the Joint Committee on Government Operations. We will inform you of the exact time and location once the information becomes available. It is expected that a representative from your agency be present at the meeting to orally respond to the report and answer any questions the committee may have.

We would like to have an exit conference on Monday, July 31, 2006 to discuss any concerns you may have with the report. Please notify us to schedule an exact time. In addition, we need your written response by noon on Thursday, August 3, 2006 in order for it to be in the final report. If your agency intends to distribute additional material to committee members at the meeting, please contact the House Government Organization staff at 340-3192 by Thursday, August 3, 2006 to make arrangements. Thank you for your cooperation.

Sincerely,

Handwritten signature of John Sylvia in cursive script.  
John Sylvia

JS/bb

Enclosure

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*Joint Committee on Government and Finance*

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# Appendix B: Agency Response

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## WEST VIRGINIA DEPARTMENT OF EDUCATION AND THE ARTS DIVISION OF REHABILITATION SERVICES

State Capitol • P.O. Box 50690 • Charleston, West Virginia 25305-0690  
Telephone: (304) 766-4600 • Fax: (304) 766-4671 • Toll-free: 1-800-642-3207  
Web Page: [www.wvdrs.org](http://www.wvdrs.org)

Deborah Lovely, Acting Director

August 2, 2006

Mr. John Sylvia  
Legislative Auditor's Office  
Building 1, Room W-314  
State Capitol  
Charleston, West Virginia 25305

Dear Mr. Sylvia:

This letter is the combined response from the West Virginia Division of Rehabilitation Services and the Ron Yost Personal Assistance Services Program Board to the Preliminary Performance Review of the Ron Yost Personal Assistance Services Program, as performed by the Legislative Auditor's office.

*Issue 1: The Ron Yost Personal Assistance Services Program increases the availability of personal care services within West Virginia and should be continued.*

**Recommendation 1:** The Legislative Auditor recommends that the Legislature continue the Ron Yost Personal Assistance Services Program.

**Response:** WVDRS and the RYPAS Board are pleased that the Legislative Auditor recommends that the Legislature continue the Ron Yost Personal Assistance Program. This program has been very instrumental in assisting individuals to remain in or return to their own homes, with the help provided by their personal assistants.

*Issue 2: If each Ron Yost Personal Assistance Services recipient used all personal assistance hours awarded, annual expenditures would exceed the program's appropriated funding.*

**Recommendation 2:** The Ron Yost Personal Assistance Services Board should award a total number of personal assistance hours that accurately reflect the program's available funding.

**Response:** The RYPAS Board is formulating policy that will address the issue of the unused hours, so that hours are appropriated more accurately and are more fiscally prudent. While it appears that the Board has been

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Mr. John Sylvia  
Page 2  
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awarding excessive hours, one should consider that roll-over funding has been re-appropriated so that more hours are available.

**Recommendation 3:** The Ron Yost Personal Assistance Services Board should consider amending the program's legislative rules to establish a time frame for discontinuing services to recipients who do not hire a personal assistant.

**Response:** The RYPAS Board is developing policy to address this issue. The Board feels that revising current program policy is a more expedient process than re-opening the Legislative rules, and will ultimately have the same results.

*Issue 3: The Legislature should consider requiring that the Ron Yost Personal Assistance Services Program conduct site reviews to recipients' homes to assure that they receive quality care.*

**Recommendation 4:** The Legislative Auditor recommends that the Legislature consider amending West Virginia Code Chapter 18, Article 10L, to require site visits to each recipient's home, on at least an annual basis.

**Response:** WVDRS and the RYPAS Board strongly feel that requiring site visits to all recipients' homes is invasive and is counter to the consumer-directed philosophy of the program. We recognize that there may be situations where an individual may not be receiving the quality of care desired and, for whatever reason, is having difficulty resolving the problems. The intention of the Board is to develop a process by which the recipient can seek assistance from the program staff to resolve said problems. At that time, the recipient can request that a site visit be conducted to further examine and resolve any existing problems.

**Recommendation 5:** The Legislative Auditor recommends that the Legislature consider amending CSR §198-1-6 to increase the percentage of appropriated funds available for administrative costs.

**Response:** We recognize that the administrative cost rate is low. However, it was intentionally set that at that rate in order to direct as much of the funding as possible to direct services. However, if annual site visits are required, the administrative cost rate would have to be increased to accommodate increased expenses.



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Mr. John Sylvia  
Page 3  
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*Issue 4: The submission of documentation required from recipients has improved, but the Ron Yost Personal Assistance Services Program should request copies of W-2 forms issued to personal assistants.*

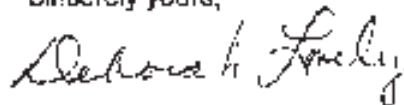
**Recommendation 6:** The Legislative Auditor recommends that the Ron Yost Personal Assistance Services Board begin requesting copies of W-2 Wage and Tax Statements issued to each personal assistant or assume a more active role in assisting recipients with the completion of the forms legally required from employers.

**Response:** The Board agrees with this recommendation and will initiate this requirement immediately.

WVDRS and the RYPAS Board appreciate the time and effort put into this review by your office. As always, such reviews enable WVDRS and the RYPAS Board to look closely at the recommendations and make programmatic changes that will enhance the quality of services to recipients while remaining good stewards of state funds.

Should you have further questions, please do not hesitate to contact me.

Sincerely yours,



Deborah Lovely  
Acting Director

cc: Ann W. Meadows, WV Statewide Independent Living Council  
Jan Lilly Stewart, Chairperson, RYPAS



# Appendix C: List of State-Funded Long-Term Care Programs in Each State

List of State-Funded Long-Term Care Programs in Each State

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Alabama</i>	<i>State of Alabama Independent Living Services</i>	<i>Department of Rehabilitation Services</i>	<i>Physically disabled younger adults</i>	<i>State Funds+ Federal Funds (General Revenue)</i>	<i>Adults 18 and older with financial needs for the Homebound program</i>	<i>Attendant care, counseling, information and referral</i>	<i>Individual budget is \$1,500 per person</i>
<i>Alaska</i>	<i>Respite</i>	<i>Department of Health and Social Services</i>	<i>Elderly, 60 years of age and older with physical disabilities</i>	<i>Mental Health Trust Funds (General Revenue)</i>	<i>No functional status requirement or asset limits</i>	<i>Chore and homemaker services</i>	<i>Family members can be paid to provide care</i>
<i>Alaska</i>	<i>Care Coordination</i>	<i>Department of Health and Social Services</i>	<i>60 years of age and older with physical disabilities, Alzheimer's or related disorders</i>	<i>Mental Health Trust Funds (General Revenue)</i>	<i>No income or asset limits</i>	<i>Case Management Services</i>	<i>Co-Pay on a sliding scale</i>

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Alaska</i>	<i>Adult Day</i>	<i>Department of Social Services</i>	<i>60 years of age and older with physical disabilities, Alzheimer's or related disorders</i>	<i>Mental Health Trust Funds (General Revenue)</i>	<i>No income or asset limits.</i>	<i>Adult care and therapeutic activity programs</i>	<i>Co-pay on a sliding scale</i>
<i>Arizona</i>	<i>State Funded</i>	<i>Department of Economic Security, Division of Developmental Disabilities</i>	<i>Mental Retardation or Developmental Disabilities</i>	<i>General Revenue</i>	<i>People with Developmental Disabilities</i>	<i>All covered on managed care</i>	<i>Consumer direction</i>
<i>Arizona</i>	<i>Arizona Non-Medical Home and Community Based Services</i>	<i>Department of Economic Security, Aging and Adult Administration</i>	<i>60 years of age or older and physically disabled adults</i>	<i>General Revenue</i>	<i>No income or asset limit</i>	<i>Personal care and case management services</i>	<i>Client satisfaction surveys but no consumer direction</i>
<i>Arizona</i>	<i>Tobacco Tax Program</i>	<i>Aging Adult Administration</i>	<i>Elderly</i>	<i>Tobacco Tax and Local Funds</i>	<i>Does not meet Medicaid requirements</i>	<i>Emergency attendant and case management.</i>	<i>Aids and devices paid up to \$1,000 per year</i>
<i>Arkansas</i>	<i>State Aging Services</i>	<i>N/A</i>	<i>Elderly, 60 years and older</i>	<i>General Revenue</i>	<i>Does not meet Medicaid financial requirements</i>	<i>Personal Care, home-maker case management</i>	<i>No-cost caps</i>

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Arkansas</i>	<i>Cigarette Tax</i>	<i>N/A</i>	<i>Elderly, 60 years and older</i>	<i>Tobacco Tax</i>	<i>Does not meet Medicaid financial requirements</i>	<i>Personal care, homemaker and case management</i>	<i>No-cost caps</i>
<i>California</i>	<i>Linkages</i>	<i>Department of Aging</i>	<i>Elderly and physically disabled 18 years of age and older</i>	<i>General Revenue</i>	<i>People who need assistance, no asset limit</i>	<i>Case management and adult day care.</i>	<i>Unknown</i>
<i>California</i>	<i>Adult Day Health Care</i>	<i>Department of Aging</i>	<i>Adults 18 years of age and older</i>	<i>General Revenue</i>	<i>N/A</i>	<i>Respite</i>	<i>No consumer direction</i>
<i>California</i>	<i>Alzheimer's Day Care</i>	<i>Department of Aging</i>	<i>Adults 18 years of age and older with Alzheimer's</i>	<i>General Revenue</i>	<i>Diagnosis of dementia or related disorders</i>	<i>Respite care</i>	<i>No consumer direction</i>
<i>California</i>	<i>Care giver Respite Center</i>	<i>Dept. of Mental Health</i>	<i>Adults 18 years of age and older</i>	<i>General Revenue</i>	<i>Adult onset cognitive disorder</i>	<i>Case management, counseling, and financial consultation</i>	<i>Cap of \$3,600 per year per person</i>
<i>Colorado</i>	<i>Home Care Allowance</i>	<i>N/A</i>	<i>Elderly and the physically disabled</i>	<i>95% State, 5% Counties</i>	<i>N/A</i>	<i>Direct payments for in-home provision</i>	<i>Consumer direction, maximum benefit is \$403 per month</i>
<i>Colorado</i>	<i>Adult Foster Care Program</i>	<i>N/A</i>	<i>Physically or mentally disabled adults 18 years of age and older</i>	<i>N/A</i>	<i>Functional eligibilities requires complete supervision</i>	<i>N/A</i>	<i>N/A</i>

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Colorado</i>	<i>Older Coloradans Fund</i>	<i>Department of Human Services</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>Personal care, home-maker and chore services</i>	<i>No service limits and client satisfaction surveys</i>
<i>Colorado</i>	<i>State Funding for Senior Services</i>	<i>N/A</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet Medicaid eligibility</i>	<i>Personal care, home-maker and chore services</i>	<i>No service limits and client satisfaction surveys</i>
<i>Connecticut</i>	<i>Connecticut Home Care Program for Elders</i>	<i>Department of Social Services</i>	<i>Elderly 65 years of age and older and physically disabled adults</i>	<i>General Revenue</i>	<i>No functional eligibility by asset limit.</i>	<i>Personal care, chore and home-maker services</i>	<i>Consumer direction, cost cap at \$1,033 per month</i>
<i>Connecticut</i>	<i>Statewide Respite Program</i>	<i>Department of Social Services</i>	<i>N/A</i>	<i>General Revenue</i>	<i>Income limit of \$30,000 per year, cannot be covered by Medicaid</i>	<i>Respite support and education</i>	<i>Cap of \$3,500 per year.</i>
<i>Connecticut</i>	<i>Personal Care State Funded</i>	<i>Department of Social Services</i>	<i>Elderly, 65 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>Personal care, chore and home-maker services</i>	<i>Cap of \$4,067 per month. and client satisfaction surveys.</i>
<i>District of Columbia</i>	<i>Senior Services Network</i>	<i>N/A</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>Personal care, home-maker, provide medical equipment</i>	<i>No cost caps, service limits are applied</i>

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Delaware</i>	<i>Community Living Respite</i>	<i>Health and Social Services</i>	<i>Physically disabled adults ages 18-59</i>	<i>General Revenue</i>	<i>Adults of Sussex County living independently but requiring assistance</i>	<i>Personal care, transportation and community activities</i>	<i>Limited to Sussex County</i>
<i>Delaware</i>	<i>Attendant Services</i>	<i>Health and Social Services Division</i>	<i>Physically disabled adults 18 years of age and older</i>	<i>General Revenue</i>	<i>Adults with specific physical criteria</i>	<i>Personal care and transportation</i>	<i>Program was authorized by the state's Medicaid Community Attendant Supports Services Act</i>
<i>Delaware</i>	<i>Assistive Devices</i>	<i>Health and Social Services Division</i>	<i>Physically disabled adults</i>	<i>General Revenue</i>	<i>Devices must promote independent action</i>	<i>Will buy or rent new and used assistive devices</i>	<i>Lifetime cap at \$25,000</i>
<i>Delaware</i>	<i>Alzheimer's Respite</i>	<i>Health and Social Services Division</i>	<i>Adults 45 years of age and older with Alzheimer's Disease</i>	<i>General Revenue</i>	<i>Adults with Disease</i>	<i>In home care</i>	<i>Length of care not to exceed 8 hrs a visit</i>
<i>Delaware</i>	<i>Home Modification</i>	<i>Health and Social Services</i>	<i>Physically Disabled Adults 18 years of age and older</i>	<i>General Revenue</i>	<i>Adults with a permanent or long term disability when no other funding is available</i>	<i>Home modifications</i>	<i>\$10,000 Lifetime cap</i>

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Delaware</i>	<i>Emergency Response System</i>	<i>Health and Social Services Division</i>	<i>Elderly and Physically Disabled</i>	<i>General Revenue</i>	<i>At risk elderly who live alone</i>	<i>A response system is set up for each</i>	<i>N/A</i>
<i>Delaware</i>	<i>Statewide Respite Services</i>	<i>Health and Social Services Division</i>	<i>Elderly</i>	<i>General Revenue</i>	<i>No income or asset limit</i>	<i>Personal care, homemaker and training</i>	<i>Co pay on a sliding scale</i>
<i>Delaware</i>	<i>Alzheimer's Adult Day Service</i>	<i>Health and Social Services Division</i>	<i>Adults with dementia and related disorders</i>	<i>General Revenue</i>	<i>No income or asset limit</i>	<i>Care giver support and day care</i>	<i>N/A</i>
<i>Florida</i>	<i>Community Care for the Elderly</i>	<i>Department of Elder Affairs</i>	<i>Elderly, 60 years of age and older</i>	<i>80% General Revenue, 20% tobacco settlement</i>	<i>Do not meet Medicaid financial eligibility</i>	<i>Personal Care, medical equipment and case management</i>	<i>No cost caps, co-pay on a sliding scale and client satisfaction surveys</i>
<i>Florida</i>	<i>Home care for the Elderly</i>	<i>Department of Elder Affairs</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Do not meet Medicaid financial eligibility</i>	<i>Personal care, meals, homemaker and case management</i>	<i>Consumer direction, no-cost caps client satisfaction surveys</i>
<i>Florida</i>	<i>Alzheimer's Disease Initiative</i>	<i>Department of Elder Affairs</i>	<i>Adults 18 years of age and older with dementia or related disorder</i>	<i>General Revenue and Tobacco Settlement Funds</i>	<i>Do not meet Medicaid financial eligibility and diagnosed with dementia</i>	<i>Personal care, homemaker, financial consultation, meals, home modification</i>	<i>No cost caps, co-pay on a sliding scale and client satisfaction surveys</i>



<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Florida</i>	<i>Contracted Services</i>	<i>Department of Elder Affairs</i>	<i>Elderly, 60 years of age or older</i>	<i>General Revenue</i>	<i>N/A</i>	<i>Adult Day Care, homemaker services</i>	<i>No co-pay required, in 3 counties only</i>
<i>Florida</i>	<i>Respite for Elders Living in Everyday Families</i>	<i>Department of Elder Affairs</i>	<i>Elderly, 60 years of age with dementia</i>	<i>General Revenue</i>	<i>Homebound people when traditional assistance not available</i>	<i>Chore, homemaker, training and financial consultation.</i>	<i>Limit 4 hours per week</i>
<i>Georgia</i>	<i>Community-based Services Program</i>	<i>Department of Human Resources</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>Personal Care, meals, and transportation</i>	<i>No cost caps, no service limits, co-pay on a sliding scale</i>
<i>Georgia</i>	<i>State Funded Alzheimer's Program</i>	<i>Department of Human Resources</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>Personal Care and homemaker services</i>	<i>No cost caps, no service limits, co-pay on a sliding scale</i>
<i>Georgia</i>	<i>Income Tax Check-Off Fund</i>	<i>Dept. of Human Resources</i>	<i>Elderly 60+</i>	<i>Dedicated Income Taxes</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>Meals and transportation.</i>	<i>No cost caps or service limits.</i>
<i>Hawaii</i>	<i>Kipuna Care</i>	<i>Executive Office on Aging</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>Personal care, case management and transportation</i>	<i>Cost cap at \$1,000 per month, co pay on sliding scale, client satisfaction surveys</i>

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Idaho</i>	<i>Family Support and In-Home Assistance</i>	<i>Department of Health and Welfare</i>	<i>Children and adults with developmental disabilities</i>	<i>N/A</i>	<i>Funding is used after all other funding sources have been used</i>	<i>Meals, medical and dental care, therapy</i>	<i>Consumer Directed, individual budget at \$250 per month</i>
<i>Idaho</i>	<i>Senior Services Act</i>	<i>Commission on Aging</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet the Medicaid financial eligibility</i>	<i>Personal care, case management, homemaker, emergency response</i>	<i>Consumer directed, no cost caps, no service limits, client satisfaction surveys</i>
<i>Illinois</i>	<i>Home Delivered Meals</i>	<i>Department of Aging</i>	<i>60 years of age and older, housebound, frail and disabled</i>	<i>General Revenue</i>	<i>No income or asset limit</i>	<i>Meals</i>	<i>N/A</i>
<i>Illinois</i>	<i>Community Care Program</i>	<i>Department of Aging</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Individuals can be in receipt of Medicaid HCBS services</i>	<i>Case management and homemaker services</i>	<i>Cost caps, no service limits, co-pay on a sliding scale</i>
<i>Indiana</i>	<i>Community and Home Options to Institutional Care for the Elderly</i>	<i>Family and Social Services Administration</i>	<i>Elderly, 65 years of age or older and physically disabled adults</i>	<i>General Revenue</i>	<i>Does not meet the Medicaid financial eligibility</i>	<i>Homemaker, chore services, and case management</i>	<i>Cost cap at \$2,286 per month, co-pay on a sliding scale, consumer direction and a customer satisfaction survey</i>

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Iowa</i>	<i>Elderly Services</i>	<i>Department of Elder Affairs</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>Personal care, homemaker, chore services, case management and transportation</i>	<i>Consumer direction, no cost caps and no service limits</i>
<i>Iowa</i>	<i>Senior Living Program</i>	<i>Department of Elder Affairs</i>	<i>Elderly, 60 years of age and older</i>	<i>Trust Fund</i>	<i>Does not meet the Medicaid financial eligibility</i>	<i>Personal care, homemaker, chore services and case management</i>	<i>No cost caps, no service limits and consumer direction.</i>
<i>Kansas</i>	<i>Senior Care Act</i>	<i>Department of Aging</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet the Medicaid financial eligibility</i>	<i>Personal care, chore services, emergency response, homemaker and transportation</i>	<i>Cost cap at \$1,445 per month, no service limits, consumer directed</i>
<i>Kansas</i>	<i>Income Eligible Program</i>	<i>Department of Aging</i>	<i>Elderly, 60 years of age and older</i>	<i>General revenue</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>In home services</i>	<i>N/A</i>

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Kansas</i>	<i>In-Home Nutrition Program</i>	<i>Department of Aging</i>	<i>Elderly</i>	<i>General Revenue</i>	<i>Individuals who are moderately to severely impaired</i>	<i>Meals</i>	<i>N/A</i>
<i>Kansas</i>	<i>State Funded Case Management</i>	<i>Department of Aging</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>N/A</i>	<i>Case Management</i>	<i>N/A</i>
<i>Kansas</i>	<i>State-Funded Custom Care</i>	<i>Department of Aging</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>N/A</i>	<i>Services to meet individually assessed needs</i>	<i>N/A</i>
<i>Kansas</i>	<i>State Funded Environmental Modification</i>	<i>Department of Aging</i>	<i>Elderly</i>	<i>General Revenue</i>	<i>N/A</i>	<i>Home modification</i>	<i>N/A</i>
<i>Kentucky</i>	<i>Supported Living Program</i>	<i>Mental Health and Retardation Board</i>	<i>Adults with defined disabilities</i>	<i>N/A</i>	<i>Individuals determine own needs</i>	<i>One time home modification</i>	<i>Apply direct to Regional Board</i>
<i>Kentucky</i>	<i>Home care Program</i>	<i>Cabinet for Health Services</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>Personal care, chore services and transportation</i>	<i>No cost caps, service limits</i>

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Kentucky</i>	<i>Personal Care Attendant Program</i>	<i>Cabinet for Health Services</i>	<i>Adults with severe disabilities</i>	<i>General Revenue</i>	<i>At risk for nursing home and need at least 14-40 hours per week</i>	<i>Personal care and transportation.</i>	<i>Financial subsidy to clients to hire and supervise personal care and consumer direction</i>
<i>Kentucky</i>	<i>Adult Day Care and Alzheimer's Respite Program</i>	<i>Department of Medicaid Services</i>	<i>Adults with Alzheimer's Disease or dementia</i>	<i>General Revenue</i>	<i>Diagnosis of dementia or related disorder</i>	<i>Personal care, chore services and transportation services</i>	<i>Co pay on a sliding scale, therapeutic program providing supervision and care for 24 hours</i>
<i>Louisiana</i>	<i>Nutrition/meals</i>	<i>N/A</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>No income or asset limit</i>	<i>Meals</i>	<i>N/A</i>
<i>Louisiana</i>	<i>Transportation</i>	<i>N/A</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>No income or asset limit</i>	<i>Transportation</i>	<i>N/A</i>
<i>Louisiana</i>	<i>Home-maker</i>	<i>N/A</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>No income or asset limit</i>	<i>N/A</i>	<i>N/A</i>

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Maine</i>	<i>Home Based Care</i>	<i>Department of Human Services</i>	<i>Elderly 60 years of age and older and physically disabled adults 18 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>Personal care, homemaker, meals, modifications and transportation</i>	<i>Caps based on functional need, service limits, co-pay on sliding scale, and client satisfaction surveys</i>
<i>Maine</i>	<i>Home Based Care: Consumer Directed</i>	<i>Department of Human Services</i>	<i>Elderly 60 years of age and older plus physically disabled adults 18 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>Personal care and adult day care</i>	<i>Consumer directed</i>
<i>Maine</i>	<i>Homemaker Services</i>	<i>Department of Human Services</i>	<i>60 years of age and older</i>	<i>General Revenue</i>	<i>Needs help with house-keeping, no income limit</i>	<i>Chore services, homemaker, meals</i>	<i>Co-pay 20% service cost</i>
<i>Maine</i>	<i>Adult Day Services</i>	<i>Department of Human Services</i>	<i>60 years of age and older</i>	<i>General Revenue</i>	<i>No income limit, assets less than \$50,000</i>	<i>Adult Day Care</i>	<i>Co-pay 20% service cost</i>
<i>Maine</i>	<i>Alzheimer's Respite</i>	<i>Department of Human Services</i>	<i>Adults 60 years of age or older with dementia</i>	<i>N/A</i>	<i>Dementia diagnosis, no income limit</i>	<i>Respite</i>	<i>Co-pay 20% of costs</i>
<i>Massachusetts</i>	<i>Statewide Head Injury Program</i>	<i>Rehabilitation Commission</i>	<i>Anyone with Brain Injury</i>	<i>N/A</i>	<i>N/A</i>	<i>Family assistance, therapy</i>	<i>Community supports are available but very limited</i>

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Massachusetts</i>	<i>Home Care Assistance Program</i>	<i>Rehabilitation Commission</i>	<i>Adults with physical disabilities 18-59</i>	<i>N/A</i>	<i>Functional impairment, lives alone</i>	<i>Homemaker services no personal care</i>	<i>Maximum 12 hours per week, consumer directed</i>
<i>Massachusetts</i>	<i>Home Care Program</i>	<i>Office of Elder Affairs</i>	<i>Elderly 60 years of age and older, adults 18 of age and older with a diagnosis of dementia</i>	<i>General Revenue</i>	<i>Do not meet the Medicaid financial eligibility</i>	<i>Personal care, meals, homemaker, chore services and transportation</i>	<i>No service limits, capped monthly payments, consumer direction, co-pay</i>
<i>Michigan</i>	<i>Personal Assistance Services Reimbursement for Employment</i>	<i>Michigan Department of Career Development</i>	<i>Working, disabled adults</i>	<i>N/A</i>	<i>N/A</i>	<i>Personal assistance in the workplace</i>	<i>Service limits applied to \$1,000 per month.</i>
<i>Michigan</i>	<i>Physical Disabilities Program</i>	<i>Department of Community Health</i>	<i>All adults subject to funding available</i>	<i>N/A</i>	<i>N/A</i>	<i>Home Modifications</i>	<i>N/A</i>
<i>Michigan</i>	<i>State/Escheat Respite</i>	<i>Office of Services to the Aging</i>	<i>Elderly, 60 years of age and older</i>	<i>Blue Cross/Blue Shield Escheat funds</i>	<i>No functional status</i>	<i>Respite</i>	<i>Statewide</i>
<i>Michigan</i>	<i>Care giver Respite Program</i>	<i>Office of Services to the Aging</i>	<i>Care givers of adults 18 years of age and older with a medical disability</i>	<i>Tobacco settlement fund</i>	<i>No functional status</i>	<i>Respite, transport</i>	<i>Statewide</i>

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Michigan</i>	<i>Personal Care</i>	<i>N/A</i>	<i>60 years of age and older</i>	<i>General Revenue</i>	<i>No income or asset limit</i>	<i>N/A</i>	<i>N/A</i>
<i>Michigan</i>	<i>Home-maker</i>	<i>N/A</i>	<i>60 years of age and older</i>	<i>General Revenue</i>	<i>No income or asset limit</i>	<i>N/A</i>	<i>N/A</i>
<i>Michigan</i>	<i>Adult Day Care</i>	<i>N/A</i>	<i>Elderly, 60 years of age and older with disabilities</i>	<i>Revenue from unclaimed property, tobacco settlement</i>	<i>No income or asset limit</i>	<i>N/A</i>	<i>N/A</i>
<i>Michigan</i>	<i>In-Home Respite</i>	<i>N/A</i>	<i>Elderly, 60 years of age and older adults with disabilities</i>	<i>Revenue from unclaimed property and tobacco settlements</i>	<i>No income or asset limit</i>	<i>N/A</i>	<i>N/A</i>
<i>Michigan</i>	<i>Care Management</i>	<i>N/A</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>No income or asset limit</i>	<i>N/A</i>	<i>N/A</i>
<i>Minnesota</i>	<i>Alternative Care</i>	<i>Department of Human Services</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet financial eligibility requirements of Medicaid</i>	<i>Personal care, case management, chore services, homemaker</i>	<i>Consumer directed</i>
<i>Minnesota</i>	<i>Non-waiver Minnesota Home Care</i>	<i>Department of Human Services</i>	<i>Elderly</i>	<i>N/A</i>	<i>N/A</i>	<i>Home care</i>	<i>N/A</i>
<i>Minnesota</i>	<i>Senior Nutrition</i>	<i>Department of Human Services</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>No income or asset limit</i>	<i>N/A</i>	<i>N/A</i>



<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Minnesota</i>	<i>Care giver support</i>	<i>N/A</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>No income or asset limit</i>	<i>N/A</i>	<i>N/A</i>
<i>Nebraska</i>	<i>Respite Subsidy Program</i>	<i>Department of Human Services</i>	<i>N/A</i>	<i>General Revenue and tobacco settlement funds</i>	<i>Income limit \$2,304 per month</i>	<i>Respite</i>	<i>Family members can get paid to provide services</i>
<i>Nebraska</i>	<i>Case Management</i>	<i>Health and Human Services</i>	<i>N/A</i>	<i>General Revenue</i>	<i>No income or asset limit</i>	<i>N/A</i>	<i>Co-pay on sliding scale</i>
<i>Nebraska</i>	<i>Disabled Persons and Family Support</i>	<i>Health and Human Services</i>	<i>Elderly and physically disabled</i>	<i>General Revenue</i>	<i>Does not meet the financial requirements of Medicaid</i>	<i>Personal care, meals and transportation</i>	<i>Consumer directed</i>
<i>Nevada</i>	<i>In-Home Personal Assistance</i>	<i>Dept. of Employment and Rehabilitation</i>	<i>Adults with disabilities</i>	<i>N/A</i>	<i>People at risk for nursing home</i>	<i>Personal care</i>	<i>Wait list of 166 people</i>
<i>Nevada</i>	<i>AT Loan Program</i>	<i>Dept. of Employment and Rehabilitation</i>	<i>N/A</i>	<i>Nevada State Bank</i>	<i>N/A</i>	<i>Clients borrow money to by devices for independent living</i>	<i>Total max loan is \$1,600</i>
<i>Nevada</i>	<i>TTY Distribution Program</i>	<i>Dept. of Employment and Rehabilitation</i>	<i>N/A</i>	<i>Surcharge on phone access line</i>	<i>No waiting list</i>	<i>Free telecommunication devices for speech and hearing impairment</i>	<i>N/A</i>

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Nevada</i>	<i>Independent Living Services</i>	<i>Department of Human Resources</i>	<i>Care receiver age 60 years of age and older</i>	<i>Tobacco Fund</i>	<i>No functional status required</i>	<i>Personal care, chore services, financial consultations</i>	<i>Consumer driven, monthly site visits</i>
<i>Nevada</i>	<i>Community Based Care giving Training</i>	<i>Department of Human Resources</i>	<i>N/A</i>	<i>General Revenue</i>	<i>No functional status</i>	<i>Education</i>	<i>N/A</i>
<i>New Hampshire</i>	<i>Family Supports Services</i>	<i>Family Support Councils</i>	<i>Mental Retardation and Developmental Disabilities</i>	<i>N/A</i>	<i>Aimed at support for families not served under the Developmental Disability waiver and supplement services</i>	<i>Informational, referral and respite</i>	<i>Amount of duration and scope of services is more limited than the waiver services</i>
<i>New Jersey</i>	<i>Statewide Respite Care Program</i>	<i>Department of Health and Senior Services</i>	<i>Care givers of adults 18 years of age and older with physical disabilities</i>	<i>Casino revenue</i>	<i>Aims to delay nursing home</i>	<i>Respite, homemaker, private duty nursing</i>	<i>Cap at \$3,000 per person, co pay on a sliding scale</i>
<i>New Jersey</i>	<i>Jersey Assistance for Community Care giving</i>	<i>Department of Health and Human Services</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Eligible for Medicaid waiver</i>	<i>Personal Care, adult day care</i>	<i>Cost cap \$7,200 per year</i>

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>New Jersey</i>	<i>Adult Day Services Program for Persons with Alzheimer's Disease</i>	<i>Department of Health and Human Services</i>	<i>Adults 18 years of age and older with Alzheimer's</i>	<i>Casino Revenue</i>	<i>Diagnosis of dementia or related disorders</i>	<i>Respite, education</i>	<i>Co-pay on a sliding scale, income limit is \$3,270 per month</i>
<i>New Jersey</i>	<i>Home-Delivered Meals</i>	<i>Department of Health and Senior Services</i>	<i>N/A</i>	<i>Casino Revenue</i>	<i>No income limit</i>	<i>N/A</i>	<i>N/A</i>
<i>New Jersey</i>	<i>Congregate Housing Program</i>	<i>Department of Health and Senior Services</i>	<i>N/A</i>	<i>Casino Revenue</i>	<i>Income limit \$930 per month</i>	<i>Personal Care and homemaker services</i>	<i>Co-pay on a sliding scale</i>
<i>New Mexico</i>	<i>State General Developmental Disabilities Program</i>	<i>Department of Health</i>	<i>Adults with Mental Retardation and Developmental Disabilities</i>	<i>General Revenue</i>	<i>Must not be on the waiver list</i>	<i>Vocational services and respite care</i>	<i>N/A</i>
<i>New Mexico</i>	<i>Multi Service Group</i>	<i>N/A</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>Personal care, homemaker and chore services</i>	<i>No cost caps</i>
<i>New Mexico</i>	<i>Indian Area Agency on Aging</i>	<i>Indian Area Agency on Aging</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>No income or asset limit</i>	<i>Personal care, homemaker and chore services</i>	<i>No cost caps, no service limits</i>

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>New Mexico</i>	<i>Navajo Area Agency</i>	<i>Navajo Area Agency on Aging</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>No income or asset limit</i>	<i>Homemaker, meals, transportation</i>	<i>No cost caps, no service limits</i>
<i>New York</i>	<i>Community Services for the Elderly</i>	<i>NYC Department for Aging</i>	<i>Elderly</i>	<i>General Revenue</i>	<i>Low income elderly living at home</i>	<i>Adult day care, case management, personal care</i>	<i>N/A</i>
<i>New York</i>	<i>Long Term Home Health Care Program</i>	<i>Sullivan County Social Services</i>	<i>Elderly, 60 years of age and older</i>	<i>Local Funds</i>	<i>Case management, meals, transportation.</i>	<i>Counties determine eligibility</i>	<i>Costs must be less than nursing home</i>
<i>New York</i>	<i>Expanded In-home Services for the Elderly</i>	<i>Department of Health Office for the Aging</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet the need for Medicaid financial eligibility</i>	<i>Personal care, homemaker and case management</i>	<i>Site visits, no cost caps, no service limits, co-pay on a sliding scale</i>
<i>New York</i>	<i>Respite Program</i>	<i>Department of Health, Office for the Aging</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>N/A</i>	<i>Personal Care, respite and case management</i>	<i>Not statewide</i>
<i>New York</i>	<i>Supplemental Nutrition Program</i>	<i>Department of Health, Office for the Aging</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>No income or asset limit</i>	<i>N/A</i>	<i>N/A</i>
<i>North Carolina</i>	<i>Respite Care Program</i>	<i>Department of Health and Human Services</i>	<i>Adults, 18 years of age and older</i>	<i>General Revenue</i>	<i>Physically disabled or diagnosis of dementia</i>	<i>Chore, personal care</i>	<i>No cost caps and service limits</i>

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>North Carolina</i>	<i>Home and community Care Block Grant</i>	<i>Division of Aging and Adult Services</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Do not meet the Medicaid financial eligibility</i>	<i>Personal care, homemaker, case management</i>	<i>No service limits</i>
<i>North Dakota</i>	<i>Service Payments for the Elderly</i>	<i>Department of Human Services</i>	<i>Elderly, physically disabled</i>	<i>95% General revenue, 5% county funds</i>	<i>Must be ineligible for waivers</i>	<i>Chore services, homemaker, PAS</i>	<i>N/A</i>
<i>North Dakota</i>	<i>Expanded Payment for Elderly</i>	<i>Department of Human Services</i>	<i>Elderly and physically disabled adults</i>	<i>General Revenue</i>	<i>Eligible for Medicaid.</i>	<i>Case management, chore, homemaker, PAS</i>	<i>N/A</i>
<i>North Dakota</i>	<i>Family Home Care</i>	<i>Department of Human Services</i>	<i>Adults, 18 years of age and older</i>	<i>General Revenue</i>	<i>3 or more Daily Living Services</i>	<i>Cash grants, respite</i>	<i>Respite cap at \$550 per month</i>
<i>Ohio</i>	<i>Senior Options</i>	<i>County Office on Aging</i>	<i>Elderly, 60 years of age and older</i>	<i>County property taxes</i>	<i>Seniors with monthly incomes below \$1,000</i>	<i>Personal care, homemaker and respite services</i>	<i>Site visits and operates only in one county</i>
<i>Ohio</i>	<i>Alzheimer's Respite Program</i>	<i>Department of Aging</i>	<i>N/A</i>	<i>General Revenue</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>Chore services, adult day care</i>	<i>No cost caps, can be consumer directed, family members can be paid</i>

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<i>Ohio</i>	<i>Senior Community Services Block Grant</i>	<i>Department of Development</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>No income or asset limit.</i>	<i>Personal Care, respite and transportation</i>	<i>No cost caps, no service limits and site visits</i>
<i>Oklahoma</i>	<i>Respite Resource Network</i>	<i>Department of Human Services</i>	<i>Elderly, 60 years of age or older with dementia and physically disabled</i>	<i>General Revenue</i>	<i>Diagnosis of dementia or related disorder</i>	<i>Respite</i>	<i>Respite cap \$1,600 per year. Consumer direction</i>
<i>Oklahoma</i>	<i>Adult Day Care</i>	<i>Aging Services</i>	<i>60 years of age or older and physically disabled</i>	<i>General Revenue</i>	<i>Income limit \$739 month/ no asset limit</i>	<i>N/A</i>	<i>N/A</i>
<i>Oregon</i>	<i>Project Independence</i>	<i>Department of Human Services</i>	<i>Elderly, 60 years of age and older adults with dementia.</i>	<i>General Revenue</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>Personal care, transportation and home modification</i>	<i>No cost caps, no service limits, no co-pay and consumer direction</i>
<i>Oregon</i>	<i>Oregon Spousal Pay Program</i>	<i>Department of Human Services</i>	<i>Physically disabled cared for by relatives</i>	<i>General Revenue</i>	<i>Eligible for Medicaid</i>	<i>Same services as waiver but care provided by spouses</i>	<i>N/A</i>

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<i>Pennsylvania</i>	<i>Options Program</i>	<i>Department of Aging</i>	<i>Elderly and physically disabled</i>	<i>State Lottery and general revenue</i>	<i>Does not meet financial need for Medicaid</i>	<i>Chore services, personal care, and home modification services</i>	<i>Cost cap at \$625 per month, no service limits, co-pay on a sliding scale and consumer directed</i>
<i>Pennsylvania</i>	<i>Bridge Program</i>	<i>Department of Aging</i>	<i>Elderly, 60 years of age or older</i>	<i>Tobacco settlement</i>	<i>Must have gross monthly income of less than \$1,656</i>	<i>Meals, personal care and transportation</i>	<i>Consumer directed</i>
<i>Pennsylvania</i>	<i>Attendant Care Program</i>	<i>Department of Aging</i>	<i>Elderly, 59 years of age and older, adults with disabilities 18-59</i>	<i>N/A</i>	<i>No financial eligibility requirement</i>	<i>Personal care</i>	<i>Consumer directed</i>
<i>Pennsylvania</i>	<i>Family Care giver Support Program</i>	<i>Department of Aging</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet the Medicaid financial eligibility</i>	<i>Case management, respite, care givers may receive \$200 per month</i>	<i>Cost cap \$200 per month, consumer directed, on site analysis</i>
<i>Pennsylvania</i>	<i>Risk Reduction</i>	<i>N/A</i>	<i>Elderly, 60 years of age and older</i>	<i>Tobacco Fund</i>	<i>Income limit is \$923 per month</i>	<i>N/A</i>	<i>N/A</i>
<i>Rhode Island</i>	<i>Respite Care</i>	<i>Department of Elderly Affairs</i>	<i>Elderly, 60 years of age and older adults with Alzheimer's</i>	<i>General Revenue</i>	<i>No income or asset limit</i>	<i>N/A</i>	<i>Co pay on sliding scale</i>

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Rhode Island</i>	<i>Co pay program</i>	<i>Department of Elderly Affairs</i>	<i>Elderly, 65 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>Adult day care</i>	<i>No cost caps, service limits such as 20 hours of home care per week</i>
<i>South Carolina</i>	<i>Alternative Care for the Elderly</i>	<i>N/A</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue dedicated from taxes on Bingo</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>Case Management, homemaker and meals</i>	<i>No cost caps, no service limits, co pay on sliding scale</i>
<i>South Dakota</i>	<i>Long Term Care Alternatives Program</i>	<i>Department of Social Services</i>	<i>Elderly and physically disabled adults</i>	<i>General Revenue</i>	<i>No income limit, asset limit \$40,000.</i>	<i>Personal care, homemaker, respite, case management.</i>	<i>Cost caps at \$850 per month, co pay on a sliding scale</i>
<i>Tenn.</i>	<i>Options for Community Living Program</i>	<i>Commission on Aging and Disability</i>	<i>Elderly and adults with disabilities</i>	<i>N/A</i>	<i>Not eligible for Medicaid</i>	<i>Personal care, homemaker, meals</i>	<i>Co pay on sliding scale, 2,521 on waiting list</i>
<i>Texas</i>	<i>Respite Care</i>	<i>Department of Human Services</i>	<i>Adults with dementia 18 years of age and older</i>	<i>General Revenue</i>	<i>Diagnosis of dementia</i>	<i>Chore, homemaker and personal care services</i>	<i>Service limits applied</i>



<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Texas</i>	<i>Multi Service Group</i>	<i>N/A</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>Personal care, chore services and case management services</i>	<i>No cost caps, service limits applied</i>
<i>Utah</i>	<i>Home and Community Based Alternatives Program</i>	<i>Department of Human Services</i>	<i>Elderly, 60 years of age and older who are physically disabled adults</i>	<i>General Revenue</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>Chore services, adult day care and home modification services</i>	<i>Cost cap at \$750 per month. Annual site monitoring</i>
<i>Vermont</i>	<i>Attendant Services Program</i>	<i>Department of Aging</i>	<i>Elderly and physically disabled adults</i>	<i>General Revenue</i>	<i>Medicaid eligible</i>	<i>Personal Care</i>	<i>Consumer directed, clients hire, train and supervise</i>
<i>Vermont</i>	<i>The Homemaker Program</i>	<i>Department of Aging and Disabilities</i>	<i>Elderly and physically disabled adults</i>	<i>General revenue</i>	<i>No income or asset limit</i>	<i>Homemaker</i>	<i>Co pay on a sliding scale</i>
<i>Vermont</i>	<i>Housing and Supportive Services Program</i>	<i>Department of Aging and Disabilities</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>Adult Day Care, homemaker, chore services and personal care services</i>	<i>Consumer directed, no cost caps, no service limits, client satisfaction survey</i>
<i>Virginia</i>	<i>Transportation</i>	<i>Department on Aging</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>No income or asset limit</i>	<i>N/A</i>	<i>Co pay on a sliding scale.</i>

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Virginia</i>	<i>Community Based Services Program</i>	<i>Department on Aging</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>No income or asset limit</i>	<i>Personal care, home-maker and chore services</i>	<i>Co-pay required</i>
<i>Virginia</i>	<i>State Funded Personal Assistance Services</i>	<i>Division of Rehabilitation Services</i>	<i>Adults with physical disabilities</i>	<i>General Revenue</i>	<i>Do not qualify for other services</i>	<i>N/A</i>	<i>Consumer directed</i>
<i>Virginia</i>	<i>Respite Care Initiative</i>	<i>Department of Aging</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>Diagnosis of dementia</i>	<i>Chore services, home-maker and personal care services</i>	<i>N/A</i>
<i>Virginia</i>	<i>Respite Care Grant Program</i>	<i>Department of Aging</i>	<i>N/A</i>	<i>General Revenue</i>	<i>Nursing home level of care</i>	<i>Respite care and transportation.</i>	<i>N/A</i>
<i>Virginia</i>	<i>Home Delivered Meals</i>	<i>Department of Aging</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>No income or asset limit</i>	<i>N/A</i>	<i>Co-pay on a sliding scale</i>
<i>Washington</i>	<i>Chore Services Program</i>	<i>Aging and Adult Services Administration</i>	<i>Elderly and physically disabled</i>	<i>N/A</i>	<i>Does not qualify for Medicaid</i>	<i>Chore and personal care</i>	<i>Consumer direction and co-pay on a sliding scale</i>
<i>Washington</i>	<i>Residential Care Program</i>	<i>Aging Adult Services Administration</i>	<i>Elderly and physically disabled</i>	<i>N/A</i>	<i>Does not qualify for Medicaid</i>	<i>Chore and personal care services</i>	<i>Co-pay on a sliding scale and consumer direction</i>

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Washington</i>	<i>Family Care giver Support Program</i>	<i>Department of Social Services</i>	<i>Adults with dementia</i>	<i>General Revenue</i>	<i>Not eligible for Medicaid due to income</i>	<i>Personal Care, chore services and transportation</i>	<i>No cost caps, service limits and client surveys</i>
<i>Washington</i>	<i>Respite Care Program</i>	<i>Department of Social Services</i>	<i>Physically disabled adults 18 years of age and older</i>	<i>General revenue</i>	<i>Diagnosis of Dementia</i>	<i>Respite</i>	<i>Consumer direction, co-pay on a sliding scale</i>
<i>West Virginia</i>	<i>Ron Yost Personal Assistance Services</i>	<i>Division of Rehabilitation Services</i>	<i>Physically disabled adults</i>	<i>General Revenue</i>	<i>Disabled, ineligible for other services</i>	<i>Personal care</i>	<i>Consumer directed, pay on a sliding scale.</i>
<i>West Virginia</i>	<i>WV Family Support Program</i>	<i>Bureau for Behavioral Health Services</i>	<i>Families with a child or adult with Developmental Disabilities</i>	<i>State appropriation and private donation</i>	<i>Family support council reviews applications</i>	<i>Funds for goods and home modifications</i>	<i>Average expenditure per family is \$1,000</i>
<i>West Virginia</i>	<i>Community Care Program</i>	<i>Bureau for Senior Services</i>	<i>Adults over 18</i>	<i>State Lottery</i>	<i>No income or asset level</i>	<i>Medicaid Eligible</i>	<i>Co-pay on a sliding scale.</i>
<i>Wisconsin</i>	<i>Community Options Program</i>	<i>Department of Health and Family Services</i>	<i>Elderly, physically disabled</i>	<i>General Revenue</i>	<i>Individuals who will likely become Medicaid eligible</i>	<i>Personal care, transportation and chore services</i>	<i>No cost caps, no service limits, consumer direction</i>
<i>Wisconsin</i>	<i>Family support program</i>	<i>Department of Health and Family Services</i>	<i>Families with a child with severe disabilities</i>	<i>N/A</i>	<i>Children under 21 with severe mental and physical disabilities</i>	<i>Funding for goods and services</i>	<i>N/A</i>

<i>State</i>	<i>Program Name</i>	<i>Agency</i>	<i>Population Served</i>	<i>Funding Source</i>	<i>Eligibility Criteria</i>	<i>Services Provided</i>	<i>Further Information</i>
<i>Wisconsin</i>	<i>Alzheimer Family and Care giver Support</i>	<i>Department of Health and Family Services</i>	<i>N/A</i>	<i>General Revenue</i>	<i>Diagnosis of dementia or related disorder</i>	<i>Personal care, homemaker, home modifications and chore services</i>	<i>Respite cap at \$4,000 per year</i>
<i>Wisconsin</i>	<i>Elderly Nutrition</i>	<i>Department of Health and Family Services</i>	<i>Elderly, 60 years of age and older</i>	<i>General Revenue</i>	<i>No income or asset level.</i>	<i>N/A</i>	<i>N/A</i>
<i>Wyoming</i>	<i>State Child Respite Program</i>	<i>Department of Developmental Disabilities</i>	<i>Children with Developmental Disabilities</i>	<i>State and co pay</i>	<i>Under 21 with severe chronic disabilities</i>	<i>Respite</i>	<i>Co-pay</i>
<i>Wyoming</i>	<i>Community based in home Services</i>	<i>Department of Health</i>	<i>Elderly, 60 years of age and older or physically disabled adults 18 years of age and older</i>	<i>General Revenue</i>	<i>Does not meet Medicaid financial eligibility</i>	<i>Personal care, chore services and home modifications</i>	<i>No cost caps, service limits, co-pay, consumer directed</i>

*Source: The Center for Personal Assistance Services at the University of California at San Francisco*



