

## 2020 Supplemental Budget Proposal Comparison — Feb. 24, 2020

The following compares the Senate and House supplemental budgets that were both released Feb. 24, 2020. The chart lists state funds and total funds, which includes the state fund and federal (or other) funds. We have indicated the items that WSHA actively supports. This budget analysis contains the following sections:

- WSHA hospital/health system top budget priorities
- Other health care items
- Mental health
- Substance use disorder and addressing the opioid crisis
- Work groups and reports

### WSHA Hospital / Health System Top Budget Priorities

Item	House	Senate	WSHA position
<p><b>Improve process for hospitalized patients needing post-acute care (SB 6275 WSHA-supported bill).</b> (DSHS) The bill requires:</p> <ul style="list-style-type: none"> <li>• DSHS staff to complete functional and financial long-term services and supports assessments within 10 to 20 business days.</li> <li>• Development of specialty contracts to prioritize long length of stay hospital patients placement in community settings.</li> <li>• A new exception to rule process.</li> <li>• HCA/DSHS to seek federal presumptive eligibility waiver.</li> <li>• WSIPP analysis of DSHS tool used for functional eligibility</li> <li>• Conduct studies regarding patients who remain in a hospital setting due to barriers in accessing community alternatives.</li> </ul>	Not funded	<p>DDA: \$4.2 million state, \$8.5 million total funds</p> <p>ALTSA: \$4.3 million state, \$8.5 million total funds</p> <p>WSIPP: \$172,000 state only funds</p>	<p>Support Senate budget</p> <p>(disappointed studies and reports not fully funded)</p>
<p><b>Intensive outpatient/partial hospitalization</b> (HCA). Funding is provided for intensive outpatient treatment programs and partial hospitalization as Medicaid services under the state plan, beginning Jan. 1, 2021. Acute care or psychiatric hospital may provide treatment for patients discharged from inpatient psychiatric facilities. Funding is only for youth programs.</p>	Not funded	\$1.9 million in state funds, \$5.2 million total funds.	Support: Prefer Senate budget

<p><b>90- and 180-inpatient psychiatric bed rate methodology.</b> Sufficient amounts are provided in fiscal year 2021 for the authority to reimburse community hospitals serving Medicaid clients in long-term inpatient care beds as defined in RCW 71.24.025, however House and Senate differ on the rate methodology (see notes in the respective columns).</p>	<p>Budget proviso: For acute care and psych hospitals with costs that exceed current psych rates, a new rate at 100% of costs based on most recent cost report. For acute care and psych hospitals with costs not exceeding their current psych rate based on cost report, rate is increased by 5%. Only one year of funding provided.</p> <p>The authority shall provide a report on the impact of the rate increase in FY21 on bed capacity and utilization for both long-term and short-term beds, but December 1, 2020.</p>	<p>Budget proviso: Adopt the methodology in the HCA's Dec. 2019 report. Acute care hospitals – 100% of costs per cost report; psych hospitals - \$995 per day.</p> <p>The authority shall provide a final plan that identifies the rate increases beyond June 2020 to the legislature by December 31, 2020.</p>	<p>Support: Prefer Senate budget language that follows HCA work group report recommendations</p>
<p><b>Psychiatric Hospital Enforcement (DOH).</b> Funding is provided to implement SHB 2426 (new psychiatric regulatory structure).</p>	<p>\$724,000 state funds only</p>	<p>\$746,000 state funds only</p>	<p>Support</p>
<p><b>Health System Transparency.</b> (DOH). Funding to implement HB 2036, which would increase financial reporting requirements of hospitals to the Department of Health.</p>	<p>\$184,000 state funds only</p>	<p>Not funded</p>	<p>Oppose</p>
<p><b>Prior Authorization Data.</b> Funding to the Office of the Insurance Commissioner to pay for data collection for the prior authorization workgroup in WSHA supported SB 6404.</p>	<p>Not funded</p>	<p>\$15,000 state funds only</p>	<p>Support</p>
<p><b>Health Care Cost Board.</b> (OIC &amp; HCA) Funding to participate on the Health Care Cost Transparency Board in HB 2457.</p>	<p><b>HCA:</b> \$611,000 state funds, \$611,000 total funds <b>OIC:</b> \$0 state funds, \$23,000 total funds</p>	<p>Not funded</p>	<p>Neutral</p>

## Other Health Care Items

Item	House	Senate	WSHA position
<b>Primary Care Provider Rate Increase.</b> Funding is provided for rate increases for primary care and vaccine services for Medicaid patients	\$14.5 million state funds, \$43.6 million total (25% increase for primary care and vaccine services)	\$9.9 million state funds, \$30 million total (15% increase to primary care, 21% increases to pediatric/neonate critical care)	Support
<b>COVID-19 Outbreak Response.</b> (DOH) One-time funding to cover the costs associated with a dedicated call center and monitoring cases of COVID-19, including one-time costs incurred by Local Health Jurisdictions.	\$5 million other funds	\$5 million state funds, \$7 million total funds	Support
<b>Enhanced Community Residential Services Rate.</b> (DSHS) To increase the rate for DDA community residential service providers.	Not funded	\$4.9 million state funds, \$9.6 million total funds	Support Senate
<b>Nursing Home Rates.</b> (DSHS) Funding to cover expected nursing home costs and three-year inflationary rate increase.	\$25.7 million state funds, \$50.2 million total funds	\$33.6 million state, \$66 million total	Support Senate
<b>Home Health Rates.</b> (HCA) Funding to increase home health rates in three annual, equal increments beginning Jan. 1, 2021 to ramp up to 75 percent of Medicare costs.	\$770,000 state funds, \$1.6 million total funds.	\$770,000 state funds, \$1.6 million total funds	Support
<b>Hospital Transitions.</b> (DSHS) Funding to state AAA coordinators in acute care hospitals to facility timely discharge.	\$1.9 million state funds only	Not funded	Support
<b>Rural Health Clinic Reconciliations.</b> One-time funding is provided for rural health clinic reconciliations for calendar years 2014 through 2017.	\$34.1 million state funds, \$40 million total funds	\$34.1 million state funds, \$40 million total funds	Support
<b>AAA Case Management.</b> (DSHS) Funding for Area Agency on Aging case managers to serve in-home clients with mental health needs.	\$1.6 million state, \$3.5 million total funds (27 case managers)	\$1.5 million state, \$2.9 million total funds (23 case managers)	Support
<b>Nursing home rates for PHDs.</b> (HCA) Funding for supplemental payments to nursing homes operated by public hospital districts.	\$1 million total funds	Not funded	Support House

<b>Developmental Disabilities Administration capacity.</b> (DSHS) To increase services for 300 individuals through the Basic Plus and Individual and Family Services waivers and to update the no-paid services caseload count.	Not funded	\$1.4 million state funds, \$2.6 million total funds	Support Senate
<b>SOLA Expansion.</b> Funding to increase capacity of state-operated living alternatives.	\$1.5 million state funds, \$2.9 million total funds	2021-2023: \$50 million total funds	Support
<b>Post-Partum Coverage.</b> (HCA) Beginning Jan. 1, 2021, funding is provided to extend postpartum coverage for pregnant and parenting persons from 60 days to one year, pursuant to E2SSB 6128	Not funded	\$3.7 million state funds, \$3.7 million total funds	Support Senate
<b>Health Homes Rate Increase.</b> (DSHS) Funding to increase rates to serve dually eligible Medicare-Medicaid clients.	Not funded	\$1.4 million state funds, \$2.8 million total funds	Support Senate
<b>SMA Newborn Screening.</b> (DOH) Funding is provided to increase the test fee to support the Newborn Screening Laboratory to conduct blood sample testing for spinal muscular atrophy, per its addition to the newborn screening list in 2019 by the State Board of Health.	\$6,000 state funds, \$366,000 total funds	\$6,000 state funds, \$366,000 total funds	Support
<b>Partnership Access Line Program.</b> (HCA) Funding to continue the partnership access line for pregnant women and mothers.	\$510,000 state funds, \$586,000 total funds	\$511,000 state, \$1 million total funds	Support
<b>Telemedicine Training.</b> (UW). Funding is provided to implement SSB 6061 (promoting telemedicine training in schools).	Not funded	\$60,000 state funds, \$60,000 total funds	Support Senate
<b>Public Option.</b> (HCA) Funding and 1 FTE to plan and administer new annual procurement effort to secure new QHPs on the HBE.	\$558,000 state funds only	\$558,000 state funds only	Support
<b>Medicaid Quality Improvement Program.</b> (HCA). Funding is appropriated for payments to Apple Health managed care organizations and partnering providers to reinforce delivery of quality health care and support community health.	\$0 state funds, \$239 million total funds	\$68.8 million	AWPHD Supports House
<b>LNI Healthcare Employees Investigations – HB 1155.</b> (LNI + AGO) Funding provided for legal services and complaint investigation to implement HB 1155 passed in 2019. Implementation of the new requirements in HB 1155 for meal and rest breaks and overtime for certain health care employees began in 2020.	LNI: \$395,000 other funds AGO: \$44,000 other funds	LNI: \$351,000 other funds	Support

<b>Training for Sexual Assault Nurse Examiners.</b> Funding to the University of Washington to increase training for sexual assault nurse examiners in rural areas and web-based services.	\$300,000 state funds only	Not funded	Support House
<b>Criminal Investigation Practices and Unreported Sexual Assault Kits.</b> (State Patrol) Funding to implement storage and preservation for sexual assault kits (HB 2318). Unreported kits would be transported and stored by local law enforcement, rather than hospitals.	\$34,000 state funds only	Not funded	Support House
<b>Lowering Tobacco and Vapor Product Use in 18-20 Year-Olds.</b> (DOH) Funding provided for tobacco and vape product cessation support services for youth aged 18-20, in compliance with WA's recent Tobacco-21 law.	\$989,000 state funds only	Not funded	Support House

### Mental Health

Item	House	Senate	WSHA position
<b>Involuntary Treatment Act</b> (HCA). Funding is provided to implement 2E2SSB 5720 (Involuntary Treatment Act).	Not funded	\$1.3 million one-time state funds, \$4 million total funds	Strong concerns – this is far less than the \$2.5M-\$3.4M HCA estimates 5720 will cost to implement.
<b>MH Waiver for Evaluation and Support.</b> (HCA). One-time funding to support the submittal of a mental health IMD waiver to CMS to allow longer stays in IMD settings to be covered by Medicaid.	\$776,000 state funds, \$4.4 million total funds	\$540,000 state funds, \$1.83 million total funds	Support
<b>BHO Rate Adjustment for CY 21.</b> (HCA). Funding to account for assumed increases in managed care rates for CY 21 and 22 for behavioral health services.	Not funded	\$25 million state funds, \$75 million total funds	Support Senate
<b>BH-ASO Reserve Funding.</b> (HCA). Funding for a one-time basis for reserve funding for ASOs providing crisis service and state-only funding in three regions transitioning to funding integration.	Not funded	\$2.4 million state funds, \$2.4 million total funds	Support Senate
<b>Recruitment and Crisis Training.</b> (DSHS). Funding to increase recruitment efforts and crisis training at Western State Hospital.	\$2.9 million state funds only	Not funded	Support House

<b>Behavioral Health Primary Care Provider Rate Increase.</b> Funding is provided to increase professional rates by 25% for behavioral health services provided to Medicaid patients.	\$3 million state funds, \$8.3 million total funds	Not funded	Support House
<b>Behavioral Health Workforce Investments.</b> (DOH + HCA). One-time funding for HCA to develop strategies to promote behavioral health workforce development efforts, and for DOH to establish a reciprocity program for behavioral health professionals.	HCA: \$50,000 state funds, \$100,000 total funds; DOH: \$0 state funds, \$227,000 total funds	DOH: \$0 state funds, \$227,000 total funds (Only BH reciprocity program funded)	Support House

### Substance Use Disorder and Addressing the Opioid Crisis Budget Items

Item	House	Senate	WSHA position
<b>Ambulance Cost for Secure Detox.</b> (HCA). People under Ricky's Law must be safely transported to secure withdrawal facility. Medicaid does not cover downtime while ambulance crew waits.	\$328,000 state funds, \$328,000 total funds	\$846,000 state funds only	Support
<b>Substance Use Disorder Coverage.</b> (HCA + OIC). Funding to implement HB 2642, which would expand SUD coverage for certain services. Funding includes increases in Medicaid managed care organization capitation rates in the HCA budget, and funding for the OIC associated with implementing these changes.	\$766,000 state funds, \$2.3M total funds (HCA) \$71,000 other funds (OIC)	Not funded	Support House
<b>Prescription Drug Monitoring Program.</b> (HCA + DOH). Funding to continue supporting the initiative to reduce prescription drug abuse and misuse.	HCA: Not funded DOH: \$48,000 in other funds only	HCA: \$0 state funds, \$1.13 million in total funds DOH: \$48,000 in other funds	Support Senate
<b>Substance Use Disorder Professions.</b> (DOH). Funding for DOH to continue their work in modernizing substance use disorder professional practice, per ESHB 1768 passed in 2019.	\$14,000 state funds, \$908,000 total funds	\$14,000 state funds, \$908,000 total funds	Support
<b>Secure Drug Take Back Program.</b> (DOH). Authorizes DOH to spend funds received through the Safe Medication Return/Drug Take-Back program.	\$0 state funds, \$1 million total funds	\$0 state funds, \$1 million total funds	Support
<b>Chemical Dependency Bed Expansion.</b> (DOC). Funding to add 34 Residential Drug Offense Sentencing Alternative and intensive inpatient chemical dependency beds in the community.	\$2.2 million state funds only	\$2.2 million state funds only	Support

### Work Groups and Reports

Item	House	Senate	WSHA position
<b>DD Continuum of Care Workgroup.</b> (DSHS). Funding to establish a Joint Executive and Legislative Task Force to address service delivery for individuals residing in residential habilitation centers, including those with complex behavioral needs.	Not funded	\$180,000 state funds, \$300,000 total funds	Support Senate
<b>Model Sexual Assault Protocols for Hospitals.</b> (AGO). Funding to implement SB 6158, which would create sexual assault community task force to establish model protocols for supporting victims of sexual assault seeking care at hospitals or clinics.	Not funded	\$59,000 state funds only	Support Senate
<b>Death with Dignity Study.</b> (DOH & UW). Funding to study barriers to the use of the Washington Death with Dignity Act.	\$200,000 state funds only	Not funded	Support House
<b>Mental Health Advance Directive Workgroup.</b> Funding is provided to establish workgroup to look at the current use of the directives and make recommendations.	Not funded	\$97,000 state funds only	Support
<b>Children’s Mental Health Workgroup.</b> (HCA). Funding to continue the workgroup.	\$139,000 state funds only	Not funded	Support House