

## 2021-23 Proposed Senate Operating Budget — March 25, 2021

The Senate is the first chamber to release its 2021-2023 budget. The following details are in the Senate’s proposed 2021-23 budget, which was released on March 25, 2021.

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
- COVID-19 Response
- Difficult to Discharge Funding
- Other Health Care Issues (such as Medicaid, low-income health care, etc.)
- Behavioral health, including mental health, substance use and addressing the Opioid Crisis
- Other Important items
- Capital Budget (Senate and House)

### WSHA Hospital / Health System Top Budget Priorities

Item	Senate Proposal (3/25/21)	WSHA Position
<b>Specialty dementia care</b> rate add-on of \$10 per client per day	\$2.4 million state (\$5.99 million total)	Strong Support (WSHA supports add-on, but not funded at requested rate)
Funding adjustment to reflect anticipated utilization for <b>long-term psychiatric services</b> in community hospitals. Also includes proviso language that establishes a rate methodology.	\$15.8 million state (\$29.4 million total)	Support
<b>Expand intensive outpatient / partial hospitalization pilot program</b>	\$1.8 million state (\$1.8 million total)	Support

## COVID-19 Response

Item	Senate Proposal (3/25/21)	WSHA Position
<b>Hospital surge placements</b> to create community capacity for long-term care clients discharging from acute care hospitals during COVID pandemic. Includes: <ul style="list-style-type: none"> <li>• 65 geriatric specialty beds</li> <li>• 20 noncitizen beds</li> <li>• 120 specialized dementia care beds</li> </ul>	DSHS: \$8.5 million state (\$15.1 million total) HCA: \$923,000 state (\$923,000 total)	Strong support (WSHA strong advocated for surge funding)
<b>COVID temporary LTC rate increases</b>	\$41.1 million state (\$142.8 million total)	
<b>COVID-19 testing and tracing grants</b>	\$900 million total	Support
<b>Grant for preparation and deployment of COVID-19 vaccines</b>	\$100 million total	Support
Federal grant funding to increase <b>public health workforce</b> to response to COVID-19 pandemic	\$100 million total	Support
<b>Support for HIV clients</b> to increase local spending authority to comply with federal RWCA for those living with HIV/AIDS	\$26.85 million total	

## Difficult to Discharge

Item	Senate Proposal (3/25/21)	WSHA Position
<b>Support of Transitional Care Center of Seattle</b> , DSHS owned nursing home, for difficult-to-place patients from hospitals.	\$22.3 million state (\$46.2 million total)	Strong support
<b>Transition patients from psychiatric hospitals</b> to community settings, including specialized dementia and enhanced adult residential care placements	\$7 million state (\$14.6 million total)	Strong support
<b>Add 29 slots for non-citizens</b> discharging from acute care hospitals to long term care, added during COVID surge	\$4.8 million state (\$4.8 million total)	Strong support
<b>Increased personal care</b> for clients whose need is due to psychiatric disability, provided via MCOs	\$13.6 million state (\$14 million total)	Strong support
<b>Expand and enhance home and community-based services</b>	\$84.9 million state (\$230 million total)	Support
<b>Dementia</b> - Staffing at dementia action collaborative and dementia specialty services at two AAAs	\$1.98 million state (\$1.9 million total)	Support
<b>AAA case management</b>	\$3.1 million state (\$7.6 million total)	Support

<b>Community living grants</b> for community-based services	\$13.95 million total	Support
<b>Assisted living facility rates</b>	\$1.98 million state (\$4.3 million total)	Support
<b>Rebase nursing home rate methodology</b>	\$29.6 million state (\$61.7 million total)	Support
<b>Residential Care Services</b> backlog	\$1.7 million state (\$4.2 million total)	Support
<b>Personal care services in homeless shelters pilots</b> in Pierce, King, Clark, and Spokane Counties	\$790,000 state (\$790,000 total)	Support
<b>Home care</b> administrative rate increase	\$527,000 state (\$1.4 million total)	Support
<b>Long Term Services and Supports Trust</b> implementation	\$8.1 million total	Neutral
<b>Enhance behavioral health personal care</b> in long-term care	\$12.3 million state	Support
<b>Transition clients</b> from acute care hospitals to state-operated facility on the Rainier School campus	\$3.95 million state (\$4.4 million total)	Support
<b>Relocate residents from Rainier School</b> - establish 3 SOLA homes, 71 supported living beds, and 19 AFH beds to	\$22.9 million state (\$49 million total)	Neutral

#### Other Health Care

<b>Item</b>	<b>Senate Proposal (3/25/21)</b>	<b>WSHA Position</b>
<b>Extending postpartum Medicaid coverage</b> for low-income women	\$230,000 state (\$857,000 total)	Support
<b>Foundational public health</b>	\$150 million state	Support
<b>Adult and pediatric primary care provider and pediatric critical care provider rate increases</b>	\$56.2 million state (\$145.6 million total)	Support
<b>Family planning services</b> funding to help service providers	\$550,000 state	
Ongoing maintenance and support of core <b>public health data systems</b> (federal funds) and ongoing maintenance and support for <b>prescription monitoring program</b> (state funds)	\$3.49 million state (\$22.36 million total)	
<b>Operation and expansion of WWAMI medical school program</b>	\$16.9 million state	
<b>Paramedic training</b> program at the University of Washington	\$450,000 state	
<b>WSU Spokane Medical School</b> development	\$36.8 million state	
<b>Universal Developmental Screening</b> to be completed in fall 2021 to capture newborn screening data across all providers	\$1.03 million state	
<b>Online Hepatitis B telehealth training</b> development	\$30,000 state	

Implement recommendations from 2018 <b>community health workers</b> task force	\$800,000 state	
<b>Adult dental services</b> provider rate increase	\$21.4 million state (\$76 million total)	
Funding for staffing and contracting costs for <b>state generic drug purchasing</b> (ESSB 5203)	\$1.3 million state	
<b>1115 Medicaid Transformation - one year extension</b> Medicaid Quality Improvement Program (MQIP) Long Term Supports (funded by MQIP) Foundational Community Supports (funded by MQIP)	\$342.3 million total \$53.6 million total \$73.2 million total	
<b>Creating a Universal Health Care Commission</b>	\$950,000 state (\$950,000 total)	Neutral

Behavioral Health, incl. Mental health, Substance Use, and Opioid Response

<b>Item</b>	<b>Senate Proposal (3/25/21)</b>	<b>WSHA Position</b>
<b>Reducing seven civil commitment wards</b> in state hospitals	--\$75.7 million (\$81.9 million total)	<b>Opposed to ward closures without corresponding beds available and serving patients in the community</b>
<b>Expand inpatient treatment capacity</b> in community behavioral health facilities	\$13.5 million state (\$34.4 million total)	Support
<b>Investments in state run inpatient or residential beds,</b> including <ul style="list-style-type: none"> <li>• 29-bed forensic ward expansion at Western state (FY 2022)</li> <li>• 30-bed facility – Maple Lane (July 2023)</li> <li>• 16-civil bed facility – Maple Lane (Nov 2022)</li> <li>• Regional treatment center in Vancouver, with 16 state-run beds and 32 contracted beds</li> </ul>	\$ million state (\$ million total), including <ul style="list-style-type: none"> <li>• \$27.4 million state</li> <li>• \$4.3 million state</li> <li>• \$6.5 million state (\$11.6 million total)</li> <li>• \$3 million state (\$5.9 million total)</li> </ul>	<b>Support, although it is not clear if the regional treatment center and the new 30-bed state run facility are intended for civil patients. WSHA will advocate that they should be as a balance to state ward closures.</b>
<b>Planning and technological investments for bed and service tracking:</b> <ul style="list-style-type: none"> <li>• Bed tracker system</li> <li>• Medication Assisted Treatment (MAT) tracking</li> <li>• Funds for HIT costs for implementing IMD waiver</li> </ul>	\$687,000 state (\$3.2 million total), including: <ul style="list-style-type: none"> <li>• \$220,000 state (\$840,000 total)</li> <li>• \$260,000 total</li> <li>• \$207,000 state (\$2.1 million total)</li> </ul>	Other

<b>Community behavioral health provider rate increase</b>	\$6.5 million state (\$17.5 million total)	Support
<b>Behavioral health services for children, youth and women</b> including: <ul style="list-style-type: none"> <li>• <b>Partnership Access Lines and Mental Health Referral Service for Children (HB 2728/HB 1325)</b></li> <li>• Youth prevention services</li> <li>• Child assessment &amp; diagnosis</li> <li>• Behavioral health for those in juvenile rehabilitation</li> <li>• Mental health consultation for infant and early childhood consultants</li> <li>• Behavioral health services for pregnant/parenting women</li> </ul>	\$16.6 million state (\$ 19.9 total) including: <ul style="list-style-type: none"> <li>• \$2.9 million total</li> <li>• \$3.3 million state/total</li> <li>• \$3 million state (\$3.2 million total)</li> <li>• \$5.6 million state/total</li> <li>• \$2.5 million total</li> <li>• \$1.3 million state/total</li> </ul>	Support
<b>Suicide prevention</b> , multi-agency, implement recommendations of the Action Alliance for Suicide Prevention	\$5.6 million	Support
<b>Opioid response</b> , including: <ul style="list-style-type: none"> <li>• Opioid overdose medication in EDs and behavioral health settings (SB 5195)</li> <li>• Grants to Tribes for prevention and treatment</li> <li>• Tribal residential facilities SUD rates</li> <li>• Secure drug/safe medication return</li> </ul>	\$21.1 million state (\$24.2 million total), including: <ul style="list-style-type: none"> <li>• \$1.3 million state (\$4.4 million total)</li> <li>• \$3 million state</li> <li>• \$15.7 million total</li> <li>• \$1.1 million total</li> </ul>	Support
<b>Crisis response</b> , including: <ul style="list-style-type: none"> <li>• Safe station pilot program to divert people with substance use disorder (SB 5074)</li> <li>• Adding mobile crisis response teams</li> <li>• Youth mobile crisis teams</li> <li>• Adding mental health practitioner to crisis teams</li> <li>• Behavioral health respite</li> </ul>	\$18.5 million state (\$22 million total), including: <ul style="list-style-type: none"> <li>• \$395,000 state (\$1.15 million total)</li> <li>• \$8 million state</li> <li>• \$7.9 million state (\$10.5 million total)</li> <li>• \$2 million state</li> <li>• \$150,000 state</li> </ul>	Support
<b>Non-medical services and supports, including:</b> <ul style="list-style-type: none"> <li>• Peer run support programs for community and school-based MH education and support programs</li> </ul>	\$5.6 million state (\$5.9 million total), including: <ul style="list-style-type: none"> <li>• \$500,000 state</li> </ul>	Support

<ul style="list-style-type: none"> <li>• SUD Peer support/recruitment</li> <li>• SUD Family navigators</li> <li>• Housing subsidies for people discharge from inpatient SUD treatment</li> <li>• Transition teams for state hospital patients (SB 5071)</li> </ul>	<ul style="list-style-type: none"> <li>• \$1.7 million state</li> <li>• \$1 million state</li> <li>• \$2.2 million state</li> <li>• \$132,000 state (\$330,000 total)</li> </ul>	
<b>Supportive housing</b> expansion for people chronic homelessness, complex behavioral health and co-occurring substance use	\$20 million total	Support
<b>Psychiatry Residency Program</b> at the University of Washington	\$3 million state	Support
<b>Child and Adolescent Psychiatry Residency Program</b> at the University of Washington	\$1 million state	Support
<b>Supports for forensic patients</b> requiring competency, restoration, housing (required by Trueblood litigation)	\$26 million state (\$28.6 total)	Support
<b>Reimbursement-based savings and investments</b> , including <ul style="list-style-type: none"> <li>• A 10% increase in state's FMAP for Medicaid home and community-based services (temporary)</li> <li>• Home and community-based services</li> </ul>	<ul style="list-style-type: none"> <li>• \$54.3 million in savings state</li> <li>• \$58.5 million in spend (\$158 million total)</li> </ul>	

## Other Important Items

Item	Senate Proposal (3/25/21)	WSHA Position
<b>Uniform guardianship act</b> implementation at courts	\$8 million state (\$8 million total)	Support
<b>Health Emergency Labor Standards Act</b> (SB 5115)	\$1.8 million state	WSHA amended to improve
<b>Health Care Worker Benefits</b> (SB 5190)	\$1.6 million state/ \$16.3 million federal	WSHA amended to improve
<b>LNI rulemaking</b> regarding state guidelines for infectious disease outbreak	\$624,000	
<b>Sexual Assault Kit Initiative Project</b> funding to continue investigations (funds shifted to the 2021-2023 biennium)	\$1.5 million state	Support

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## 2021-23 Proposed House Capital Budget (March 24) and Senate Capital Budget (March 25)

### Behavioral Health - Community Investments

Item	House Proposal (3/24/21)	Senate Proposal (3/25/21)	WSHA Position
<b>Competitive grants for community hospitals and freestanding E&amp;T facilities to increase capacity for patients on 90- and 180-day civil commitment orders (not an IMD facility).</b>	<b>\$18 million</b>	<b>\$18 million</b>	Strongly Support
Enhanced adult residential care facilities for long-term patients with dementia discharged/diverted from state psych hospitals (not an IMD facility).	\$14.5 million	\$6.6 million	Support
At least 1 facility with secure withdrawal management and stabilizing treatment beds (not an IMD facility).	\$2 million	\$4 million	Support
At least 1 crisis triage and stabilization facility (not an IMD facility).	\$2 million	\$700,000	Support
2 16-bed crisis triage and stabilization facilities in King County (with one in Seattle and one in South King County), per Trueblood settlement	\$8 million	\$8 million	Support
At least 2 mental health peer respite centers (not an IMD facility)	\$3.1 million	\$1.05 million	Support
House: At least 3 intensive behavioral health treatment facilities for long-term placement of behavioral health patients with complex needs. Senate: For at least 1 intensive behavioral health treatment facilities for long-term placement of behavioral health patients with complex needs.	\$9.4 million	\$4.7 million	Support
Grants for community providers to increase behavioral health services to children and minor youth.	\$2 million	\$700,000	Support

### Behavioral Health - State Facilities

Item	House Proposal (3/24/21)	Senate Proposal (3/25/21)	WSHA Position
UW Behavioral Health Teaching Hospital (150 beds)	\$191.3 million	\$191.3 million	Support
Design of 350-bed forensic hospital at WSH	\$51 million	\$51 million	Support
Construction of 48-bed state-owned, mixed-use, community civil behavioral health facility - Clark County	\$37.7 million	--	Support

Renovations for two wards for treatment and recovery, WSH	\$16.6 million	\$16.6 million	Support
Construction 16-bed state-operated, community civil behavioral health facility – Maple Lane	\$15.2 million	\$15.2 million	Support
Renovations at Child Study and Treatment Center, WSH and ESH	\$7 million	--	Support
Renovation – Columbia Cottage in Maple Lane. Operates as 30-bed satellite for WSH to serve patients found not guilty by reason in insanity.	\$5 million	\$5 million	Support