SUBSTITUTE HOUSE BILL 2069

State of Washington63rd Legislature2013 1st Special SessionBy House Appropriations
Hunter and Sullivan)(originally sponsored by Representatives

READ FIRST TIME 06/06/13.

1 AN ACT Relating to continuation of safety net benefits for persons 2 determined to have a physical or mental disability which makes them eligible for the aged, blind, and disabled program under RCW 74.62.030 3 4 or the essential needs and housing program under RCW 43.185C.220; amending RCW 74.62.030, 43.185C.220, and 43.185C.230; reenacting and 5 amending RCW 74.09.510, 74.09.035, and 74.09.010; adding a new section 6 7 to chapter 74.04 RCW; creating a new section; and providing a contingent effective date. 8

9 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

10 Sec. 1. RCW 74.62.030 and 2011 1st sp.s. c 36 s 3 are each amended 11 to read as follows:

12 (1)(a) Effective November 1, 2011, the aged, blind, or disabled 13 assistance program shall provide financial grants to persons in need 14 who:

(i) Are not eligible to receive federal aid assistance, other than
 basic food benefits transferred electronically and medical assistance;

17 (ii) Meet the eligibility requirements of subsection (3) of this 18 section; and (iii) Are aged, blind, or disabled. For purposes of determining
 eligibility for assistance for the aged, blind, or disabled assistance
 program, the following definitions apply:

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(A) "Aged" means age sixty-five or older.

5 (B) "Blind" means statutorily blind as defined for the purpose of 6 determining eligibility for the federal supplemental security income 7 program.

(C) "Disabled" means a bodily or mental infirmity that will (I) 8 likely continue for a minimum of nine months; (II) prevent the 9 individual from currently performing work that the individual was able 10 to perform as a substantial gainful activity within the prior ten 11 12 years; and (III) is otherwise likely to meet the federal supplemental 13 security income disability standard as determined by the department. 14 making this determination, the department should give full In 15 consideration to the cumulative impact of an applicant's multiple impairments, an applicant's age, and vocational and educational 16 17 history.

18 In determining whether a person is disabled, the department may 19 rely on, but is not limited to, the following:

20 (I) A previous disability determination by the social security 21 administration or the disability determination service entity within 22 the department; or

(II) A determination that an individual is eligible to receive
 optional categorically needy medicaid as a disabled person under the
 federal regulations at 42 C.F.R. Parts 435, Secs. 201(a)(3) and 210.

(b) The following persons are not eligible for the aged, blind, ordisabled assistance program:

(i) Persons who are not able to engage in gainful employment due 28 29 primarily to alcohol or drug addiction. These persons shall be 30 referred to appropriate assessment, treatment, shelter, or supplemental security income referral services as authorized under chapter 74.50 31 32 RCW. Referrals shall be made at the time of application or at the time of eligibility review. This subsection may not be construed to 33 prohibit the department from granting aged, blind, or disabled 34 assistance benefits to 35 alcoholics and drug addicts who are 36 incapacitated due to other physical or mental conditions that meet the 37 eligibility criteria for the aged, blind, or disabled assistance 38 program; or

(ii) Persons for whom there has been a final determination of
 ineligibility for federal supplemental security income benefits.

3 (c) Persons may receive aged, blind, or disabled assistance 4 benefits pending application for federal supplemental security income 5 benefits. The monetary value of any aged, blind, or disabled 6 assistance benefit that is subsequently duplicated by the person's 7 receipt of supplemental security income for the same period shall be 8 considered a debt due the state and shall by operation of law be 9 subject to recovery through all available legal remedies.

10 (2) Effective November 1, 2011, the pregnant women assistance11 program shall provide financial grants to persons who:

(a) Are not eligible to receive federal aid assistance other thanbasic food benefits or medical assistance; and

(b) Are pregnant and in need, based upon the current income and resource standards of the federal temporary assistance for needy families program, but are ineligible for federal temporary assistance for needy families benefits for a reason other than failure to cooperate in program requirements; and

19 (c) Meet the eligibility requirements of subsection (3) of this 20 section.

(3) To be eligible for the aged, blind, or disabled assistance
program under subsection (1) of this section or the pregnant women
assistance program under subsection (2) of this section, a person must:

(a) Be a citizen or alien lawfully admitted for permanent residence
or otherwise residing in the United States under color of law;

26 (b) <u>Meet the income and resource standards described in section</u> 27 <u>2(1) (d) and (e) of this act;</u>

28 (c) Have furnished the department his or her social security 29 number. If the social security number cannot be furnished because it 30 has not been issued or is not known, an application for a number shall 31 be made prior to authorization of benefits, and the social security 32 number shall be provided to the department upon receipt;

(((c))) (d) Not have ((not)) refused or failed without good cause to participate in drug or alcohol treatment if an assessment by a certified chemical dependency counselor indicates a need for such treatment. Good cause must be found to exist when a person's physical or mental condition, as determined by the department, prevents the person from participating in drug or alcohol dependency treatment, when

needed outpatient drug or alcohol treatment is not available to the person in the county of his or her residence or when needed inpatient treatment is not available in a location that is reasonably accessible for the person; and

5 (((d))) (<u>e</u>) Not have refused or failed to cooperate in obtaining
6 federal aid assistance, without good cause.

7 (4) Effective November 1, 2011, referrals for essential needs and
8 housing support under RCW 43.185C.220 shall be provided to persons
9 found eligible ((for medical care services under RCW 74.09.035 who are
10 not recipients of alcohol and addiction services provided under chapter
11 74.50 RCW or are not recipients of aged, blind, or disabled
12 assistance)) under section 2 of this act.

13 (5) No person may be considered an eligible individual for benefits 14 under this section with respect to any month if during that month the 15 person:

16 (a) Is fleeing to avoid prosecution of, or to avoid custody or 17 confinement for conviction of, a felony, or an attempt to commit a 18 felony, under the laws of the state of Washington or the place from 19 which the person flees; or

(b) Is violating a condition of probation, community supervision, or parole imposed under federal or state law for a felony or gross misdemeanor conviction.

(((6) The department must review the cases of all persons, except recipients of alcohol and addiction treatment under chapter 74.50 RCW, or recipients of aged, blind, or disabled assistance, who have received medical care services for twelve consecutive months, and at least annually after the first review, to determine whether they are eligible for the aged, blind, or disabled assistance program.))

29 <u>NEW SECTION.</u> Sec. 2. A new section is added to chapter 74.04 RCW
30 to read as follows:

31 (1) The department is responsible for determining eligibility for 32 referral for essential needs and housing support under RCW 43.185C.220. 33 Persons eligible are persons who:

(a) Are incapacitated from gainful employment by reason of bodily
 or mental infirmity that will likely continue for a minimum of ninety
 days. The standard for incapacity in this subsection, as evidenced by

the ninety-day duration standard, is not intended to be as stringent as
 federal supplemental security income disability standards;

3 (b) Are citizens or aliens lawfully admitted for permanent 4 residence or otherwise residing in the United States under color of 5 law;

6 (c) Have furnished the department their social security number. If 7 the social security number cannot be furnished because it has not been 8 issued or is not known, an application for a number must be made prior 9 to authorization of benefits, and the social security number must be 10 provided to the department upon receipt;

(d) Have countable income as described in RCW 74.04.005 at or below four hundred twenty-eight dollars for a married couple or at or below three hundred thirty-nine dollars for a single individual;

14 (e) Do not have countable resources in excess of those described in 15 RCW 74.04.005; and

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(f) Are not eligible for:

17 (i) The aged, blind, or disabled assistance program;

18 (ii) The pregnant women assistance program; or

(iii) Federal aid assistance, other than basic food benefitstransferred electronically and medical assistance.

(2) The following persons are not eligible for a referral foressential needs and housing support:

23 (a) Persons who are unemployable due primarily to alcohol or drug 24 addiction, except as provided in subsection (3) of this subsection. These persons must be referred to appropriate assessment, treatment, 25 26 supplemental security income referral services shelter, or as 27 authorized under chapter 74.50 RCW. Referrals must be made at the time of application or at the time of eligibility review. This subsection 28 29 may not be construed to prohibit the department from making a referral 30 for essential needs and housing report for persons who have a substance abuse addiction who are incapacitated due to other physical or mental 31 32 conditions that meet the eligibility criteria for a referral for essential needs and housing support. 33

34 (b) Persons who refuse or fail to cooperate in obtaining federal35 aid assistance, without good cause;

36 (c) Persons who refuse or fail without good cause to participate in 37 drug or alcohol treatment if an assessment by a certified chemical 38 dependency counselor indicates a need for such treatment. Good cause

1 must be found to exist when a person's physical or mental condition, as 2 determined by the department, prevents the person from participating in 3 drug or alcohol dependency treatment, when needed outpatient drug or 4 alcohol treatment is not available to the person in the county of his 5 or her residence or when needed inpatient treatment is not available in 6 a location that is reasonably accessible for the person; and

7 (d) Persons who are fleeing to avoid prosecution of, or to avoid 8 custody or confinement for conviction of, a felony, or an attempt to 9 commit a felony, under the laws of the state of Washington or the place 10 from which the person flees; or who are violating a condition of 11 probation, community supervision, or parole imposed under federal or 12 state law for a felony or gross misdemeanor conviction.

13 (3) For purposes of determining whether a person is incapacitated 14 from gainful employment under subsection (1) of this section:

15 (a) The department shall adopt by rule medical criteria for 16 incapacity determinations to ensure that eligibility decisions are 17 consistent with statutory requirements and are based on clear, 18 objective medical information; and

(b) The process implementing the medical criteria must involve consideration of opinions of the treating or consulting physicians or health care professionals regarding incapacity, and any eligibility decision which rejects uncontroverted medical opinion must set forth clear and convincing reasons for doing so.

(4) For purposes of reviewing a person's continuing eligibility and in order to remain eligible for the program, persons who have been found to have an incapacity from gainful employment must demonstrate that there has been no material improvement in their medical or mental health condition. The department may discontinue benefits when there was specific error in the prior determination that found the person eligible by reason of incapacitation.

(5) The department must review the cases of all persons who have received benefits under the essential needs and housing support program for twelve consecutive months, and at least annually after the first review, to determine whether they are eligible for the aged, blind, or disabled assistance program.

36 Sec. 3. RCW 43.185C.220 and 2011 1st sp.s. c 36 s 4 are each 37 amended to read as follows:

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1 (1) The department shall distribute funds for the essential needs 2 and housing support program established under this section in a manner 3 consistent with the requirements of this section and the biennial 4 operating budget. The first distribution of funds must be completed by 5 September 1, 2011. Essential needs or housing support is only for 6 persons found eligible for such services under ((RCW 74.62.030(4))) 7 section 2 of this act and is not considered an entitlement.

8 (2) The department shall distribute funds appropriated for the 9 essential needs and housing support program in the form of grants to 10 designated essential needs support and housing support entities within 11 each county. The department shall not distribute any funds until it 12 approves the expenditure plan submitted by the designated essential 13 needs support and housing support entities. The amount of funds to be distributed pursuant to this section shall be designated in the 14 15 biennial operating budget. For the sole purpose of meeting the initial distribution of funds date, the department may distribute partial funds 16 17 upon the department's approval of a preliminary expenditure plan. The 18 department shall not distribute the remaining funds until it has 19 approved a final expenditure plan.

20 (3)(a) During the 2011-2013 biennium, in awarding housing support 21 that is not funded through the contingency fund in this subsection, the 22 designated housing support entity shall provide housing support to 23 clients who are homeless persons as defined in RCW 43.185C.010. As 24 provided in the biennial operating budget for the 2011-2013 biennium, a contingency fund shall be used solely for those clients who are at 25 26 substantial risk of losing stable housing or at substantial risk of 27 losing one of the other services defined in RCW 74.62.010(6). For purposes of this chapter, "substantial risk" means the client has 28 provided documentation that he or she will lose his or her housing 29 30 within the next thirty days or that the services will be discontinued within the next thirty days. 31

(b) After July 1, 2013, the designated housing support entity shall
 give first priority to clients who are homeless persons as defined in
 RCW 43.185C.010 and second priority to clients who would be at
 substantial risk of losing stable housing without housing support.

(4) For each county, the department shall designate an essential
 needs support entity and a housing support entity that will begin
 providing these supports to medical care services program recipients on

November 1, 2011. Essential needs and housing support entities are not
 required to provide assistance to every ((medical care services
 recipient that is)) person referred to the local entity or who meets
 the priority standards in subsection (3) of this section.

5 (a) Each designated entity must be a local government or 6 community-based organization, and may administer the funding for 7 essential needs support, housing support, or both. Designated entities 8 have the authority to subcontract with qualified entities. Upon 9 request, and the approval of the department, two or more counties may 10 combine resources to more effectively deliver services.

(b) The department's designation process must include a review of proficiency in managing housing or human services programs when designating housing support entities.

(c) Within a county, if the department directly awards separate grants to the designated housing support entity and the designated essential needs support entity, the department shall determine the amount allocated for essential needs support as directed in the biennial operating budget.

(5)(a) Essential needs and housing support entities must use funds distributed under this section as flexibly as is practicable to provide essential needs items and housing support to recipients of the essential needs and housing support program, subject to the requirements of this section.

(b) Benefits provided under the essential needs and housing support
 program shall not be provided to recipients in the form of cash
 assistance.

27 (c) The appropriations by the legislature for the purposes of the essential needs and housing support program established under this 28 29 section shall be based on forecasted program caseloads. The caseload 30 forecast council shall provide a courtesy forecast of the ((medical care services recipient)) population eligible for a referral for 31 essential needs and housing support that is homeless or is included in 32 33 reporting under subsection (7)(c)(iii) of this section. The department may move funds between entities or between counties to reflect actual 34 35 caseload changes. In doing so, the department must: (i) Develop a 36 process for reviewing the caseload of designated essential needs and 37 housing support entities, and for redistributing grant funds from those entities experiencing reduced actual caseloads to those with increased 38

1 actual caseloads; and (ii) inform all designated entities of the 2 redistribution process. Savings resulting from program caseload 3 attrition from the essential needs and housing support program shall 4 not result in increased per-client expenditures.

5 (d) Essential needs and housing support entities must partner with 6 other public and private organizations to maximize the beneficial 7 impact of funds distributed under this section, and should attempt to 8 leverage other sources of public and private funds to serve essential 9 needs and housing support recipients. Funds appropriated in the 10 operating budget for essential needs and housing support must be used 11 only to serve persons eligible to receive services under that program.

(6) The department shall use no more than five percent of the funds
for administration of the essential needs and housing support program.
Each essential needs and housing support entity shall use no more than
seven percent of the funds for administrative expenses.

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(7) The department shall:

17 (a) Require housing support entities to enter data into the18 homeless client management information system;

(b) Require essential needs support entities to report on servicesprovided under this section;

(c) In collaboration with the department of social and health services, submit a report annually to the relevant policy and fiscal committees of the legislature. A preliminary report shall be submitted by December 31, 2011, and must include (c)(i), (iii), and (v) of this subsection. Annual reports must be submitted beginning December 1, 2012, and must include:

(i) A description of the actions the department has taken toachieve the objectives of chapter 36, Laws of 2011 1st sp. sess.;

29 (ii) The amount of funds used by the department to administer the 30 program;

(iii) Information on the housing status of essential needs and housing support recipients served by housing support entities, and individuals who have requested housing support but did not receive housing support;

35 (iv) Grantee expenditure data related to administration and 36 services provided under this section; and

37 (v) Efforts made to partner with other entities and leverage38 sources or public and private funds;

(d) Review the data submitted by the designated entities, and make 1 2 recommendations for program improvements and administrative 3 efficiencies. department has the authority to The designate 4 alternative entities necessary due to performance or other as significant issues. Such change must only be made after consultation 5 with the department of social and health services and the impacted 6 7 entity.

8 (8) The department, counties, and essential needs and housing support entities are not civilly or criminally liable and may not have 9 10 any penalty or cause of action of any nature arise against them related 11 to decisions regarding: (a) The provision or lack of provision of 12 housing or essential needs support; or (b) the type of housing 13 arrangement supported with funds allocated under this section, when the decision was made in good faith and in the performance of the powers 14 and duties under this section. However, this section does not prohibit 15 legal actions against the department, county, or essential needs or 16 17 housing support entity to enforce contractual duties or obligations.

18 Sec. 4. RCW 43.185C.230 and 2011 1st sp.s. c 36 s 5 are each 19 amended to read as follows:

The department, in collaboration with the department of social and health services, shall develop a mechanism through which the department and local governments or community-based organizations can verify a person has been determined eligible <u>by the department of social and health services</u> and remains eligible for ((medical care services under <u>RCW 74.09.035 by the department of social and health services</u>)) <u>the</u> essential needs and housing support program.

27 Sec. 5. RCW 74.09.510 and 2011 1st sp.s. c 36 s 9 and 2011 1st 28 sp.s. c 15 s 25 are each reenacted and amended to read as follows:

Medical assistance may be provided in accordance with eligibility requirements established by the authority, as defined in the social security Title XIX state plan for mandatory categorically needy persons and:

33 (1) Individuals who would be eligible for cash assistance except 34 for their institutional status;

(2) Individuals who are under twenty-one years of age, who would beeligible for medicaid, but do not qualify as dependent children and who

1 are in (a) foster care, (b) subsidized adoption, (c) a nursing facility 2 or an intermediate care facility for persons with intellectual 3 disabilities, or (d) inpatient psychiatric facilities;

4 (3) Individuals who:

5 (a) A

(a) Are under twenty-one years of age;

6 (b) On or after July 22, 2007, were in foster care under the legal 7 responsibility of the department or a federally recognized tribe 8 located within the state; and

9 (c) On their eighteenth birthday, were in foster care under the 10 legal responsibility of the department or a federally recognized tribe 11 located within the state;

12 (4) Persons who are aged, blind, or disabled who: (a) Receive only 13 a state supplement, or (b) would not be eligible for cash assistance if 14 they were not institutionalized;

15 (5) Categorically eligible individuals who meet the income and 16 resource requirements of the cash assistance programs;

17 (6) Individuals who are enrolled in managed health care systems, 18 who have otherwise lost eligibility for medical assistance, but who 19 have not completed a current six-month enrollment in a managed health 20 care system, and who are eligible for federal financial participation 21 under Title XIX of the social security act;

(7) Children and pregnant women allowed by federal statute for whomfunding is appropriated;

(8) Working individuals with disabilities authorized under section
 1902(a)(10)(A)(ii) of the social security act for whom funding is
 appropriated;

(9) Other individuals eligible for medical services under ((RCW 74.09.035 based on age, blindness, or disability and income and resources standards for medical care services and)) RCW 74.09.700 for whom federal financial participation is available under Title XIX of the social security act;

32 (10) Persons allowed by section 1931 of the social security act for 33 whom funding is appropriated; and

(11) Women who: (a) Are under sixty-five years of age; (b) have been screened for breast and cervical cancer under the national breast and cervical cancer early detection program administered by the department of health or tribal entity and have been identified as needing treatment for breast or cervical cancer; and (c) are not otherwise covered by health insurance. Medical assistance provided under this subsection is limited to the period during which the woman requires treatment for breast or cervical cancer, and is subject to any conditions or limitations specified in the omnibus appropriations act.

5 Sec. 6. RCW 74.09.035 and 2011 1st sp.s. c 36 s 6 and 2011 1st 6 sp.s. c 15 s 3 are each reenacted and amended to read as follows:

7 (1) To the extent of available funds, medical care services may be8 provided to:

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(a) ((Persons who:

10 (i) Are incapacitated from gainful employment by reason of bodily 11 or mental infirmity that will likely continue for a minimum of ninety 12 days as determined by the department. The standard for incapacity in 13 this subsection, as evidenced by the ninety-day duration standard, is 14 not intended to be as stringent as federal supplemental security income 15 disability standards;

16 (ii) Are citizens or aliens lawfully admitted for permanent 17 residence or otherwise residing in the United States under color of 18 law;

19 (iii) Have furnished the department their social security number.
20 If the social security number cannot be furnished because it has not
21 been issued or is not known, an application for a number shall be made
22 prior to authorization of benefits, and the social security number
23 shall be provided to the department upon receipt;

(iv) Have countable income as described in RCW 74.04.005 at or
 below four hundred twenty-eight dollars for a married couple or at or
 below three hundred thirty-nine dollars for a single individual; and

27 (v) Do not have countable resources in excess of those described in
 28 RCW 74.04.005.

29 (b)) Persons eligible for the aged, blind, or disabled assistance 30 program authorized in RCW 74.62.030 and who are not eligible for 31 medicaid under RCW 74.09.510; and

32 (b) Persons eligible for essential needs and housing support under 33 section 2 of this act and who are not eligible for medicaid under RCW 34 <u>74.09.510</u>.

35 (((c) Persons eligible for alcohol and drug addiction services 36 provided under chapter 74.50 RCW, in accordance with medical 37 eligibility requirements established by the department. 1 (d) The following persons are not eligible for medical care
2 services:

(i) Persons who are unemployable due primarily to alcohol or drug 3 4 addiction, except as provided in (c) of this subsection. These persons shall be referred to appropriate assessment, treatment, shelter, or 5 б supplemental security income referral services as authorized under 7 chapter 74.50 RCW. Referrals shall be made at the time of application or at the time of eligibility review. This subsection shall not be 8 construed to prohibit the department from granting medical care 9 services benefits to alcoholics and drug addicts who are incapacitated 10 11 due to other physical or mental conditions that meet the eligibility 12 criteria for medical care services;

13 (ii) Persons who refuse or fail to cooperate in obtaining federal 14 aid assistance, without good cause;

15 (iii) Persons who refuse or fail without good cause to participate in drug or alcohol treatment if an assessment by a certified chemical 16 dependency counselor indicates a need for such treatment. Good cause 17 18 must be found to exist when a person's physical or mental condition, as 19 determined by the department, prevents the person from participating in 20 drug or alcohol dependency treatment, when needed outpatient drug or 21 alcohol treatment is not available to the person in the county of his or her residence or when needed inpatient treatment is not available in 22 23 a location that is reasonably accessible for the person; and

(iv) Persons who are fleeing to avoid prosecution of, or to avoid custody or confinement for conviction of, a felony, or an attempt to commit a felony, under the laws of the state of Washington or the place from which the person flees; or who are violating a condition of probation, community supervision, or parole imposed under federal or state law for a felony or gross misdemeanor conviction.

30 (e) For purposes of determining whether a person is incapacitated
31 from gainful employment under (a) of this subsection:

32 (i) The department shall adopt by rule medical criteria for 33 incapacity determinations to ensure that eligibility decisions are 34 consistent with statutory requirements and are based on clear, 35 objective medical information; and

36 (ii) The process implementing the medical criteria shall involve 37 consideration of opinions of the treating or consulting physicians or health care professionals regarding incapacity, and any eligibility decision which rejects uncontroverted medical opinion must set forth clear and convincing reasons for doing so.

4 (f) For purposes of reviewing a person's continuing eligibility and 5 in order to remain eligible for the program, persons who have been 6 found to have an incapacity from gainful employment must demonstrate 7 that there has been no material improvement in their medical or mental 8 health condition. The department may discontinue benefits when there 9 was specific error in the prior determination that found the person 10 eligible by reason of incapacitation.))

Enrollment in medical care services may not result 11 (2) in 12 expenditures that exceed the amount that has been appropriated in the 13 operating budget. If it appears that continued enrollment will result in expenditures exceeding the appropriated level for a particular 14 fiscal year, the department may freeze new enrollment and establish a 15 waiting list of persons who may receive benefits only when sufficient 16 17 funds are available.

18 (3) Determination of the amount, scope, and duration of medical 19 care services shall be limited to coverage as defined by the authority, 20 except that adult dental, and routine foot care shall not be included 21 unless there is a specific appropriation for these services.

(4) The authority shall enter into performance-based contracts with one or more managed health care systems for the provision of medical care services under this section. The contract must provide for integrated delivery of medical and mental health services.

(5) The authority shall establish standards of assistance and resource and income exemptions, which may include deductibles and coinsurance provisions. In addition, the authority may include a prohibition against the voluntary assignment of property or cash for the purpose of qualifying for assistance.

31 (6) ((Residents of skilled nursing homes, intermediate care 32 facilities, and intermediate care facilities for persons with 33 intellectual disabilities, as that term is described by federal law, 34 who are eligible for medical care services shall be provided medical 35 services to the same extent as provided to those persons eligible under 36 the medical assistance program.

37 (7)) Eligibility for medical care services shall commence with the 38 date of ((certification for medical care services, date of))

eligibility for the aged, blind, or disabled assistance program provided under RCW 74.62.030(($_{\tau}$)) or the date (($_{OT}$)) of eligibility for ((alcohol and drug addiction services provided under chapter 74.50 RCW)) the essential needs and housing support program under section 2 of this act.

6 Sec. 7. RCW 74.09.010 and 2011 1st sp.s. c 15 s 2 and 2011 c 316 7 s 2 are each reenacted and amended to read as follows:

8 The definitions in this section apply throughout this chapter 9 unless the context clearly requires otherwise.

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(1) "Authority" means the Washington state health care authority.

11 (2) "Children's health program" means the health care services 12 program provided to children under eighteen years of age and in 13 households with incomes at or below the federal poverty level as 14 annually defined by the federal department of health and human services 15 as adjusted for family size, and who are not otherwise eligible for 16 medical assistance or the limited casualty program for the medically 17 needy.

(3) "Chronic care management" means the health care management
within a health home of persons identified with, or at high risk for,
one or more chronic conditions. Effective chronic care management:

(a) Actively assists patients to acquire self-care skills to improve functioning and health outcomes, and slow the progression of disease or disability;

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(b) Employs evidence-based clinical practices;

(c) Coordinates care across health care settings and providers,
 including tracking referrals;

(d) Provides ready access to behavioral health services that are,to the extent possible, integrated with primary care; and

(e) Uses appropriate community resources to support individualpatients and families in managing chronic conditions.

31 (4) "Chronic condition" means a prolonged condition and includes,32 but is not limited to:

33 (a) A mental health condition;

34 (b) A substance use disorder;

35 (c) Asthma;

36 (d) Diabetes;

37 (e) Heart disease; and

1 (f) Being overweight, as evidenced by a body mass index over 2 twenty-five.

3 (5) "County" means the board of county commissioners, county4 council, county executive, or tribal jurisdiction, or its designee.

5 (6) "Department" means the department of social and health6 services.

7 (7) "Department of health" means the Washington state department of
8 health created pursuant to RCW 43.70.020.

9 (8) "Director" means the director of the Washington state health 10 care authority.

(9) "Full benefit dual eligible beneficiary" means an individual who, for any month: Has coverage for the month under a medicare prescription drug plan or medicare advantage plan with part D coverage; and is determined eligible by the state for full medicaid benefits for the month under any eligibility category in the state's medicaid plan or a section 1115 demonstration waiver that provides pharmacy benefits.

17 (10) "Health home" or "primary care health home" means coordinated 18 health care provided by a licensed primary care provider coordinating 19 all medical care services, and a multidisciplinary health care team 20 comprised of clinical and nonclinical staff. The term "coordinating 21 all medical care services" shall not be construed to require prior 22 authorization by a primary care provider in order for a patient to 23 receive treatment for covered services by an optometrist licensed under 24 chapter 18.53 RCW. Primary care health home services shall include those services defined as health home services in 42 U.S.C. Sec. 1396w-25 26 4 and, in addition, may include, but are not limited to:

(a) Comprehensive care management including, but not limited to,chronic care treatment and management;

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(b) Extended hours of service;

30 (c) Multiple ways for patients to communicate with the team, 31 including electronically and by phone;

32 (d) Education of patients on self-care, prevention, and health33 promotion, including the use of patient decision aids;

34 (e) Coordinating and assuring smooth transitions and follow-up from35 inpatient to other settings;

36 (f) Individual and family support including authorized 37 representatives;

(g) The use of information technology to link services, track 1 2 tests, generate patient registries, and provide clinical data; and

(h) Ongoing performance reporting and quality improvement.

4 (11) "Internal management" means the administration of medical 5 assistance, medical care services, the children's health program, and the limited casualty program. 6

7 (12) "Limited casualty program" means the medical care program provided to medically needy persons as defined under Title XIX of the 8 federal social security act, and to medically indigent persons who are 9 10 without income or resources sufficient to secure necessary medical 11 services.

12 (13) "Medical assistance" means the federal aid medical care 13 program provided to categorically needy persons as defined under Title XIX of the federal social security act. 14

(14) "Medical care services" means the limited scope of care 15 financed by state funds and provided to ((disability lifeline benefits 16 17 recipients, and recipients of alcohol and drug addiction services provided under chapter 74.50 RCW)) persons who are not eligible for 18 19 medicaid under RCW 74.09.510 and who are eligible for the aged, blind, 20 or disabled assistance program authorized in RCW 74.62.030 or the essential needs and housing support program pursuant to section 2 of 21 22 this act.

23 (15)"Multidisciplinary health care team" means an 24 interdisciplinary team of health professionals which may include, but 25 is not limited to, medical specialists, nurses, pharmacists, 26 nutritionists, dieticians, social workers, behavioral and mental health 27 providers including substance use disorder prevention and treatment providers, doctors of chiropractic, physical therapists, licensed 28 29 complementary and alternative medicine practitioners, home care and 30 other long-term care providers, and physicians' assistants.

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(16) "Nursing home" means nursing home as defined in RCW 18.51.010. 32 (17) "Poverty" means the federal poverty level determined annually by the United States department of health and human services, or 33 34 successor agency.

(18) "Primary care provider" means a general practice physician, 35 36 family practitioner, internist, pediatrician, osteopath, naturopath, 37 physician assistant, osteopathic physician assistant, and advanced 38 registered nurse practitioner licensed under Title 18 RCW.

(19) "Secretary" means the secretary of social and health services.

NEW SECTION. Sec. 8. This act takes effect January 1, 2014, if 2 3 medicaid expansion coverage under the federal patient protection and affordable care act of 2010 (42 U.S.C. 1396a(a)(10)(A)(i)(VIII)) is 4 available in Washington state January 1, 2014. If medicaid expansion 5 б coverage is not available January 1, 2014, this act takes effect upon 7 the date that medicaid expansion coverage under the federal patient protection and affordable care act of 2010 is available in Washington 8 9 state.

10 <u>NEW SECTION.</u> Sec. 9. The Washington state health care authority 11 must provide notice of the effective date of section 8 of this act to 12 affected parties, the chief clerk of the house of representatives, the 13 secretary of the senate, the office of the code reviser, and others as 14 deemed appropriate by the Washington state health care authority.

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