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SENATE BILL 5444

State of Washington 53rd Legislature 1993 Regular Session

By Senator Talmadge; by request of Department of Social and Health Services

Read first time 01/28/93. Referred to Committee on Health & Human Services.

- 1 AN ACT Relating to medical assistance coverage of hospice care and
- 2 services; amending RCW 74.09.520; and reenacting and amending RCW
- 3 74.09.700.
- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 5 **Sec. 1.** RCW 74.09.520 and 1991 sp.s. c 8 s 9 are each amended to 6 read as follows:
- 7 (1) The term "medical assistance" may include the following care
- 8 and services: (a) Inpatient hospital services; (b) outpatient hospital
- 9 services; (c) other laboratory and x-ray services; (d) nursing facility
- 10 services; (e) physicians' services, which shall include prescribed
- 11 medication and instruction on birth control devices; (f) medical care,
- 12 or any other type of remedial care as may be established by the
- 13 secretary; (g) home health care services; (h) private duty nursing
- 14 services; (i) dental services; (j) physical and occupational therapy
- 15 and related services; (k) prescribed drugs, dentures, and prosthetic
- 16 devices; and eyeglasses prescribed by a physician skilled in diseases
- 17 of the eye or by an optometrist, whichever the individual may select;
- 18 (1) personal care services, as provided in this section; (m) hospice
- 19 services; (n) other diagnostic, screening, preventive, and

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rehabilitative services; and (o) like services when furnished to a handicapped child by a school district as part of an individualized education program established pursuant to RCW 28A.155.010 through 28A.155.100. For the purposes of this section, the department may not cut off any prescription medications, oxygen supplies, respiratory services, or other life-sustaining medical services or supplies.

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"Medical assistance," notwithstanding any other provision of law, shall not include routine foot care, or dental services delivered by any health care provider, that are not mandated by Title XIX of the social security act unless there is a specific appropriation for these services. Services included in an individualized education program for a handicapped child under RCW 28A.155.010 through 28A.155.100 shall not qualify as medical assistance prior to the implementation of the funding process developed under RCW 74.09.524.

- (2) The department shall amend the state plan for medical assistance under Title XIX of the federal social security act to include personal care services, as defined in 42 C.F.R. 440.170(f), in the categorically needy program.
- 19 (3) The department shall adopt, amend, or rescind such 20 administrative rules as are necessary to ensure that Title XIX personal 21 care services are provided to eligible persons in conformance with 22 federal regulations.
- 23 (a) These administrative rules shall include financial eligibility 24 indexed according to the requirements of the social security act 25 providing for medicaid eligibility.
- (b) The rules shall require clients be assessed as having a medical condition requiring assistance with personal care tasks. Plans of care must be approved by a physician and reviewed by a nurse every ninety days.
- 30 (4) The department shall design and implement a means to assess the 31 level of functional disability of persons eligible for personal care services under this section. The personal care services benefit shall 32 be provided to the extent funding is available according to the 33 34 assessed level of functional disability. Any reductions in services 35 made necessary for funding reasons should be accomplished in a manner that assures that priority for maintaining services is given to persons 36 37 with the greatest need as determined by the assessment of functional disability. 38

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- 1 (5) The department shall report to the appropriate fiscal committees of the legislature on the utilization and associated costs of the personal care option under Title XIX of the federal social security act, as defined in 42 C.F.R. 440.170(f), in the categorically needy program. This report shall be submitted by January 1, 1990, and submitted on a yearly basis thereafter.
- 7 (6) Effective July 1, 1989, the department shall offer hospice 8 services in accordance with available funds. ((The hospice benefit 9 under this section shall terminate on June 30, 1993, unless extended by the legislature.))
- 11 Sec. 2. RCW 74.09.700 and 1991 sp.s. c 9 s 7 and 1991 sp.s. c 8 s 12 10 are each reenacted and amended to read as follows:
- 13 (1) To the extent of available funds and subject to any conditions 14 placed on appropriations made for this purpose, medical care may be 15 provided under the limited casualty program to persons not otherwise eligible for medical assistance or medical care services who are 16 medically needy as defined in the social security Title XIX state plan 17 18 and medical indigents in accordance with eligibility requirements 19 established by the department. The eligibility requirements may include minimum levels of incurred medical expenses. 20 This includes residents of nursing facilities and residents of intermediate care 21 facilities for the mentally retarded who are aged, blind, or disabled 22 23 as defined in Title XVI of the federal social security act and whose 24 income exceeds three hundred percent of the federal supplement security 25 income benefit level.
- (2) Determination of the amount, scope, and duration of medical coverage under the limited casualty program shall be the responsibility of the department, subject to the following:
 - (a) Only the following services may be covered:

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- (i) For persons who are medically needy as defined in the social security Title XIX state plan: Inpatient and outpatient hospital services;
- (ii) For persons who are medically needy as defined in the social security Title XIX state plan, and for persons who are medical indigents under the eligibility requirements established by the department: Rural health clinic services; physicians' and clinic services; prescribed drugs, dentures, prosthetic devices, and eyeglasses; nursing facility services; and intermediate care facility

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services for the mentally retarded; home health services; hospice 1 2 services; other laboratory and x-ray services; rehabilitative services, including occupational therapy; medically necessary transportation; and 3 4 other services for which funds are specifically provided in the omnibus appropriations act;

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- (b) Medical care services provided to the medically indigent and received no more than seven days prior to the date of application shall be retroactively certified and approved for payment on behalf of a person who was otherwise eligible at the time the medical services were furnished: PROVIDED, That eligible persons who fail to apply within the seven-day time period for medical reasons or other good cause may be retroactively certified and approved for payment.
- 13 (3) The department shall establish standards of assistance and resource and income exemptions. All nonexempt income and resources of 14 15 limited casualty program recipients shall be applied against the cost of their medical care services. 16

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