
SECOND SUBSTITUTE HOUSE BILL 2181

State of Washington 54th Legislature 1996 Regular Session

By House Committee on Appropriations (originally sponsored by Representatives Dyer, Horn, L. Thomas, Carlson and Benton)

Read first time 02/05/96.

1 AN ACT Relating to enhancing long-term care services; amending RCW
2 74.39.040; and creating a new section.

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

4 **Sec. 1.** RCW 74.39.040 and 1989 c 427 s 13 are each amended to read
5 as follows:

6 ~~((1) A long-term care commission is created. It shall consist of:~~

7 ~~(a) Four legislators who shall serve on the executive committee,~~
8 ~~one from each of the two largest caucuses in the house of~~
9 ~~representatives and the senate who shall be selected by the president~~
10 ~~of the senate and the speaker of the house of representatives;~~

11 ~~(b) Six members, to be selected by the executive committee, who~~
12 ~~shall be authorities in gerontology, developmental disabilities,~~
13 ~~neurological impairments, physical disabilities, mental illness,~~
14 ~~nursing, long-term care service delivery, long-term care service~~
15 ~~financing, systems development, or systems analysis;~~

16 ~~(c) Three members, to be selected by the executive committee, who~~
17 ~~represent long-term care consumers, services providers, or advocates;~~

18 ~~(d) Two members, to be selected by the executive committee, who~~
19 ~~represent county government;~~

1 ~~(e) One member, to be selected by the secretary of social and~~
2 ~~health services, to represent the department of social and health~~
3 ~~services long term care programs, including at least developmental~~
4 ~~disabilities, mental health, aging and adult services, AIDS, children's~~
5 ~~services, alcohol and substance abuse, and vocational rehabilitation;~~
6 ~~and~~

7 ~~(f) Two members, to represent the governor, who shall serve on the~~
8 ~~executive committee.~~

9 ~~The legislative members shall select a chair from the membership of~~
10 ~~the commission.~~

11 ~~The commission shall be staffed, to the extent possible, by staff~~
12 ~~from the appropriate senate and house of representatives committees.~~

13 ~~The commission may form technical advisory committees to assist it~~
14 ~~with any particular matters deemed necessary by the commission.~~

15 ~~The commission and technical advisory committee members shall~~
16 ~~receive no compensation, but except for publicly funded agency staff,~~
17 ~~shall, to the extent funds are available, be reimbursed for their~~
18 ~~expenses while attending any meetings in the same manner as legislators~~
19 ~~engaged in interim committee business as specified in RCW 44.04.120.~~

20 ~~The commission may receive appropriations, grants, gifts, and other~~
21 ~~payments from any governmental or other public or private entity or~~
22 ~~person which it may use to defray the cost of its operations or to~~
23 ~~contract for technical assistance, with the approval of the senate~~
24 ~~committee on facilities and operations and the house of representatives~~
25 ~~executive rules committee.~~

26 ~~(2) The long term care commission shall develop legislation and~~
27 ~~recommend administrative actions necessary to achieve the following~~
28 ~~long term care reforms:~~

29 ~~(a) The systematic coordination, planning, budgeting, and~~
30 ~~administration of long term care services currently administered by the~~
31 ~~department of social and health services, division of developmental~~
32 ~~disabilities, aging and adult services administration, division of~~
33 ~~vocational rehabilitation, office on AIDS, division of health, and the~~
34 ~~bureau of alcohol and substance abuse;~~

35 ~~(b)) The legislature finds the intent of the 1989 legislature to~~
36 ~~reform statutory provisions of long-term care for persons of all ages~~
37 ~~with chronic functional disability, although not enacted, continues to~~
38 ~~be applicable. The need to streamline the current bureaucratic~~
39 ~~fragmentation of chronic health services for the person with functional~~

1 disabilities and facilitate the development of client centered,
2 accessible, high quality, cost-effective, and appropriate long-term
3 care services options for persons with functional disabilities is even
4 more pressing today. The legislature further finds that if we are
5 going to meet the significant and growing chronic care needs in the
6 next two decades, rapid fundamental changes will need to take place in
7 the way we finance, organize, and provide long-term care services to
8 the functionally disabled. The public demands, and it is the intent of
9 the legislature to reduce the cost and size of government and provide
10 efficient and effective public service to the persons most impaired by
11 chronic functional disability.

12 To realize the need for a cost-effective, uniform, and fully
13 integrated long-term care system while simultaneously reducing the size
14 and cost of government, the Washington health care policy board shall
15 develop a working plan or cause to be conducted by contract a working
16 plan for long-term care reform, including recommendations and statutory
17 changes required to accomplish subsections (3) through (12) of this
18 section by December 12, 1996, and subsections (1), (2), and (13)
19 through (15) of this section by July 1, 1997, and shall include the
20 following:

21 (1) Reorganize and consolidate, on a noncategorical basis, all
22 disease or age-specific (categorical) organizational entities of state
23 administration and their regional elements pertaining to chronic care
24 services to persons with functional mental and physical disabilities,
25 including but not limited to: In the department of social and health
26 services: Health and rehabilitative services and aging and adult
27 services; in the department of health: Aids chronic care and boarding
28 homes; the department of services to the blind; in the department of
29 veterans affairs: Nursing facilities; and in all other state agencies
30 that provide chronic long-term health care services;

31 (2) Implement a streamlined client centered administrative and
32 delivery system for long-term care services state-wide that
33 incorporates all long-term care services for the person with functional
34 disabilities to include the functionally disabled, developmentally
35 disabled, mentally ill, traumatically brain injured, and others with
36 chronic functional disabilities. The system shall be a single point
37 entry system administered at the local level that allows the person
38 with functional disabilities to obtain needs determination, eligibility
39 screening, priority setting, and services information and assistance.

1 The system shall be designed so that acute health care services are
2 effectively coordinated with long-term care services. The system shall
3 recognize and respect the individuality and dignity of all functionally
4 disabled individuals and promote self-reliance and the preference for
5 the assistance and comfort provided by families, friends, and community
6 volunteers. It shall also recognize the importance of community
7 organizations and the public and private infrastructure in the delivery
8 of care and support. All major points of access into the long-term
9 care system shall be identified and integrated into the system to
10 insure that clients are fully informed of the most appropriate least
11 expensive care options;

12 (3) Provision of long-term care services to persons based on their
13 functional disabilities noncategorically and in the most independent
14 living situation consistent with the person's needs and preferences;

15 ~~((e))~~ (4) A consistent definition of appropriate roles and
16 responsibilities for state and local government, regional
17 organizations, and private organizations in the planning,
18 administration, financing, and delivery of long-term care services;

19 ~~((d))~~ (5) Technical assistance to enable local communities to
20 have greater participation and control in the planning, administration,
21 and provision of long-term care services;

22 ~~((e))~~ (6) A case management system that coordinates an
23 appropriate and cost-effective plan of care and services for eligible
24 functionally disabled persons based on their individual needs and
25 preferences;

26 ~~((f))~~ (7) A sufficient supply of quality institutional and
27 noninstitutional residential alternatives for functionally disabled
28 persons, and supports for the providers of such services;

29 ~~((g))~~ (8) Public and private alternative funding for long-term
30 care services, ~~((such as federal Title XIX funding of personal care~~
31 ~~services through the limited casualty program for the medically needy~~
32 ~~and other optional services)) that includes the promotion of affordable~~
33 stand alone long-term care insurance options or as part of overall
34 health care insurance benefits, a uniform fee copayment scale for
35 client participation in state-funded, long-term care programs, and
36 private, long-term care insurance;

37 ~~((h))~~ (9) A systematic and balanced long-term care services
38 payment and reimbursement system, including a case mix nursing home

1 reimbursement, that will provide access to needed services while
2 controlling the rate of cost increases for such services;

3 ~~((i))~~ (10) Active involvement of volunteers and advocacy groups;

4 ~~((j))~~ (11) An integrated data base that provides long-term care
5 client tracking;

6 ~~((k))~~ (12) A coordinated education system for long-term care to
7 insure client safety and quality of services; ((and

8 ~~(l))~~ (13) Administratively separate the nonmeans tested economic
9 and social welfare and advocacy programs of the older Americans act, 42
10 U.S.C. Chap 35 and 45 C.F.R. 1321 et seq. from the need and means
11 tested programs for persons with functional disabilities;

12 (14) Review all activities mandated and expenditures authorized by
13 the senior citizens services act, chapter 74.38 RCW; and identify which
14 funds are being used for functionally disabled seniors and identify how
15 these senior citizens services act funds can be directed to programs
16 serving the most disabled elderly; and

17 (15) Other issues deemed appropriate by the ~~((implementation team))~~
18 joint committee on health systems oversight.

19 The ~~((commission))~~ Washington health care policy board shall report
20 to the legislature with its findings, recommendations, and proposed
21 legislation ~~((by December 1, 1990))~~ required to accomplish subsections
22 (3) through (12) of this section by December 12, 1996, and subsections
23 (1), (2), and (13) through (15) of this section by July 1, 1997.

24 NEW SECTION. Sec. 2. If specific funding for the purposes of this
25 act, referencing this act by bill or chapter number, is not provided by
26 June 30, 1996, in the omnibus appropriations act, this act is null and
27 void.

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