**5436-S AMH HCW H2479.1 - NOT FOR FLOOR USE**

**SSB 5436** - H COMM AMD

By Committee on Health Care & Wellness

Strike everything after the enacting clause and insert the following:

"NEW SECTION. **Sec.**  A new section is added to chapter 74.39A RCW to read as follows:

(1)(a) A joint legislative executive committee on aging and disability is established, with members as provided in this subsection.

(i) Four members of the senate, with the leaders of the two largest caucuses each appointing two members, who are voting members;

(ii) Four members of the house of representatives, with the leaders of the two largest caucuses each appointing two members, who are voting members;

(iii) A member from the office of the governor, appointed by the governor, who is a voting member;

(iv) The secretary of the department of social and health services or his or her designee, who shall serve as an ex officio member;

(v) The director of the health care authority or his or her designee, who shall serve as an ex officio member;

(vi) The insurance commissioner or his or her designee, who shall serve as an ex officio member; and

(vii) The director of the department of retirement systems or his or her designee, who shall serve as an ex officio member.

(b) The cochairs must be selected from among the members who are legislators. The cochairs who served as the cochairs of the joint legislative executive committee on aging and disability created in section 206, chapter 4, Laws of 2013 2nd sp. sess. must convene the initial meeting of the committee. All meetings of the committee are open to the public.

(c) The purpose of the committee is to identify key strategic actions to prepare for the aging of the population in Washington, including state budget and policy options, by conducting at least, but not limited to, the following tasks:

(i) Identify state budget and policy options to more effectively use state, federal, and private resources to, over time, reduce the growth rate in state expenditures that would otherwise occur by continuing current policy in light of significant population growth, particularly in the aging and disabled demographic;

(ii) Identify strategies to better serve the health care needs of an aging population and people with disabilities and promote healthy living, including the use of technology;

(iii) Consider the recommendations of the Bree collaborative regarding advance care planning and develop implementation strategies to educate people about advance care planning, make advance planning documents accessible and available in clinical and community settings, and increase compliance by health care providers and facilities with the advance planning wishes of patients;

(iv) Review the regulation of continuing care retirement communities and ways to protect those who reside in them, including the consideration of effective disclosures to residents;

(v) Identify the needs of older people and people with disabilities for high quality public and private guardianship services and information about assisted decision-making options;

(vi) Identify options for promoting client safety through residential care services and consider methods of protecting older people and people with disabilities from physical abuse and financial exploitation;

(vii) Identify policy options to create financing mechanisms for long-term services and supports that will promote additional private responsibility for individuals and families to meet their needs for

service;

(viii) Identify policies to promote financial security in retirement, support people who wish to stay in the workplace longer, and expand the availability of workplace retirement savings plans; and

(ix) Identify policy options to help communities adapt to the aging demographic in planning for housing, land use, and transportation.

(d) The committee shall consult with the office of the insurance commissioner, the caseload forecast council, the health care authority, and other appropriate entities with specialized knowledge of the needs and growth trends of the aging population and people with disabilities.

(e) The office of program research, senate committee services, the office of financial management, and the department of social and health services shall provide staff support for the committee.

(f) Within existing appropriations, the cost of meetings must be paid jointly by the senate, the house of representatives, and the office of financial management. Joint committee expenditures are subject to approval by the senate facilities and operations committee and the house of representatives executive rules committee, or their successor committees. The committee members may be reimbursed for travel expenses as authorized under RCW 43.03.050 and 43.03.060, and chapter 44.04 RCW as appropriate. Advisory committee members may not receive compensation or reimbursement for travel and expenses.

(2) This section expires December 1, 2017."

Correct the title.

EFFECT: Makes the member of the Joint Legislative Executive Committee on Aging and Disability (Committee) from the Office of the Governor a voting member. Adds the Insurance Commissioner to the Committee as an ex officio member.

Removes the requirements for the Committee to establish a demographic profile and an inventory of services and supports for older people and people with disabilities. Specifies that, when identifying options to reduce the growth rate in state expenditures due to the population, consideration is to be given specifically to the aging and disabled demographic. Specifies that the Committee must consider the use of technology among the strategies to serve the health needs of the aging and disabled populations. Requires the Committee to consider the implementation of the Bree Collaborative's recommendations regarding advance care planning and develop implementation strategies. Requires that the Committee review continuing care retirement communities, the need for guardianships, and ways to promote client safety and protect older people and people with disabilities from physical abuse and financial exploitation.