

SSB 5894 - S AMD TO 2319.1/17 168

By Senator Ranker

NOT ADOPTED 03/23/2017

1 On page 73, after line 15, insert the following:

2
3 **"Sec. 801.** 2016 1st sp.s. c 36 s 201 (uncodified) is amended to
4 read as follows:

5 **FOR THE DEPARTMENT OF SOCIAL AND HEALTH SERVICES**

6 (1) The appropriations to the department of social and health
7 services in this act shall be expended for the programs and in the
8 amounts specified in this act. Appropriations made in this act to
9 the department of social and health services shall initially be
10 allotted as required by this act. Subsequent allotment modifications
11 shall not include transfers of moneys between sections of this act
12 except as expressly provided in this act, nor shall allotment
13 modifications permit moneys that are provided solely for a specified
14 purpose to be used for other than that purpose.

15 (2) The department of social and health services shall not
16 initiate any services that require expenditure of state general fund
17 moneys unless expressly authorized in this act or other law. The
18 department may seek, receive, and spend, under RCW 43.79.260 through
19 43.79.282, federal moneys not anticipated in this act as long as the
20 federal funding does not require expenditure of state moneys for the
21 program in excess of amounts anticipated in this act. If the
22 department receives unanticipated unrestricted federal moneys, those
23 moneys shall be spent for services authorized in this act or in any
24 other legislation providing appropriation authority, and an equal
25 amount of appropriated state general fund moneys shall lapse. Upon
26 the lapsing of any moneys under this subsection, the office of
27 financial management shall notify the legislative fiscal committees.

1 As used in this subsection, "unrestricted federal moneys" includes
2 block grants and other funds that federal law does not require to be
3 spent on specifically defined projects or matched on a formula basis
4 by state funds.

5 (3) The legislature finds that medicaid payment rates, as
6 calculated by the department pursuant to the appropriations in this
7 act, bear a reasonable relationship to the costs incurred by
8 efficiently and economically operated facilities for providing
9 quality services and will be sufficient to enlist enough providers
10 so that care and services are available to the extent that such care
11 and services are available to the general population in the
12 geographic area. The legislature finds that cost reports, payment
13 data from the federal government, historical utilization, economic
14 data, and clinical input constitute reliable data upon which to
15 determine the payment rates.

16 (4) The department shall to the maximum extent practicable use
17 the same system for delivery of spoken-language interpreter services
18 for social services appointments as the one established for medical
19 appointments in the health care authority. When contracting directly
20 with an individual to deliver spoken language interpreter services,
21 the department shall only contract with language access providers
22 who are working at a location in the state and who are state-
23 certified or state-authorized, except that when such a provider is
24 not available, the department may use a language access provider who
25 meets other certifications or standards deemed to meet state
26 standards, including interpreters in other states.

27 (5) Information technology projects or investments and proposed
28 projects or investments impacting time capture, payroll and payment
29 processes and systems, eligibility, case management, and
30 authorization systems within the department of social and health
31 services are subject to technical oversight by the office of the
32 chief information officer.

33 (6)(a) The department shall facilitate enrollment under the
34 medicaid expansion for clients applying for or receiving state

1 funded services from the department and its contractors. Prior to
2 open enrollment, the department shall coordinate with the health
3 care authority to provide referrals to the Washington health benefit
4 exchange for clients that will be ineligible for medicaid.

5 (b) To facilitate a single point of entry across public and
6 medical assistance programs, and to maximize the use of federal
7 funding, the health care authority, the department of social and
8 health services, and the health benefit exchange will coordinate
9 efforts to expand HealthPlanfinder access to public assistance and
10 medical eligibility staff. No later than October 1, 2015, the
11 department shall complete medicaid applications in the
12 HealthPlanfinder for households receiving or applying for public
13 assistance benefits.

14 (c) The department, in coordination with the health care
15 authority, shall pursue a federal waiver to use supplemental
16 nutrition assistance program eligibility, aged, blind, or disabled
17 program eligibility, or temporary assistance for needy families
18 eligibility, to enroll eligible persons into medicaid.

19 (7) In accordance with RCW 71.24.380, the health care authority
20 and the department are authorized to purchase medical and behavioral
21 health services through integrated contracts upon request of all of
22 the county authorities in a regional service area to become an early
23 adopter of fully integrated purchasing of medical and behavioral
24 health services. The department may combine and transfer such
25 amounts appropriated under sections 204, 208, and 213 of this act as
26 may be necessary to fund early adopter contracts. The amount of
27 medicaid funding transferred from each program may not exceed the
28 average per capita cost assumed in this act for individuals covered
29 by that program, actuarially adjusted for the health condition of
30 persons enrolled, times the number of clients enrolled. The amount
31 of non-medicaid funding transferred from sections 204 and 208 may
32 not exceed the amount that would have been contracted with a
33 behavioral health organization if the county authorities had not
34 requested to become an early adopter of fully integrated purchasing.

1 These limits do not apply to the amounts provided in section
2 204(1)(s) of this act. If any funding that this act provides solely
3 for a specific purpose is transferred under this subsection, that
4 funding must be used consistently with the provisions and conditions
5 for which it was provided.

6 (8) In accordance with RCW 71.24.380, the department is
7 authorized to purchase mental health and substance use disorder
8 services through integrated contracts with behavioral health
9 organizations. The department may combine and transfer such amounts
10 appropriated under sections 204 and 208 of this act as may be
11 necessary to finance these behavioral health organization contracts.
12 If any funding that this act provides solely for a specific purpose
13 is transferred under this subsection, that funding must be used
14 consistently with the provisions and conditions for which it was
15 provided.

16 (9)(a) The appropriations to the department of social and health
17 services in this act shall be expended for the programs and in the
18 amounts specified in this act. However, after May 1, (~~2016~~) 2017,
19 unless prohibited by this act, the department may transfer general
20 fund-state appropriations for fiscal year (~~2016~~) 2017 among
21 programs after approval by the director of financial management.
22 However, the department shall not transfer state moneys that are
23 provided solely for a specified purpose except as expressly provided
24 in (b) of this subsection.

25 (b) To the extent that transfers under (a) of this subsection
26 are insufficient to fund actual expenditures in excess of fiscal
27 year (~~2016~~) 2017 caseload forecasts and utilization assumptions in
28 the long-term care, foster care, adoptions support, medical personal
29 care, and child support programs, the department may transfer state
30 moneys that are provided solely for a specified purpose. The
31 department shall not transfer funds, and the director of financial
32 management shall not approve the transfer, unless the transfer is
33 consistent with the objective of conserving, to the maximum extent
34 possible, the expenditure of state funds. The director of financial

1 management shall notify the appropriate fiscal committees of the
2 senate and house of representatives in writing seven days prior to
3 approving any allotment modifications or transfers under this
4 subsection. The written notification shall include a narrative
5 explanation and justification of the changes, along with
6 expenditures and allotments by budget unit and appropriation, both
7 before and after any allotment modifications or transfers.

8 (10) To facilitate the authority provided in subsection (7) and
9 (8) of this section, and to ensure a new accounting structure is in
10 place as of July 1, 2017, the department is authorized to create a
11 new program for accounting purposes only that combines the mental
12 health program and alcohol and substance abuse program allotments
13 and expenditures."

14

15 NEW SECTION. Sec. 802. The sum of forty three million nine
16 hundred eighty five thousand dollars, or as much thereof as may be
17 necessary, is appropriated for the fiscal year ending June 30, 2017,
18 from the general fund to the department of social and health
19 services for critical and necessary expenditures state hospitals.

20

21 NEW SECTION. Sec. 803. Sections 801 and 802 of this act are
22 necessary for the immediate preservation of the public peace, health,
23 or safety, or support of the state government and its existing public
24 institutions, and takes effect immediately."

25

26 Renumber the remaining sections consecutively and correct any
internal references accordingly.

27

EFFECT:

- Allows the Department of Social and Health Services (DSHS) to transfer general fund-state appropriations for fiscal year 2017 between DSHS programs with the approval of the director of Office of Financial Management.
- Appropriates \$43,985,000 general fund-state for fiscal year 2017 to cover state hospital spending.
- These portions of the act take effect immediately.

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FISCAL IMPACT (FY 2017): \$43,985,000 General Fund-State
FOUR-YEAR OUTLOOK: \$43,985,000

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