## CERTIFICATION OF ENROLLMENT

# SUBSTITUTE SENATE BILL 5968

Chapter 392, Laws of 1999

(partial veto)

56th Legislature 1999 Regular Session

# NURSING FACILITIES -- SUPPLEMENTAL PAYMENTS

EFFECTIVE DATE: 7/25/99

Passed by the Senate April 25, 1999 YEAS 48 NAYS 0

### BRAD OWEN

### President of the Senate

Passed by the House April 25, 1999 YEAS 96 NAYS 0

JOHN E. PENNINGTON, JR.

Speaker of the House of Representatives

FRANK CHOPP

Speaker of the House of Representatives

Approved May 18, 1999, with the exception of section 2(14), which is vetoed.

CERTIFICATE

I, Tony M. Cook, Secretary of the Senate of the State of Washington, do hereby certify that the attached is SUBSTITUTE SENATE BILL 5968 as passed by the Senate and the House of Representatives on the dates hereon set forth.

TONY M. COOK

Secretary

FILED

May 18, 1999 - 3:24 p.m.

GARY LOCKE

Governor of the State of Washington

Secretary of State State of Washington

### SUBSTITUTE SENATE BILL 5968

AS AMENDED BY THE HOUSE

Passed Legislature - 1999 Regular Session

State of Washington 56th Legislature 1999 Regular Session

**By** Senate Committee on Ways & Means (originally sponsored by Senators Loveland and Rasmussen)

Read first time 04/21/1999.

- 1 AN ACT Relating to human services; authorizing supplemental
- 2 payments for nursing facilities operated by public hospital districts;
- 3 amending 1999 c ... (ESSB 5180) s 210 (uncodified); and adding a new
- 4 section to chapter 74.46 RCW.
- 5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 6 <u>NEW SECTION.</u> **Sec. 1.** A new section is added to chapter 74.46 RCW
- 7 and codified under part F to read as follows:
- 8 To the extent the federal government approves such payments under
- 9 the state's plan for medical assistance, and only to the extent that
- 10 funds are specifically appropriated for this purpose in the biennial
- 11 appropriations act, the department shall make supplemental payments to
- 12 nursing facilities operated by public hospital districts. The payments
- 13 shall be calculated and distributed in accordance with the terms and
- 14 conditions specified in the biennial appropriations act. The payments
- 15 shall be supplemental to the component rate allocations calculated in
- 16 accordance with part E of this chapter, and neither the provisions of
- 17 part E of this chapter nor the provisions of part C of this chapter
- 18 apply to these supplemental payments.

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*Sec. 2. 1999 c ... (ESSB 5180) s 210 (uncodified) is amended to
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 2
   read as follows:
   FOR THE DEPARTMENT OF SOCIAL AND HEALTH SERVICES -- MEDICAL ASSISTANCE
 3
4
   PROGRAM
 5
   General Fund--State Appropriation (FY 2000) . . . $
                                                               722,863,000
    General Fund--State Appropriation (FY 2001) . . . $
6
                                                               784,657,000
7
   General Fund--Federal Appropriation . . . . . . ((2,345,803,000))
8
                                                             2,401,804,000
   General Fund--Private/Local Appropriation . . . . $
                                                               261,534,000
9
10
    Emergency Medical Services and Trauma Care Systems
11
        Trust Account -- State Appropriation . . . . . $
                                                                 9,200,000
12
    Health Services Account--State Appropriation . . $ ((\frac{339,535,000}{1}))
13
                                                               391,582,000
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The appropriations in this section are subject to the following conditions and limitations:

TOTAL APPROPRIATION . . . . . . . . . . . . ((4,463,592,000))

4,571,641,000

- 18 (1) The department shall continue to make use of the special 19 eligibility category created for children through age 18 and in 20 households with incomes below 200 percent of the federal poverty level 21 made eligible for medicaid as of July 1, 1994.
- (2) It is the intent of the legislature that Harborview medical center continue to be an economically viable component of the health care system and that the state's financial interest in Harborview medical center be recognized.
- 26 (3) Funding is provided in this section for the adult dental 27 program for Title XIX categorically eligible and medically needy 28 persons and to provide foot care services by podiatric physicians and 29 surgeons.
- 30 (4) \$1,647,000 of the general fund--state appropriation for fiscal 31 year 2000 and \$1,672,000 of the general fund--state appropriation for 32 fiscal year 2001 are provided for treatment of low-income kidney 33 dialysis patients.
- (5) \$80,000 of the general fund--state appropriation for fiscal year 2000, \$80,000 of the general fund--state appropriation for fiscal year 2001, and \$160,000 of the general fund--federal appropriation are provided solely for the prenatal triage clearinghouse to provide access and outreach to reduce infant mortality.

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- (6) The department shall adopt a new formula for distributing funds under the low-income disproportionate share hospital (LI-DSH) program. Under this new formula, (a) the state's Level 1 trauma center shall continue to receive the same amount of LI-DSH payments as in fiscal year 1999; and (b) ((in addition to other factors, the amount of a hospital's LI-DSH payment shall be inversely related to its net operating income as a percentage of total expenditures, such that more profitable hospitals receive a relatively smaller payment under the program)) a net profitability factor shall be included with other factors to determine LI-DSH payments. The net profitability factor shall inversely relate hospital percent net operating income to payment under the program.
  - (7) The department shall report to the fiscal committees of the legislature by September 15, 1999, and again by December 15, 1999, on (a) actions it has taken and proposes to take to increase the share of medicare part B premium payments upon which it is collecting medicaid matching funds; (b) the percentage of such premium payments for each month of service subsequent to June 1998 which have been paid with unmatched, state-only funds; and (c) why matching funds could not be collected on those payments.

- (8) The department shall report to the fiscal committees of the legislature by December 1, 1999, and again by October 1, 2000, on the amount which has been recovered from third-party payers as a result of its efforts to improve coordination of benefits on behalf of "basic health plan-plus" enrollees.
- (9) The department shall report to the health care and fiscal committees of the legislature by December 1, 1999, on options for controlling the growth in medicaid prescription drug expenditures through strategies such as but not limited to volume purchasing, selective contracting, supplemental drug discounts, and improved care coordination for high utilizers.
- (10) \$3,992,000 of the health services account appropriation and \$7,651,000 of the general fund--federal appropriation are provided solely for health insurance coverage for children with family incomes between 200 percent and 250 percent of the federal poverty level, as provided in Substitute Senate Bill No. 5416 (children's health insurance program). If the bill is not enacted by June 30, 1999, these amounts shall lapse.

- 1 (11) \$191,000 of the general fund--state appropriation for fiscal 2 year 2000 and \$391,000 of the general fund--state appropriation for 3 fiscal year 2001 are provided solely for implementation of Substitute 4 Senate Bill No. 5587 (patient bill of rights). If the bill is not 5 enacted by June 30, 1999, these amounts shall lapse.
- 6 (12) Upon approval from the federal health care financing 7 administration, the department shall implement the section 1115 family 8 planning waiver to provide family planning services to persons with 9 family incomes at or below two hundred percent of the federal poverty 10 level.
- (13) Except in the case of rural hospitals and Harborview medical center, weighted average payments ((rates)) under the ratio-of-cost-to-charges hospital payment system shall increase by no more than ((4.7)) 14 175 percent ((per year)) of the DRI HCFA hospital reimbursement market basket index.
  - (14) From the funds appropriated in this section, the department shall provide chiropractic services for persons qualifying for medical assistance services under chapter 74.09 RCW.
- 18 19 (15) In accordance with Substitute Senate Bill No. 5968, \$25,978,000 of the health services account appropriation for fiscal 20 year 2000, \$26,069,000 of the health services account appropriation for 21 fiscal year 2001, and \$56,002,000 of the general fund--federal 22 23 appropriation, or so much thereof as may be expended without exceeding 24 the medicare upper payment limit, are provided solely for supplemental 25 payments to nursing homes operated by rural public hospital districts. 26 Such payments shall be distributed among the participating rural public hospital districts proportional to the number of days of medicaid-27 funded nursing home care provided by each district during the preceding 28 29 calendar year, relative to the total number of such days of care 30 provided by all participating rural public hospital districts. Prior to making any supplemental payments, the department shall first obtain 31 federal approval for such payments under the medicaid state plan. The 32 payments shall further be conditioned upon (a) a contractual commitment 33 34 by the association of public hospital districts and participating rural 35 public hospital districts to make an intergovernmental transfer to the state treasurer, for deposit into the health services account, equal to 36 37 at least 82 percent of the supplemental payment amount; and (b) a

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contractual commitment by the participating districts to not allow

- 1 <u>expenditures covered by the supplemental payments to be used for</u>
- 2 <u>medicaid nursing home rate-setting.</u>
- 3 \*Sec. 2 was partially vetoed. See message at end of chapter.

Passed the Senate April 25, 1999.

Passed the House April 25, 1999.

Approved by the Governor May 18, 1999, with the exception of certain items that were vetoed.

Filed in Office of Secretary of State May 18, 1999.

- 1 Note: Governor's explanation of partial veto is as follows:
- "I am returning herewith, without my approval as to section 2(14), 3 Substitute Senate Bill No. 5968 entitled:
- 4 "AN ACT Relating to human services;"
- Substitute Senate Bill No. 5968 establishes a Pro-Share program with the federal government that will fund nursing homes operated by public hospital districts.
- Section 2(14) of the bill is an appropriation item proviso that would require the Department of Social and Health Services "Medical Assistance Administration to provide chiropractic services to adults. However, additional funding is not provided. This unfunded mandate would force the Medical Assistance Administration to reduce services elsewhere. While chiropractic services can be very beneficial, I do
- 14 not believe other services of the Medical Assistance Administration
- 15 should be reduced to provide them.
- For these reasons, I have vetoed section 2(14) of Substitute Senate Bill No. 5968.
- With the exception of section 2(14), Substitute Senate Bill No.
- 19 5968 is approved."