CERTIFICATION OF ENROLLMENT

SUBSTITUTE HOUSE BILL 1693

58th Legislature 2003 1st Special Session

Passed by the House June 5, 2003 Yeas 92 Nays 0	CERTIFICATE
	I, Cynthia Zehnder, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is
Speaker of the House of Representatives	SUBSTITUTE HOUSE BILL 1693 as passed by the House of Representatives and the Senate or
Passed by the Senate June 4, 2003 Yeas 47 Nays 2	the dates hereon set forth.
	Chief Clerk
President of the Senate	
Approved	FILED
Governor of the State of Washington	Secretary of State State of Washington

SUBSTITUTE HOUSE BILL 1693

Passed Legislature - 2003 1st Special Session

State of Washington 58th Legislature 2003 Regular Session

By House Committee on Appropriations (originally sponsored by Representatives Cody, Skinner, Clibborn and Morrell; by request of Department of Social and Health Services)

READ FIRST TIME 03/04/03.

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- 1 AN ACT Relating to direct care component rate allocation; and 2 amending RCW 74.46.508.
- 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 4 **Sec. 1.** RCW 74.46.508 and 1999 c 181 s 2 are each amended to read 5 as follows:
 - $(1)((\frac{1}{2}))$ The department is authorized to increase the direct care component rate allocation calculated under RCW 74.46.506(5) for residents who have unmet exceptional care needs as determined by the department in rule. The department may, by rule, establish criteria, patient categories, and methods of exceptional care payment.
- 11 (((b) The department shall submit a report to the health care and 12 fiscal committees of the legislature by December 12, 2002, that 13 addresses:
- (i) The number of individuals on whose behalf exceptional care
 payments have been made under this section, their diagnosis, and the
 amount of the payments; and
- (ii) An assessment as to whether the availability of exceptional
 care payments resulted in more expedient placement of residents into
 nursing homes and fewer and/or shorter hospitalizations.))

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 $(2)((\frac{1}{2}))$ The department $(\frac{1}{2})$ may by $(\frac{1}{2})$ Duly 2 $\frac{1}{2}$, adopt rules and implement a system of exceptional care 3 payments for therapy care.

 $((\frac{1}{2}))$ (a) Payments may be made on behalf of facility residents who are under age sixty-five, not eligible for medicare, and can achieve significant progress in their functional status if provided with intensive therapy care services.

(((ii) Payment under this subsection is limited to no more than twelve facilities that have demonstrated excellence in therapy care, based upon criteria defined by rule. A facility accredited by the commission for accreditation of rehabilitation facilities (CARF) shall be deemed to meet the criteria for demonstrated excellence in therapy care. However, CARF accreditation is not required for payment under this subsection.

(iii))) (b) Payments may be made only after approval of a rehabilitation plan of care for each resident on whose behalf a payment is made under this subsection, and each resident's progress must be periodically monitored.

(((b) The department shall submit a report to the health care and fiscal committees of the legislature by December 12, 2002, that addresses:

(i) The number of individuals on whose behalf therapy payments were made under this section, and the amount of the payments; and

(ii) An assessment as to whether the availability of exceptional care payments for therapy care resulted in substantial progress in residents' functional status, more expedient placement of residents into less expensive settings, or other long-term cost savings.

(3) This section expires June 30, 2003.))

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