Brief Description: Concerning reimbursement for services provided pursuant to community assistance referral and education services programs.

Sponsors: House Committee on Appropriations (originally sponsored by Representatives Griffey and Cody).

House Committee on Health Care & Wellness
House Committee on Appropriations
Senate Committee on Health Care
Senate Committee on Ways & Means

Background:

Fire departments may establish community assistance referral and education services (CARES) programs. A CARES program provides community outreach and assistance to residents to improve population health and promote injury and illness prevention. A CARES program identifies members of the community who use the 911 system or emergency departments for nonemergency or nonurgent assistance calls. A CARES program connects residents with health care professionals, low-cost medication programs, and social services. A CARES program must measure reductions in the repeated use of the 911 system and any associated reductions in avoidable emergency department trips. Fire departments may fund CARES programs through grants and private gifts.

The term "fire departments" includes city and town fire departments, fire protection districts, regional fire protection service authorities, emergency medical service providers that levy a tax, and federally recognized Indian tribes.

The programs may hire health care professionals to perform the services. The health care professionals may include emergency medical technicians, advanced emergency medical technicians, and paramedics if they are trained and certified to provide the service and they practice under the supervision and direction of a medical program director.

Summary:

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.
The Health Care Authority (Authority) must adopt reimbursement standards for fire departments providing covered health care services through a community assistance and referral education services (CARES) program to Medicaid clients who do not require ambulance transport to an emergency department. In addition to grants and private gifts, fire departments may fund a CARES program through the establishment and collection of reasonable charges, if approved by resolution or ordinance.

The Department of Health (Department) must review the certification and training of health professionals who participate in a CARES program, review the certification and training requirements in states with similar programs, and coordinate with the Authority to link certification requirements to the covered health care services that are eligible for reimbursement. The Department must submit recommendations for changes and suggestions for implementation to relevant legislative committees within six months of the adoption of the reimbursement standards.

The term "fire department" is expanded to include entities that are eligible to impose an emergency medical care and services levy, rather than only those entities that actually impose such a levy.

By December 1, 2021, the Joint Legislative Audit and Review Committee (JLARC), in consultation with the Authority, must conduct a cost-effectiveness review of the reimbursement standards and submit the results to the fiscal and health policy committees of the Legislature. The review must compare the amount paid to fire departments under the reimbursement standards to the amount that would have been paid if the services had been provided in a different setting. The review must identify any savings from the reimbursement standards and make recommendations to reduce the potential for excessive billing or billing for unnecessary services. If the review finds that the reimbursement standards have not resulted in savings to medical assistance programs, the JLARC must recommend the repeal of the standards.

**Votes on Final Passage:**

- **House**: 92 6
- **Senate**: 49 0  (Senate amended)
- **House**: 95 2  (House concurred)

**Effective:** July 23, 2017