

**CHILD PROTECTION AND FOSTER CARE**

**FPAWS litigation**, DSHS, \$14.0 million General Fund-State; \$4.6 million General Fund-Federal

Settles the Foster Parent Association of Washington lawsuit and increases reimbursement to foster parents to fully cover the cost of care when a foster child is placed in their home. Allows for adequate reimbursement and supports foster parent recruitment and retention.

**Child Protective Services staffing**, DSHS, \$6.3 million GF-S; \$1.8 million GF-F

Hires 50 more Child Protective Services staff to address an increase in the number of reports of child abuse or neglect. Enables the department to conduct face-to-face contact within 24 hours for children at imminent risk of harm and within 72 hours when the threat is not imminent. Enables all investigations to be completed within 90 days.

**Braam compliance**, DSHS, \$5.3 million GF-S; \$1.6 million GF-F

Hires 57 child and family welfare services staff to improve the conditions and treatment of children in the state foster care system. Allows for compliance with measures required under the Braam settlement, effective November 2011, including locating children on the run; conducting monthly health and safety checks for children in out-of-home care; ensuring monthly sibling visits for children in out-of-home care; and providing foster parents with adequate information, training and support for children placed in their homes.

**MENTAL HEALTH AND COMPETENCY**

**Single bed certification**, DSHS, \$24.7 million GF-S; \$12.6 million GF-F

Prevents inappropriate boarding of patients at medical hospitals by funding 145 more psychiatric community beds for individuals in need of mental health services. Improves public safety by ensuring that individuals determined to be a danger to themselves or others receive necessary mental health services.

**T.R. implementation**, DSHS, \$16.5 million GF-S; \$16.5 million GF-F

Expands intensive mental health services for high-needs youth. The Department of Social and Health Services is expected to accomplish the year 3 and 4 commitments set forth in the so-called T.R. settlement agreement.

**Improve treatment of hepatitis C; HCA**; \$90.2 million GF-S; \$283.7 million GF-F

**Prison capacity – medium custody beds; DOC**; \$7.3 million GF-S

**Area agencies on aging case management**; DSHS; \$5.2 million GF-S; \$5.2 million GF-F

**Expand home visits; DEL**; \$2.0 million GF-S

**Coverage staffing; DSHS**; \$1.6 million GF-S

**Performance-based contracting; DSHS**; \$1.3 million GF-S

**Enterprise Veterans Case Management System; DVA**; \$600,000 GF-S

**Forensic psychologists; DSHS**; \$581,000 GF-S

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**Competency restoration ward, DSHS, \$8.8 million GF-S**

Opens a new 30-bed forensic ward at Western State Hospital, adds five beds at Eastern State Hospital and hires 49 staff to address the rising demand for inpatient, court-ordered competency restoration and forensic services. Cuts wait times for people in jail for inpatient competency evaluation and restoration services.

**Civil admission ward, DSHS, \$7.5 million GF-S**

Prevents boarding of patients at medical hospitals by funding a new, 30-bed civil admission ward at Western State Hospital. Increases the availability of mental health inpatient services for individuals determined to be a danger to themselves or others, or are seriously mentally ill.

**Competency evaluation staff, DSHS, \$828,000 GF-S**

Supports recommendations made by the Joint Legislative Audit and Review Committee's 2014 report for improving the state mental health hospitals' ability to keep up with demand for competency evaluations. Helps the state hospitals meet statutory targets, reduce waiting lists and avoid contempt of court rulings by developing adequate data, a service delivery approach and a staffing model to address the demand for competency evaluations.

**PATIENT AND STAFF SAFETY**

**Psychiatric intensive care unit, DSHS, \$3.7 million GF-S**

Creates a psychiatric intensive care unit (PICU) at Western State Hospital to serve violent and assaultive patients at Western State Hospital or Eastern State Hospital, and hires 23 more staff. To increase patient safety, the PICU will house high-acuity patients for short-term stays, then transition them back to a standard ward after stabilization. PICU patients will be provided specialized care and treatment targeted at reducing violent and assaultive behavior.

**Psychiatric emergency response team, DSHS, \$3.4 million GF-S**

Hires 23 staff and expands the psychiatric emergency response team at the Center for Forensic Services in Western State Hospital. Enhances the safety of both staff and patients at the state hospitals through the addition of a team for day and evening shifts to support the civil wards of both facilities.

**Safety and security at facilities, DSHS, \$2.0 million GF-S**

Improves the safety and security of staff and youth by increasing the number of graveyard staff for each of the eight juvenile rehabilitation community facilities. Also funds additional safety equipment such as partitioned vehicles, safety harnesses for maintenance staff and eyewash stations.

**PROVIDER RATES**

**Primary care physician rate, HCA, \$79.0 million GF-S; \$157.0 million GF-F**

Builds primary care provider capacity in rural communities by holding Medicaid primary care payments at Medicare rates, which was required under the Affordable Care Act and is set to expire December 2014.

**Supported living rate increase, DSHS, \$10.3 million GF-S; \$10.3 million GF-F**

Increases by 50¢ the hourly rate paid to supported-living providers who provide in-home care services such as care coordination and teaching skills to increase client independence. These services help to keep people living in community settings.

**Assisted living rate increase, DSHS, \$3.6 million GF-S; \$4.6 million GF-F**

Increases reimbursement rates for assisted living facilities residential services. These facilities include assisted living, adult residential care and enhanced adult residential care. Assisted living was the only setting to receive two rate reductions in the past five years. This setting is a crucial Medicaid service that allows people in need of a residential placement to be served in the community instead of a more expensive nursing home.

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**Restore agency provider rate cut, DSHS, \$1.6 million GF-S; \$2.0 million GF-F**

Restores the 13¢ hourly administrative rate reduction for home care agencies enacted in 2010. Helps home care agencies maintain a sufficient workforce to meet growing caseload demands. Home care agencies support clients living in community settings by helping them with activities of daily living such as bathing, shopping and meal planning.

### **LONG-TERM AND ADULT PROTECTIVE CARE**

**Pre-Medicaid services, DSHS, \$19.1 million GF-S**

Expands services and supports that will delay or divert individuals from entering the more expensive Medicaid long-term care system. This further positions the state to address the needs of an aging population and better manage the financial pressures associated with greater demands for individuals who need community-based supports such as family caregiver support, memory care and evidence-based caregiver assessments due to age, disability or dementia.

**Adult Protective Services, DSHS, \$1.5 million GF-S; \$274,000 GF-F**

Hires more staff for Adult Protective Services to ensure in-home investigations that protect vulnerable adults are completed in 90 days. The complexity and time spent investigating each case have increased. Financial exploitation cases now represent nearly one-third of all investigations and self-neglect cases account for one-quarter.

### **CHEMICAL AND SUBSTANCE ABUSE TREATMENT**

**Address interim chemical dependency Medicaid rates, DSHS, \$3.3 million GF-S; \$4.2 million GF-F**

Provides a rate increase for Medicaid chemical dependency/substance-use disorder services to keep the provider network viable until reimbursement rates have been actuarially certified and approved by the Centers for Medicare & Medicaid Services. Ensures continued delivery of these vital services.

### **INFECTIOUS DISEASE AND TOBACCO USE PREVENTION**

**Infectious disease response, DOH, \$9.1 million GF-S; \$5.0 million GF-F**

Prevents new and emerging communicable disease threats from taking hold in Washington by increasing the resources necessary to recognize, identify and effectively combat communicable disease outbreaks. Resources include implementation of evidence-based practices to improve immunization coverage rates; standardizing and prioritizing communicable disease tracking, monitoring and response; and increasing capacity to receive electronic laboratory reporting of diseases through a health information exchange.

**Youth tobacco and e-cigarette prevention, DOH, \$3.0 million GF-S**

Supports prevention of tobacco use and vaping (such as e-cigarettes) aimed at youth and populations with a high incidence of tobacco use to prevent chronic disease and cut health care costs.

### **PUBLIC SAFETY**

**Justice Reinvestment Initiative prison capacity, DOC, \$1.4 million GF-S**

Shifts offenders from incarceration in prisons to intensive community supervision with programming such as chemical dependency and cognitive behavioral treatment. This evidence-based approach both reduces recidivism and avoids the need for expensive prison beds in and out of state.

### **REDUCTIONS**

**Hospital-based clinic services, HCA, \$20.8 million GF-S; \$21.4 million GF-F**

Reduces facility fee payments for standard office visit services performed at a hospital-based clinic to equal the fee provided for services in individual provider facilities.

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**Allow earned time enhancements, DOC, \$12.7 million GF-S**

Reduces prison population by allowing earned time credits to be applied to confinement ordered pursuant to a weapons enhancement. Currently, if an offender has a weapon enhancement on one or more counts, the enhancement(s) are served consecutively to one another and consecutive to the underlying sentence. The current law does not allow offenders to receive any earned time for the weapon enhancement portion of their sentence, but does allow earned time on the underlying sentence. This change allows earned time on an offender's entire sentence, not just a portion of the sentence. The rate of time earned would be consistent to the rate allowed for the underlying sentence.

**Juvenile Offender Basic Training Camp, DSHS, \$1.6 million GF-S**

Closes the 15-bed, 120-day program known as the Juvenile Offender Basic Training Camp (JOBTC) in Connell. JOBTC-eligible youth are low-risk, non-violent, non-sex offenders with a commitment of less than a year. This population is one-third the size it was at peak levels in 1997.

**Eliminate child care resource and referral, DEL, \$1.2 million GF-S**

Eliminates the child care aware contract that provides a child care licensing databank, and the child care provider referral call center and website. Referral services are also provided at local Department of Early Learning centers and the child care call center in the Department of Social and Health Services.

**Central office funding reduction, DVA, \$553,000 GF-S**

Reduces funding as a result of savings related to cost containment and efficiencies in administrative functions in the Department of Veterans Affairs central office.