

Human Services

Department of Social and Health Services – Behavioral health institutional services

State hospital operations

Provide high-quality patient care to individuals referred through behavioral health organizations, the civil court system or the criminal justice system to Western and Eastern State hospitals. (\$82.1 million General Fund-State)

Western State Hospital safety response

Implement a multi-pronged approach to reduce violence and boost patient and staff safety at Western State Hospital. Two new units will be established to serve the highest-acuity patients through evidence-based best practices: a STAR, or Specialized Treatment Assessment and Recovery unit, will serve up to 10 patients at a time and a Step Up unit will serve up to 20 patients as a transition from the STAR unit to a standard ward. Other initiatives include greater security and staff training and enclosing nurses stations. (\$22.2 million GF-S)

Psychiatric intensive care unit

Fund eight psychiatric intensive care unit beds at Eastern State Hospital to serve high-acuity, assaultive patients. PICU beds will house patients for short-term stays; patients will transition to a standard ward once stabilized. Providing this level of specialized care and treatment in the PICU will reduce violence and increase patient and staff safety across the hospital. (\$10.2 million GF-S)

Ross lawsuit compliance

Hire 23 staff as outlined in the Ross v. Lashway compliance plan. Additional staff will improve the quality and timeliness of treatment for patients found not guilty by reason of insanity. (\$6.2 million GF-S)

Child Study and Treatment Center capacity

Hire 84.7 individuals to staff the newly constructed 18-bed cottage at the Child Study and Treatment Center, located on the grounds of Western State Hospital. The center serves the state's most-acute child patients in the Children's Long-term Inpatient Program. This new cottage increases state CLIP bed capacity by more than 38 percent. (\$10.8 million GF-S)

Trueblood settlement agreement

A settlement agreement has been approved in the case of Trueblood v. Department of Social and Health Services. Agreement implementation will occur in phases in regions of the state, with the first phase including the Pierce, Spokane and Southwest regions. The agreement outlines five key areas of investments: competency evaluations; competency restoration; crisis diversion and supports; education and training; and workforce development. It requires DSHS to open 80 new forensic beds at Eastern State Hospital and Western State Hospital, as provided in the 2018 supplemental budget. Under the agreement, accrual of fines ceases December 2018 and continues unless the state is considered to be in material breach by the court. (\$90.7 million GF-S; \$3.7 million GF-Federal across several agencies)

Department of Social and Health Services – Aging and long-term and developmental disabilities services

Community transition expansion

Provide 100 community residential placements in state-operated living alternatives for individuals seeking a community placement. Placements will be phased in over a four-year period. (\$10.8 million GF-S; \$10.4 million GF-F)

Strengthening our response to the deadly opioid crisis

Opioid overdose deaths are now the leading cause of accidental deaths in nearly every part of our state, surpassing even motor vehicle and firearm-related fatalities. In 2017, a total of 739 people, or almost two a day, succumbed to opioid overdoses in Washington. While the number of deaths from prescription opioid drugs is slowly declining, deaths from heroin overdose are on the rise, particularly among young people.

Overuse of medically prescribed opioids to treat chronic pain has contributed to this epidemic. Through a first-in-the-nation set of guidelines developed here in Washington for use of opioids to treat chronic pain, the volume of these prescriptions has declined. While in 2016, Gov. Inslee issued Executive Order 16-09, which implements our state opioid response plan, the work is not done.

Inslee is advancing a plan to step up the state's response to the crisis. His budget and accompanying legislation will build upon substantial work underway to treat more of those in need of services and prevent the epidemic from claiming more lives.

Summary of opioid crisis-related items in the governor's budget

Treatment and recovery (\$19.3 million total)

Substance use disorder peer support

Create a Medicaid substance use disorder peer service benefit and fund the training and certification program. (\$1.8 million General Fund-State; \$9.1 million total)

Pregnant and parenting women residential program site expansion

Provide start-up costs for four new 16-bed pregnant and parenting women residential treatment sites that allow mother and child to reside together during the mother's treatment. (\$1.3 million GF-S)

Chemical dependency/substance use disorder specialist

Fund one staff member at the Department of Children, Youth, and Families to support pregnant and parenting individuals receiving chemical dependency or substance use disorder treatment. (\$200,000 GF-S)

Provider incentives and transportation for post-jail treatment

Provide transport and an incentive payment to providers to hold appointments so individuals being released from jail have no disruption in access to medication-assisted treatment for opioid use disorder. This will ease transition from jail and ensure access to treatment for individuals. (\$1.2 million GF-S)

Department of Corrections discharge planners

Fund four registered nurses to support released individuals who have medication needs and require behavioral health services or substance use disorder treatment upon release from a Department of Corrections facility. (\$1.4 million GF-S)

Substance abuse disorder assessments

Fund two chemical dependency professionals to complete approximately 2,000 more substance abuse disorder assessments at Department of Corrections reception centers. (\$406,000 GF-S)

Grants for diversion program

Fund grants to create two new Law Enforcement Assisted Diversion programs for jurisdictions outside King County. LEAD allows law enforcement officers to divert low-level offenders engaged in drug or prostitution activity to community service instead of jail or prosecution. (\$686,000 GF-S; \$5.2 million total)

Prevention (\$10.7 million total)

Chiropractic care for spinal pain

Provide Medicaid-covered adults access to certain nonpharmacological interventions for spinal pain diagnoses. (\$5.1 million GF-S; \$10.2 million total)

Fentanyl testing strip kits

Provide one-time funding and staff support to supply fentanyl test strips kits for distribution to syringe services programs. BTNX fentanyl test strips have been shown to be highly accurate, correctly detecting the presence of fentanyl and/or fentanyl analogues approximately 98 percent of the time. Data shows that 66 percent of individuals who found positive fentanyl test results reduced their risk-taking behaviors. (\$101,000 GF-S)

Electronic mail screeners

Fund four electronic mail screeners in the mail rooms at each of the stand-alone minimum security prison facilities to keep drugs and other contraband from inmates. (\$460,000 GF-S)

Community respite beds

Expand overnight planned respite services for adults and enhanced respite services for children by six beds each. The current daily rate is increased from \$374 to \$450–\$550 for adult services and from \$350–\$448 to \$400–\$510 for children’s services starting July 1, 2019. (\$5.3 million GF-S; \$1 million GF-F)

Children’s state-operated living alternatives

Add two new children’s SOLA homes on the west side of the state to serve children age 20 and younger. These children who are no longer eligible for residential habilitation center admission are not able to successfully transition to out-of-home residential placement because suitable community options do not exist. These SOLA homes will house three children each in King and Pierce counties. (\$2.5 million GF-S; \$2.3 million GF-F)

Residential habilitation center compliance

Hire 183.9 staff to meet requirements from the federal Centers for Medicare and Medicaid Services on continuous, aggressive active treatment in all intermediate care facilities, which are components of the residential habilitation centers, for individuals with intellectual disabilities. This includes residential habilitation center nursing facility capacity and additional SOLA capacity to transition some current clients with intellectual disabilities to more appropriate levels of services and supports. (\$20.1 million GF-S; \$20.1 million GF-F)

Group training homes

Add 14 new group training home beds. These are community-based, residential facilities serving two or more adults that provide 24-hour instruction and support services in an integrated setting that supports personal power, choice and full access to the greater community. *This item is part of the governor’s statewide behavioral health reform package.* (\$2.6 million GF-S)

Increase in-home personal needs allowance

Raise the income level at which in-home personal care clients must contribute to the cost of their care to 120 percent, up from 100 percent of the federal

poverty level. This allows clients greater flexibility to cover their expenses which helps them to remain in their homes rather than move to more expensive residential settings. (\$10.9 million GF-S; \$13.8 million GF-F)

Additional enhanced discharge beds

Provide 440 additional community placement beds for patients discharging from the state psychiatric hospitals. These include beds in enhanced service facilities, adult family homes, skilled nursing facilities, shared supportive housing, assisted living facilities, specialized dementia facilities and SOLAs. *This item is part of the governor’s statewide behavioral health reform package.* (\$49.6 million GF-S; \$44.2 million GF-F)

Kinship Care Support Program

Assist low-income caregivers with short-term financial supports to meet children’s urgent needs and provide them greater stability. Program funds can be used to purchase goods such as beds, clothing, safety items or supplies, and services when no other resources are available to meet a child’s particular needs. (\$500,000 GF-S)

Enhanced service facilities rate increase

Increase the daily rate for enhanced service facilities from \$425 to \$450 and add 78 beds. *This item is part of the governor’s statewide behavioral health reform package.* (\$14.9 million GF-S; \$14.9 million GF-F)

Targeted vendor rate increase

Set the quality enhancement component of the nursing home rate formula at a flat 2 percent of the overall rate, instead of a fixed dollar amount that decreases in percentage as the overall rate for nursing homes continues to grow. This increases the rate paid to assisted living facilities to 64 percent of the new rate system enacted by the Legislature in 2018, with an emphasis placed on significant increases for higher acuity classifications. This matches what the Health Care Authority now pays for contracted skilled nursing, nurse delegation and private duty nursing. (\$30.4 million GF-S; \$35.5 million GF-F)

Community residential rate increase

Increase the rate paid to community residential providers by 10 percent effective Jan. 1, 2020, and an additional 10 percent effective Jan. 1, 2021. Community residential providers deliver valuable in-home care services to keep citizens living in community settings. (\$59.4 million GF-S; \$58.2 million GF-F)

Department of Social and Health Services – Economic Services Administration

Automatic voter registration

Fund staff and information technology to implement automatic voter registration, consistent with state law. The department will provide information about an individual's right to register and offer the opportunity to opt out of automatic voter registration. (\$459,000 GF-S; \$188,000 GF-F)

Naturalization services increase

Expand contractor capacity for the Office of Refugee and Immigrant Assistance Naturalization Services Program to help up to 1,800 additional eligible refugees and immigrants annually to become citizens of the United States. (\$2 million GF-S)

Pregnant Women Assistance grant increase

Increase the maximum Pregnant Women Assistance program grant from \$197 to \$363 per month. Increasing the grant allows pregnant individuals who are ineligible for Temporary Assistance for Needy Families to meet more of their foundational needs, such as securing a safe home. Approximately 62 percent of PWA recipients report experiencing unstable housing, with half reporting as homeless. (\$300,000 GF-S)

Department of Social and Health Services – Division of Vocational Rehabilitation

Support individuals who are the most significantly disabled

Expand supported employment services to an additional 428 eligible individuals with the most significant disabilities. Services help individuals achieve competitive, integrated employment.

Without additional funding, some individuals in need of supported employment services will be placed on a waitlist. (\$2 million GF-S)

Health Care Authority – Other

Healthier Washington savings restoration

Restore savings assumed in the 2017–19 budget. Under Healthier Washington, HCA and DSHS have established integrated clinical models for physical and behavioral health care. This improves the effectiveness of health care purchasing and delivery. Due to aggressive assumptions about savings and delays in integrating the clinical models, full savings will not be realized. (\$55 million GF-S; \$65.2 million GF-F)

Pharmacy savings restoration

Restore savings assumed in the 2017–19 budget. While HCA has implemented a single Medicaid preferred drug list, the savings assumptions are aggressive and cannot be achieved as quickly nor at the level assumed in the enacted budget. (\$14.2 million GF-S; \$35.5 million GF-F)

Dental emergency room savings restoration

Restore savings assumed in the 2017–19 budget. HCA has named apparently successful bidders to transition dental services from fee-for-service to managed care. Savings from lower emergency department utilization as a result of dental managed care were assumed in the current budget. However, savings assumptions in the current budget will not be achieved at the level nor within the timeline originally anticipated. (\$12.2 million GF-S; \$17.6 million GF-F)

Doula services

Add doula services through the Maternity Support Services program, which includes preventive health and education services to help pregnant individuals have healthy pregnancies and healthy babies. Doulas are community-based professionals who provide education, case management and labor support as well as offer home visits. Doula services have been shown to improve perinatal outcomes and reduce negative outcomes among communities affected by disparities. (\$4.6 million GF-S; \$7.1 million GF-F)

Bi-directional behavioral health rate increase

Increase the rate paid for health and behavior codes and psychotherapy codes that were identified through the stakeholder work group process required under law. (\$9.1 million GF-S; \$27.7 million GF-F)

Primary care rate increase

Increase the rate paid for adult and pediatric primary care to 83 percent of the Medicare reimbursement rate. This increase helps to retain providers and improves access to medical care for Medicaid beneficiaries. (\$56.6 million GF-S; \$142.9 million GF-F)

Hepatitis C elimination strategy

Fund a hepatitis C virus elimination strategy established through a governor's directive. HCA, the Department of Health and other state hepatitis C virus medication purchasers will collaboratively set a comprehensive procurement strategy for the purchase of medications that includes financing public health interventions to affordably eliminate the infection by 2030. (\$3.7 million GF-S; \$3.7 million GF-F)

Public option

Contract with an insurance carrier to offer at least one health plan in all counties in Washington on the Health Benefit Exchange. (\$500,000 GF-S)

Health Care Authority – Community behavioral health

Intensive behavioral health treatment facilities

Create four intensive behavioral health community treatment facilities across the state. This new facility type addresses the need for discharge placements in the community for individuals leaving the state psychiatric hospitals but who possess higher levels of behavioral challenges that alternative behavioral health facilities cannot now accommodate. (\$80 million GF-S; \$6.4 million GF-F)

Mental health drop-in facilities

Create five mental health drop-in facilities across the state to divert individuals from crisis services and inpatient-level care. Mental health drop-in facilities are peer operated and serve individuals in need of voluntary, short-term, noncrisis services that focus on recovery and wellness in a trauma-informed environment. (\$2.4 million GF-S; \$2.7 million GF-F)

Community long-term inpatient beds

Increase the daily bed rate to providers to create new 90- and 180-day civil inpatient psychiatric capacity in the community. (\$37 million GF-S; \$41.7 million GF-F)

Discharge wraparound services

Fund intensive wraparound services for adults discharging from the state psychiatric hospitals to alternative community placements. These services help ensure discharge placements are successful. (\$2.8 million GF-S; \$5.9 million GF-F)

Intensive outpatient treatment and partial hospitalization

Expand intensive outpatient treatment programs and partial hospitalization programs to Medicaid clients. These evidence-based programs are provided by acute or psychiatric hospitals and tailored to individual patient treatment needs once individuals are discharged from inpatient psychiatric facilities. (\$13.9 million GF-S; \$23.6 million GF-F)

Program for Assertive Community Treatment

Increase the ACT, or assertive community treatment teams statewide and provide flexibility in treatment models to better serve rural communities. ACT teams provide evidence-based, recovery-oriented intensive outreach services in the community to divert individuals from more intensive levels of care. Currently there are 14 PACTs, or program for assertive community treatment teams across the state and one FACT, or flexible assertive community treatment team being piloted. This funds eight more PACT and FACT teams across the state. (\$6 million GF-S; \$12.6 million GF-F)

Secure withdrawal management and stabilization vendor rate increase

Increase provider rates for secure withdrawal management and stabilization facilities across the state by 12 percent. These facilities provide up to 17 days of withdrawal management and substance use treatment for adults and adolescents over 13 years of age who present a likelihood of serious harm to themselves or others. (\$10.8 million GF-S; \$14.9 million GF-F)

Department of Corrections

Yakima County Jail women's therapeutic community

Establish a 60-bed substance abuse recovery therapeutic community for incarcerated women, with on-site case management, at the new Yakima County Jail. (\$2.1 million GF-S)

Earned time

Reduce the prison population through a prospective sentencing change that would make certain incarcerated individuals serving time for nonviolent or drug offenses eligible for 50 percent earned time. These offenders are now allowed to earn up to 33 percent of his or her sentence. A report produced by the Washington State Institute for Public Policy found that offenders who were awarded the increased earned time percentage had a 3.5 percent lower felony recidivism rate after three years than offenders who stayed in prison longer. (Save \$13 million GF-S)

Swift and certain sanctioning

Reduce the community violator population through a sentencing change that would allow for nonconfinement sanctions for low-level violations; remove the requirement that after an individual commits five violations under community custody, each subsequent violation must be addressed through a hearing and is subject to a sanction of up to 30 days in jail; and remove requirements outlining special rules for addressing violations that constitute new crimes by individuals on supervision for one of 21 underlying offenses. (Save \$8.2 million GF-S)

Concurrent supervision

Require terms of supervision to be served concurrently unless the court expressly orders the terms to be served consecutively. This change simplifies supervision and will allow the department to more accurately track adherence with conditions and ensure treatment for the offender is delivered at the most appropriate time. (Save \$9.6 million GF-S)

Capital project operating costs

Hire 107.8 staff and fund the operating costs related to several capacity projects that were funded in the 2017–19 capital budget to reduce overcrowding in prisons. These projects include more programming space at the Washington State Penitentiary, a 128-bed minimum security prison at Maple Lane and a 41-bed expansion of the Ahtanum View work release facility. (\$18.6 million GF-S)

Violator bed rate increase

Fund a jail bed rate increase to reflect actual costs incurred to house violators and to ensure continuity of contracts with local jails, which house individuals who violate the terms of their community supervision. (\$7.9 million GF-S)

Targeted vendor rate increase

Provide targeted vendor rate increases for contracted services, including chemical dependency treatment providers, health care professionals and psychological evaluators. (\$4.2 million GF-S)

Department of Children, Youth and Families – Children and families

Increase behavioral rehabilitation services rates and bed capacity

Provide a rate increase to behavioral rehabilitation services providers. This promotes financial solvency, attracts staff capable of delivering high-quality therapeutic treatment and reduces the average length of stay for youth. It also allows providers to maintain bed capacity, supports future federal accreditation requirements for Title IV-E funding and when combined with new investments in

Behavioral Rehabilitation Services Capacity Grants in the capital budget, allows providers to build bed capacity. (\$17.7 million GF-S; \$7.6 million GF-F)

Parent Mentoring Program

Fund a contract with a nonprofit entity to reestablish the Parent Mentoring Program which provides parents whose children are in an out-of-home placement with a skilled foster parent mentor. Although highly successful at reducing the length of stay for children in foster care and reducing the rate of re-entry into foster care, the Parent Mentoring Program was terminated in 2009. This funding is sufficient for statewide implementation beginning Dec. 1, 2019, and will serve nearly 2,200 children over the biennium. (\$4.9 million GF-S; \$1.6 million GF-F)

Foster parent application portal

Procure an online portal for foster parent applications and renewals. Automating the foster parent application will eliminate a cumbersome paper application and renewal process, thereby improving foster parent satisfaction, reducing errors, lessening the licensing process time and supporting efforts to recruit new foster parents. (\$1.4 million GF-S; \$1.4 million GF-F)

YVLifeSet young adult transitions

Provide intensive case management services using the YVLifeSet clinical consultation model, which significantly improves housing and economic stability, enhances health and safety outcomes and reduces recidivism rates. Funding is sufficient to contract with a community organization with expertise in this model to serve 318 youth. (\$1.3 million GF-S)

Child and family welfare service workers

Hire staff to lower the average statewide caseload ratio to 18 families per child and family welfare services worker. These staff manage children in temporary out-of-home placements and children who have reunified with their families following a placement. This step phases in case-carrying child and family welfare services workers, supervisors and support staff, with the goal of filling 106.9 positions. (\$7.9 million GF-S; \$7.4 million GF-F)

Department of Children, Youth and Families – Juvenile rehabilitation

Acute mental health staffing

Hire 5.6 counselor assistants and two security officers to operate the new acute mental health pod for female youth at Echo Glen Children's Center and provide mental health treatment programs to the youth housed there. (\$1.2 million GF-S)

Reduce assault in juvenile facilities

Hire 65 security officers to bring all three juvenile rehabilitation institutional facilities into compliance with the Prison Rape Elimination Act standard 115.313 (c), which requires each secure juvenile facility to maintain staffing ratios of 1:8 during waking hours and 1:16 during sleeping hours. (\$8.4 million GF-S)

Department of Children, Youth and Families – Early learning

Universal home visiting and newborn assessment

Create a new universal home visiting and universal newborn assessment program to serve 16,854 families this biennium. Specialized nurses will conduct in-home assessments to requesting parents with newborns between 3 and 12 weeks of age. Nurses will provide up to six home visits and determine if additional resources and supports are needed. A new statewide early learning referral system is also implemented and will link families to early learning services in their community. The referral system will give home visiting nurses, parents, caregivers, medical professionals and early learning educators access to centralized resources for all early learning services in their area. A total of 2,951 more families will receive additional intensive home visiting services for one to three years. This more than doubles the number of families receiving state-funded intensive home visiting services today. (\$38.3 million GF-S; \$4 million GF-F; \$2.3 million GF-Local)

Early Childhood Education and Assistance Program quality improvement

Fund quality improvements such as coaching, technical assistance, ratings and scholarships for teachers. In order for ECEAP to reach entitlement status by school year 2023, new providers must be recruited. These services will help new providers meet level 4 rating requirement for ECEAP and complete the rating process in a timely manner. (\$898,000 GF-S)

Early Childhood Education and Assistance Program expansion to entitlement

Fund 1,037 ECEAP slots in 2020 and 1,348 ECEAP slots in 2021 for a total of 2,385 slots, an 18 percent increase. Eighty percent of the slots are funded as full day and extended day. (\$38.5 million GF-S)

Early Childhood Education and Assistance Program rate increase

Fund a 6 percent rate increase for slots in ECEAP, with 3 percent effective July 1, 2019, and another 3 percent effective July 1, 2020. (\$12.6 million GF-S)

Early Childhood Education and Assistance Program pilot

Implement a three-year Early ECEAP pilot modeled after the federal Early Head Start program. The pilot will provide services to 154 children, ages birth to 3, in families with income below 110 percent of the federal poverty level. It will offer home-visiting services and age-appropriate curriculum in a classroom setting. (\$4.4 million GF-S; \$232,000 GF-L)

Preschool expansion

Create a new affordable preschool program with wraparound family support services. The program will offer 1,073 slots in 2020 and 833 more slots in 2021, totaling 1,907 slots for children of families with income up to 200 percent of the federal poverty level. Aligning the income limit with the state's subsidized child care program requirements maximizes future opportunities to serve children while their parents work full time, extended hours or nontraditional work hours. (\$30.1 million GF-S)

Child care equal access

Increase tiered reimbursement rates for child care center providers. The level 3 tiered reimbursement rate is increased by 7 percent and the level 4 TR rate is increased by 4 percent. Federal law requires that payment rates for child care are sufficient to ensure equal access to various child care settings for all eligible children. The intent is to reduce the gap between subsidy and private pay with a focus on incentivizing quality improvements. (\$72.3 million GF-F)

Department of Children, Youth and Families – Program support

Reduce gang violence

Use the Office of Juvenile Justice and Delinquency Prevention comprehensive gang model to offer more services for youth. Funds will also be used for a pilot in King County that uses social network data to identify youth and young adults most at risk for gun-related violence. (\$740,000 GF-S)

Youth services project

Develop a process for youth who are in crisis to access services outside the court system. This project will develop options for a pre-court process that provides intake, assessment and referral to services. It will also develop recommendations for leveraging federal funding sources to pay for community-based prevention and intervention services. (\$350,000 GF-S)

Department of Health

Fund foundational public health

Increase funding to help stabilize local public health systems and improve the public health system's capability to respond to communicable diseases and other environmental health issues. (\$22 million GF-S)

Reduce suicide rates

Expand the National Suicide Prevention Lifeline by adding call centers to better serve Eastern Washington and assist with rising call volumes. (\$1.2 million GF-S)

Increase access to fruits and vegetables

Maintain the Food Insecurity Nutrition Incentives and the WIC Farmers Market Nutrition programs to offer fruit and vegetable incentives to low-income individuals to use at grocery stores and farmers markets. Federal funding for these programs expires in 2020. (\$2.3 million GF-S)

Conduct mandated newborn screening

Add Pompe disease and MPS-I to the newborn screening panel, as mandated by the Board of Health. Additional expenditure authority and a fee increase are necessary for the Department of Health's Newborn Screening Laboratory to conduct blood sample testing. (\$1.6 million GF-S)

Department of Veterans Affairs**Increase transitional housing**

Add 40 beds to the Department of Veterans Affairs transitional housing program, which provides temporary housing and intensive case management services to eligible veterans in the Roosevelt Barracks on the Washington Soldiers Home campus in Orting. (\$1.3 million GF-S; \$120,000 GF-F)

Department of Labor and Industries**Workers' compensation systems modernization**

Begin a seven-year workers' compensation system replacement project, including implementation of systems that support employer accounts. This project simplifies the program's technology architecture, replaces manual processes with electronic features and frees up staff time to focus on improving services to injured workers and their employers. Modernization is critical as the system processes \$2.25 billion in workers' compensation premiums annually, paid by 176,000 employers and 2.9 million workers; processes about 110,000 new injured worker claims annually; and issues about \$2.1 billion in provider, time-loss and pension payments annually. (\$41 million Accident Account-State; \$41 million Medical Aid Account-State)

Preventing worker hospitalizations

Hire two staff to join the Safety and Health Assessment and Research for Prevention program to conduct research on preventing the types of work-related injuries that result in immediate hospitalization. Labor and Industries must submit a report to the governor and Legislature in August 2020, and annually thereafter, summarizing work-related immediate hospitalization and prevention opportunities, actions that employers and workers can take to make workplaces safer and ways to avoid severe injuries. (\$273,000 Accident Account-State; \$273,000 Medical Aid Account-State)

Health care apprenticeships

Develop and operate an apprenticeship program for several health care occupations, including medical assisting, behavioral health and licensed practical nurse. In addition to connecting workers and employers to fill employment needs, the health care apprenticeship program will partner with community-based organizations to support nonpostsecondary youth ages 16 to 21, low-income individuals and people of color. Health care employers in Washington will match the state financial contribution through funds and resources contributed through the SEIU Healthcare 1199NW Multi-Employer Training Fund. (\$1.3 million Accident Account-State; \$240,000 Medical Aid Account-State)

Technology apprenticeships

Continue to contract through fiscal year 2020 for supplemental instruction for information technology apprentices. The contractor will collaborate with the State Board for Community and Technical Colleges to offer instruction through one or more Washington community or technical colleges by the 2020–21 academic year. The technology apprenticeship program prepares underemployed Washingtonians to succeed in the tech sector while filling the talent shortage employers are facing. (\$1.7 million Accident Account-State; \$300,000 Medical Aid Account-State)

Crime victims provider rate increase

Increase the Crime Victim Compensation Program reimbursement rate for medical and health care providers from 70 percent to 100 percent of the workers' compensation fee schedule. Increasing the rate will allow more medical providers to participate in the program and offer services to victims of crimes when they have no other coverage options. (\$6.7 million GF-S)

Employment Security Department

Statewide Reentry Initiative

Hire an additional eight staff to advance the reentry model, which allows the department to proactively engage with incarcerated individuals before release to reduce the state's recidivism rate. Through collaboration with state and local corrections partners who work with justice-involved people, individuals will receive registration with the state's job match system WorkSourceWA and individualized job readiness services. (\$4.6 million Employment Services Administrative Account-State)

Temporary agriculture program

Fund 14 staff and create the Employment Security Department's Office of H-2A Compliance and Farm Labor to provide adequate protections for foreign and domestic workers. The office will provide education and outreach services to help agricultural employers maintain a stable workforce and meet federal H-2A program requirements. Sustainable funding for the office comes from new fees that agricultural employers hiring H-2A temporary workers must pay on an annual basis beginning Jan. 1, 2020. (\$4.1 million Temporary Agriculture Program Nonappropriated Account)