



together



Advocacy News

Week 4

We are just finishing up week 4 of the legislative session and it's been a busy one.

Budget

[SB 5311](#) - Adjusting the skilled nursing Medicaid rate methodology. SB 5311 was passed out of the Senate Health & Long Term Care Committee this morning with a unanimous yes vote! The bill, as passed, includes an amendment from the prime sponsor, Senator Rivers. The amendment includes annual rebasing to go along with the annual inflation adjustment for direct care and indirect care as described in the original bill. The annual inflation from the original bill, utilizes the higher CPI in the medical expenditure category of nursing homes and adult day services for the first year of the biennium and then shifts back to the CPI all category for rates beginning July 1, 2022. Next steps for this bill - it will head to the Senate Ways & Means Committee as it deals with budgetary items. Once referred to the Ways & Means Committee, we will ask for your help by sending a message to your legislators on the committee. We will email you once that is ready!

[HB 1275](#) - Concerning nursing facility Medicaid rate rebasing, inflation, and case mix. This bill would place annual rebasing and annual inflation in statute, it also makes it possible for the department to move from a RUGs IV based casemix system to a PDPM based casemix system. This bill had its first public hearing on the 26th. We testified in support of this bill; however, we also urged the committee to invest additional funding so we can better compete for nurses and CNAs and close the gap in chronic Medicaid underfunding. We currently have an advocacy campaign running for you to voice your support for this legislation as it has yet to be moved out of Committee! You can support this advocacy on our [Action Center](#).

[HB 1367](#) - Revising 2019-2021 fiscal biennium appropriations of state and federal funding for previously implemented Medicaid rates and other Medicaid expenditures in the developmental disabilities and long-term care programs in response to the COVID-19 pandemic. This bill would swap money spent from the CARES Act with money designated through the enhanced federal match program (FMAP). For LTC, when the state originally instituted COVID-19 add-ons, as well as retainer payments, they did this utilizing the enhanced FMAP. Beginning July 1, 2020, the state switched to using CARES Act funding. This bill will not have any impact on the current COVID-19 add-ons and retainer payments. We have been assured that the current rate add-ons will continue through June 30, 2021 and we will ensure the bill language supports this intent. This bill passed the House unanimously on Feb. 1st and is currently waiting for a floor vote in the Senate.

Assisted Living- Nearly half of the CARES classifications haven't seen a rate increase in nearly 5 years. We must correct years of funding neglect and are pushing the legislature to implement an across the board rate increase of 2.5% each year of the biennium. This will ensure that all classifications will receive a rate increase. While the funding needed to achieve this pales in comparison to the \$114 million needed to fully fund the assisted living rate methodology, it is an important and continuing step towards our ultimate funding goal. To gain traction towards fully funding the methodology, we are also calling on the legislature to instruct DSHS to create a plan to phase us towards a fully funded model. We have met with a number of legislators that are willing to pursue this in the budget. You can help push this along by sending a message to your legislators, asking them to make funding assisted living a priority. We have a campaign running for this on our [Action Center](#). **\$6.3 million GF-S, \$13.3 million Total.**

We are also requesting that the legislature implement the rate increase for Specialized Dementia Care clients that was passed last year. This rate increase was, unfortunately, vetoed by Governor Inslee in order to redirect the funding to the state's COVID response. **\$3 million GF-S, \$6 million Total.**

Policy

LeadingAge Washington Priority Policy Bills

[SB 5294](#)- Concerning the creation of statewide epidemic preparedness and response guidelines for long-term care facilities. There will be a hearing on Tuesday, the 9th, in the Senate Ways & Means Committee since there is a cost to implement the bill. LeadingAge Washington will testify in favor of the bill, urging the committee's support for the much-needed work outlined in the bill.

[SB 5247](#)- Concerning the multistate nurse licensure compact. No hearing has been scheduled for this bill but please join us in supporting this legislation by sending a message to your legislators asking them to support the bill. Visit our advocacy center [here](#) and click on the Support Adding More Nurses to our Workforce "Take Action" button!

[HB 1120](#) - Concerning state of emergency operations impacting long-term services and supports. This bill is waiting on the House floor calendar with multiple amendments that would restore the bill's original intent. When it was passed out of committee, an amendment was adopted, which inadvertently prevented the backlog of worker training and certification to be addressed once the state of emergency ends.

Support

[SB 5169](#) - Concerning provider reimbursement for personal protective equipment during the state of emergency related to COVID-19. This bill was passed out of committee and is headed to the House floor for a vote.

[SB 5191](#) - Regulating unfair business practices and prohibiting predatory price increases during states of emergency. The first public hearing has been scheduled for Monday Feb 8th in the Senate Committee on Law & Justice. This bill will limit the amount staffing agencies may charge during an emergency.

[HB 1124](#) - Concerning nurse delegation of glucose monitoring, glucose testing, and insulin injections. This bill was passed out of House and now heads to the Senate. As a reminder if passed it would allow CNAs in a nursing home to be delegated for glucose monitoring and testing.

Oppose

[HB 1218](#) - Improving health, safety, and quality of life for residents in long-term care facilities. This week we've had multiple stakeholder meetings in an effort to get to a place of compromise where we can accept the bill. Placing in statute the Essential Support Person as a visitor is the last issue that needs to be ironed out. We are opposed to placing this in law, but we are also working to be able to impose certain restrictions on an ESP should we be unsuccessful. We asked to see a proposed substitute bill before it is scheduled for executive session next week on the 10th. We hope to know more soon and will keep you apprised.

[SB 5139](#) - **Limiting rent increases after expiration of the governor's eviction moratorium.** For a second time this bill was scheduled for executive session on Feb 3rd. This prime sponsor of the bill, Sen. Das, was again expected to offer an amendment to her bill that will exempt assisted living communities and CCRCs. After the committee went to caucus, the bill was pulled and, again, no action was taken. We don't believe there was any disagreement our amendment, just a controversial bill all on its own. It has been scheduled again for potential executive session on Feb 10th.

[SB 5160](#) - **Addressing landlord-tenant relations by providing certain tenant protections during and after public health emergencies, providing for legal representation in eviction cases, and authorizing landlord access to state rental assistance programs.** This bill was passed out of committee on February 3rd as Substitute SB 5160. The substitute does contain an amendment that exempts assisted living facilities, nursing homes, adult family homes and continuing care retirement communities.

[SB 5115](#) - **Establishing health emergency labor standards.** This bill is waiting to be scheduled for executive action.

[HB 1073](#) - **Expanding coverage of the paid family and medical leave program.** Was passed out of committee with amendments. The amendments remove the modified employee eligibility threshold of \$1,000, and replaces it with a limited alternate eligibility, applicable to claims with effective dates from January 1, 2021 to June 30, 2022, for employees not meeting the existing hours worked threshold for 2020 or the first calendar quarter of 2021. There is also now a null & void clause if funding is not appropriated.

[HB 1097](#) - **Increasing worker protections.** This bill passed out of committee and now waits to be placed on the House floor for a vote.

[SB 5190](#) - **Providing health care workers with presumptive benefits during a public health emergency.** This bill is scheduled for executive action on February 10th.

You can find a more detailed description of each of these bills in Week 1 [write-up](#).

As a reminder the first cutoff date of the session will be **February 15th**. This will be the last day to pass bills out of policy committees and read them into the record on the floor in house of origin, except House fiscal committees and Senate Ways & Means and Transportation committees. We are certainly hoping a number of bills drop off.

Sincerely,

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