

NEW SECTION. Sec. 4. If specific funding for the purposes of this act, referencing this act by bill number, is not provided by June 30, 1990, in the omnibus appropriations act, this act shall be null and void.

NEW SECTION. Sec. 5. This act is necessary for the immediate preservation of the public peace, health, or safety, or support of the state government and its existing public institutions, and shall take effect immediately.

Passed the House March 8, 1990.

Passed the Senate March 8, 1990.

Approved by the Governor March 29, 1990.

Filed in Office of Secretary of State March 29, 1990.

CHAPTER 296

[Substitute House Bill No. 2603]

CHILDREN'S HEALTH PROGRAM

AN ACT Relating to children's health; amending RCW 74.09.010; adding new sections to chapter 74.09 RCW; repealing section 9, chapter 10, Laws of 1989 1st ex. sess. (uncodified); and providing an effective date.

Be it enacted by the Legislature of the State of Washington:

NEW SECTION. Sec. 1. It is the purpose of sections 1 through 5 of this act and RCW 74.09.010 to provide, consistent with appropriated funds, health care access and services to children in poverty in this state. To this end, a children's health program is established based on the following principles:

- (1) Access to preventive and other health care services should be made more readily available for children in poverty.
- (2) Unnecessary barriers to health care for children in poverty should be removed.
- (3) The status of children's health and their access to health care providers should be evaluated at appropriate intervals to determine program effectiveness and need for modification.
- (4) Health care services should be delivered in a cost-effective manner.
- (5) The program should be sensitive to cultural and ethnic differences among children in poverty.

NEW SECTION. Sec. 2. (1) There is hereby established a program to be known as the children's health program.

To the extent of available funds:

- (a) Health care services may be provided to persons who are under eighteen years of age with household incomes at or below the federal poverty level and not otherwise eligible for medical assistance or the limited casualty program for the medically needy.

(b) The determination of eligibility of recipients for health care services shall be the responsibility of the department. The application process shall be easy to understand and, to the extent possible, applications shall be made available at local schools and other appropriate locations. The department shall make eligibility determinations within the timeframes for establishing eligibility for children on medical assistance, as defined by RCW 74.09.510.

(c) The amount, scope, and duration of health care services provided to eligible children under the children's health program shall be the same as that provided to children under medical assistance, as defined in RCW 74.09.520.

(2) The legislature is interested in assessing the effectiveness of the prenatal care program. However, the legislature recognizes the cost and complexity associated with such assessment.

The legislature accepts the effectiveness of prenatal and maternity care at improving birth outcomes when these services are received by eligible persons. Therefore, the legislature intends to focus scarce assessment resources to determine the extent to which support services such as child care, psychosocial and nutritional assessment and counseling, case management, transportation, and other support services authorized by this act result in receipt of prenatal and maternity care by eligible persons.

The University of Washington shall conduct a study, based on a statistically significant state-wide sampling of data, to evaluate the effectiveness of the maternity care access program set forth in RCW 74.09.760 through 74.09.820 based on the principles set forth in RCW 74.09.770.

The University of Washington shall develop a plan and budget for the study in consultation with the legislative budget committee. The legislative budget committee shall also monitor the progress of the study.

The department of social and health services shall make data and other information available as needed to the University of Washington as required to conduct this study.

The study shall determine:

(a) The characteristics of women receiving services, including health risk factors;

(b) The extent to which access to maternity care and support services have improved in this state as a result of this program;

(c) The utilization of services and birth outcomes for women and infants served by this program by type of practitioner;

(d) The extent to which birth outcomes for women receiving services under this program have improved in comparison to birth outcomes of non-medicare mothers;

(e) The impact of increased medicare reimbursement to physicians on provider participation;

(f) The difference between costs for services provided under this program and medicaid reimbursement for the services;

(g) The gaps in services, if any, that may still exist for women and their infants as defined by RCW 74.09.790 (1) and (4) served by this program, excluding pregnant substance abusers, and women covered by private health insurance; and

(h) The number and mix of services provided to eligible women as defined by subsection (2)(g) of this section and the effect on birth outcomes as compared to nonmedicaid birth outcomes.

Results of the study shall be submitted to the legislative budget committee and appropriate committees of the legislature, by December 1 of each year through December 1, 1994, beginning with December 1, 1991.

****NEW SECTION. Sec. 3. (1) The children's health services committee is hereby established, which shall advise the secretary as set forth in this chapter. Its membership shall be composed as follows: The secretary shall appoint, from the department's personnel, representatives from the various service and related administrative support programs that address children's needs. The secretary of health shall appoint, with the approval of the secretary, appropriate department of health personnel to the committee, but shall include the deputy secretary of health or successor position and the administrator of the parent and child health service program as identified in RCW 43.70.080(6).***

(2) The requirements of subsection (1) of this section shall be in effect until June 30, 1993, at such time, the statutory responsibility shall be given to the department. The secretary may continue the committee under executive policy.

(3) The secretary and the secretary of health shall examine program areas where there is a lack of clear authority, dual responsibilities, or potential problems regarding jurisdiction between the department and department of health and submit a brief report to the governor and the legislature by December 1, 1992, outlining these problems and proposing remedial action.

(4) The committee, in coordination with counties, shall identify counties experiencing significant problems with access to health care for children eligible for services under chapter 74.09 RCW, based on indicators such as:

(a) Number of primary care providers for children eligible for services under chapter 74.09 RCW;

(b) Percent of children eligible for services under chapter 74.09 RCW;

(c) Postneonatal mortality rate for low-income children;

(d) Early and periodic screening, diagnosis, and treatment (EPSDT) utilization;

(e) Teen birth rate for low-income children; and

(f) Low birth weight rate for low-income children.

(5) The department shall provide data to each county within the state regarding its performance on the indicators in subsection (4) of this section

and notify those counties having a significant problem with access, as defined in this section. The county shall also be advised of the availability of technical and financial assistance from the state in support of local remedial action.

(6) Any county, including those not identified by the committee, wishing to pursue state assistance under this section may submit a request to the committee. The request should include a description of the access problems in their community, a plan for addressing those problems, and a description of how the state's technical or financial assistance will aid them in increasing access to pediatric care for children in poverty. The request for assistance shall be prepared in consultation with the department, local community service offices, the local public health officer, community health clinics, health care providers, hospitals, the business community, labor representatives, and low-income advocates in their area.

(7) Counties are encouraged to combine to fulfill their duties under this section. In doing so, they shall consider the organizational principles set forth in RCW 43.70.020. If after one hundred twenty days' notice by the committee that a significant problem with health care access to children exists within a county, the county has not submitted a preliminary request for assistance according to this section, the committee shall solicit or may receive requests for assistance from any health care provider within that county.

(8) The committee shall evaluate local requests for technical and financial assistance, and shall recommend to the secretary funding of any or all parts of the requests, using criteria such as:

(a) The number of children proposed to receive expanded access to pediatric health care per dollar expended;

(b) Ability to meet the particular needs of the community as defined in the county request, including responsiveness to the needs of ethnic and racial minorities and addressing language barriers to access; and

(c) Capability to meet stated goals of increasing access to pediatric care.

(9) The department, after considering the recommendations of the committee, shall provide financial assistance, such as grants to counties or disproportionate share payments to providers, to the extent of available funds. The department shall make such changes to the state medicaid plan or take such other action as may be needed to secure federal matching funds for grants under this section.

**Sec. 3 was vetoed, see message at end of chapter.*

NEW SECTION. Sec. 4. Local communities are encouraged to take actions necessary to make health care more accessible to children in poverty in their communities, such as coordinating the development of alternative health care delivery systems. To support communities in their efforts, the committee, in coordination with counties and to the extent funds are available, shall: (1) Advise the secretary and the secretary of health regarding

the dispensing of technical assistance to counties to enable them to develop provider resources and expand coordinated provision of health care to children in poverty, and (2) recommend to the secretary financial incentives to be provided within counties requesting assistance according to section 3 of this act.

NEW SECTION. Sec. 5. The committee, in coordination with the department of health, shall reevaluate the state of access to care for children in poverty on at least a biennial basis and shall provide this information, along with information on the implementation of sections 1 through 4 of this act, to the board of health for consideration of possible inclusion in the biennial state health report.

Sec. 6. Section 74.09.010, chapter 26, Laws of 1959 as last amended by section 11, chapter 406, Laws of 1987 and RCW 74.09.010 are each amended to read as follows:

As used in this chapter:

(1) "Children's health program" means the health care services program provided to children under eighteen years of age and in households with incomes at or below the federal poverty level as annually defined by the federal department of health and human services as adjusted for family size, and who are not otherwise eligible for medical assistance or the limited casualty program for the medically needy.

(2) "Committee" means the children's health services committee created in section 3 of this act.

(3) "County" means the board of county commissioners, county council, county executive, or tribal jurisdiction, or its designee. A combination of two or more county authorities or tribal jurisdictions may enter into joint agreements to fulfill the requirements of sections 2 through 5 of this act.

(4) "Department" means the department of social and health services.

~~((2) "Secretary" means the secretary of social and health services.~~

~~(3))~~ (5) "Department of health" means the Washington state department of health created pursuant to RCW 43.70.020.

(6) "Internal management" means the administration of medical assistance, medical care services, the children's health program, and the limited casualty program.

~~((4))~~ (7) "Limited casualty program" means the medical care program provided to medically needy persons as defined under Title XIX of the federal social security act, and to medically indigent persons who are without income or resources sufficient to secure necessary medical services.

(8) "Medical assistance" means the federal aid medical care program provided to categorically needy persons as defined under Title XIX of the federal social security act.

~~((5))~~ (9) "Medical care services" means the limited scope of care financed by state funds and provided to general assistance recipients, and recipients of alcohol and drug addiction services provided under chapter 74.50 RCW.

~~((6))~~ "Limited casualty program" means the medical care program provided to medically needy persons as defined under Title XIX of the federal social security act, and to medically indigent persons who are without income or resources sufficient to secure necessary medical services.

(7)) (10) "Nursing home" means nursing home as defined in RCW 18.51.010.

(11) "Poverty" means the federal poverty level determined annually by the United States department of health and human services, or successor agency.

(12) "Secretary" means the secretary of social and health services.

NEW SECTION. Sec. 7. Section 9, chapter 10, Laws of 1989 1st ex. sess. (uncodified) is repealed.

NEW SECTION. Sec. 8. Sections 1 through 5 of this act are each added to chapter 74.09 RCW.

NEW SECTION. Sec. 9. This act shall take effect July 1, 1990.

Passed the House March 8, 1990.

Passed the Senate March 8, 1990.

Approved by the Governor March 30, 1990, with the exception of certain items which were vetoed.

Filed in Office of Secretary of State March 30, 1990.

Note: Governor's explanation of partial veto is as follows:

"I am returning herewith, without my approval as to section 3, Engrossed Substitute House Bill No. 2603 entitled:

"AN ACT Relating to children's health."

This bill establishes the children's health program to provide health care services to children in poverty who are not otherwise eligible for medical assistance. I appreciate the Legislature's support for this state-funded health care program for young people in poverty.

Section 3 of this bill substantially changes the access support portion of the original proposal. My intention in our original bill was to have the Department of Social and Health Services (DSHS) work closely with the Department of Health to identify areas of the state experiencing difficulties with access of young children to pediatric care. I also intended the Department of Social and Health Services, in close coordination with the Department of Health, to provide technical and financial assistance to local communities to break down the barriers to access for poor children. The access support program for pediatric care was to use substantially the same process as is being used for maternity and perinatal care in the First Steps program.

Section 3 essentially allows only county governments to apply for and receive state financial and technical assistance. The circumstances under which a local health care provider, such as a community or migrant clinic, may solicit state financial and technical support are unnecessarily constrictive. This is a different process than is used in the First Steps program.

Local communities are best able to identify problems with access, and are best able to develop local resources. The state should not dictate to local communities who should participate or what they should do. Within the boundaries of accountability, this program should have sufficient flexibility to allow the state to support innovative ideas. I encourage all local health care providers and county health departments to step up to the challenge of addressing poor children's access to health care.

The remainder of the bill contains sufficient statutory structure to allow the Department of Social and Health Services to administer an access support program. I direct DSHS, subject to funding, to work closely with the Department of Health to adopt an access support program that follows substantially the same process used in the First Steps program.

With the exception of section 3, Engrossed Substitute House Bill No. 2603 is approved."

CHAPTER 297

[Substitute House Bill No. 2327]

SUNSET REVIEW

AN ACT Relating to sunset review; amending RCW 43.131.010, 43.131.050, 43.131.301, 43.131.302, 43.131.303, 43.131.304, 43.131.323, 43.131.343, 43.131.344, 43.131.351, 43.131.352, 43.131.357, 43.131.358, 18.74.010, and 18.74.012; adding new sections to chapter 18.06 RCW; adding new sections to chapter 18.19 RCW; adding new sections to chapter 18.36A RCW; adding new sections to chapter 18.51 RCW; adding new sections to chapter 18.73 RCW; adding new sections to chapter 18.83 RCW; adding new sections to chapter 43.31 RCW; adding new sections to chapter 43.121 RCW; adding new sections to chapter 43.131 RCW; adding new sections to chapter 43.240 RCW; adding new sections to chapter 53.31 RCW; adding new sections to chapter 67.16 RCW; adding new sections to chapter 77.12 RCW; recodifying RCW 43.131.301, 43.131.302, 43.131.303, 43.131.304, 43.131.323, 43.131.343, 43.131.344, 43.131.351, 43.131.352, 43.131.357, 43.131.358, 43.131.359, 43.131.360, 43.131.363, and 43.131.364; repealing RCW 18.06.900, 18.06.901, 19.118.901, 28A.61.900, 53.31.900, 67.16.240, 67.70.900, 43.131.256, 43.131.269, 43.131.270, 43.131.315, 43.131.316, 43.131.319, 43.131.320, 43.131.331, 43.131.332, 43.131.339, 43.131.345, 43.131.346, 43.131.361, 43.131.362 and 84.26.140; repealing section 9, chapter 387, Laws of 1987 (uncodified); and providing an effective date.

Be it enacted by the Legislature of the State of Washington:

Sec. 1. Section 1, chapter 289, Laws of 1977 ex. sess. and RCW 43.131.010 are each amended to read as follows:

This chapter may be known and cited as the Washington Sunset Act ((of 1977)).

Sec. 2. Section 5, chapter 289, Laws of 1977 ex. sess. as amended by section 1, chapter 22, Laws of 1979 and RCW 43.131.050 are each amended to read as follows:

The legislative budget committee shall cause to be conducted a program and fiscal review of ((each)) any state agency or program scheduled for termination by the processes provided in this chapter. Such program and fiscal review shall be completed and a preliminary report prepared on or before June 30th of the year prior to the date established for termination. Upon completion of its preliminary report, the legislative budget committee shall transmit copies of the report to the office of financial management. The office of financial management may then conduct its own program and