

service providers; client advocates; local governments; the department of social and health services; the office of financial management; and the Washington state institute on public policy.

NEW SECTION. Sec. 4. This act is necessary for the immediate preservation of the public peace, health, and safety, the support of the state government and its existing public institutions, and shall take effect immediately.

Passed the House February 29, 1984.

Passed the Senate February 26, 1984.

Approved by the Governor March 8, 1984.

Filed in Office of Secretary of State March 8, 1984.

CHAPTER 158

[Engrossed Second Substitute House Bill No. 1137]

RESPIRE CARE SERVICES

AN ACT Relating to respite care services; creating new sections; making an appropriation; and declaring an emergency.

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

NEW SECTION. Sec. 1. The legislature recognizes that:

(1) Most care provided for functionally disabled adults is delivered by family members or friends who are not compensated for their services. Family involvement is a crucial element for avoiding or postponing institutionalization of the disabled adult.

(2) Family or other caregivers who provide continuous care in the home are frequently under substantial stress, physical, psychological, and financial. The stress, if unrelieved by family or community support to the caregiver, may lead to premature or unnecessary nursing home placement.

(3) Respite care and other community-based supportive services for the caregiver and for the disabled adult could relieve some of the stresses, maintain and strengthen the family structure, and postpone or prevent institutionalization.

(4) With family and friends providing the primary care for the disabled adult, supplemented by community health and social services, long-term care may be less costly than if the individual were institutionalized.

NEW SECTION. Sec. 2. It is the intent of the legislature to provide for a demonstration of the possible cost-effectiveness of both in-home and out-of-home respite care services which are provided by a range of service providers. The respite care services shall:

(1) Provide relief and support to family or other unpaid caregivers of disabled adults;

(2) Encourage individuals to provide care for disabled adults at home, and thus offer a viable alternative to institutionalization;

(3) Ensure that respite care is made generally available on a sliding-fee basis to eligible participants and caregivers in the program; and

(4) Be provided in the least restrictive setting available consistent with the individually assessed needs of the functionally disabled adult.

NEW SECTION. Sec. 3. Unless the context clearly indicates otherwise, the definitions in this section apply throughout sections 1 through 7 of this act.

(1) "Respite care services" means relief care for families or other caregivers of disabled adults, not exceeding five hundred seventy-six hours in not more than twenty-four days in any twelve-month period for each household. The services provide temporary care or supervision of disabled adults in substitution for the caregiver. The term includes social day care.

(2) "Eligible participant" means an adult (a) who needs substantially continuous care or supervision by reason of his or her functional disability, and (b) who is assessed as requiring institutionalization in the absence of a caregiver assisted by home and community support services, including respite care.

(3) "Caregiver" means a spouse, relative, or friend who has primary responsibility for the care of a functionally disabled adult, who does not receive financial compensation for the care, and who is assessed as being at risk of placing the eligible participant in a long-term care facility if respite care is not available.

(4) "Institutionalization" means placement in a long-term care facility.

(5) "Social day care" means nonmedical services to persons who live with their families, cannot be left unsupervised, and are at risk of being placed in a twenty-four-hour care facility if their families do not receive some relief from constant care.

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

NEW SECTION. Sec. 4. The department shall administer sections 1 through 8 of this act and shall establish such rules and standards as the department deems necessary in carrying out sections 1 through 8 of this act. The department shall not require the development of plans of care or discharge plans by nursing homes providing respite care service.

The department shall develop program standards for the demonstration projects in conjunction with the selected area agencies on aging. The program standards shall serve as the basis for soliciting bids, entering into sub-contracts, and developing sliding fee scales to be used in determining the ability of eligible participants and caregivers to participate in paying for respite care.

NEW SECTION. Sec. 5. The department shall select at least two but not more than three area agencies on aging to conduct one-year respite care demonstration projects ending June 30, 1985. One of the selected area

agencies on aging shall be east of the crest of the Cascade range and one shall be west of the crest of the Cascade range. The area agencies on aging will be responsible for negotiating rates of payment and developing sliding-fee scales to enable eligible participants and caregivers to participate in paying for respite care. Rates of payment to respite care service providers shall not exceed, and may be less than, rates paid by the department to the same providers for other than respite care.

NEW SECTION. Sec. 6. The department shall insure that the respite care program is designed to meet the following criteria:

(1) Make maximum use of services which provide care to the greatest number of eligible participants with the fewest number of staff consistent with adequate care;

(2) Provide for use of one-on-one care when necessary;

(3) Provide for both day care and overnight care;

(4) Provide personal care to continue at the same level which the caregiver ordinarily provides to the eligible participant; and

(5) Provide for the utilization of family home settings.

NEW SECTION. Sec. 7. (1) The area agencies administering respite care demonstration projects shall:

(a) Maintain data which indicates demand for respite care, and which includes information on in-home and out-of-home day care and in-home and out-of-home overnight care demand; and

(b) Make a comparison of the relative cost-effectiveness of the several types of respite care with all other programs and services which are intended to forestall institutionalization.

(2) The department shall conduct a survey of all public assistance patients accepted by long-term care facilities in each participating planning and service area to determine the extent to which each of them availed themselves of services designed to defer institutionalization.

(3) The department shall provide a progress report to the legislature on the respite care demonstration projects authorized in this act, not later than January 1, 1985. The department shall report the results of the data collection, cost comparison, and survey as required in this section to the legislature not later than thirty days prior to the 1986 legislative session.

NEW SECTION. Sec. 8. Nothing in this act shall impair the practice of any licensed health care practitioner or licensed health care facility.

NEW SECTION. Sec. 9. There is appropriated to the department of social and health services from the general fund for the biennium ending June 30, 1985, the sum of five hundred thousand dollars, or so much thereof as may be necessary, to carry out the purposes of this act.

NEW SECTION. Sec. 10. This act is necessary for the immediate preservation of the public peace, health, and safety, the support of the state

government and its existing public institutions, and shall take effect immediately.

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CHAPTER 159

[Engrossed House Bill No. 1142]

OCCUPATIONAL DISEASES—DISABILITY BENEFITS

AN ACT Relating to occupational diseases; amending section 51.28.050, chapter 23, Laws of 1961 and RCW 51.28.050; amending section 51.28.055, chapter 23, Laws of 1961 as amended by section 34, chapter 350, Laws of 1977 ex. sess. and RCW 51.28.055; and amending section 51.28.020, chapter 23, Laws of 1961 as last amended by section 33, chapter 350, Laws of 1977 ex. sess. and RCW 51.28.020.

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

Sec. 1. Section 51.28.050, chapter 23, Laws of 1961 and RCW 51.28.050 are each amended to read as follows:

No application shall be valid or claim thereunder enforceable unless filed within one year after the day upon which the injury occurred or the rights of dependents or beneficiaries accrued, except as provided in RCW 51.28.055.

Sec. 2. Section 51.28.055, chapter 23, Laws of 1961 as amended by section 34, chapter 350, Laws of 1977 ex. sess. and RCW 51.28.055 are each amended to read as follows:

Claims for occupational disease or infection to be valid and compensable must be filed within ~~((one year))~~ two years following the date the worker had written notice from a physician: (1) Of the existence of his or her occupational disease, ((without reference to its date of origin)) and (2) that a claim for disability benefits may be filed. The notice shall also contain a statement that the worker has two years from the date of the notice to file a claim. The physician shall file the notice with the department. The department shall send a copy to the worker and to the self-insurer if the worker's employer is self-insured. However, a claim is valid if it is filed within two years from the date of death of the worker suffering from an occupational disease.

Sec. 3. Section 51.28.020, chapter 23, Laws of 1961 as last amended by section 33, chapter 350, Laws of 1977 ex. sess. and RCW 51.28.020 are each amended to read as follows:

Where a worker is entitled to compensation under this title he or she shall file with the department or his or her self-insuring employer, as the case may be, his or her application for such, together with the certificate of