

from a list of five persons submitted by the governor of the state of Washington, and shall hold office at the pleasure of the appointing power. He shall not be over the age of sixty years at the time of his appointment. He shall receive a salary (~~(of thirty-seven thousand five hundred dollars effective July 1, 1979, and forty thousand two hundred dollars effective July 1, 1980)~~) to be fixed by the supreme court.

Passed the Senate January 30, 1984.

Passed the House February 16, 1984.

Approved by the Governor February 21, 1984.

Filed in Office of Secretary of State February 21, 1984.

CHAPTER 21

[Substitute Senate Bill No. 4357]

JUDGMENT DEBTOR—REAL ESTATE LIENS NOT TO EXCEED TEN YEARS

AN ACT Relating to justice courts; amending section 95, page 240, Laws of 1854 as last amended by section 1795, Code of 1881 and RCW 12.24.100; and creating a new section.

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

Sec. 1. Section 95, page 240, Laws of 1854 as last amended by section 1795, Code of 1881 and RCW 12.24.100 are each amended to read as follows:

Execution for the enforcement of a judgment in a justice's court, may be issued on the application of the party entitled thereto, in the manner hereinbefore prescribed; but after the lapse of ~~((five))~~ ten years from the date of the judgment, no execution shall issue ~~((except by leave of the justice before whom such judgment may be, upon reasonable notice, to the defendant)).~~ A lien on real estate of a judgment debtor must be commenced under RCW 4.56.200(3) within ten years from the date of judgment, and shall run for a period not to exceed ten years from the date of the judgment.

NEW SECTION. Sec. 2. Section 1 of this act applies to all judgments which have not expired before the effective date of this act.

Passed the Senate February 4, 1984.

Passed the House February 16, 1984.

Approved by the Governor February 21, 1984.

Filed in Office of Secretary of State February 21, 1984.

CHAPTER 22

[Senate Bill No. 4787]

HOME HEALTH CARE—HOSPICE CARE—INSURANCE COVERAGE REVISIONS

AN ACT Relating to home health care; amending section 1, chapter 249, Laws of 1983 and RCW 48.21.220; amending section 2, chapter 249, Laws of 1983 and RCW 48.21A.090;

amending section 3, chapter 249, Laws of 1983 and RCW 48.44.320; amending section 5, chapter 249, Laws of 1983 and RCW 70.126.010; amending section 6, chapter 249, Laws of 1983 and RCW 70.126.020; amending section 7, chapter 249, Laws of 1983 and RCW 70.126.030; amending section 8, chapter 249, Laws of 1983 and RCW 70.126.040; and providing an effective date.

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

Sec. 1. Section 1, chapter 249, Laws of 1983 and RCW 48.21.220 are each amended to read as follows:

(1) Every insurer (~~(issuing)~~) entering into or renewing group or blanket disability insurance policies governed by this chapter shall offer optional coverage for home health care and hospice care for persons who are home-bound and would otherwise require hospitalization. Such optional coverage need only be offered in conjunction with a policy that provides payment for hospitalization as a part of health care coverage.

(2) Home health care and hospice care coverage offered under subsection (1) of this section shall conform to the following standards, limitations, and restrictions:

(a) The coverage may include reasonable deductibles (~~(and)~~), coinsurance provisions, and internal maximums;

(b) The coverage should be structured to create incentives for the use of home health care and hospice care as an alternative to hospitalization;

(c) The coverage may contain provisions for utilization review and quality assurance;

(d) The coverage may require that home health agencies and hospices (~~(agencies)~~) have written treatment plans approved by a physician licensed under chapter 18.57 or 18.71 RCW, and may require such treatment plans to be reviewed at designated intervals;

(e) The coverage shall provide benefits for, and may restrict benefits to, services rendered by home health and hospices (~~(agencies)~~) certified by the department of social and health services;

(f) Hospice care coverage shall provide benefits for terminally ill patients for an initial period of care of not less than six months and may provide benefits for an additional six months of care in cases where the patient is facing imminent death or is entering remission if certified in writing by the attending physician;

(g) Home health care coverage shall provide benefits for a minimum of one hundred thirty health care visits per calendar year. However, a visit of any duration by an employee of a home health agency for the purpose of providing services under the plan of treatment constitutes one visit;

(h) The coverage may be structured so that services or supplies included in the primary contract are not duplicated in the optional home health and hospice coverage.

(3) The insurance commissioner shall adopt any rules necessary to implement this section.

(4) The requirements of this section shall not apply to contracts or policies governed by chapter 48.66 RCW.

Sec. 2. Section 2, chapter 249, Laws of 1983 and RCW 48.21A.090 are each amended to read as follows:

(1) Every insurer (~~(issuing)~~) entering into or renewing extended health insurance governed by this chapter shall offer optional coverage for home health care and hospice care for persons who are homebound and would otherwise require hospitalization. Such optional coverage need only be offered in conjunction with a policy that provides payment for hospitalization as a part of health care coverage.

(2) Home health care and hospice care coverage offered under subsection (1) of this section shall conform to the following standards, limitations, and restrictions:

(a) The coverage may include reasonable deductibles (~~(and)~~), coinsurance provisions, and internal maximums;

(b) The coverage should be structured to create incentives for the use of home health care and hospice care as an alternative to hospitalization;

(c) The coverage may contain provisions for utilization review and quality assurance;

(d) The coverage may require that home health agencies and hospices (~~(agencies)~~) have written treatment plans approved by a physician licensed under chapter 18.57 or 18.71 RCW, and may require such treatment plans to be reviewed at designated intervals;

(e) The coverage shall provide benefits for, and may restrict benefits to, services rendered by home health and hospices (~~(agencies)~~) certified by the department of social and health services;

(f) Hospice care coverage shall provide benefits for terminally ill patients for an initial period of care of not less than six months and may provide benefits for an additional six months of care in cases where the patient is facing imminent death or is entering remission if certified in writing by the attending physician;

(g) Home health care coverage shall provide benefits for a minimum of one hundred thirty health care visits per calendar year. However, a visit of any duration by an employee of a home health agency for the purpose of providing services under the plan of treatment constitutes one visit;

(h) The coverage may be structured so that services or supplies included in the primary contract are not duplicated in the optional home health and hospice coverage.

(3) The insurance commissioner shall adopt any rules necessary to implement this section.

(4) The requirements of this section shall not apply to contracts or policies governed by chapter 48.66 RCW.

Sec. 3. Section 3, chapter 249, Laws of 1983 and RCW 48.44.320 are each amended to read as follows:

(1) Every health care service contractor (~~(issuing)~~) entering into or renewing a group health care service contract governed by this chapter shall offer optional coverage for home health care and hospice care for persons who are homebound and would otherwise require hospitalization. Such optional coverage need only be offered in conjunction with a policy that provides payment for hospitalization as a part of health care coverage.

(2) Home health care and hospice care coverage offered under subsection (1) of this section shall conform to the following standards, limitations, and restrictions:

(a) The coverage may include reasonable deductibles (~~(and)~~), coinsurance provisions, and internal maximums;

(b) The coverage should be structured to create incentives for the use of home health care and hospice care as an alternative to hospitalization;

(c) The coverage may contain provisions for utilization review and quality assurance;

(d) The coverage may require that home health agencies and hospices (~~(agencies)~~) have written treatment plans approved by a physician licensed under chapter 18.57 or 18.71 RCW, and may require such treatment plans to be reviewed at designated intervals;

(e) The coverage shall provide benefits for, and may restrict benefits to, services rendered by home health and hospices (~~(agencies)~~) certified by the department of social and health services;

(f) Hospice care coverage shall provide benefits for terminally ill patients for an initial period of care of not less than six months and may provide benefits for an additional six months of care in cases where the patient is facing imminent death or is entering remission if certified in writing by the attending physician;

(g) Home health care coverage shall provide benefits for a minimum of one hundred thirty health care visits per calendar year. However, a visit of any duration by an employee of a home health agency for the purpose of providing services under the plan of treatment constitutes one visit;

(h) The coverage may be structured so that services or supplies included in the primary contract are not duplicated in the optional home health and hospice coverage.

(3) The insurance commissioner shall adopt any rules necessary to implement this section.

(4) The requirements of this section shall not apply to contracts or policies governed by chapter 48.66 RCW.

Sec. 4. Section 5, chapter 249, Laws of 1983 and RCW 70.126.010 are each amended to read as follows:

Unless the context clearly requires otherwise, the definitions in this section apply throughout this chapter.

(1) "Hospice (~~agency~~)" means a private or public agency or organization that administers and provides hospice care and is certified by the department of social and health services as a hospice care agency.

(2) "Hospice care" means care prescribed and supervised by the attending physician and provided by the hospice (~~agency~~) to the terminally ill in ~~((the patient's home, or in an inpatient hospice unit that meets))~~ accordance with the standards of RCW 70.126.030.

(3) "Home health agency" means a private or public agency or organization that administers and provides home health care and is certified by the department of social and health services as a home health care agency.

(4) "Home health care" means services, supplies, and medical equipment that meet the standards of RCW 70.126.020, prescribed and supervised by the attending physician, and provided through a home health agency and rendered to members in their residences when hospitalization would otherwise be required.

(5) "Home health aide" means a person employed by a home health agency or a hospice who is providing part-time or intermittent ((personaf)) care((,-ambulation and exercise, household services essential to health care at home;)) under the supervision of a registered nurse, a physical therapist, occupational therapist, or speech therapist. Such care includes ambulation and exercise, assistance with medications ordinarily self-administered, reporting changes in patients' conditions and needs, ~~((and))~~ completing appropriate records ~~((and under the supervision of a registered nurse or a physical therapist, occupational therapist, or speech therapist)),~~ and personal care or household services that are needed to achieve the medically desired results.

(6) ~~((("Plan of treatment" means a written plan of care established and periodically reviewed by a physician that describes home health or hospice care to be provided to a patient for palliation or treatment of illness or injury:))~~ "Home health care plan of treatment" means a written plan of care established and periodically reviewed by a physician that describes medically necessary home health care to be provided to a patient for treatment of illness or injury.

(7) ~~((("Certification period" means the period of time for which the home health care or hospice care plan of treatment is written:))~~ "Hospice plan of care" means a written plan of care established and periodically reviewed by a physician that describes hospice care to be provided to a terminally ill patient for palliation or medically necessary treatment of an illness or injury.

(8) "Physician" means a physician licensed under chapter 18.57 or 18.71 RCW.

Sec. 5. Section 6, chapter 249, Laws of 1983 and RCW 70.126.020 are each amended to read as follows:

(1) Home health care shall be provided by a home health agency and shall:

(a) Be delivered by a registered nurse, physical therapist, occupational therapist, speech therapist, or home health aide on a part-time or intermittent basis;

(b) Include, as applicable under the written plan, supplies and equipment such as:

(i) ~~Drugs and medicines ((dispensed by or through the agency))~~ that are legally obtainable only upon a physician's written prescription, and insulin;

(ii) ~~((Artificial limbs or eyes, splints, trusses, braces, crutches, and other durable medical apparatus, and the rental of a wheelchair, hospital bed, iron lung, and other))~~ Rental of durable medical ((equipment required)) apparatus and medical equipment such as wheelchairs, hospital beds, respirators, splints, trusses, braces, or crutches needed for treatment;

(iii) Supplies normally used for hospital inpatients and dispensed by the home health agency such as oxygen, catheters, needles, syringes, dressings, materials used in aseptic techniques, irrigation solutions, and intravenous fluids.

(2) The following services may be included when medically necessary, ordered by the attending physician, and included in the approved plan of treatment:

(a) Licensed practical nurses;

(b) ~~((Inhalation))~~ Respiratory therapists;

(c) Social workers holding a master's degree;

(d) Ambulance service that is certified by the physician as necessary in the approved plan of treatment because of the patient's physical condition or for unexpected emergency situations.

(3) Services not included in home health care include:

(a) Nonmedical, custodial, or housekeeping services except by ~~((nurse aides or))~~ home health aides as ordered in the approved plan of treatment;

(b) "Meals on Wheels" or similar food services;

(c) Nutritional guidance;

(d) Services performed by family members;

(e) Services not included in an approved plan of treatment;

(f) Supportive environmental materials such as handrails, ramps, telephones, air conditioners, and similar appliances and devices.

Sec. 6. Section 7, chapter 249, Laws of 1983 and RCW 70.126.030 are each amended to read as follows:

(1) Hospice care shall be provided by a hospice ~~((agency))~~ and shall meet the standards of RCW 70.126.020 (1)(a) and (b)(ii) and (iii).

(2) A written hospice care plan shall be approved by a physician and shall be reviewed at designated intervals.

(3) The following services for necessary medical or palliative care shall be included when ~~((medically necessary,))~~ ordered by the attending physician(;) and included in the approved plan of treatment:

(a) Short-term care ~~((in))~~ as an inpatient ~~((hospice unit));~~

(b) Care of the terminally ill in an individual's home on an outpatient basis as included in the approved plan of treatment;

(c) Respite care that is continuous care in the most appropriate setting for a maximum of five ~~((continuous))~~ days per ~~((certification period))~~ three-month period of hospice care.

Sec. 7. Section 8, chapter 249, Laws of 1983 and RCW 70.126.040 are each amended to read as follows:

The department of social and health services shall adopt rules establishing standards for the certification of home health agencies and hospices ~~((agencies))~~ under this chapter. These standards shall be compatible with and at least as stringent as home health and hospice certification regulations established by the United States department of health and human services and hospice ~~((agency))~~ accreditation standards established by the joint commission on accreditation of hospitals.

NEW SECTION. Sec. 8. This act shall take effect July 1, 1984.

Passed the Senate February 1, 1984.

Passed the House February 15, 1984.

Approved by the Governor February 21, 1984.

Filed in Office of Secretary of State February 21, 1984.

CHAPTER 23

[Senate Bill No. 4642]

MUTUAL INSURERS—REORGANIZATION PLANS OR REINSURANCE AGREEMENTS

AN ACT Relating to mutual insurers; amending section .09.35, chapter 79, Laws of 1947 as amended by section 1, chapter 32, Laws of 1983 1st ex. sess. and RCW 48.09.350; and amending section .09.36, chapter 79, Laws of 1947 and RCW 48.09.360.

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

Sec. 1. Section .09.35, chapter 79, Laws of 1947 as amended by section 1, chapter 32, Laws of 1983 1st ex. sess. and RCW 48.09.350 are each amended to read as follows:

(1) Upon satisfaction of the requirements applicable to the formation of a domestic stock insurer, a domestic mutual insurer may be reorganized as a stock corporation, pursuant to a plan of reorganization as approved by the commissioner.