last examination given for a particular rank shall be used in compiling each eligible list therefor. The chief, or in his discretion a committee of three individuals appointed by him, shall prepare and conduct the examinations, and thereafter grade and evaluate them in accordance with the following provisions, or factors: For promotion to the rank of lieutenant; (1) Service rating forty percent; (2) written examination thirty percent; (3) oral examination and interview twenty percent; (4) personnel record ten percent: For promotion to the rank of sergeant; (1) Service rating fifty percent; (2) written examination fifty percent.

<u>NEW SECTION.</u> Sec. 2. 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 Senate February 18, 1985.

Passed the House March 8, 1985.

Approved by the Governor March 13, 1985.

Filed in Office of Secretary of State March 13, 1985.

## **CHAPTER 5**

[Engrossed Substitute House Bill No. 500]

MEDICAL SERVICES——CERTAIN SERVICES NEED SPECIFIC

APPROPRIATION——MEDICAL ASSISTANCE ELIGIBILITY MODIFIED FOR PREGNANT WOMEN

AN ACT Relating to medical care programs; amending RCW 74.09.035, 74.09.510, 74.09.520, and 74.09.700; and declaring an emergency.

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

- Sec. 1. Section 19, chapter 6, Laws of 1981 1st ex. sess. as last amended by section 2, chapter 43, Laws of 1983 1st ex. sess. and RCW 74-.09.035 are each amended to read as follows:
- (1) To the extent of available funds, medical care services may be provided to recipients of general assistance in accordance with medical eligibility requirements established by the department.
- (2) Determination of the amount, scope, and duration of medical care services shall be limited to coverage as defined by the department, except that adult dental, and routine foot care shall not be included unless there is a specific appropriation for these services.
- (3) The department shall establish standards of assistance and resource and income exemptions, which may include deductibles and co-insurance provisions. In addition, the department may include a prohibition against the voluntary assignment of property or cash for the purpose of qualifying for assistance.
- (4) Residents of skilled nursing homes, intermediate care facilities, and intermediate care facilities for the mentally retarded who are eligible for

medical care services shall be provided medical services to the same extent as provided to those persons eligible under the medical assistance program.

- (5) Payments made by the department under this program shall be the limit of expenditures for medical care services solely from state funds.
- (6) Eligibility for medical care services shall commence with the date of certification for general assistance.
- Sec. 2. Section 4, chapter 30, Laws of 1967 ex. sess. as last amended by section 5, chapter 3, Laws of 1981 2nd ex. sess. and RCW 74.09.510 are each amended to read as follows:

Medical assistance may be provided in accordance with eligibility requirements established by the department of social and health services, including the prohibition under RCW 74.09.532 through 74.09.536 against the knowing and wilful assignment of property or cash for the purpose of qualifying for such assistance, as defined in the social security Title XIX state plan for mandatory categorically needy persons and: (1) Individuals who would be eligible for cash assistance except for their institutional status; (2) individuals who are under twenty-one years of age, who would be eligible for aid to families with dependent children, but do not qualify as dependent children and who are in (a) foster care, (b) subsidized adoption, (c) an intermediate care facility or an intermediate care facility for the mentally retarded, or (d) inpatient psychiatric facilities; (3) the aged, blind, and disabled who: (a) Receive only a state supplement, or (b) would not be eligible for cash assistance if they were not institutionalized; (4) individuals who would be eligible for but choose not to receive cash assistance; ((and)) (5) pregnant women who would be eligible for aid to families with dependent children if the child had been born and was living with the mother during the month of the payment, and the pregnancy has been medically verified; (6) individuals who are enrolled in managed health care systems, who have otherwise lost eligibility for medical assistance, but who have not completed a current six-month enrollment in a managed health care system, and who are eligible for federal financial participation under Title XIX of the social security act; and (7) other individuals eligible for medical services under RCW 74.09.035 and 74.09.700 for whom federal financial participation is available under Title XIX of the social security act.

Sec. 3. Section 5, chapter 30, Laws of 1967 ex. sess. as last amended by section 4, chapter 19, Laws of 1982 1st ex. sess. and RCW 74.09.520 are each amended to read as follows:

The term "medical assistance" may include the following care and services: (1) Inpatient hospital services; (2) outpatient hospital services; (3) other laboratory and x-ray services; (4) skilled nursing home services; (5) physicians' services, which shall include prescribed medication and instruction on birth control devices; (6) medical care, or any other type of remedial care as may be established by the secretary; (7) home health care services; (8) private duty nursing services; (9) dental services; (10) physical therapy

and related services; (11) prescribed drugs, dentures, and prosthetic devices; and eyeglasses prescribed by a physician skilled in diseases of the eye or by an optometrist, whichever the individual may select; (12) other diagnostic, screening, preventive, and rehabilitative services: PROVIDED, That the department may not cut off any prescription medications, oxygen supplies, respiratory services, or other life-sustaining medical services or supplies.

"Medical assistance," notwithstanding any other provision of law, shall not include routine foot care, or dental services delivered by any health care provider, that are not mandated by Title XIX of the social security act unless there is a specific appropriation for these services.

- Sec. 4. Section 22, chapter 6, Laws of 1981 1st ex. sess. as last amended by section 1, chapter 43, Laws of 1983 1st ex. sess. and RCW 74-.09.700 are each amended to read as follows:
- (1) To the extent of available funds, medical care may be provided under the limited casualty program to persons not otherwise eligible for medical assistance or medical care services who are medically needy as defined in the social security Title XIX state plan and medical indigents in accordance with medical eligibility requirements established by the department. This includes residents of skilled nursing homes, intermediate care facilities, and intermediate care facilities for the mentally retarded who are aged, blind, or disabled as defined in Title XVI of the federal social security act and whose income exceeds three hundred percent of the federal supplement security income benefit level.
- (2) Determination of the amount, scope, and duration of medical coverage under the limited casualty program shall be the responsibility of the department, subject to the following:
- (a) Only inpatient hospital services; outpatient hospital and rural health clinic services; physicians' and clinic services; prescribed drugs, dentures, prosthetic devices, and eyeglasses; skilled nursing home services, intermediate care facility services, and intermediate care facility services for the mentally retarded; home health services; other laboratory and x-ray services; ((and)) rehabilitative services; medically necessary transportation; and other services for which funds are specifically provided in the omnibus appropriations act shall be covered;
- (b) ((A patient deductible not to exceed one-half the payment the department makes for the first day's stay for inpatient hospital care, shall be included for the medically needy component of the program;
- (c))) Persons who are medically indigent and are not eligible for a federal aid program shall satisfy a deductible of not less than one hundred dollars nor more than five hundred dollars in any twelve-month period;
- (((d))) (c) Medical care services provided to the medically indigent and received no more than seven days prior to the date of application shall be retroactively certified and approved for payment on behalf of a person who was otherwise eligible at the time the medical services were furnished:

PROVIDED, That eligible persons who fail to apply within the seven-day time period for medical reasons or other good cause may be retroactively certified and approved for payment.

(3) The department shall establish standards of assistance and resource and income exemptions. All nonexempt income and resources of limited casualty program recipients shall be applied against the cost of their medical care services. In addition, the department shall include a prohibition against the knowing and wilful assignment of property or cash for the purpose of qualifying for assistance under RCW 74.09.532 through 74.09.536.

<u>NEW SECTION.</u> Sec. 5. 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 March 20, 1985. Passed the Senate March 21, 1985. Approved by the Governor March 25, 1985. Filed in Office of Secretary of State March 25, 1985.

## **CHAPTER 6**

[Senate Bill No. 3040]
DEPARTMENT OF COMMUNITY DEVELOPMENT—OBSOLETE REFERENCES
CORRECTED

AN ACT Relating to the department of community development; amending RCW 28A-.57.050, 35.13.171, 35.21.300, 35.21.775, 36.57A.070, 36.57A.150, 36.93.080, 42.17.2401, 43-.63A.200, 43.132.030, 43.150.040, 43.160.020, 43.160.030, 43.180.040, 43.180.200, 47.39.040, 49.04.100, 50.38.030, 54.16.285, 54.52.010, 54.52.020, 67.38.070, 70.95.260, 79.08.1078, and 80.28.010; decodifying RCW 43.41.900, 43.41.910, 43.41.920, 43.41.930, 43.41.960, 47.01-.111, and 47.01.121; and repealing RCW 43.63A.045.

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

Sec. 1. Section 2, chapter 15, Laws of 1975-'76 2nd ex. sess. and RCW 28A.57.050 are each amended to read as follows:

The powers and duties of the county committee shall be:

(1) To initiate, on its own motion and whenever it deems such action advisable, proposals or alternate proposals for changes in the organization and extent of school districts in the county; to receive, consider, and revise, whenever in its judgment revision is advisable, proposals initiated by petition or presented to the committee by the educational service district superintendent as provided for in this chapter; to prepare and submit to the state board any of the aforesaid proposals that are found by the county committee to provide for satisfactory improvement in the school district system of the county and state; to prepare and submit with the aforesaid proposals, a map showing the boundaries of existing districts affected by any proposed