

SENATE BILL 5010

State of Washington

52nd Legislature

1991 Regular Session

By Senators Moore, West and Conner.

R-ead first time January 14, 1991. Referred to Committee on Health & Long-Term Care.

1 AN ACT Relating to occupational therapy; amending RCW 74.09.700;
2 and reenacting and amending RCW 74.09.520.

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

4 **Sec. 1.** RCW 74.09.520 and 1990 c 33 s 594 and 1990 c 25 s 1 are
5 each reenacted and amended to read as follows:

6 (1) The term "medical assistance" may include the following care
7 and services: (a) Inpatient hospital services; (b) outpatient hospital
8 services; (c) other laboratory and x-ray services; (d) skilled nursing
9 home services; (e) physicians' services, which shall include prescribed
10 medication and instruction on birth control devices; (f) medical care,
11 or any other type of remedial care as may be established by the
12 secretary; (g) home health care services; (h) private duty nursing
13 services; (i) dental services; (j) physical and occupational therapy
14 and related services; (k) prescribed drugs, dentures, and prosthetic

1 devices; and eyeglasses prescribed by a physician skilled in diseases
2 of the eye or by an optometrist, whichever the individual may select;
3 (l) personal care services, as provided in this section; (m) hospice
4 services; (n) other diagnostic, screening, preventive, and
5 rehabilitative services; and (o) like services when furnished to a
6 handicapped child by a school district as part of an individualized
7 education program established pursuant to RCW 28A.155.010 through
8 28A.155.100. For the purposes of this section, the department may not
9 cut off any prescription medications, oxygen supplies, respiratory
10 services, or other life-sustaining medical services or supplies.

11 "Medical assistance," notwithstanding any other provision of law,
12 shall not include routine foot care, or dental services delivered by
13 any health care provider, that are not mandated by Title XIX of the
14 social security act unless there is a specific appropriation for these
15 services. Services included in an individualized education program for
16 a handicapped child under RCW 28A.155.010 through 28A.155.100 shall not
17 qualify as medical assistance prior to the implementation of the
18 funding process developed under RCW 74.09.524.

19 (2) The department shall amend the state plan for medical
20 assistance under Title XIX of the federal social security act to
21 include personal care services, as defined in 42 C.F.R. 440.170(f), in
22 the categorically needy program.

23 (3) The department shall adopt, amend, or rescind such
24 administrative rules as are necessary to ensure that Title XIX personal
25 care services are provided to eligible persons in conformance with
26 federal regulations.

27 (a) These administrative rules shall include financial eligibility
28 indexed according to the requirements of the social security act
29 providing for medicaid eligibility.

1 (b) The rules shall require clients be assessed as having a medical
2 condition requiring assistance with personal care tasks. Plans of care
3 must be approved by a physician and reviewed by a nurse every ninety
4 days.

5 (4) The department shall design and implement a means to assess the
6 level of functional disability of persons eligible for personal care
7 services under this section. The personal care services benefit shall
8 be provided to the extent funding is available according to the
9 assessed level of functional disability. Any reductions in services
10 made necessary for funding reasons should be accomplished in a manner
11 that assures that priority for maintaining services is given to persons
12 with the greatest need as determined by the assessment of functional
13 disability.

14 (5) The department shall report to the appropriate fiscal
15 committees of the legislature on the utilization and associated costs
16 of the personal care option under Title XIX of the federal social
17 security act, as defined in 42 C.F.R. 440.170(f), in the categorically
18 needy program. This report shall be submitted by January 1, 1990, and
19 submitted on a yearly basis thereafter.

20 (6) Effective July 1, 1989, the department shall offer hospice
21 services in accordance with available funds. The department shall
22 provide a complete accounting of the costs of providing hospice
23 services under this section by December 20, 1990. The report shall
24 include an assessment of cost savings which may result by providing
25 hospice to persons who otherwise would use hospitals, nursing homes, or
26 more expensive care. The hospice benefit under this section shall
27 terminate on June 30, 1991, unless extended by the legislature.

28 **Sec. 2.** RCW 74.09.700 and 1989 c 87 s 3 are each amended to read
29 as follows:

1 (1) To the extent of available funds, medical care may be provided
2 under the limited casualty program to persons not otherwise eligible
3 for medical assistance or medical care services who are medically needy
4 as defined in the social security Title XIX state plan and medical
5 indigents in accordance with medical eligibility requirements
6 established by the department. This includes residents of skilled
7 nursing homes, intermediate care facilities, and intermediate care
8 facilities for the mentally retarded who are aged, blind, or disabled
9 as defined in Title XVI of the federal social security act and whose
10 income exceeds three hundred percent of the federal supplement security
11 income benefit level.

12 (2) Determination of the amount, scope, and duration of medical
13 coverage under the limited casualty program shall be the responsibility
14 of the department, subject to the following:

15 (a) Only inpatient hospital services; outpatient hospital and rural
16 health clinic services; physicians' and clinic services; prescribed
17 drugs, dentures, prosthetic devices, and eyeglasses; skilled nursing
18 home services, intermediate care facility services, and intermediate
19 care facility services for the mentally retarded; home health services;
20 other laboratory and x-ray services; rehabilitative services, including
21 occupational therapy; medically necessary transportation; and other
22 services for which funds are specifically provided in the omnibus
23 appropriations act shall be covered;

24 (b) Persons who are medically indigent and are not eligible for a
25 federal aid program shall satisfy a deductible of not less than one
26 hundred dollars nor more than five hundred dollars in any twelve-month
27 period;

28 (c) Medical care services provided to the medically indigent and
29 received no more than seven days prior to the date of application shall
30 be retroactively certified and approved for payment on behalf of a

1 person who was otherwise eligible at the time the medical services were
2 furnished: PROVIDED, That eligible persons who fail to apply within
3 the seven-day time period for medical reasons or other good cause may
4 be retroactively certified and approved for payment.

5 (3) The department shall establish standards of assistance and
6 resource and income exemptions. All nonexempt income and resources of
7 limited casualty program recipients shall be applied against the cost
8 of their medical care services.