
SUBSTITUTE HOUSE BILL 1220

State of Washington

59th Legislature

2005 Regular Session

By House Committee on Health Care (originally sponsored by Representatives Morrell, Schual-Berke, Cody, Simpson, Campbell, Williams, Chase, Kenney, O'Brien, Clibborn, Conway, Green, Kagi and Upthegrove; by request of Governor Gregoire)

READ FIRST TIME 03/04/05.

1 AN ACT Relating to establishing a task force on long-term care
2 financing and chronic care management; and creating a new section.

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

4 NEW SECTION. **Sec. 1.** (1) The governor shall establish a joint
5 legislative and executive task force on long-term care financing and
6 chronic care management. The joint task force consists of eight
7 members, as follows: The secretary of the department of social and
8 health services or his or her designee; the secretary of the department
9 of health or his or her designee; the administrator of the health care
10 authority or his or her designee; a representative from the governor's
11 office; two members of the senate appointed by the president of the
12 senate, one of whom shall be a member of the majority caucus and one of
13 whom shall be a member of the minority caucus; and two members of the
14 house of representatives appointed by the speaker of the house of
15 representatives, one of whom shall be a member of the majority caucus
16 and one of whom shall be a member of the minority caucus.

17 (2) The joint task force shall elect a member of the joint task
18 force to serve as chair of the joint task force.

1 (3) Consistent with funds appropriated specifically for this
2 purpose, the joint task force shall contract for professional services.
3 State agencies, the senate, and the house of representatives may
4 provide staff support upon request of the joint task force.

5 (4) The joint task force shall create advisory committees to assist
6 the joint task force in its work. The task force shall actively
7 consult with and solicit recommendations from the advisory committee or
8 committees regarding issues under consideration by the task force.

9 (5) Joint task force members may be reimbursed for travel expenses
10 as authorized under RCW 43.03.050 and 43.03.060, and chapter 44.04 RCW
11 as appropriate. Advisory committee members, if appointed, may not
12 receive compensation or reimbursement for travel or expenses.

13 (6) The joint task force shall review public and private mechanisms
14 for financing long-term care and make recommendations related to:

15 (a) The composition of a long-term care system that is adequate to
16 meet the needs of persons of all ages with functional limitations,
17 including appropriate services to be offered in the continuum of care
18 ranging from services to support persons residing at home through
19 residential care;

20 (b) Efficient payment models that will effectively sustain public
21 funding of long-term care and maximize the use of financial resources
22 to directly meet the needs of persons of all ages with functional
23 limitations;

24 (c) State laws and regulations that should be revised and/or
25 eliminated in order to reduce or contain long-term care costs to
26 individuals and the state;

27 (d) The feasibility of private options for realistically enabling
28 individuals to pay for long-term care and the most effective tools for
29 implementing these options. The assessment of options should include
30 but not be limited to: (i) Adequacy of personal savings and pensions;
31 (ii) availability of family care, including incentives and supports for
32 families to provide care or pay for care; (iii) creative
33 community-based strategies or partnerships for funding quality
34 long-term care; (iv) enhanced health insurance options; (v) long-term
35 care insurance options, including incentives to purchase long-term care
36 insurance through individual or group-based products; (vi) life
37 insurance annuities; and (vii) reverse mortgage and other products that
38 draw on home equity; and

1 (e) Options that will support long-term care needs of rural
2 communities.

3 (7) The joint task force shall recommend chronic care management
4 and disability prevention interventions that will reduce health care
5 and long-term care costs to individuals and the state, improve the
6 health of individuals over their life span, and encourage patient
7 self-management of chronic care needs.

8 (8) The joint task force shall incorporate a process designed to
9 facilitate an open dialog with the public on findings and
10 recommendations.

11 (9) The joint task force shall: (a) Report its initial findings to
12 the governor and appropriate committees of the legislature by January
13 1, 2006; (b) report its recommendations to the governor and appropriate
14 committees of the legislature by January 1, 2007; and (c) submit a
15 final report to the governor and appropriate committees of the
16 legislature by June 30, 2007.

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