
SECOND SUBSTITUTE HOUSE BILL 1087

State of Washington

66th Legislature

2019 Regular Session

By House Appropriations (originally sponsored by Representatives Jinkins, MacEwen, Cody, Harris, Tharinger, Slatter, Kloba, Ryu, Macri, DeBolt, Bergquist, Doglio, Robinson, Stanford, Stonier, Frame, and Leavitt)

READ FIRST TIME 02/18/19.

1 AN ACT Relating to long-term services and supports; amending RCW
2 74.39A.076 and 18.88B.041; reenacting and amending RCW 43.79A.040;
3 adding a new section to chapter 44.28 RCW; and adding a new chapter
4 to Title 50A RCW.

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

6 NEW SECTION. **Sec. 1.** The legislature finds that:

7 (1) Long-term care is not covered by medicare or other health
8 insurance plans, and the few private long-term care insurance plans
9 that exist are unaffordable for most people, leaving more than ninety
10 percent of seniors uninsured for long-term care. The current market
11 for long-term care insurance is broken: In 2002, there were one
12 hundred two companies offering long-term care insurance coverage, but
13 today that number is only twelve.

14 (2) The majority of people over sixty-five years of age will need
15 long-term services and supports within their lifetimes. The senior
16 population has doubled in Washington since 1980, to currently over
17 one million, and will more than double again by 2040. Without access
18 to insurance, seniors must rely on family care and spend their life
19 savings down to poverty levels in order to access long-term care
20 through medicaid. In Washington, more than eight hundred fifty
21 thousand unpaid family caregivers provided care valued at eleven

1 billion dollars in 2015. Furthermore, family caregivers who leave the
2 workforce to provide unpaid long-term services and supports lose an
3 average of three hundred thousand dollars in their own income and
4 health and retirement benefits.

5 (3) Paying out-of-pocket for long-term care is expensive. In
6 Washington, the average cost for medicaid in-home care is twenty-four
7 thousand dollars per year and the average cost for nursing home care
8 is sixty-five thousand dollars per year. These are costs that most
9 seniors cannot afford.

10 (4) Seniors and the state will not be able to continue their
11 reliance on family caregivers in the near future. Demographic shifts
12 mean that fewer potential family caregivers will be available in the
13 future. Today, there are around seven potential caregivers for each
14 senior, but by 2030 that ratio will decrease to four potential
15 caregivers for each senior.

16 (5) Long-term services and supports comprise approximately six
17 percent of the state operating budget, and demand for these services
18 will double by 2030 to over twelve percent. This will result in an
19 additional six billion dollars in increased near-general fund costs
20 for the state by 2030.

21 (6) An alternative funding mechanism for long-term care access in
22 Washington state could relieve hardship on families and lessen the
23 burden of medicaid on the state budget. In addition, an alternative
24 funding mechanism could result in positive economic impact to our
25 state through increased state competition and fewer Washingtonians
26 leaving the workforce to provide unpaid care.

27 (7) The average aging and long-term supports administration
28 medicaid consumer utilizes ninety-six hours of care per month. At
29 current costs, a one hundred dollars per day benefit for three
30 hundred sixty-five days would provide complete financial relief for
31 the average in-home care consumer and substantial relief for the
32 average facility care consumer for a full year or more.

33 (8) Under current caseload and demographic projections, an
34 alternative funding mechanism for long-term care access could save
35 the medicaid program eight hundred ninety-eight million dollars in
36 the 2051-2053 biennium.

37 (9) As the state pursues an alternative funding mechanism for
38 long-term care access, the state must continue its commitment to
39 promoting choice in approved services and long-term care settings.

1 Therefore, any alternative funding mechanism program should be
2 structured such that:

3 (a) Individuals are able to use their benefits for long-term care
4 services in the setting of their choice, whether in the home, a
5 residential community-based setting, or a skilled nursing facility;

6 (b) The choice of provider types and approved services is the
7 same or greater than currently available through Washington's
8 publicly funded long-term services and supports;

9 (c) Transitions from private and public funding sources for
10 consumers are seamless; and

11 (d) Long-term care health status data is collected across all
12 home and community-based settings.

13 (10) The creation of a long-term care insurance benefit of an
14 established dollar amount per day for three hundred sixty-five days
15 for all eligible Washington employees, paid through an employee
16 payroll premium, is in the best interest of the state of Washington.

17 NEW SECTION. **Sec. 2.** The definitions in this section apply
18 throughout this chapter unless the context clearly requires
19 otherwise.

20 (1) "Account" means the long-term services and supports trust
21 account created in section 10 of this act.

22 (2) "Approved service" means long-term services and supports
23 including, but not limited to:

24 (a) Adult day services;

25 (b) Care transition coordination;

26 (c) Memory care;

27 (d) Adaptive equipment and technology;

28 (e) Environmental modification;

29 (f) Personal emergency response system;

30 (g) Home safety evaluation;

31 (h) Respite for family caregivers;

32 (i) Home delivered meals;

33 (j) Transportation;

34 (k) Dementia supports;

35 (l) Education and consultation;

36 (m) Eligible relative care;

37 (n) Professional services;

38 (o) Services that assist paid and unpaid family members caring
39 for eligible individuals, including training for individuals

1 providing care who are not otherwise employed as long-term care
2 workers under RCW 74.39A.074;

3 (p) In-home personal care;

4 (q) Assisted living services;

5 (r) Adult family home services; and

6 (s) Nursing home services.

7 (3) "Benefit unit" means up to one hundred dollars, increasing at
8 a three percent index subject to annual commission approval, paid by
9 the department of social and health services to a long-term services
10 and supports provider as reimbursement for approved services provided
11 to an eligible beneficiary on a specific date.

12 (4) "Commission" means the long-term services and supports trust
13 commission established in section 4 of this act.

14 (5) "Eligible beneficiary" means a qualified individual who is
15 age eighteen or older, residing in the state of Washington, was not
16 disabled before the age of eighteen, has been determined to meet the
17 minimum level of assistance with activities of daily living necessary
18 to receive benefits through the trust program, as established in this
19 chapter, and who has not exhausted the lifetime limit of benefit
20 units.

21 (6) "Employee" has the meaning provided in RCW 50A.04.010.

22 (7) "Employer" has the meaning provided in RCW 50A.04.010.

23 (8) "Employment" has the meaning provided in RCW 50A.04.010.

24 (9) "Long-term services and supports provider" means an entity
25 that meets the qualifications applicable in law to the approved
26 service they provide, including a qualified or certified home care
27 aide, licensed assisted living facility, licensed adult family home,
28 licensed nursing home, licensed in-home services agency, adult day
29 services program, vendor, instructor, qualified family member, or
30 other entities as registered by the department of social and health
31 services.

32 (10) "Premium" or "premiums" means the payments required by
33 section 8 of this act and paid to the employment security department
34 for deposit in the account created in section 10 of this act.

35 (11) "Program" means the long-term services and supports trust
36 program established in this chapter.

37 (12) "Qualified family member" means a relative of an eligible
38 beneficiary qualified to meet requirements established in state law
39 for the approved service they provide that would be required of any

1 other long-term services and supports provider to receive payments
2 from the state.

3 (13) "Qualified individual" means an individual who meets the
4 duration of payment requirements, as established in this chapter.

5 (14) "Wages" has the meaning provided in RCW 50A.04.010, except
6 that all wages are subject to a premium assessment and not limited by
7 the commissioner of the employment security department, as provided
8 under RCW 50A.04.115.

9 NEW SECTION. **Sec. 3.** (1) The health care authority, the
10 department of social and health services, and the employment security
11 department each have distinct responsibilities in the implementation
12 and administration of the program. In the performance of their
13 activities, they shall actively collaborate to realize program
14 efficiencies and provide persons served by the program with a well-
15 coordinated experience.

16 (2) The health care authority shall:

17 (a) Track the use of lifetime benefit units to verify the
18 individual's status as an eligible beneficiary as determined by the
19 department of social and health services;

20 (b) Ensure approved services are provided through audits or
21 service verification processes within the service provider payment
22 system for registered long-term services and supports providers and
23 recoup any inappropriate payments;

24 (c) Establish criteria for the payment of benefits to registered
25 long-term services and supports providers under section 7 of this
26 act;

27 (d) Establish rules and procedures for benefit coordination when
28 the eligible beneficiary is also funded for medicaid and other long-
29 term services and supports, including medicare, coverage through the
30 department of labor and industries, and private long-term care
31 coverage; and

32 (e) Adopt rules and procedures necessary to implement and
33 administer the activities specified in this section related to the
34 program.

35 (3) The department of social and health services shall:

36 (a) Make determinations regarding an individual's status as an
37 eligible beneficiary under section 6 of this act;

1 (b) Approve long-term services and supports eligible for payment
2 as approved services under the program, as informed by the
3 commission;

4 (c) Register long-term services and supports providers that meet
5 minimum qualifications;

6 (d) Discontinue the registration of long-term services and
7 supports providers that: (i) Fail to meet the minimum qualifications
8 applicable in law to the approved service that they provide; or (ii)
9 violate the operational standards of the program;

10 (e) Disburse payments of benefits to registered long-term
11 services and supports providers, utilizing and leveraging existing
12 payment systems for the provision of approved services to eligible
13 beneficiaries under section 7 of this act;

14 (f) Prepare and distribute written or electronic materials to
15 qualified individuals, eligible beneficiaries, and the public as
16 deemed necessary by the commission to inform them of program design
17 and updates;

18 (g) Provide customer service and address questions and
19 complaints, including referring individuals to other appropriate
20 agencies;

21 (h) Provide administrative and operational support to the
22 commission;

23 (i) Track data useful in monitoring and informing the program, as
24 identified by the commission; and

25 (j) Adopt rules and procedures necessary to implement and
26 administer the activities specified in this section related to the
27 program.

28 (4) The employment security department shall:

29 (a) Collect and assess employee premiums as provided in section 8
30 of this act;

31 (b) Assist the commission in monitoring the solvency and
32 financial status of the program;

33 (c) Perform investigations to determine the compliance of premium
34 payments in section 8 of this act in coordination with the same
35 activities conducted under the family and medical leave act, chapter
36 50A.04 RCW, to the extent possible;

37 (d) Make determinations regarding an individual's status as a
38 qualified individual under section 5 of this act; and

1 (e) Adopt rules and procedures necessary to implement and
2 administer the activities specified in this section related to the
3 program.

4 NEW SECTION. **Sec. 4.** (1) The long-term services and supports
5 trust commission is established.

6 (2) The commission includes:

7 (a) Two members from each of the two largest caucuses of the
8 house of representatives, appointed by the speaker of the house of
9 representatives;

10 (b) Two members from each of the two largest caucuses of the
11 senate, appointed by the president of the senate;

12 (c) The commissioner of the employment security department, or
13 the commissioner's designee;

14 (d) The secretary of the department of social and health
15 services, or the secretary's designee;

16 (e) The director of the health care authority, or the director's
17 designee, who shall serve as a nonvoting member;

18 (f) One representative of the organization representing the area
19 agencies on aging;

20 (g) One representative of a home care association that represents
21 caregivers who provide services to private pay and medicaid clients;

22 (h) One representative of a union representing long-term care
23 workers;

24 (i) One representative of an organization representing retired
25 persons;

26 (j) One representative of an association representing skilled
27 nursing facilities and assisted living providers;

28 (k) One representative of an association representing adult
29 family home providers;

30 (l) Two individuals receiving long-term services and supports, or
31 their designees, or representatives of consumers receiving long-term
32 services and supports under the program;

33 (m) One member who is a worker who is, or will likely be, paying
34 the premium established in section 8 of this act and who is not
35 employed by a long-term services and supports provider; and

36 (n) One representative of an organization of employers whose
37 members collect, or will likely be collecting, the premium
38 established in section 8 of this act.

1 (3) (a) Other than the legislators and agency heads identified in
2 subsection (2) of this section, members of the commission are
3 appointed by the governor for terms of two years, except that the
4 governor shall appoint the initial members identified in subsection
5 (2)(f) through (n) of this section to staggered terms not to exceed
6 four years.

7 (b) The secretary of the department of social and health
8 services, or the secretary's designee, shall serve as chair of the
9 commission. Meetings of the commission are at the call of the chair.
10 A majority of the voting members of the commission shall constitute a
11 quorum for any votes of the commission. Approval of sixty percent of
12 those voting members of the commission who are in attendance is
13 required for the passage of any vote.

14 (c) Members of the commission and the subcommittee established in
15 subsection (6) of this section must be compensated in accordance with
16 RCW 43.03.250 and must be reimbursed for their travel expenses while
17 on official business in accordance with RCW 43.03.050 and 43.03.060.

18 (4) Beginning January 1, 2021, the commission shall propose
19 recommendations to the appropriate executive agency or the
20 legislature regarding:

21 (a) The establishment of criteria for determining that an
22 individual has met the requirements to be a qualified individual as
23 established in section 5 of this act or an eligible beneficiary as
24 established in section 6 of this act;

25 (b) The establishment of criteria for minimum qualifications for
26 the registration of long-term services and supports providers who
27 provide approved services to eligible beneficiaries;

28 (c) The establishment of payment maximums for approved services
29 consistent with actuarial soundness which shall not be lower than
30 medicaid payments for comparable services. A service or supply may be
31 limited by dollar amount, duration, or number of visits. The
32 commission shall engage affected stakeholders to develop this
33 recommendation;

34 (d) Changes to rules or policies to improve the operation of the
35 program;

36 (e) The annual adjustment of the benefit unit in accordance with
37 the formula established in section 2 of this act;

38 (f) The preparation of regular actuarial reports on the solvency
39 and financial status of the program and advising the legislature on
40 actions necessary to maintain trust solvency; and

1 (g) For the January 1, 2021, report only, recommendations on
2 whether and how to extend coverage to individuals who became disabled
3 before the age of eighteen, including the impact on the financial
4 status and solvency of the trust. The commission shall engage
5 affected stakeholders to develop this recommendation.

6 (5) The commission shall monitor agency administrative expenses
7 over time. Beginning November 15, 2020, the commission must annually
8 report to the governor and the fiscal committees of the legislature
9 on agency spending for administrative expenses and anticipated
10 administrative expenses as the program shifts into different phases
11 of implementation and operation. The November 15, 2025, report must
12 include recommendations for a method of calculating future agency
13 administrative expenses to limit administrative expenses while
14 providing sufficient funds to adequately operate the program. The
15 agency heads identified in subsection (2) of this section may advise
16 the commission on the reports prepared under this subsection, but
17 must recuse themselves from the commission's process for review,
18 approval, and submission to the legislature.

19 (6) The commission shall establish an investment strategy
20 subcommittee consisting of the members identified in subsection
21 (2)(a) through (d) of this section as voting members of the
22 subcommittee. In addition, four members appointed by the governor who
23 are considered experienced and qualified in the field of investment
24 shall serve as nonvoting members. The subcommittee shall provide
25 guidance and advice to the state investment board on investment
26 strategies for the account, including seeking counsel and advice on
27 the types of investments that are constitutionally permitted.

28 NEW SECTION. **Sec. 5.** (1) The employment security department
29 shall deem a person to be a qualified individual as provided in this
30 chapter if the person has paid the long-term services and supports
31 premiums required by section 8 of this act for the equivalent of
32 either:

33 (a) A total of ten years without interruption of five or more
34 consecutive years; or

35 (b) Three years within the last six years.

36 (2) When deeming a person to be a qualified individual, the
37 employment security department shall require that the person have
38 worked at least two hundred eight hours during each of the ten years

1 in subsection (1)(a) of this section and each of the three years in
2 subsection (1)(b) of this section.

3 NEW SECTION. **Sec. 6.** (1) Beginning January 1, 2025, approved
4 services must be available and benefits payable to a registered long-
5 term services and supports provider on behalf of a qualified
6 individual under this section.

7 (2) A qualified individual may receive approved services and
8 benefits that are payable to a registered long-term services and
9 supports provider on behalf of a qualified individual under this
10 section if the qualified individual has been determined by the
11 department of social and health services to require assistance with
12 at least three activities of daily living. The department of social
13 and health services must engage sufficient qualified assessor
14 capacity, including via contract, so that the determination may be
15 made within forty-five days from receipt of a request by a
16 beneficiary to use a benefit.

17 (3)(a) An eligible beneficiary may receive approved services and
18 benefits through the program in the form of a benefit unit payable to
19 a registered long-term services and supports provider.

20 (b) An eligible beneficiary may not receive more than the dollar
21 equivalent of three hundred sixty-five benefit units over the course
22 of the eligible beneficiary's lifetime.

23 (i) If the department of social and health services reimburses a
24 long-term services and supports provider for approved services
25 provided to an eligible beneficiary and the payment is less than the
26 benefit unit, only the portion of the benefit unit that is used shall
27 be taken into consideration when calculating the person's remaining
28 lifetime limit on receipt of benefits.

29 (ii) Eligible beneficiaries may combine benefit units to receive
30 more approved services per day as long as the total number of
31 lifetime benefit units has not been exceeded.

32 NEW SECTION. **Sec. 7.** (1) Benefits provided under this chapter
33 shall be paid periodically and promptly to registered long-term
34 services and supports providers.

35 (2) Qualified family members may be paid for approved personal
36 care services in the same way as individual providers, through a
37 licensed home care agency, or through a third option if recommended

1 by the commission and adopted by the department of social and health
2 services.

3 NEW SECTION. **Sec. 8.** (1) Beginning January 1, 2022, the
4 employment security department shall assess for each individual in
5 employment with an employer a premium based on the amount of the
6 individual's wages. The premium is fifty-eight hundredths of one
7 percent of the individual's wages.

8 (2) (a) The employer must collect from the employees the premiums
9 provided under this section through payroll deductions and remit the
10 amounts collected to the employment security department.

11 (b) In collecting employee premiums through payroll deductions,
12 the employer shall act as the agent of the employees and shall remit
13 the amounts to the employment security department as required by this
14 chapter.

15 (3) Nothing in this chapter requires any party to a collective
16 bargaining agreement in existence on October 19, 2017, to reopen
17 negotiations of the agreement or to apply any of the responsibilities
18 under this chapter unless and until the existing agreement is
19 reopened or renegotiated by the parties or expires.

20 (4) (a) Premiums shall be collected in the manner and at such
21 intervals as provided in this chapter and directed by the employment
22 security department.

23 (b) To the extent feasible, the employment security department
24 shall use the premium assessment, collection, and reporting
25 procedures in chapter 50A.04 RCW.

26 (5) The employment security department shall deposit all premiums
27 collected in this section in the long-term services and supports
28 trust account created in section 10 of this act.

29 (6) Premiums collected in this section are placed in the trust
30 account for the individuals who become eligible for the program.

31 NEW SECTION. **Sec. 9.** (1) Beginning January 1, 2022, any self-
32 employed person, including a sole proprietor, independent contractor,
33 partner, or joint venturer, may elect coverage under this chapter.
34 Those electing coverage under this subsection are responsible for
35 payment of one hundred percent of all premiums assessed to an
36 employee under section 8 of this act. The self-employed person must
37 file a notice of election in writing with the employment security
38 department, in the manner required by the employment security

1 department in rule. The self-employed person is eligible for benefits
2 after paying the long-term services and supports premium for the time
3 required under section 5 of this act.

4 (2) A self-employed person who has elected coverage may withdraw
5 from coverage, at such times as the employment security department
6 may adopt by rule, by filing a notice of withdrawal in writing with
7 the employment security department, with the withdrawal to take
8 effect not sooner than thirty days after filing the notice with the
9 employment security department.

10 (3) The employment security department may cancel elective
11 coverage if the self-employed person fails to make required payments
12 or file reports. The employment security department may collect due
13 and unpaid premiums and may levy an additional premium for the
14 remainder of the period of coverage. The cancellation must be
15 effective no later than thirty days from the date of the notice in
16 writing advising the self-employed person of the cancellation.

17 (4) Those electing coverage are considered employers or employees
18 where the context so dictates.

19 (5) For the purposes of this section, "independent contractor"
20 means an individual excluded from the definition of "employment" in
21 section 2(8) of this act.

22 (6) The employment security department shall adopt rules for
23 determining the hours worked and the wages of individuals who elect
24 coverage under this section and rules for enforcement of this
25 section.

26 NEW SECTION. **Sec. 10.** (1) The long-term services and supports
27 trust account is created in the custody of the state treasurer. All
28 receipts from employers under section 8 of this act must be deposited
29 in the account. Expenditures from the account may be used for the
30 administrative activities of the department of social and health
31 services, the health care authority, and the employment security
32 department. Benefits associated with the program must be disbursed
33 from the account by the department of social and health services.
34 Only the secretary of the department of social and health services or
35 the secretary's designee may authorize disbursements from the
36 account. The account is subject to the allotment procedures under
37 chapter 43.88 RCW. An appropriation is required for administrative
38 expenses, but not for benefit payments. The account must provide

1 reimbursement of any amounts from other sources that may have been
2 used for the initial establishment of the program.

3 (2) The revenue generated pursuant to this chapter shall be
4 utilized to expand long-term care in the state. These funds may not
5 be used either in whole or in part to supplant existing state or
6 county funds for programs that meet the definition of approved
7 services.

8 (3) The moneys deposited in the account must remain in the
9 account until expended in accordance with the requirements of this
10 chapter. If moneys are appropriated for any purpose other than
11 supporting the long-term services and supports program, the
12 legislature shall notify each qualified individual by mail that the
13 person's premiums have been appropriated for an alternate use,
14 describe the alternate use, and state its plan for restoring the
15 funds so that premiums are not increased and benefits are not
16 reduced.

17 NEW SECTION. **Sec. 11.** (1) The department of social and health
18 services shall have the state investment board invest the funds in
19 the account. The state investment board has the full power to invest,
20 reinvest, manage, contract, sell, or exchange investment money in the
21 account. All investment and operating costs associated with the
22 investment of money shall be paid under RCW 43.33A.160 and 43.84.160.
23 With the exception of these expenses, the earnings from the
24 investment of the money shall be retained by the accounts.

25 (2) All investments made by the state investment board shall be
26 made with the degree of judgment and care required under RCW
27 43.33A.140 and the investment policy established by the state
28 investment board.

29 (3) As deemed appropriate by the state investment board, money in
30 the account may be commingled for investment with other funds subject
31 to investment by the state investment board.

32 (4) Members of the state investment board may not be considered
33 an insurer of the funds or assets and are not liable for any action
34 or inaction.

35 (5) Members of the state investment board are not liable to the
36 state, to the account, or to any other person as a result of their
37 activities as members, whether ministerial or discretionary, except
38 for willful dishonesty or intentional violations of law. The state

1 investment board in its discretion may purchase liability insurance
2 for members.

3 (6) The authority to establish all policies relating to the
4 account, other than the investment policies as provided in
5 subsections (1) through (3) of this section, resides with the
6 department of social and health services acting in accordance with
7 the principles set forth in this chapter. With the exception of
8 expenses of the state investment board under subsection (1) of this
9 section, disbursements from the account shall be made only on the
10 authorization of the department of social and health services or its
11 designee, and moneys in the account may be spent only for the
12 purposes specified in this chapter.

13 (7) The state investment board shall routinely consult and
14 communicate with the department of social and health services on the
15 investment policy, earnings of the accounts, and related needs of the
16 program.

17 NEW SECTION. **Sec. 12.** (1) Determinations made by the health
18 care authority or the department of social and health services under
19 this chapter, including determinations regarding functional
20 eligibility or related to registration of long-term services and
21 supports providers, are subject to appeal in accordance with chapter
22 34.05 RCW. In addition, the standards and procedures adopted for
23 these appeals must address the following:

- 24 (a) Timelines;
- 25 (b) Eligibility and benefit determination;
- 26 (c) Judicial review; and
- 27 (d) Fees.

28 (2) Determinations made by the employment security department
29 under this chapter are subject to appeal in accordance with the
30 appeal procedures under chapter 50A.04 RCW. The employment security
31 department shall adopt standards and procedures for appeals for
32 persons aggrieved by any determination or redetermination made by the
33 department. The standards and procedures must be consistent with
34 those adopted for the family and medical leave program under chapter
35 50A.04 RCW and must address topics including:

- 36 (a) Premium liability;
- 37 (b) Premium collection;
- 38 (c) Judicial review; and
- 39 (d) Fees.

1 NEW SECTION. **Sec. 13.** The department of social and health
2 services must:

3 (1) Seek access to medicare data from the federal centers for
4 medicare and medicaid services to analyze the potential savings in
5 medicare expenditures due to the operation of the program;

6 (2) Apply for a demonstration waiver from the federal centers for
7 medicare and medicaid services to allow for the state to share in the
8 savings generated in the federal match for medicaid long-term
9 services and supports and medicare due to the operation of the
10 program;

11 (3) Submit a report, in compliance with RCW 43.01.036, on the
12 status of the waiver to the office of financial management and the
13 appropriate committees of the legislature by December 1, 2022.

14 NEW SECTION. **Sec. 14.** Beginning December 1, 2026, and annually
15 thereafter, and in compliance with RCW 43.01.036, the commission must
16 report to the legislature on the program, including:

17 (1) Projected and actual program participation;

18 (2) Adequacy of premium rates;

19 (3) Fund balances;

20 (4) Benefits paid;

21 (5) Demographic information on program participants, including
22 age, gender, race, ethnicity, geographic distribution by county,
23 legislative district, and employment sector; and

24 (6) The extent to which the operation of the program has resulted
25 in savings to the medicaid program by avoiding costs that would have
26 otherwise been the responsibility of the state.

27 NEW SECTION. **Sec. 15.** Any benefits used by an individual under
28 this chapter are not income or resources for any determinations of
29 eligibility for any other state program or benefit, for medicaid, for
30 a state-federal program, or for any other means-tested program.

31 NEW SECTION. **Sec. 16.** Nothing in this chapter creates an
32 entitlement for a person to receive, or requires a state agency to
33 provide, case management services including, but not limited to, case
34 management services under chapter 74.39A RCW.

35 NEW SECTION. **Sec. 17.** A new section is added to chapter 44.28
36 RCW to read as follows:

1 By December 1, 2032, the joint legislative audit and review
2 committee must report on the performance of the long-term services
3 and supports trust commission established in section 4 of this act in
4 providing oversight to the long-term services and supports trust
5 program and make recommendations to the legislature on ways to
6 improve the functioning, efficiency, and membership, as well as
7 whether the long-term services and supports trust commission should
8 continue to exist or should expire.

9 **Sec. 18.** RCW 74.39A.076 and 2018 c 220 s 1 are each amended to
10 read as follows:

11 (1) Beginning January 7, 2012, except for long-term care workers
12 exempt from certification under RCW 18.88B.041(1) (a):

13 (a) A biological, step, or adoptive parent who is the individual
14 provider only for (~~his or her~~) the person's developmentally
15 disabled son or daughter must receive twelve hours of training
16 relevant to the needs of adults with developmental disabilities
17 within the first one hundred twenty days after becoming an individual
18 provider.

19 (b) A spouse or registered domestic partner who is a long-term
20 care worker only for a spouse or domestic partner, pursuant to the
21 long-term services and supports trust program established in chapter
22 50A.--- RCW (the new chapter created in section 21 of this act), must
23 receive fifteen hours of basic training, and at least six hours of
24 additional focused training based on the care-receiving spouse's or
25 partner's needs, within the first one hundred twenty days after
26 becoming a long-term care worker.

27 (c) A person working as an individual provider who (i) provides
28 respite care services only for individuals with developmental
29 disabilities receiving services under Title 71A RCW or only for
30 individuals who receive services under this chapter, and (ii) works
31 three hundred hours or less in any calendar year, must complete
32 fourteen hours of training within the first one hundred twenty days
33 after becoming an individual provider. Five of the fourteen hours
34 must be completed before becoming eligible to provide care, including
35 two hours of orientation training regarding the caregiving role and
36 terms of employment and three hours of safety training. The training
37 partnership identified in RCW 74.39A.360 must offer at least twelve
38 of the fourteen hours online, and five of those online hours must be
39 individually selected from elective courses.

1 (~~(e)~~) (d) Individual providers identified in (~~(e)~~) (d)(i) or
2 (ii) of this subsection must complete thirty-five hours of training
3 within the first one hundred twenty days after becoming an individual
4 provider. Five of the thirty-five hours must be completed before
5 becoming eligible to provide care. Two of these five hours shall be
6 devoted to an orientation training regarding an individual provider's
7 role as caregiver and the applicable terms of employment, and three
8 hours shall be devoted to safety training, including basic safety
9 precautions, emergency procedures, and infection control. Individual
10 providers subject to this requirement include:

11 (i) An individual provider caring only for (~~his or her~~) the
12 individual provider's biological, step, or adoptive child or parent
13 unless covered by (a) of this subsection; and

14 (ii) A person working as an individual provider who provides
15 twenty hours or less of care for one person in any calendar month.

16 (2) In computing the time periods in this section, the first day
17 is the date of hire.

18 (3) Only training curriculum approved by the department may be
19 used to fulfill the training requirements specified in this section.
20 The department shall only approve training curriculum that:

21 (a) Has been developed with input from consumer and worker
22 representatives; and

23 (b) Requires comprehensive instruction by qualified instructors.

24 (4) The department shall adopt rules to implement this section.

25 **Sec. 19.** RCW 18.88B.041 and 2015 c 152 s 1 are each amended to
26 read as follows:

27 (1) The following long-term care workers are not required to
28 become a certified home care aide pursuant to this chapter:

29 (a) (i) (A) Registered nurses, licensed practical nurses, certified
30 nursing assistants or persons who are in an approved training program
31 for certified nursing assistants under chapter 18.88A RCW, medicare-
32 certified home health aides, or other persons who hold a similar
33 health credential, as determined by the secretary, or persons with
34 special education training and an endorsement granted by the
35 superintendent of public instruction, as described in RCW
36 28A.300.010, if the secretary determines that the circumstances do
37 not require certification.

38 (B) A person who was initially hired as a long-term care worker
39 prior to January 7, 2012, and who completes all of (~~his or her~~) the

1 training requirements in effect as of the date (~~he or she~~) the
2 person was hired.

3 (ii) Individuals exempted by (a)(i) of this subsection may obtain
4 certification as a home care aide without fulfilling the training
5 requirements in RCW 74.39A.074(1)(d)(ii) but must successfully
6 complete a certification examination pursuant to RCW 18.88B.031.

7 (b) All long-term care workers employed by community residential
8 service businesses.

9 (c) An individual provider caring only for (~~his or her~~) the
10 individual provider's biological, step, or adoptive child or parent.

11 (d) A person working as an individual provider who provides
12 twenty hours or less of care for one person in any calendar month.

13 (e) A person working as an individual provider who only provides
14 respite services and works less than three hundred hours in any
15 calendar year.

16 (f) A long-term care worker providing approved services only for
17 a spouse or registered domestic partner, pursuant to the long-term
18 services and supports trust program established in chapter 50A.---
19 RCW (the new chapter created in section 21 of this act).

20 (2) A long-term care worker exempted by this section from the
21 training requirements contained in RCW 74.39A.074 may not be
22 prohibited from enrolling in training pursuant to that section.

23 (3) The department shall adopt rules to implement this section.

24 **Sec. 20.** RCW 43.79A.040 and 2018 c 260 s 28, 2018 c 258 s 4, and
25 2018 c 127 s 6 are each reenacted and amended to read as follows:

26 (1) Money in the treasurer's trust fund may be deposited,
27 invested, and reinvested by the state treasurer in accordance with
28 RCW 43.84.080 in the same manner and to the same extent as if the
29 money were in the state treasury, and may be commingled with moneys
30 in the state treasury for cash management and cash balance purposes.

31 (2) All income received from investment of the treasurer's trust
32 fund must be set aside in an account in the treasury trust fund to be
33 known as the investment income account.

34 (3) The investment income account may be utilized for the payment
35 of purchased banking services on behalf of treasurer's trust funds
36 including, but not limited to, depository, safekeeping, and
37 disbursement functions for the state treasurer or affected state
38 agencies. The investment income account is subject in all respects to
39 chapter 43.88 RCW, but no appropriation is required for payments to

1 financial institutions. Payments must occur prior to distribution of
2 earnings set forth in subsection (4) of this section.

3 (4)(a) Monthly, the state treasurer must distribute the earnings
4 credited to the investment income account to the state general fund
5 except under (b), (c), and (d) of this subsection.

6 (b) The following accounts and funds must receive their
7 proportionate share of earnings based upon each account's or fund's
8 average daily balance for the period: The 24/7 sobriety account, the
9 Washington promise scholarship account, the Gina Grant Bull memorial
10 legislative page scholarship account, the Washington advanced college
11 tuition payment program account, the Washington college savings
12 program account, the accessible communities account, the Washington
13 achieving a better life experience program account, the community and
14 technical college innovation account, the agricultural local fund,
15 the American Indian scholarship endowment fund, the foster care
16 scholarship endowment fund, the foster care endowed scholarship trust
17 fund, the contract harvesting revolving account, the Washington state
18 combined fund drive account, the commemorative works account, the
19 county enhanced 911 excise tax account, the toll collection account,
20 the developmental disabilities endowment trust fund, the energy
21 account, the fair fund, the family and medical leave insurance
22 account, the fish and wildlife federal lands revolving account, the
23 natural resources federal lands revolving account, the food animal
24 veterinarian conditional scholarship account, the forest health
25 revolving account, the fruit and vegetable inspection account, the
26 future teachers conditional scholarship account, the game farm
27 alternative account, the GET ready for math and science scholarship
28 account, the Washington global health technologies and product
29 development account, the grain inspection revolving fund, the
30 Washington history day account, the industrial insurance rainy day
31 fund, the juvenile accountability incentive account, the law
32 enforcement officers' and firefighters' plan 2 expense fund, the
33 local tourism promotion account, the low-income home rehabilitation
34 revolving loan program account, the multiagency permitting team
35 account, the northeast Washington wolf-livestock management account,
36 the pilotage account, the produce railcar pool account, the regional
37 transportation investment district account, the rural rehabilitation
38 account, the Washington sexual assault kit account, the stadium and
39 exhibition center account, the youth athletic facility account, the
40 self-insurance revolving fund, the children's trust fund, the

1 Washington horse racing commission Washington bred owners' bonus fund
2 and breeder awards account, the Washington horse racing commission
3 class C purse fund account, the individual development account
4 program account, the Washington horse racing commission operating
5 account, the life sciences discovery fund, the Washington state
6 heritage center account, the reduced cigarette ignition propensity
7 account, the center for childhood deafness and hearing loss account,
8 the school for the blind account, the Millersylvania park trust fund,
9 the public employees' and retirees' insurance reserve fund, the
10 school employees' benefits board insurance reserve fund, (~~{the}~~)
11 the public employees' and retirees' insurance account, (~~{the}~~) the
12 school employees' insurance account, the long-term services and
13 supports trust account, and the radiation perpetual maintenance fund.

14 (c) The following accounts and funds must receive eighty percent
15 of their proportionate share of earnings based upon each account's or
16 fund's average daily balance for the period: The advanced right-of-
17 way revolving fund, the advanced environmental mitigation revolving
18 account, the federal narcotics asset forfeitures account, the high
19 occupancy vehicle account, the local rail service assistance account,
20 and the miscellaneous transportation programs account.

21 (d) Any state agency that has independent authority over accounts
22 or funds not statutorily required to be held in the custody of the
23 state treasurer that deposits funds into a fund or account in the
24 custody of the state treasurer pursuant to an agreement with the
25 office of the state treasurer shall receive its proportionate share
26 of earnings based upon each account's or fund's average daily balance
27 for the period.

28 (5) In conformance with Article II, section 37 of the state
29 Constitution, no trust accounts or funds shall be allocated earnings
30 without the specific affirmative directive of this section.

31 NEW SECTION. **Sec. 21.** Sections 1 through 16 of this act
32 constitute a new chapter in Title 50A RCW.

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