## SUBSTITUTE SENATE BILL 6419

## State of Washington

66th Legislature
2020 Regular Session
By Senate Human Services, Reentry \& Rehabilitation (originally sponsored by Senators Keiser, Braun, Rolfes, Randall, Rivers, Dhingra, Darneille, Wilson, C., Saldaña, and Salomon; by request of Office of the Governor)

AN ACT Relating to implementation of the recommendations of the December 2019 report from the William D. Ruckelshaus center regarding residential habilitation center clients; creating new sections; and providing an expiration date.

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

NEW SECTION. Sec. 1. (1) The legislature finds that the recommendations in the December 2019 report, "Rethinking Intellectual and Developmental Disability Policy to Empower Clients, Develop Providers and Improve Services" are the product of deliberations among a diverse and dedicated group of stakeholders facilitated by the William D. Ruckelshaus center, and are critical to advancing the continuum of care for individuals with developmental disabilities.
(2) The legislature intends to design a phased-in, multiyear implementation plan based on the recommendations from the report with the goals of reducing the risk of federal divestment from Washington's intermediate care facilities and providing appropriate care to clients of the developmental disabilities administration.

NEW SECTION. Sec. 2. (1) The developmental disabilities administration within the department of social and health services must develop a plan to implement the recommendations of the December

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2019 report from the William D. Ruckelshaus center regarding residential habilitation center clients. The administration also must collaborate with the office of financial management to create a financing plan to include as part of the recommendations for implementation. A preliminary implementation plan must be included within a report to the governor and the appropriate policy and fiscal committees of the legislature no later than November 1, 2020. A final implementation plan and report must be provided to the governor and the appropriate policy and fiscal committees of the legislature no later than September 1, 2021. The final plan and report must describe the implementation plan, timeline, any recommended statutory changes, and a financing plan and expected fiscal impacts of operationalizing the recommendations.
(2) The legislature hereby creates a joint executive and legislative task force to oversee the development of, and to approve, the preliminary and final reports prior to submission. The members of the task force must include:
(a) The governor or his or her designee;
(b) One member from each of the two largest caucuses in the senate, appointed by the president of the senate;
(c) One member from each of the two largest caucuses in the house of representatives, appointed by the speaker of the house; and
(d) The secretary of the department of social and health services or his or her designee.
(3) The governor or his or her designee must convene and chair the task force. The department of social and health services must staff the task force.
(4) The task force must periodically meet with, provide updates to, and solicit feedback from stakeholders. The task force may meet with stakeholders collectively or individually, at the task force's discretion. The stakeholders must include but are not limited to:
(a) The developmental disabilities council;
(b) The Arc of Washington;
(c) A representative of the organization designated to implement the protection and advocacy program pursuant to RCW 71A.10.080;
(d) Family members or guardians of current residential habilitation center residents, including members of the friends of residential habilitation centers groups;
(e) Individuals with developmental disabilities, which may include residents of the residential habilitation centers;
(f) The Washington federation of state employees;
(g) Developmental disability self-advocacy organizations; and
(h) The service employees international union 1199.
(5) The preliminary and final reports must advance the recommendations of the Ruckelshaus report to design and implement a modern, community-focused, person-centered, and individualized service delivery system for individuals who reside in residential habilitation centers, with an emphasis on investments in community residential service options, including services and options for those with complex behavioral needs. At a minimum, they must address the following four guideposts from the December 2019 report, "Rethinking Intellectual and Developmental Disability Policy to Empower Clients, Develop Providers and Improve Services":
(a) Increasing the capabilities of community residential services;
(b) Improving cross-system coordination;
(c) Investing in state-operated nursing facilities; and
(d) Redesigning intermediate care facilities to function as short-term crisis stabilization and intervention facilities.
(6) In developing the implementation plan, the task force must review and consider the following recommendations from the December 2019 report, "Rethinking Intellectual and Developmental Disability Policy to Empower Clients, Develop Providers and Improve Services":
(a) Assess options to expand forecast-based maintenance level funding adjustment for the developmental disabilities administration waiver services. This includes developing and examining options to more accurately project demand for developmental disabilities administration waiver services in order to provide funding that is predictable and aligned with caseload demand;
(b) Reduce case management ratios, with a goal of a general caseload of one case manager per thirty-five clients;
(c) Expand state-operated community residential options. This includes expanding state-operated living alternatives and four-bed facilities that provide stabilization, assessment, and intervention services for individuals with complex behavioral support needs;
(d) Expand quality assurance efforts by developing uniform quality assurance metrics that are applied across community residential settings, intermediate care facilities, and stateoperated nursing facilities;
(e) Assess options for an alternative, opt-in rate structure for contracted supported living. This includes considering a model that would provide contracted providers with an enhanced rate for serving individuals with complex behavioral needs, completing additional training, and submitting to additional monitoring;
(f) Increase the options for overnight planned respite, including increasing the number of funded respite hours available to clients and the number of respite beds statewide;
(g) Expand apprenticeship opportunities for medical and direct care professionals who have received specific training related to working with individuals with developmental disabilities. This includes working with the Washington state apprenticeship and training council, colleges, and universities to establish medical, dental, nursing, and direct care apprenticeship programs that would address gaps in provider training and overall competence;
(h) Continue reforming guardianship. This includes, but is not limited to, supporting the ongoing stakeholder work groups regarding the implementation of the uniform adult guardianship and protective proceedings jurisdiction act;
(i) Address the challenges of access to affordable housing for individuals with intellectual and developmental disabilities;
(j) Enable professional staff at the state-operated intermediate care facilities to provide state plan benefits to individuals who reside in the community. This includes directing the developmental disabilities administration to work with the health care authority and their contracted managed care organizations to establish the agreements necessary for clients who live in the community to access the developmental disabilities administration's facility-based professionals to receive care covered under the state plan. If feasible, these agreements should enable facility-based professionals to deliver services at mobile or brick-and-mortar clinical settings in the community;
(k) Invest in state-operated nursing facilities, including constructing a replacement facility for the current nursing facility on the Fircrest campus;
(l) Complete assessments for intermediate care facilities clients. All intermediate care facilities clients should be assigned a case manager and receive the developmental disabilities administration's assessment at least annually and any time a significant change is identified;
(m) Expand the family mentor project to the level necessary to connect each client in a state-operated facility with a family mentor;
(n) Establish transition teams at each intermediate care facility in order to increase the ability of intermediate care facilities to serve as short-term interventions;
(o) Leverage future intermediate care facility capacity to meet crisis stabilization needs by redesigning state-operated intermediate care facilities to operate as short-term crisis intervention facilities; and
(p) Conduct a rate study to determine future rates, and enhanced rates when appropriate, for community contracted providers.
(7) This section expires July 1, 2022.

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