

<b>Budget Item</b>	<b>Conference Budget-</b> <i>Status: Passed Legislature 4.23.23</i>	<b>House Budget – <a href="#">ESSB 5187</a> (House Version)</b> <i>Status: Passed House Floor 4.3.23</i>	<b>Senate Budget – <a href="#">ESSB 5187</a></b> <i>Status: Passed the Senate 3.29.23</i>
<b>Assisted Living (AL) Medicaid Base Rates</b>	\$50M GF-S (\$105.5M Total) <ul style="list-style-type: none"> <li>Funds the labor component at 79%.</li> <li>Requires DSHS to report on utilization each year.</li> <li>Collapses to two service areas.</li> </ul>	\$40.4M GF-S (\$85.6M Total) <ul style="list-style-type: none"> <li>Funds labor component at 79%</li> <li>Funds operations component at 68%</li> <li>Requires DSHS to report on utilization each year</li> <li>Collapses to two service areas.</li> </ul>	\$45.2M GF-S (\$92.2M Total) <ul style="list-style-type: none"> <li>Funds the labor component of the payment model at 80%.</li> <li>Funds the operations component of the payment model at 70%.</li> <li>Collapses from three to two service areas.</li> </ul>
<b>Assisted Living Bridge Rate</b>	\$5.2M GF-S (\$10.3M Total) EARCs, ARCs, and AL with 90% or greater Medicaid occupancy receive a daily rate add-on of \$20.99.	\$7.8M GF-S (\$15.4M Total) EARCs, ARCs, and AL with high Medicaid occupancy receive the following daily rate add-ons: <ul style="list-style-type: none"> <li>90% or greater = \$18.00</li> <li>80% to 89% = \$9.00</li> </ul>	
<b>Assisted Living Biennial Rebase</b>	Matches House and Senate. The rebase adds approximately \$7/resident day to the current average daily weighted rate of \$102.55 starting July 1, 2023. Medicaid base rates funding will also be included in July 1, 2023, rates.	\$8.7 GF-S (\$18.7M Total) <ul style="list-style-type: none"> <li>Funds the statutory rebase based on February 2023 caseloads.</li> </ul>	\$8.7 GF-S (\$18.7M Total) <ul style="list-style-type: none"> <li>Funds the statutory rebase based on February 2023 caseloads.</li> </ul>
<b>Assisted Living Specialized Dementia Contracts</b>	\$10.9M GF-S (\$22.5M Total) Converts to a flat rate add-on of \$43.48/day.	\$20.4M GF-S (\$42.4M Total) <ul style="list-style-type: none"> <li>Converts to a flat rate add-on of \$75/day.</li> </ul>	\$11.7M GF-S (\$25M Total) <ul style="list-style-type: none"> <li>Does not convert to an add-on rate.</li> <li>Increases by percentage are in parity with base rate increases.</li> </ul>
<b>Assisted Living Enhanced/Expanded Community Services</b>	\$1.3M GF-S (\$2.6M Total) <ul style="list-style-type: none"> <li>5% increase to existing rate structure.</li> <li>Not converted to a flat rate add-on</li> </ul>		\$1.3M GF-S (\$2.7M Total) <ul style="list-style-type: none"> <li>10% increase to existing rate structure</li> <li>Not converted to a rate add-on.</li> </ul>
<b>Enhanced Services Facilities (ESF) Base Rates</b>	\$7.8M GF-S (\$15.7 M Total) <ul style="list-style-type: none"> <li>Increase daily rates to \$596.10.</li> <li>Includes requirement for DSHS to open referrals.</li> </ul>	\$7.8M GF-S (\$15.7M Total) <ul style="list-style-type: none"> <li>Increases daily rate by 30% to \$591.50.</li> <li>Includes requirement for DSHS to open referrals.</li> <li>Includes a workgroup to establish rates</li> </ul>	\$6.5M GF-S (\$13.1M Total) <ul style="list-style-type: none"> <li>Increases daily rate by 25% to \$573.18.</li> </ul>
<b>Behavioral Health Capacity: Operating funds for new ESFs and Specialized Dementia care beds</b>	Senate Position		\$15M GF-S (\$30M Total) Operational funding to support the Behavioral Health Community Capacity Grants funded in the 2021-23 Capital Budget. <ul style="list-style-type: none"> <li>Phase-in of 64 ESF beds</li> <li>Phase-in of 107 Specialized Dementia Beds</li> </ul>
<b>Skilled Nursing Facility Medicaid Base Rates</b>	\$105M GF-S (\$215M Total) <ul style="list-style-type: none"> <li>Budget Dials: FY24= \$341.41, FY25=\$364.67</li> <li>Does not assume policy legislation. Back of the budget amendments: <ul style="list-style-type: none"> <li>One-time annual rebase for FY24 rates.</li> <li>Two inflations adjustments: FY24 = 4.7%; FY25 = 5%.</li> <li>Minimum Occupancy: 80% for FY24 &amp; FY25</li> <li>Direct Care Cap: FY24 = 153%; FY25 = 142%</li> </ul> </li> </ul>	\$107M GF-S (\$218M Total) <ul style="list-style-type: none"> <li>Budget Dials: FY24= \$341.42, FY25=\$365.68</li> <li>Budget notes specify medians are to be 111% for DC and 92% for IDC.</li> <li>Does not assume policy legislation. Back of the budget amendments: <ul style="list-style-type: none"> <li>One-time annual rebase for FY24 rates</li> <li>Minimum Occupancy: 80% for FY24 &amp; FY25</li> </ul> </li> </ul>	\$117M GF-S (\$240M Total) <ul style="list-style-type: none"> <li>Budget Dials: FY24 = \$349.42, FY25= \$364.67</li> <li>Does not assume policy legislation. Back of the budget amendments: <ul style="list-style-type: none"> <li>One-time annual rebase for FY24 rates</li> <li>Two Inflation adjustments: FY24 = 6%; FY25 = 5%</li> <li>Minimum Occupancy: FY24 = 75%; FY25 =80%</li> <li>Direct Care Cap: FY24 =153%; FY25=142%</li> </ul> </li> </ul>

	Intent that a rate add-on be provided to ensure the budget dial from FY25 is carried into the base for the 2025-27 Biennium.	<ul style="list-style-type: none"> <li>Direct Care Cap: FY24 &amp; FY25 = 165%, thereafter it drops to 118%.</li> </ul>	Intent that a rate add-on be provided to ensure the budget dial from FY25 is carried into the base for the 2025-27 Biennium.
<b>Skilled Nursing Facility Low Wage Equity</b>	<p>\$39.2M GF-S (\$78.4 Total)</p> <ul style="list-style-type: none"> <li>Does not specify medians but allocates roughly the same dollar amount that was funded last year for low wage workers. Language states “to the maximum extent possible, a facility specific wage rate add-on shall be equal to the wage payment received on June 30, 2023.”</li> </ul>	<p>\$39.2M GF-S (\$78.4 Total)</p> <ul style="list-style-type: none"> <li>Medians are specified (See “Skilled Nursing Facility Medicaid Base Rates” above).</li> <li>Language states, “A facility specific wage add-on shall be equal to the wage payment received on June 30, 2023.”</li> <li>Requires an ongoing verification and reporting process.</li> </ul>	<p>\$39.2M GF-S (\$78.4 Total)</p> <ul style="list-style-type: none"> <li>Does not specify medians but allocates roughly the same dollar amount that was funded last year for low wage workers.</li> <li>Requires funds be used to maintain rate add-ons funded in the 2021-23 biennium but does not specify a method for doing so.</li> </ul>
<b>Skilled Nursing Facility Biennial Rebase</b>	Matches House & Senate	<p>\$51.7M GF-S (108.6M Total)</p> <ul style="list-style-type: none"> <li>FY25 rebase based on February 2023 Caseloads</li> </ul>	<p>\$51.7M GF-S (\$108.6M Total)</p> <ul style="list-style-type: none"> <li>FY25 rebase based on February 2023 Caseloads</li> </ul>
<b>Skilled Nursing Facility Specialty Rates</b>	Senate Position	<p>\$4.8M GF-S (\$9.7M Total)</p> <p>The Department must adopt a payment model that incorporates the following adjustments into the rates:</p> <ul style="list-style-type: none"> <li>\$175/day EBS Plus/EBS Respite</li> <li>\$235/day EBS with Specialized Services</li> <li>\$192/day Ventilator</li> <li>\$123/day Tracheotomy</li> <li>\$200/day TBI</li> </ul>	<p>\$2M GF-S (\$4M Total)</p> <p>Add-ons to the base rates:</p> <ul style="list-style-type: none"> <li>\$175/day EBS Plus/EBS Respite</li> <li>\$235/day EBS with Specialized Services</li> <li>\$191.51/day Ventilator</li> <li>\$122.72/day Tracheotomy</li> <li>TBI rate is not funded</li> </ul>
<b>Skilled Nursing Facility (SNF) Safety Net Assessment</b>	Not Funded- NOTE: There is no language prohibiting DSHS from changing the assessment fee.	Not Funded	Not Funded
<b>Rapid Response Teams</b>	House Position	<p>\$17.4M GF-S (\$35M Total)</p> <ul style="list-style-type: none"> <li>Funds Rapid Response Teams through June 30, 2024.</li> </ul>	<p>\$17M GF-S (\$35M Total)</p> <ul style="list-style-type: none"> <li>Funds Rapid Response Teams through June 30, 2024.</li> </ul>
<b>Hospital Discharge Assessment Study</b>	House Position	<p>\$250K GF-S</p> <ul style="list-style-type: none"> <li>Funding is provided for a DSHS study that evaluates the impact of requiring functional assessments prior to discharge from acute care hospitals. Requires recommendations on: <ul style="list-style-type: none"> <li>Timeliness of assessment completion</li> <li>Impacts on length of stay</li> <li>Impacts on patient’s well-being</li> <li>Impacts on staff</li> </ul> </li> </ul>	