HCAOA-WA OCTOBER 2023 Public Policy Report

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Legislative/Political Landscape

It's been fairly busy as I gear up for the 2024 legislative session! I attended the Wednesday Night Study Group Conference (health care association lobbyist group) on Sept-20-22. The conference featured panels of legislators such as health committee chairs Senator Cleveland and Representative Riccelli, state agency leadership from DOH, DSHS, OIC and HCA. We also heard from policy strategists on health care policy hot topics impacting the state such as health care affordability, workforce staffing and behavioral health. Luckily the state budget is in good shape and they are not looking at cuts to programs in the coming year!



(Lou McDermott, HCA, Jilma Meneses, DSHS, Kelly Cooper, DOH & Jane Byer, OIC)

<u>New state budget forecast offers \$1B worth of good news for</u> <u>Washington leaders</u>

A new forecast released Tuesday projects state revenues will

reach \$66.7 billion for the two-year budget cycle that began July 1, an increase of \$663 million from what chief economist Steve Lerch predicted in June. He said the state also hauled in an additional \$265 million in the last budget that was not in his June report. It came from tax collections that arrived after the forecast was prepared and before the fiscal year ended June 30, Lerch said. Added up, that's \$928 million more than when lawmakers adopted the current state spending plan in April. And if the trend continues, the amount will grow in November when the next revenue report is published. *Continue reading at <u>WA State Standard</u>*. (Jerry Cornfield)

Another item of interest! Bea Rector, Assistant Secretary Aging and Long-Term Services (ALTSA) send out the 2023 LTSS AARP Scorecard: <u>https://ltsschoices.aarp.org/scorecard-report/innovation-and-opportunity</u>. Washington state ranks #2 in the nation for LTC Services!

State agencies are hard at work implementing legislation from the 2023 session and are preparing their Agency Request Legislation and Budget Requests for the 2024 session. Many agencies are releasing their legislative packages to stakeholders to get feedback before the session starts.

Department of Health (DOH)

Home Care Aide Exam Payment and Scheduling Changes: The scheduling and payment of applicant examinations will move from the Department of Health to Prometric.

• Starting early 2024, <u>applicants will contact Prometric directly</u> to schedule and pay for an examination.

- There will be a black-out period for two weeks prior to the new system going live. Prometric will not be accepting payment or scheduling exams during this period.
- Programs that pay for home care aide exams will need to purchase vouchers for candidates through the new Prometric portal.
- <u>This Candidate User Guide will help caregivers (PDF)</u> and their employers or trainers to better understand the new process for candidates to self-schedule and self-pay for their exams.
- <u>This Voucher User Guide (PDF)</u> will provide guidance to employers, training programs, and other third parties that pay for caregiver exams to understand the process for purchasing bulk vouchers for payment of caregiver exams.
- <u>Prometric will provide more information on its website</u> as the transition date gets closer.

Legislative Changes to the Home Care Aide Profession: Due to recent legislation, the following changes took place on July 23, 2023:

- If a home care aide credential is expired less than five years, no continuing education is required to renew the credential. You will simply complete the required forms and pay the fee. If a credential is expired for more than five years, retraining and examination is required.
- If a caregiver in training changes employers or returns to employment with a former employer, they may now start over with a new date of hire. This starts over the 200 days they have to receive their credential. To restart the 200 days:
 - If you are obtaining an initial credential, speak with your credentialing specialist by email or phone.
 - If you are renewing an expired credential, submit an updated Employment Verification Form online.
- You will be able to provide care to the following individuals without obtaining or maintaining a home care aide credential:
- Biological, step, or adoptive child or parents.
- Siblings, aunts, uncles, cousins, nieces, nephews, grandparents, and grandchildren (including by marriage or domestic partnership).
- If you care for one of the above individuals, work with the Consumer Direct Care Network Washington to be classified as an exempt family caregiver.
- You will be required to obtain and maintain a home care aide credential when caring for a spouse or registered domestic partner, unless you qualify for the US Dept of Veteran Affairs home and community-based programs.

The following changes will take place on September 1, 2023:

• From September 1, 2023, through July 1, 2025, if your credential has been expired for more than six months but less than two years, your credential will be automatically renewed with

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no fee, forms to complete, or CE requirements. These renewals will take place between September 8 and September 15.

2024 Legislative Session Preview on Agency Request Legislation and Budget: Here are the requests that impact home care:

HELMS Project Continuation (\$ to be determined): There is still quite a bit of concern from the stakeholders about the HELMS implementation and how much it's going to cost. A request has been made to have the next meeting with health care lobbyists just be about HELMS. DOH is requesting additional one-time spending authority to extend the Health Care Enforcement and Licensing Management System (HELMS) project by 4 months. Without additional spending authority, DOH will be forced to stop the project or reduce the project scope. Stopping at this stage would result in a loss of \$21.3 million in investment and require licensees and facilities to pay for those costs without any return. HELMS will provide the licensure for all home care aides, certified nursing assistants and all professions at DOH!

Decreasing Health Care Provider Credentialing Timelines (\$ to be determined): DOH is requesting funding to implement improvements in the health care provider credentialing process. Teams will implement the recommendations made by the contractor and public, as well as any additional recommendation from the Governor's Results Washington office.

Supporting Critical Professions such as Home Care Aides (\$ to be determined)

DOH is carrying a negative fund balance of over \$6.2 million in the home care aide program. Achieving cost recovery through fees alone risks driving workers out of professions, worsening access to care. DOH is requesting a state general fund shift to offset the deficit.

Labor and Industries

Washington's minimum wage will hit \$16.28 per hour in 2024: ...a 3.4 percent increase over 2023. The <u>Washington State Department of Labor & Industries</u> (L&I) announced the increase to the minimum wage. It takes effect Jan. 1, 2024. In 2023, Washington has the highest state-level minimum wage in the nation. The federal minimum wage remains set at \$7.25 an hour. Cities can set minimum wages higher than the state. Seattle, SeaTac, and Tukwila, have higher wages.

Under state law, L&I calculates the minimum wage for the coming year based on the federal Bureau of Labor Statistics' (BLS) Consumer Price Index for Urban Wage Earners and Clerical Workers (CPI-W). In making the calculation, L&I compares the CPI-W index from August of the previous year to August of the current year.

Z-0431 Increasing Workers Comp Incentives for Return-to-Work Activities: State agencies start their stakeholder work on bills that they will be running in the next legislative session (2024) with what are called Z-drafts. <u>This draft could have an impact on home care agencies.</u> Some

agencies are using the stay-at-work program which includes the light duty wage. Comments so far are that "reimbursement of 10k and that moving to 25k is a lot. It begs the question what will happen to the premiums for such a change. The remaining provisions, like workplace modifications and such likely will have little impact, but if our members are not using the stay-at-work program, we should honestly consider some education around that."

This proposal would expand incentives to return a workers' compensation claimant to work, consistent with their medical restrictions. It enhances several types of existing incentives and adds options for:

- Stay at Work program, increasing what an employer may receive in reimbursement for creating a light duty job to a maximum of half the wages paid to a worker for up to 120 workdays, capped at \$25k with no inflationary factor. These are increased from the current 66 workdays and a cap of \$10k. Continuous employment bonus is increased from \$10k to \$25k. In addition, reimbursements for:
 - Tuition, books, fees and materials required for light duty are increased from \$1k to \$2k;
 - Clothing required for light duty is increased from \$400 to \$1k; and
 - Tools required for light duty is increased from \$2,500 to \$5k.
- **Return to L&I for vocational retraining**, providing for a worker whose claim has been appealed to the Board of Industrial Insurance Appeals (BIIA) or court to have it returned to L&I if the worker did not complete the full range of statutory vocational retraining options before being granted a pension. This language is made more specific to only address circumstances in which a worker:
 - Has not been previously assessed for vocational retraining services;
 - Was determined able to work without retraining services; or
 - Vocational services were discontinued.

If one of these claims is remanded to the department, and the department determines no further vocational services will be provided, the department must grant the worker a pension.

- Job modification costs, increasing the amount an employer may be eligible to receive when a job is modified to accommodate retaining or hiring workers with disabilities resulting from work-related injury. Current amount is capped at \$5k and has been unchanged since 1982. This would increase the cap to \$10k.
 - No escalation factor is included.
 - No changes to fund sources are made from current: Job modifications are paid from 2nd Injury Fund and reimbursed by the Medical Aid Fund; Pre-job modifications are paid from the Accident Fund and charged to the employer of injury.
- Vocational rehabilitation benefits, allowing the department to provide up to an additional 25% once per claim of total vocational award during vocational recovery and assessment so that

workers can participate in approved basic skills training (such as English language training, computer literacy, and completion of a GED) to improve labor market readiness and to enable workers to benefit from other return to work services. This award is funded through the Stay at Work premium and would be optional for any eligible worker. Use does not reduce funds available for formal retraining. Eligibility is based on a recommendation from the assigned vocational rehabilitation counselor. Knowledge and skills gained may not be construed as acquisition of transferrable skills.



Bills under Rulemaking Consideration at DOH/WABON

HB 1009-Military Spouse Employment –requires WABON to issue a temporary license to military spouses within 90 days of application date and the temporary license must be issued for no less than 180 days.

SB 5582-Reducing barriers and expanding educational opportunities to increase the supply of nurses in Washington: Section 4: calls for an apprenticeship program for home care aides and nursing assistants-certified to advance to licensed practical nursing. Section 8: "The Commission shall adopt rules which allow for one hour of simulated learning to be counted as equivalent to two hours of clinical placement learning, with simulated learning accounting for up to 50% of the required clinical hours." Section 12: calls for the development of at least two pilot projects between high school nursing assistant training programs and rural hospitals to address workforce shortages and promote nursing careers in rural hospitals.

2SHB 1724 Amends Uniform Disciplinary Act: <u>2SHB 1724</u> to increase the behavioral health workforce. The bill also makes several <u>changes that apply to all professions</u> under the Uniform Disciplinary Act (<u>RCW 18.130</u>) including:

- Requiring disciplining authorities to waive education, training, experience, and exam requirements for applicants credentialed in another state with substantially equivalent standards. It also allows waiving requirements for applicants who have achieved national certification.
- Removing DOH's authority to screen applicants before scheduling them for exams and Grants the department authority to contract with third parties to review applications.

Washington State Board of Nursing (WABON)

New process for the Nursing Assistant Exam: Washington is changing the process for completing the nursing assistant exam. The purpose is to increase students' access to skills testing following graduation. New process starts October 1, 2023. Registration for October skills testing slots starts now. (See steps below.)

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- Skills test dates scheduled for September are unchanged.
 - Testing candidates should keep September testing appointments.
- Graduates beginning their testing process October 1 or later will take the skills test first.
 - Graduates are expected to pass the skills test before registering for the written test.
 - This change will save steps and time in testing and certification processes.
- For October skills test dates, many approved nursing assistant training programs will schedule and provide skills tests for their current and previous graduates at the program.
 - View <u>list of the programs ready to provide skills testing</u> to their graduates.
 - More programs will begin providing skills testing in November or December.
 - By 2024, most programs will provide skills testing routinely immediately after graduation.
- Graduates will no longer register for skills tests on Credentia365.
 - They will continue to use Credentia365 to get their Candidate Identification (ID) number and register for the written (or oral) exam.
- For October skills test dates, graduates will use these new steps to register and test.

New Skills Test Registration Process

Step 1: Get a Credentia Candidate ID number.

- <u>Create a Credentia365 account</u> and verify your email address.
- You need a Candidate ID number to:
 - Register for the skills test.
 - Register for the written (or oral) test.
 - Ensure your results are processed quickly.

Step 2: Register for the skills test.

- **Option A: Register with your training program,** if your training program is ready to provide skills testing
 - If your <u>training program offers testing</u>, the program will reach out to you about available skills test dates and the registration and payment process.
 - Please wait for the program to contact you (or check the program's website for information). Contacting the program now will cause delays in scheduling.
- **Option B: Register through WABON online scheduling** if your training program is NOT providing skills testing at this time.
 - Use this site to register for a test location, date, and time.

• The test site will follow up regarding their process for paying the skills test fee.

Step 3: Register for the written (or oral) test AFTER you pass the skills test.

Step 4: Apply for your nursing assistant-certified (NAC) credential with the <u>Department of</u> <u>Health (DOH)</u>, if you have not already done so.

Overall cost of the nursing assistant exam is the same, but the amounts paid for each part of the exam have changed.

- Skills test fee will be \$100.
- Written (or oral) test fee will be \$55.

Helpful Resources:

- List: <u>Nursing Assistant Programs providing Skills Testing in October 2023</u>
- 1-Page Chart: <u>The 4-step nursing assistant exam process (PDF)</u>
- Video: Nursing Assistant Exam Changes for October 2023 Overview video (YouTube)
- Subscribe to receive email updates <u>Washington State Department of Health</u> (govdelivery.com)

Nurse Licensure Compact (NLC). As a part of the legislation, <u>SSB 5499 Multistate Nurse</u> <u>Licensure Compact</u>, beginning July 24, 2023, nurses with an active MSL issued from another state will be able to practice in Washington state. For more info: <u>NCQAC.Rules@doh.wa.gov</u>.

- Employer Multistate License (MSL) Information
- RN and LPN Multistate License (MSL) Information
- Our Name Change
- <u>NLC Implementation Plan</u>

Health Care Authority (HCA)

Home Care Safety Net Assessment Workgroup: I attended the first workgroup meeting on the Home Care Safety Net Assessment Workgroup on September 15th. <u>SHB 1435</u> requires consumerdirected employers and <u>in-home services</u> agencies to submit specified financial information to DOH to inform the development of a home care safety net assessment to secure federal matching funds under the state's Medicaid plan. Establishes the <u>Home Care Safety Net Assessment Work Group to</u> <u>develop the home care safety net assessment</u>. I spoke quite firmly about the fact that this may not have a positive impact on private pay home care agencies and that raising taxes gets passed on the customers and that increases the number of people who do not have access to private home care. They sent out a form last week to review on collecting data from our members.