



**ABS 029 Summarized Revenue by Account and Source
Washington State Health Care Authority
Agency Level
2022 First Supplemental Budget Session
AB2022 - 2022 Supplemental**

	Maintenance Level		Policy Level		Annual Totals		Biennial Total
	FY2022	FY2023	FY2022	FY2023	FY2022	FY2023	
001 - General Fund							
0393 - Health & Human Svc - F							
41 - CPE Hold Harmless Adjustment - OTH	1	1	0	0			
48 - MQIP Payments - OTH	0	49,085	0	0			
AD - 1115 IMD Waiver Costs - OTH	(1,049)	990	0	0			
BV - Trueblood Phase 2 Implementation - CBH	1,265	3,596	0	0			
FA - Bariatric Surgery - OTH	0	0	5,156	9,870			
FB - Periodic Screening - OTH	0	0	133	263			
FC - Primary Care Improvement - OTH	0	0	0	258			
FE - Opioid Treatment Rate Increase - CBH	0	0	0	24,600			
FF - AL TSA Renewal of MTP - OTH	0	0	0	19,902			
FH - DBHR FCS admin - Renewal of MTP - CBH	0	0	426	426			
FJ - Problem Gambling - CBH	0	0	0	63			
FP - Firearms Compliance - CBH	0	0	0	50			
FQ - FCS Renewal of MTP - CBH	0	0	(28,191)	(7,763)			
FX - FHQC's Accruals - OTH	0	0	25,672	0			
GA - MSP Asset Test Removal - OTH	0	0	1,202	3,478			
GC - CBH Sustainability CCBHC Model - CBH	0	0	0	300			
GD - Non-MAGI Post Eligibility Review - OTH	0	0	5,024	10,033			
GE - MQIP Renewal - OTH	0	0	4,374	110,340			
GF - Continuum of Care - CBH	0	0	0	66			
GG - Expand PCCM Programs - OTH	0	0	0	86,530			
GK - MCOs and Tribe Protocols - OTH	0	0	0	219			
GM - Renewal of MTP - OTH	0	0	(2,275)	13,866			
GP - Children's Dental Rate Increase - OTH	0	0	8,013	16,026			
GR - UPL Overpayment - OTH	(1,131)	(1,121)	0	0			
GT - Children's Long-Term Inpatient Prog - CBH	0	0	7,520	7,520			
GV - Admin Operations - CBH	0	0	0	418			
GV - Admin Operations - OTH	0	0	110	987			

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	Maintenance Level		Policy Level		Annual Totals		Biennial Total
	FY2022	FY2023	FY2022	FY2023	FY2022	FY2023	
GX - Rural CHART Support - OTH	0	0	1,200	882			
HD - QAF Appropriation - OTH	12,808	12,815	0	0			
HE - Cost Allocation Update - HBE	(2,000)	(1,000)	0	0			
HR - Community Long-Term Inpatient Beds - CBH	(7,198)	(10,908)	0	0			
HU - Remote Patient Monitoring - OTH	0	0	869	(3,279)			
Total - 0393 - Health & Human Svc - F	2,696	53,458	29,233	295,055	31,929	348,513	380,442
0499 - Other Revenue - S							
FZ - Supported Housing - CBH	0	0	0	17,605			
HA - Family Centered Care - OTH	0	0	33,303	33,303			
HC - EHR Expansion - OTH	0	0	0	12,770			
Total - 0499 - Other Revenue - S	0	0	33,303	63,678	33,303	63,678	96,981
0541 - Contributions Grants - P/L							
48 - MQIP Payments - OTH	0	20,048	0	0			
FF - ALISA Renewal of MTP - OTH	0	0	0	19,903			
FH - DBHR FCS admin - Renewal of MTP - CBH	0	0	142	426			
FQ - FCS Renewal of MTP - CBH	0	0	(2,057)	(2,215)			
GE - MQIP Renewal - OTH	0	0	1,786	45,068			
GM - Renewal of MTP - OTH	0	0	2,140	21,730			
Total - 0541 - Contributions Grants - P/L	0	20,048	2,011	84,912	2,011	104,960	106,971
001 - General Fund - State			33,303	63,678	33,303	63,678	96,981
001 - General Fund - Federal	2,696	53,458	29,233	295,055	31,929	348,513	380,442
001 - General Fund - Private/Local		20,048	2,011	84,912	2,011	104,960	106,971
Total - 001 - General Fund	2,696	73,506	64,547	443,645	67,243	517,151	584,394
17T - Health Benefit Exch							
0499 - Other Revenue - S							
HE - Cost Allocation Update - HBE	2,000	1,000	0	0			
Total - 0499 - Other Revenue - S	2,000	1,000	0	0	2,000	1,000	3,000
17T - Health Benefit Exch - State	2,000	1,000			2,000	1,000	3,000

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Total - 17T - Health Benefit Exch	2,000	1,000			2,000	1,000	3,000
418 - St Hlth Care Admn Ac							
0621 - Operating Trans In - S							
FS - Customer Service Staff - PEB	0	0	0	604			
FT - Procurement Resources - PEB	0	0	35	228			
GV - Admin Operations - OTH	0	0	9	121			
Total - 0621 - Operating Trans In - S	0	0	44	953	44	953	997
418 - St Hlth Care Admn Ac - State			44	953	44	953	997
Total - 418 - St Hlth Care Admn Ac			44	953	44	953	997
438 - Uniform Dental							
0621 - Operating Trans In - S							
FT - Procurement Resources - PEB	0	0	123	105			
Total - 0621 - Operating Trans In - S	0	0	123	105	123	105	228
438 - Uniform Dental - State			123	105	123	105	228
Total - 438 - Uniform Dental			123	105	123	105	228
439 - Uniform Medical Plan							
0621 - Operating Trans In - S							
FT - Procurement Resources - PEB	0	0	438	438			
FV - Mental Health Parity - PEB	0	0	125	225			
Total - 0621 - Operating Trans In - S	0	0	563	663	563	663	1,226
439 - Uniform Medical Plan - State			563	663	563	663	1,226
Total - 439 - Uniform Medical Plan			563	663	563	663	1,226
475 - SEBB Dntl Admn Acct							
0621 - Operating Trans In - S							
FT - Procurement Resources - SEB	0	0	123	105			

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	FY2022	FY2023	FY2022	FY2023	FY2022	FY2023	
Total - 0621 - Operating Trans In - S	0	0	123	105	123	105	228
475 - SEBB Dntl Admn Acct - State			123	105	123	105	228
Total - 475 - SEBB Dntl Admn Acct			123	105	123	105	228
492 - Schl Empl Insur Adm							
0496 - Insurance Premiums - S							
FW - SEBB Maintenance and Operations - SEB	0	0	229	742			
Total - 0496 - Insurance Premiums - S	0	0	229	742	229	742	971
0621 - Operating Trans In - S							
FS - Customer Service Staff - PEB	0	0	0	604			
FT - Procurement Resources - SEB	0	0	35	228			
GV - Admin Operations - OTH	0	0	7	95			
Total - 0621 - Operating Trans In - S	0	0	42	927	42	927	969
492 - Schl Empl Insur Adm - State			271	1,669	271	1,669	1,940
Total - 492 - Schl Empl Insur Adm			271	1,669	271	1,669	1,940
493 - Schl Empl Insur Acct							
0496 - Insurance Premiums - S							
FR - LTD Employer Pd Benefit Improvement - SEI	0	0	0	3,287			
Total - 0496 - Insurance Premiums - S	0	0	0	3,287		3,287	3,287
493 - Schl Empl Insur Acct - State				3,287		3,287	3,287
Total - 493 - Schl Empl Insur Acct						3,287	3,287
494 - SEBB Med Ben Admin							
0621 - Operating Trans In - S							
FT - Procurement Resources - SEB	0	0	438	438			
FV - Mental Health Parity - SEB	0	0	125	552			
Total - 0621 - Operating Trans In - S	0	0	563	990	563	990	1,553
494 - SEBB Med Ben Admin - State			563	990	563	990	1,553

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	Maintenance Level		Policy Level		Annual Totals		Biennial Total
	FY2022	FY2023	FY2022	FY2023	FY2022	FY2023	
Total - 494 - SEBB Med Ben Admin			563	990	563	990	1,553
721 - Public Employees'/Re							
0496 - Insurance Premiums - S							
FR - LTD Employer Pd Benefit Improvement - PEI	0	0	0	5,754			
Total - 0496 - Insurance Premiums - S	0	0	0	5,754		5,754	5,754
721 - Public Employees'/Re - State				5,754		5,754	5,754
Total - 721 - Public Employees'/Re						5,754	5,754
Agency: 107 HCA - State	2,000	1,000	34,990	77,204	36,990	78,204	115,194
Agency: 107 HCA - Federal	2,696	53,458	29,233	295,055	31,929	348,513	380,442
Agency: 107 HCA - Private/Local		20,048	2,011	84,912	2,011	104,960	106,971
Total - Agency: 107 HCA	4,696	74,506	66,234	457,171	70,930	531,677	602,607
- unknown source title - Z							

41 - CPE Hold Harmless Adjustment - OTH

The Health Care Authority (HCA) submits a request for the 2022 supplemental budget to align appropriations with projected costs for the Certified Public Expenditure (CPE) program along with the federal disproportionate share hospital (DSH) funds. This adjustment is necessary to ensure that funding is aligned to support anticipated hold harmless grants and cost settlement payments.

48 - MQIP Payments - OTH

The Health Care Authority (HCA) requests a funding increase in the FY21 supplemental budget to align with projected expenditures for the Medicaid Qual Improvement Program (MQIP). MQIP does not call for any expenditure of state general funds.

48 - MQIP Payments - OTH

The Health Care Authority (HCA) requests a funding increase in the FY21 supplemental budget to align with projected expenditures for the Medicaid Qual Improvement Program (MQIP). MQIP does not call for any expenditure of state general funds.

AD - 1115 IMD Waiver Costs - OTH

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The Health Care Authority (HCA) requests additional funding in the 2022 supplemental operating budget to fund required monitoring and evaluation, health information technology (HIT), and staffing costs necessary for the implementation and maintenance of the 1115 Mental Health Institute of Mental Disease (MH IMD) Waiver. The Centers for Medicare & Medicaid Services (CMS) deliverables require significant and intensive reporting and monitoring work and improvements to enable the exchange and use of information at the point of care to meet milestones associated with the 1115 MH waiver, which will require additional funding.

BV - Trueblood Phase 2 Implementation - CBH

The Health Care Authority (HCA) requests operational funds for newly constructed crisis stabilization facility in the Spokane region and for two newly funded crisis triage stabilization facilities in the King region. These funds are for the initial 6 months of operations, including non-commerce funded startup costs and ongoing operational costs for non-Medicaid Trueblood v. DSHS Class Members and potential Class Members. The Medicaid managed care organizations (MCOs) will pay for the costs associated with Medicaid Class Members. Projections for increased rates for Medicaid eligible individuals will be made by the actuaries to ensure payment for services in the new facilities for those members.

FA - Bariatric Surgery - OTH

The Health Care Authority (HCA) requests funding to implement the current Washington State Health Technology Clinical Committee (HTCC) recommended coverage for bariatric surgery for Apple Health (Medicaid) clients. Bariatric surgery is a safe, effective, and mainstream treatment for obesity and comorbidities. The medical need and appropriateness for bariatric surgery is supported by high-quality scientific research. The HTCC determined that bariatric surgery should be covered with conditions. HTCC determinations defined a medically necessary standard for care, and Apple Health is required to cover services proven to be medically necessary. HCA also requests \$300,000 of funding to support the Robert Bree Collaborative.

FB - Periodic Screening - OTH

The Health Care Authority (HCA) requests funding to provide nine additional preventative care visits for all children and youth enrolled in Apple Health (Medicaid). The periodicity allowed under the current Early Periodic Screening, Diagnosis, and Treatment (EPSDT) benefit, often referred to as well-child care, does not align with the best practice standards recommended by the American Academy of Pediatrics through their Bright Futures guidelines. There is a nine-visit gap between the Apple Health covered well-child visits and the Bright Futures recommended schedule. HCA proposes following the Bright Futures schedule to provide complete coverage of evidence-based pediatric provider visits.

FC - Primary Care Improvement - OTH

The Health Care Authority (HCA) requests funding and staff to develop and support a multi-payer primary care model to improve access to and quality of primary care services covered by the Apple Health (Medicaid), the Public Employees Benefits Board, and the School Employees Benefits Board programs.

FE - Opioid Treatment Rate Increase - CBH

The Health Care Authority (HCA) requests ongoing funding to increase Opioid Treatment Program (OTP) Medicaid reimbursement rates so that it is based on the current Medicare Part B OTP bundled rate. This increase will ensure Opioid Treatment Program (OTP) providers are financially stable during the ongoing opioid epidemic and better promote efficient delivery of services that are needed.

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FF - AL TSA Renewal of MTP - OTH

The Health Care Authority (HCA) is pursuing a renewal of the Medicaid Transformation Project (MTP) for up to five years. HCA requests an additional fund in the Fiscal Year 22 supplemental budget to align with projected expenditures for Department of Social and Health Services (DSHS) Aging and Long-Term Support Administration (AL TSA) Initiative 2 and Initiative 3 programs through the renewal period. HCA also requests new authority and an additional 2.5 F for AL TSA's additional programs being considered under the MTP renewal.

FF - AL TSA Renewal of MTP - OTH

The Health Care Authority (HCA) is pursuing a renewal of the Medicaid Transformation Project (MTP) for up to five years. HCA requests an additional fund in the Fiscal Year 22 supplemental budget to align with projected expenditures for Department of Social and Health Services (DSHS) Aging and Long-Term Support Administration (AL TSA) Initiative 2 and Initiative 3 programs through the renewal period. HCA also requests new authority and an additional 2.5 F for AL TSA's additional programs being considered under the MTP renewal.

FH - DBHR FCS admin - Renewal of MTP - CBH

The Health Care Authority (HCA) is pursuing a renewal of the Medicaid Transformation Project (MTP) for up to five years. HCA requests additional funding in the Fiscal Year 2022 supplemental budget to align with projected expenditures in a renewal for Initiative 3 under MTP's administrative budget within Community Behavioral Health.

FH - DBHR FCS admin - Renewal of MTP - CBH

The Health Care Authority (HCA) is pursuing a renewal of the Medicaid Transformation Project (MTP) for up to five years. HCA requests additional funding in the Fiscal Year 2022 supplemental budget to align with projected expenditures in a renewal for Initiative 3 under MTP's administrative budget within Community Behavioral Health.

FJ - Problem Gambling - CBH

The Health Care Authority (HCA) requests funding in the 2021-2023 first supplemental budget to add problem gambling treatment as a new behavioral health treatment service provided through Washington State's Apple Health/Medicaid program.

FP - Firearms Compliance - CBH

The Health Care Authority (HCA) requests ongoing funding for staff resources in the 2021-2023 first supplemental budget to meet an increasing volume of requests for firearms-related mental health background checks.

FQ - FCS Renewal of MTP - CBH

The Health Care Authority (HCA) requests additional funding in the Fiscal Year 2022 supplemental budget to continue Foundational Community Supports (FCS) under the Medicaid Transformation Project (MTP) for up to five years. FCS is the third initiative of MTP and is currently operating in year 5 of the demonstration period, which ends December 31, 2021.

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FQ - FCS Renewal of MTP - CBH

The Health Care Authority (HCA) requests additional funding in the Fiscal Year 2022 supplemental budget to continue Foundational Community Supports (FCS) under the Medicaid Transformation Project (MTP) for up to five years. FCS is the third initiative of MTP and is currently operating in year 5 of the demonstration period, which ends December 31, 2021.

FR - LTD Employer Pd Benefit Improvement - PEB

The Health Care Authority (HCA) requests funding in the Fiscal Year (FY) 2022 Supplemental Budget to improve the employer-paid basic long-term disability (LTD) benefit in the Public Employees Benefits Board (PEBB) and School Employees Benefits Board (SEBB) programs. This funding would allow HCA to better align the PEBB and SEBB LTD benefits with LTD plans offered by other public entities and state employers. HCA is proposing an employer-paid \$1,500 monthly maximum benefit for each program, beginning January 1, 2023.

FR - LTD Employer Pd Benefit Improvement - SEB

The Health Care Authority (HCA) requests funding in the Fiscal Year (FY) 2022 Supplemental Budget to improve the employer-paid basic long-term disability (LTD) benefit in the Public Employees Benefits Board (PEBB) and School Employees Benefits Board (SEBB) programs. This funding would allow HCA to better align the PEBB and SEBB LTD benefits with LTD plans offered by other public entities and state employers. HCA is proposing an employer-paid \$1,500 monthly maximum benefit for each program, beginning January 1, 2023.

FS - Customer Service Staff - PEB

The Health Care Authority (HCA) requests funding and 9.0 full time equivalent (FTEs) in the 2022 Supplemental Budget to address customer service responsiveness through phone calls and navigation with Public Employees Benefits Board (PEBB) and School Employees Benefits Board (SEBB) My Accounts, open enrollments and the new PEBB My Account (PMA) navigation starting in 2022, and additional complexity and expansion of the program administration of the Medical Flexible Spending Arrangement (FSA) and Dependent Care Assistant Program (DCAP) benefits in recent years.

FS - Customer Service Staff - PEB

The Health Care Authority (HCA) requests funding and 9.0 full time equivalent (FTEs) in the 2022 Supplemental Budget to address customer service responsiveness through phone calls and navigation with Public Employees Benefits Board (PEBB) and School Employees Benefits Board (SEBB) My Accounts, open enrollments and the new PEBB My Account (PMA) navigation starting in 2022, and additional complexity and expansion of the program administration of the Medical Flexible Spending Arrangement (FSA) and Dependent Care Assistant Program (DCAP) benefits in recent years.

FT - Procurement Resources - PEB

The Health Care Authority (HCA) requests funding to maintain and enhance member benefits, replace outdated contracts, create a new accountable care program (ACP) contract and new dental contracts, comply with executive orders, and implement the decisions of the Public Employees Benefits (PEB) Board and School Employees Benefits (SEB) boards, and conduct several key procurements.

FT - Procurement Resources - PEB

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The Health Care Authority (HCA) requests funding to maintain and enhance member benefits, replace outdated contracts, create a new accountable care program (ACP) contract and new dental contracts, comply with executive orders, and implement the decisions of the Public Employees Benefits (PEB) Board and School Employees Benefits (SEB) boards, and conduct several key procurements.

FT - Procurement Resources - SEB

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FT - Procurement Resources - SEB

The Health Care Authority (HCA) requests funding to maintain and enhance member benefits, replace outdated contracts, create a new accountable care program (ACP) contract and new dental contracts, comply with executive orders, and implement the decisions of the Public Employees Benefits (PEB) Board and School Employees Benefits (SEB) boards, and conduct several key procurements.

FV - Mental Health Parity - PEB

The Health Care Authority (HCA) requests funding in the 2021-2023 first supplemental budget to complete an analysis of mental health benefits being administered by the Uniform Medical Plan (UMP) Third Party Administer (TPA), and to implement necessary changes to comply with federal requirements access to care.

FV - Mental Health Parity - SEB

The Health Care Authority (HCA) requests funding in the 2021-2023 first supplemental budget to complete an analysis of mental health benefits being administered by the Uniform Medical Plan (UMP) Third Party Administer (TPA), and to implement necessary changes to comply with federal requirements access to care.

FW - SEBB Maintenance and Operations - SEB

The Health Care Authority (HCA) requests \$971,000 (\$0 GF-State) funding in the 2022 Supplemental Budget to support basic maintenance and operation and capacity for future enhancements for the School Employees Benefits Board (SEBB) Program My Account system.

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FX - FHQC's Accruals - OTH

The Health Care Authority (HCA) requests a one-time funding increase to meet the federal requirement to repay underpayments to federally qualified health centers (FQHCs). Due to COVID-19, FQHCs experienced a drop in encounters and a rise in Medicaid clients seeking services through FQHCs due to the moratorium on disenrollment. These two factors have resulted in HCA owing funds to FQHCs and the underpayment, in the amount of \$35.6 million, has been taken into account in the forecasting process.

FZ - Supported Housing - CBH

The American Rescue Plan Act (ARPA) provides a significant infusion of resources to help turn the tide on the pandemic, addresses the economic fallout and lays the foundation for a strong and equitable recovery (Treasury, 2021). The 2021-23 capital budget allocated \$129,903,000 for the Housing Trust Fund for the production and preservation of affordable housing projects that serve and benefit low-income and special needs populations including, but not limited to people with chronic mental illness, people with developmental disabilities, farmworkers, people who are homeless, and people in need of permanent supportive housing.

The goal of this supplemental budget decision package is to access additional federal funding, ARPA for the upfront capital funding, operations, and service provision to address the housing crisis in Washington state.

GA - MSP Asset Test Removal - OTH

The Health Care Authority (HCA) proposes to eliminate the asset test for the Apple Health Medicare Savings Program (MSP), laying the groundwork for an integrated eligibility system and reducing access inequalities between the Modified Adjusted Gross Income (MAGI)-based and Classic Apple Health (Medicaid) populations. Prior to the public health emergency (PHE), 4,500 individuals were getting denied yearly due to being over the asset limit for the MSP. This change will ensure these individuals will continue to be eligible once the PHE ends.

GC - CBH Sustainability CCBHC Model - CBH

The Health Care Authority (HCA) requests funding for actuarial work to explore ways to finance Washington's network of Behavioral Health Agencies (BHAs) with the intent of improving access to care, quality and health outcomes. Funding this decision package will allow the state to explore transformative financing models like the Certified Community Behavioral Health Clinic (CCBHC). HCA is also requesting an additional year of funding for actuarial work supporting the development of behavioral health comparison rates. This project was originally funded for FY 2022 in the underlying budget.

GD - Non-MAGI Post Eligibility Review - OTH

This decision package (DP) intends to lay the groundwork towards an integrated eligibility system and to close the gaps of access inequalities between Modified Adjusted Gross Income (MAGI) and Classic Apple Health populations. This DP proposes to allow for self-attestation of eligibility factors with post eligibility verification for Classic Apple Health programs, a flexibility already granted during the Public Health Emergency (PHE). This model is consistent with the process for MAGI programs, promotes consistency and equality for all individuals applying and receiving Apple Health, and paves the path for an integrated eligibility system.

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GE - MQIP Renewal - OTH

The Health Care Authority (HCA) requests an additional funding in the Fiscal Year 2022 supplemental budget to continue the Medicaid Quality Improvement Program (MQIP) in alignment with HCA's request to renew the Medicaid Transformation Project. MQIP does not call for any expenditures of state general funds.

GE - MQIP Renewal - OTH

The Health Care Authority (HCA) requests an additional funding in the Fiscal Year 2022 supplemental budget to continue the Medicaid Quality Improvement Program (MQIP) in alignment with HCA's request to renew the Medicaid Transformation Project. MQIP does not call for any expenditures of state general funds.

GF - Continuum of Care - CBH

The Health Care Authority (HCA) submits a placeholder request for ongoing funding for staff resources and to cover the health care costs of certain Medicaid clients admitted in a short-term Residential Crisis Stabilization Program (RCSP) for youth with severe behavioral health diagnoses.

GG - Expand PCCM Programs - OTH

The Health Care Authority (HCA) requests funding to expand the Primary Care Case Management (PCCM) program for Indian Health Care Providers serving American Indian and Alaska Native (AI/AN) individuals in the Apple Health (Medicaid) program. This expansion will improve care coordination. HCA intend to submit a Medicaid State Plan Amendment to authorize payment of \$38,400,000 per year in PCCM payments and a 1915(b)(3) waiver to authorize payment of \$48,000,000 per year in PCCM payments.

GK - MCOs and Tribe Protocols - OTH

The Health Care Authority (HCA) requests funding to support the development of a model for managed care organizations (MCOs) to serve as supportive wraparound to tribes to better coordinate care across MCOs and other Indian Health Care Providers (IHCPs). The expected result will be to increase tribal use of MCOs and improve health outcomes.

GM - Renewal of MTP - OTH

The Health Care Authority (HCA) requests additional funding in the Fiscal Year 2022 supplemental budget to renew the Medicaid Transformation Project (MTP) waiver for up to five years. A five-year renewal will permit HCA to continue providing important services and investments, building upon the success of the MTP waiver by sustaining innovations in whole-person care, reducing avoidable use of high-cost services, and focusing on new and evolved activities to improve health and health outcomes throughout all stages of life from family formation through aging/older adulthood.

GM - Renewal of MTP - OTH

The Health Care Authority (HCA) requests additional funding in the Fiscal Year 2022 supplemental budget to renew the Medicaid Transformation Project (MTP) waiver for up to five years. A five-year renewal will permit HCA to continue providing important services and investments, building upon the success of the MTP waiver by sustaining innovations in whole-person care, reducing avoidable use of high-cost services, and focusing on new and evolved activities to improve health and health outcomes throughout all stages of life from family formation through aging/older adulthood.

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GP - Children's Dental Rate Increase - OTH

To improve dental provider retention and maintain network adequacy, the Health Care Authority (HCA) proposes to increase Apple Health reimbursement rates for children to parity with adult rates for specific diagnostic and preventive dental procedures.

Apple Health fee-for-service reimbursement rates for children's dental procedures have not changed since 2009. These rates are not high enough to cover current cost of technology for some procedures, which has led more dental providers to stop serving children enrolled in Apple Health. Recent dental provider cost increases associated with the COVID-19 pandemic (e.g., for personal protective equipment) has made Apple Health dental provider retention more challenging.

GR - UPL Overpayment - OTH

The Health Care Authority (HCA) requests a shift in funding from federal to state to cover the costs that exceed the Medicaid Inpatient Upper Payment Limit.

GT - Children's Long-Term Inpatient Program - CBH

The Health Care Authority (HCA) requests to expand the Children's Long-Term Inpatient Program (CLIP) and reduce wait times. The Children's Long-Term Inpatient Program (CLIP) is the most intensive inpatient psychiatric treatment available to Washington State residents, ages 5-17. Serving children in CLIP is less expensive than treating them in a hospital inpatient setting. Increasing the number of CLIP beds available could decrease inpatient costs by approximately \$7 million. These additional beds would also allow individuals currently served outside of Washington to receive in-state treatment.

GV - Admin Operations - CBH

The Health Care Authority (HCA) is requesting additional administrative resources to invest in key agency support areas. This investment in the agency is primarily needed due to the significant growth in the HCA's health care programs over the past few years. Additionally, this request includes key programmatic investments—most notably in the Division of Behavioral Health and Recovery (DBHR) and Clinical Quality and Care Transformation (CQCT) to strengthen the agency's work for community behavioral health.

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GX - Rural CHART Support - OTH

The Health Care Authority (HCA) requests spending authority in anticipation of a federal grant award effective October 2021 and staffing starting January to implement and achieve the goals of the Community Health Access and Rural Transformation (CHART) model. In May 2021, HCA applied to be the CHART lead organization for the state. As lead organization, HCA will be awarded a federal grant to partner with rural hospitals and community stakeholders to reduce the disparities in health care access and quality that currently exist between rural and urban settings.

HA - Family Centered Care - OTH

Stronger, integrated, relational and whole-person/whole-family care is essential in fostering family stability and well-being, building on strengths of families flourish. We must test and evaluate interventions backed by evidence and scientific thinking to move the needle on disparities and to build a more equitable foundation of health for families in WA. We propose to fund a pilot in 2-3 counties to test effectiveness in improving outcomes for pregnant persons, infants, young children and their families.

HC - EHR Expansion - OTH

The Health Care Authority (HCA) requests funding in the 2022 supplemental budget to procure the services of a lead organization (LO) to setup, operate, maintain an Electronic Health Record (EHR) service, and to procure the EHR software to be managed by the LO.

HD - QAF Appropriation - OTH

The Health Care Authority (HCA) request appropriation authority from the Ambulance Transport Fund and General Fund Federal to make increased payment to ambulance transport providers and administer the Quality Assurance Fee program as directed in RCW 74.70.

HE - Cost Allocation Update - HBE

A net-zero adjustment in Health Benefit Exchange (Exchange) funding sources for the 2022 fiscal year is needed to reflect the beneficiaries of services provided and to align funding levels with the appropriate fund source. This request reflects the updated Advanced Planning Documents (APD) for federal fiscal year (FFY) 2022.

HE - Cost Allocation Update - HBE

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HR - Community Long-Term Inpatient Beds - CBH

The Health Care Authority (HCA) is requesting to align current appropriations with projected expenditures for individuals on 90- to 180-day involuntary inpatient psychiatric treatment (civil commitment orders) served in community settings.

HU - Remote Patient Monitoring - OTH

The Health Care Authority (HCA) requests funding to add remote patient monitoring (RPM) to Apple Health (Medicaid) coverage, which will allow Medicaid providers to better manage chronic diseases such as hypertension (HTN), chronic obstructive pulmonary disease (COPD), and congestive heart failure (CHF).

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