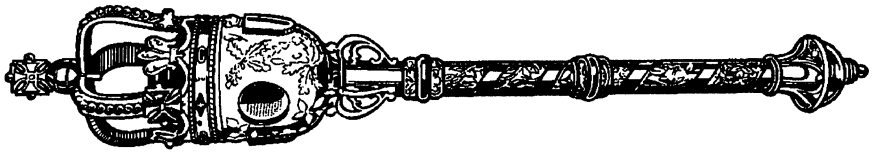
Report of the House Appropriations Subcommittee

on

Health & Human Resources



House Bill 29
&
House Bill 30

February 19, 2006

REPORT OF THE SUBCOMMITTEE
on
HEALTH & HUMAN RESOURCES

Mr. Chairman and Members of the Committee:

When we began our work this Session, it was clear that there were several pressing issues that would need to be addressed this Session outside of the area of Health and Human Resources. So as we began our work, we were determined to identify resources that could be redirected to some of these other priorities. However, thanks to your leadership, you made it clear early on that we would not sacrifice the safety net and mental health restructuring to road building and tax relief.

With this in mind, the subcommittee realized that any initiatives in this area would have to be funded by redirecting resources from new programs or non-critical program expansions contained in the introduced budget. As we started this process, it became clear that funds from non-essential initiatives could be provided to assist the committee in meeting other pressing needs outside this area. While it can be a painful process to identify resources to be used in other areas, I believe that the Subcommittee's efforts resulted in a good balance of meeting our critical health and human service needs while scaling back initiatives that need further analysis and development before we commit more resources.

The subcommittee's recommendations today preserve needed funding for Medicaid, the Comprehensive Services Act, TANF, adoptions and foster care, aging services, and other public health services that so many vulnerable Virginians depend on to meet their needs. Beyond that, the subcommittee recommends a number of changes that address continued access problems for certain Medicaid services and funding inequities for critical health care providers.

Our recommendations today also build upon the mental health and mental retardation restructuring proposal contained in the introduced budget. During the public hearings on the budget, who can forget the many families with disabled children that testified about their daily struggles to care for their children? Many of these families languish on the waiting list for services year after year. The subcommittee felt strongly that we needed to place additional resources into addressing the community mental retardation waiting list. I'm proud to state that we will add another 65 Mental Retardation Waiver slots to those contained in the introduced budget, bringing the total new slots for the next biennium to 324.

Further, actions by this subcommittee as well as the Capital Outlay Subcommittee reaffirm our commitment to rebuild four state mental health and mental retardation facilities so they can provide state-of-the-art care and treatment. We recognize the value of using the PPEA process to expedite our public building programs and are recommending that approach be used to build some of our new facilities and to operate at least one of the new facilities.

And finally, our recommendations, like those in Public Safety, recognize the need to confine, treat and monitor individuals who are civilly committed to the Department of Mental Health, Mental Retardation and Substance Abuse Services as sexually violent predators. As Delegate Sherwood stated earlier, this Committee and the House of Delegates supported legislation recommended by the Virginia State Crime Commission to better identify individuals leaving our correctional system who may be candidates for civil commitment as sexually violent predators. The subcommittee redirected almost $15 million in resources in order to implement provisions of the legislation that pertain to the civil commitment process including clinical evaluations, expert court testimony, conditional release treatment and monitoring (including GPS monitoring), and institutional confinement and active treatment.

While this budget already contains funding to help improve access to health care services by providing rate increases to some of our health care partners, we are continuing to lose other providers in

our Medicaid program such as pediatricians, private duty nurses, and personal care providers simply because they can no longer afford to subsidize the cost of serving Medicaid recipients. For this reason, we are recommending funding to increase these provider rates in the upcoming biennium.

Over the past couple of years, we have taken a couple of first steps to try to address the funding problems facing the Commonwealth's trauma system. As many of you know, a couple of years ago, the Joint Legislative Audit and Review Commission completed a study of Virginia's trauma centers due to concerns about access and sustainability. JLARC found a system which is in a tenuous state. Trauma centers routinely lose money due to the large number of uninsured trauma patients they serve, the low reimbursement from public insurers, and the readiness costs they must absorb.

As a result, we established the Trauma Center Fund, to defray the costs of providing uncompensated emergency medical care to victims of automobile accidents attributable to alcohol or drug use. We passed legislation to charge a fee to those convicted of two or more DUI-related offenses within 10 years and later we passed legislation to charge a fee to those applying for reinstatement of suspended or revoked driver's licenses. While these measures should provide about $4.2 million annually to the Trauma Center Fund, the funding will fall woefully short of the losses these centers are bearing each year – close to $44 million annually. In order to help maintain Virginia's trauma system, the subcommittee is recommending a redirection of resources to provide about $15 million in funding for trauma centers over the next biennium.

Finally, Mr. Chairman, the subcommittee heard compelling testimony this year from Virginians who have suffered from a traumatic brain injury and have been unable to get help in dealing with the devastating effects of the injury. Therefore, we are recommending almost $1.8 million in new funds to increase community services for individuals with traumatic brain injuries.

Mr. Chairman, I would like to thank the subcommittee members for their hard work this Session and I would like to thank the entire committee for their efforts to preserve our safety net programs and the mental health restructuring package. The details of the subcommittee's recommendations are contained in the attachments which the staff will walk through with you. It is my hope that you will adopt our recommendations.

Respectfully Submitted by the House Appropriations Subcommittee on Health & Human Resources:

Phillip A. Hamilton, Chairman

Lionell Spruill, Sr.

Harvey B. Morgan

Robert H. Brink

M. Kirkland Cox

Mamye E. BaCote

R. Steven Landes

S. Chris Jones

BUDGET AMENDMENT RECOMMENDATIONS

Amendment	HB 29 General Fund	2006-08 BIENNIAL TOTAL General Fund	Nongeneral Fund	FTE
Health & Human Resources				
HB 29				
Department Of Medical Assistance Services				
Prior Authorization Contract Savings	(1,200,000)			
Correct Medicaid Funding Double Count	(1,979,354)			
Pharmacy Rebates	(4,500,000)			
Reduce Medicare Part D "Clawback" Payment	(6,717,958)			
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HB 29 TOTAL	($14,397,312)			
HB 30				
General Assembly of Virginia				
Oversight of Social Services Performance		Language		
Joint Legislative Audit and Review Commission				
Report on Assisted Living Regulations		Language		
Secretary Of Health And Human Resources				
Secretary to Examine Federal Grants for Trauma System		Language		
Forecast of Sexually Violent Predators		Language		
Department For The Aging				
Peninsula AAA Use of Care Coordination Funds		Language		
Department Of Health				
Trauma Center Funding		15,925,634	0	
Conform $4-for-Life Language to Statute		Language	0	
Reflect $4-for-Life Funding in Act		0	5,175,000	
Booster Tdap Vaccine for Children		553,399	1,660,114	
Correct and Remove Duplicate Language		Language		
HB 413-Virginia Cord Blood Bank Initiative		506,000	0	
HB 760-Outpatient Data System		250,000	0	
Organ and Tissue Donor Registry		70,000	0	
Correct CHIP of Virginia Language		Language		
Eliminate Electronic Health Records Initiative		(6,753,240)	0	
St. Mary's Health Wagon		(200,000)	0	
Drinking Water Revolving Fund		(2,800,000)	0	
Department Of Medical Assistance Services				
Involuntary Mental Commitment Reimbursements		Language		
Children's Health Insurance Buy-In program		Language		
Day Support Waiver to Include Supported Employment		Language		
Kidney Disease Testing		Language		
Review MR Waiver Program		Language		
Medicaid Specialty Drug Program		Language		
MR Waiver Inclusion of Applied Behavioral Analysis		Language		
Authority to Comply with Federal Medicaid Law Changes		Language		
Increase Medicaid Pediatric Payment Rates		7,949,788	7,949,788	
Increase Medicaid Payments for Personal Care		4,284,705	4,284,705	
Medicaid Reimbursement for Skilled Nursing Services		1,487,684	1,487,684	
Staff for Medicaid Reform, Acute & Long-Term Svs. Integration		176,650	176,650	3.00

BUDGET AMENDMENT RECOMMENDATIONS

Amendment	HB 29 General Fund	2006-08 BIENNIAL TOTAL General Fund	Nongeneral Fund	FTE
Reduce Medicare Part D "Clawback" Payment		(32,246,198)	0	
Eliminate Increase in Hospital Payment Adj. Factor		(15,925,634)	0	
Prior Authorization Contract Savings		(2,400,000)	2,400,000	
Eliminate Obesity Pilot Project		(404,200)	(359,800)	
Department Of Mental Health, Mental Retardation And Substance Abuse Services				
Revise Community Reinvestment Language		Language		
Use of PPEA for Facility Replacement & Operations		Language	0	
Contract Operations of SVP Facility		Language	0	
Eliminate Funds and Transfer Olmstead Follow-up to VBPD		(466,796)	0	
Eliminate Nonstate Funding for Greater Richmond ARC		(750,000)	0	
Eliminate Nonstate Agency Funding for Celebrating Special Children		(100,000)	0	
Transfer SVP Conditional Release Funds to New SVP Office		(650,000)	0	
Create Office of Sexually Violent Predator Services		2,716,882	0	4.00
MH Services to Juveniles in Detention Centers		Language		
Additional MR Waiver Slots for Community Waiting List		4,000,000	4,000,000	
MR Waiver Start-Up Funds		270,000	0	
ESH Lease Agreement with James City County Schools		Language		
VCBR & New SVP Facility Operating Costs		12,284,805	0	
Sexual Predators - Out of State Services Authorized		Language		
Department Of Rehabilitative Services				
Virginia Brain Injury Council		Language		
Brain Injury Svs. for Unserved or Underserved Areas		1,200,000	0	
Department Of Social Services				
Authority for TANF Plan Changes		Language		
EITC Mini-Grants		460,000	0	
Maximze Federal Funds for Faith-Based Prisoner Reentry Svs.		Language		
Supplant GF with NGF for Community Action Agencies		(1,029,572)	1,834,000	
Reduce Funding for the Early Childhood Foundation		(6,600,000)	0	
Revise Study Language Special Needs Adoptions		Language		
Virginia Board For People With Disabilities				
Oversight of Virginia's Olmstead Plan		Language		
Part 3				
Technical Correction to Vital Records Fee Transfer		Language		
Part 4				
No State, Special or Nongeneral Funds for Abortion Svs		Language		
		==========	==========	==========
HB 30 TOTAL		**(18,190,093)**	**28,608,141**	**7.00**

Legislative Department

General Assembly Of Virginia Language

Language:

Page 7, after line 47, insert:

"G. The Chairmen of the House Appropriations and Senate Finance Committees shall each appoint four members from their respective committees to a joint subcommittee to (i) review the recommendations from the Joint Legislative Audit and Review Commission (JLARC) studies titled "Operation and Performance of Virginia's Social Services System" and "Self-Sufficiency Among Social Services Clients in Virginia"; (ii) assess the progress of the Department of Social Services and related agencies in improving Virginia's social services system to improve the local administrative funding process, human resource management, information technology plan and development, and organization and management of the State Department of Social Services; (iii) assess efforts by the Department of Social Services and related agencies in increasing personal accountability and enhance the effectiveness of services in helping clients attain self-sufficiency; (iv) review any proposed changes to the Temporary Assistance to Needy Families Program that may be needed to comply with new federal requirements, pursuant to the federal Deficit Reduction Omnibus Reconciliation Act of 2005; and (v) review the funding policies of the foster care and adoption subsidy program."

Explanation:

(This amendment creates a joint subcommittee composed of four members each from the House Appropriations and Senate Finance Committees to review and assess the progress of the Department of Social Services and the social services system in implementing recommendations from two JLARC studies which examined the system in 2005. In addition, the joint subcommittee would review proposed changes to the TANF program that may be needed to comply with recent federal changes with the reauthorization of the program. Finally, the joint subcommittee would review funding policies for the foster care and adoption subsidy programs. Expenditures in recent years, particularly in the adoption subsidy program, have increased significantly.)

Legislative Department

Joint Legislative Audit And Review Commission — Language

Language:

Page 14, after line 37, insert:

"E. The Joint Legislative Audit and Review Commission (JLARC) shall report on the impact of new assisted living regulations on the cost of providing services; residents' access to providers and services, including Medicaid-funded mental health and other services; and tangible improvements in the quality of care delivered. The Department of Social Services, the Department of Mental Health, Mental Retardation, and Substance Abuse Services, and the Department of Medical Assistance Services shall cooperate fully as requested by JLARC and its staff. JLARC shall submit the report by June 30, 2008."

Explanation:

(This amendment requires JLARC to continue to report on the impact of the regulatory changes included in Chapter 610 and Chapter 924 from the 2005 Session on providers of assisted living services and the quality of care provided in these settings.)

Health And Human Resources

Secretary Of Health And Human Resources — Language

Language:

Page 235, line 8, before "Out", insert: "A."

Page 235, after line 20, insert:

"B. The Secretary of Health and Human Resources shall examine and identify potential funding sources on the federal, state and local levels that may be available to Virginia's trauma centers to support the system's capacity to provide quality trauma services to Virginia citizens. As sources are identified, the Secretary shall work with any federal and state agencies and the Trauma System Oversight and Management Committee to assist in securing additional funding for the trauma system."

Explanation:

(This amendment is self-explanatory.)

Health And Human Resources

Secretary Of Health And Human Resources — Language

Language:

Page 235, line 8, before "Out", insert "A."

Page 235, after line 20, insert:

"B.1. The Secretary of Health and Human Services, in collaboration with the Office of the Attorney General and the Secretary of Public Safety, shall establish a Sexually Violent Predator (SVP) forecast committee. The committee shall forecast and track for each fiscal year through fiscal year 2012: (i) the number of inmates presently incarcerated in the Department of Corrections and approaching release who meet the criteria set forth in House Bill 1038 (2006 Session) and may be eligible for evaluation as sexually violent predators; (ii) the number of Commitment Review Committee (CRC) evaluations to be completed; (iii) the number of eligible inmates recommended by the CRC for civil commitment, conditional release, and full release; (iv) the number of civilly committed residents of the Virginia Center for Behavioral Rehabilitation who are eligible for annual review; and (v) the number of individuals civilly committed to the Virginia Center for Behavioral Rehabilitation and granted conditional release from civil commitment in a state SVP facility. At a minimum, the forecast committee shall include representatives from: the Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS) Office of SVP Services, the Department of Corrections, the Office of the Attorney General, the Department of Planning and Budget, the Senate Finance and House Appropriations Committee Staff, the Crime Commission, the Virginia Criminal Sentencing Commission and other entities as deemed appropriate. The Secretary shall complete a summary report of current SVP cases and a forecast of SVP-eligibility, civil commitments, and SVP conditional releases, including projected bed space requirements, to the Governor, Senate Finance and House Appropriations Committees by October 1 of each year.

2. As part of the forecast process, the Department of Corrections shall administer a STATIC-99 screening to all potential Sexually Violent Predators eligible for civil commitment pursuant to § 37.2-900 et seq., Code of Virginia, within 6 months of admission to the Department of Corrections. The results of such screenings shall be provided to the Commissioner of DMHMRSAS on a monthly basis and used for the SVP population forecast process.

3. The Office of the Attorney General shall also provide to the Commissioner of DHMRSAS, on a monthly basis, the status of all SVP cases pending before their office for purposes of forecasting the SVP population."

Explanation:

(This amendment requires the Secretary of Health and Human Resources to set up a forecast process for estimating the number of individuals who may be released from prison and civilly committed as sexually violent predators to a state facility or granted conditional release and require monitoring and/or treatment. The Office of the Attorney General and the Department of Corrections are required to collaborate and provide information to be used in the forecasting process.)

Health And Human Resources

Department For The Aging Language

Language:

Page 241, after line 52, insert:

"M. The Peninsula Agency on Aging shall be authorized to use funding provided for care coordination for the elderly to provide mobile, brief intervention and service linking as a form of care coordination."

Explanation:

(This amendment authorizes the Peninsual Agency on Aging to provide care coordination services, which are modeled on the existing Senior Outreach to Services (SOS) program. This program provides mobile, brief intervention and service linking to coordinate care for the elderly population it serves.)

Health And Human Resources

Department Of Health Language

Language:

Page 245, strike lines 13 through 16.
Page 245, line 17, strike "B" and insert "A".
Page 245, line 17, strike "$230,750 the first year and" and insert:
"$25,000 each year shall be provided from".
Page 245, strike line 18.
Page 245, line 22, strike ", to the" and insert "."
Page 245, strike lines 23 through 45.
Page 245, line 46, strike "E" and insert "B".
Page 245, line 49, strike "F" and insert "C".
Page 245, line 50, strike "special funds" and insert:
"the Rescue Squad Assistance Fund".

Explanation:

(This amendment eliminates unnecessary language citing Code of Virginia provisions for distributing the $4-for-Life funding for emergency medical services. New statutory language was passed by the 2004 General Assembly which realigned the funding formula guiding the distribution of the $4-for-Life funding. However, the new distribution formula was contingent upon receipt of the full amount of $4-for-Life funding which will occur beginning July 1, 2007. The implementation of the new formula makes the current language in the budget related to this distribution obsolete. In addition, language is added to clarify that funding provided to the Department of State Police for med-flight operations will be provided from the Rescue Squad Assistance Fund, thereby ensuring that the new funding formula adopted for $4-for-Life will be effective on July 1, 2007.)

Health And Human Resources
Department Of Health Language

Language:
Page 246, strike lines 34 through 46.
Page 246, line 47, strike "D." and insert "A."
Page 247, line 3, strike "E." and insert "B."
Page 247, line 10, strike "F." and insert "C."

Explanation:
(This amendment corrects and removes duplicate language in this item.)

Health And Human Resources
Department Of Health Language

Language:
Page 250, line 43, strike "$396,000" and insert "$571,000".
Page 250, line 44, strike "$396,000" and insert "$571,000".

Explanation:
(This amendment corrects the amount of funding for Comprehensive Health Investment Project (CHIP) of Virginia in the language included in this item.)

Health And Human Resources

Department Of Medical Assistance Services — Language

Language:

Page 257, line 19, before "Any balance", insert "A."

Page 257, after line 25, insert:

"B. Out of this appropriation, payments may be made from the Involuntary Mental commitment Fund to licensed health care providers for medical screening and assessment services provided to persons with mental illness while in emergency custody pursuant to § 37.2-808, Code of Virginia."

Explanation:

(This amendment adds language allowing the Department of Medical Assistance Services to reimburse qualified providers for medical assessments required for those persons in emergency custody before admission to a psychiatric unit or hospital from the Involuntary Mental Commitment Fund. Most hospitals require some medical screening and will not admit a patient unless "medical clearance" has been granted.)

Health And Human Resources

Department Of Medical Assistance Services — Language

Language:

Page 258, after line 31, insert:

"E. The Department of Medical Assistance Services shall review and evaluate State Children's Health Insurance Program (SCHIP) buy-in programs for children that are operating in other states, which allow families with income in excess of the state's Title XXI program eligibility limits to purchase health insurance for their children. This review, including recommendations regarding the development of a SCHIP buy-in program in Virginia, shall be presented to the Chairmen of the House Appropriations and Senate Finance Committees, and the Joint Commission on Health Care by October 1, 2006."

Explanation:

(This amendment requires the agency to review and report on other states' SCHIP buy-in programs. At least eight states -- Connecticut, Florida, Illinois, Maine, North Carolina, New Hampshire, New York, and Pennsylvania -- have buy-in programs that allow families with incomes in excess of their SCHIP program eligibility limits to purchase SCHIP or SCHIP-like insurance coverage for their children. Buy-in programs such as these fill a necessary coverage gap for children of working families that are not eligible for SCHIP but do not have access to or cannot afford private insurance coverage.)

Health And Human Resources

Department Of Medical Assistance Services — Language

Language:

Page 271, after line 53, insert:

"TT. The Department of Medical Assistance Services shall amend the Day Support home- and community-based waiver to include supported employment as a service option."

Explanation:

(This amendment adds a service category to the services available to individuals with mental retardation who are enrolled in the Medicaid Day Support waiver. The Day Support waiver was designed to serve 300 individuals with an original appropriation of $2.9 million from the general fund and $2.9 million from matching federal Medicaid funds, effective July 1, 2005. During the design of the waiver, the department estimated that the addition of supported employment would have an additional cost impact, which could impact the number of individuals who could be served by the waiver. Currently, more than 200 individuals receive services through the Day Support waiver. Supported employment would be an appropriate addition to the continuum of services to better serve these individuals. The addition of these services is estimated to not require additional funding, as the program is not yet at projected capacity.)

Health And Human Resources

Department Of Medical Assistance Services

Language

Language:

Page 268, after line 22, after "FF." insert "1."

Page 268, after line 36, insert:

"2. Effective July 1, 2006, the Department shall request any clinical laboratory performing a serum creatinine test on a Medicaid recipient over the age of 18 years to calculate and report to the physician the estimated glomerular filtration rate (eGFR) of the patient and shall report it as a percent of kidney function remaining. The Department shall provide a status report on its efforts to increase reporting of the eGFR rate to physicians and the extent to which clinical laboratories are complying with the requested reporting to the Governor and the Chairmen of the House Appropriations and Senate Finance Committees by January 1, 2007."

Explanation:

(This amendment adds language directing the Department of Medical Assistance Services to request any clinical laboratory performing a serum creatinine test on a Medicaid recipient over the age of 18 years to calculate and to report the estimated glomerular filtration rate (eGFR) of the patient to the physician. The eGFR is a calculation which measures how well a patient's kidneys are filtering wastes from the blood. Currently, physicians are required to ask for this calculation. The calculation is necessary in order to accurately classify patients into the proper disease stages of chronic kidney disease. Language is also added to clarify that the Department shall begin requesting this information be provided by clinical laboratories beginning July 1, 2006. Language is added to require a status report on the Department's efforts and laboratory compliance by January 1, 2007.)

Health And Human Resources

Department Of Medical Assistance Services — Language

Language:

Page 271, after line 53, insert:

"TT. The Department of Medical Assistance Services, in cooperation with the Department of Mental Health, Mental Retardation and Substance Abuse Services, the Virginia Association of Community Services Boards, the ARC of Virginia, and other stakeholders, shall jointly review the current Medicaid home- and community-based waiver for persons with mental retardation to determine how the waiver program can be improved to provide a person-centered, individualized support focus. In conducting the review, the Department shall assess the need to upgrade availability of therapeutic behavioral consultation, skilled nursing, medical and other specialized supports for individuals who are served through the waiver. Also, the department shall review successful models of waiver funded community supports used by other states to serve individuals with mental retardation for potential application to Virginia. The Department shall report on its review of the waiver program including recommendations for changes and cost implications by December 1, 2006, to the Governor and the Chairmen of the House Appropriations and Senate Finance Committees."

Explanation:

(This language amendment requires the Department of Medical Assistance Services to work with the Department of Mental Health, Mental Retardation and Substance Abuse Services and interested stakeholders to review and make recommendations for changes to the mental retardation (MR) waiver to provide a person-centered, individualized support focus and MR waiver supportive services that better meet the needs of mentally retarded individuals who receive waiver services. Language requires a report on this review by December 1, 2006.)

Health And Human Resources

Department Of Medical Assistance Services — Language

Language:

Page 269, line 50, after "program.", insert:
"In developing the modifications, the Department shall consider input from physicians, pharmacists, pharmaceutical manufacturers, patient advocates, the Pharmacy Liaison Committee, and others as appropriate."
Page 269, line 51, after "program to", insert:
"implement appropriate care management and".
Page 269, line 54, after "utilization", insert:
"through appropriate case management".
Page 269, line 58, after "program", insert:
"and publish same on the department's website".
Page 269, after line 58, insert:
"3. In the event that the Department of Medical Assistance Services contracts with a vendor, the Department shall establish the fee paid to any such contractor based on the reasonable cost of services provided. The Department may not offer or pay directly or indirectly any material inducement, bonus, or other financial incentive to a program contractor based on the denial or administrative delay of medically appropriate prescription drug therapy, or on the decreased use of a particular drug or class of drugs, or a reduction in the proportion of beneficiaries who receive prescription drug therapy under the Medicaid program. Bonuses cannot be based on the percentage of cost savings generated under the benefit management of services."
Page 269, line 59, strike "3" and insert "4".
Page 269, line 59, after "review", strike "and" and insert ",".
Page 269, line 59, after "update", insert ", and publish".
Page 270, line 9, strike "4" and insert "5".
Page 270, line 15, strike "September 15" and insert "November 1".
Page 270, line 16, strike "5" and insert "6".

Explanation:

(This amendment adds language that requires the Department of Medical Assistance Services to work with stakeholders in developing the Specialty Drug Program. Language is added to prohibit the Department of Medical Assistance Services from offering or paying incentives to any potential contractor for the Specialty Drug Program based on denying or delaying medically appropriate

prescription drug therapy, should the Department decide to contract for these services.)

Health And Human Resources

Department Of Medical Assistance Services — Language

Language:

Page 271, after line 53, insert:

"TT. Effective July 1, 2006, the Department of Medical Assistance Services shall amend the home- and community-based care waivers for mental retardation services and developmental disabilities to ensure that applied behavioral analysis for individuals with autism or autistic spectrum disorders and positive behavioral supports for individuals with severe behavioral difficulties are covered under therapeutic consultation services."

Explanation:

(This amendment directs the Department of Medical Assistance Services to modify the Mental Retardation Waiver and Individual and Family Developmental Disabilities Support Waiver programs to ensure that applied behavioral analysis for individuals with autism or autistic spectrum disorders and positive behavioral supports for individuals with severe behavioral difficulties are covered under therapeutic consultation services. Therapeutic consultation services are currently available under both of these waivers. Intensive, comprehensive treatment of children at early stages in their development who are at high risk for autism or autistic spectrum disorders using applied behavior analysis methods has shown promise in helping these children become ready for school and avoid more costly treatment later in life. For some children, this type of early intervention has resulted in the avoidance of special education services. The Mental Retardation Waiver provides home- and community-based services to children under age six and the Individual and Family Developmental Disabilities Support Waiver provides services to children over the age of six who have developmental disabilities and who, without such services, would require institutional services. Positive behavioral supports is another behavioral treatment modality that may be provided under therapeutic consultation services. This modality decreases the need for more intrusive interventions to eliminate challenging behaviors for both children and adults.)

Health And Human Resources

Department Of Medical Assistance Services

Language

Language:

Page 271, after line 53, insert:

"TT. The Department of Medical Assistance Services shall have the authority to amend the State Plan of Medical Assistance Services to implement modifications to the Medicaid program to comply with the mandated provisions of the federal Deficit Reduction Omnibus Reconciliation Act of 2005. This authorization shall apply only to those provisions the states are required to implement within 280 days of enactment of this Appropriation Act. The Department shall have the authority to enact emergency regulations under § 2.2-4011 of the Administrative Process Act to effect this provision."

Explanation:

(This amendment provides the Department with the authority to make changes to the Medicaid State Plan to ensure compliance with federal requirements included in the Deficit Reduction Omnibus Reconciliation Act of 2005.)

Health And Human Resources

Department Of Mental Health, Mental Retardation And Substance Abuse Services — Language

Language:

Page 275, line 50, after "setting.", insert:

"It is the intent of the General Assembly that the Public-Private Education Facilities and Infrastructure Act (PPEA) of 2002 be used wherever possible to facilitate cost effective and expeditious replacement of the four facilities that are identified in this item. Further, it is the intent of the General Assembly, based on the success in developing public-private partnerships to deliver acute care services as part of the comprehensive mental health care system, that one of the four facilities be operated by a private entity if one submits a proposal that meets the requirements of the PPEA of 2002 in order to provide operational efficiencies to the mental health care delivery system, unless the Department of Mental Health, Mental Retardation and Substance Abuse Services can demonstrate that continued state operation of the facility is at least as cost effective and provides at least an equivalent or higher level quality care than operation by a private entity."

Explanation:

(This amendment adds language in the Department of Mental Health, Mental Retardation and Substance Abuse Services to indicate the intent of the General Assembly that the Department use the PPEA of 2002 as the framework for constructing one of the four facilities targeted for replacement, Eastern State Hospital, Western State Hospital, Southeastern Virginia Training Center, and Central Virginia Training Center. Language also requires that at least one of the four facilities be operated by a private entity, unless the Department can demonstrate that continued state operation of the facility is at least as cost effective and provides at least and equivalent or higher level of quality care.)

Health And Human Resources

Department Of Mental Health, Mental Retardation And Substance Abuse Services — Language

Language:

Page 276, after line 5, insert:
"Mental Retardation Waiver Slots to Eliminate Urgent Care Waiting List for Children Under Age Six $5,346,563 $5,346,563".
Page 276, line 6, strike "4,972,250" and insert "8,972,250".
Page 276, line 6, strike "9,260,816" and insert "13,260,816".
Page 276, line 7, strike "320,000" and insert "590,000".
Page 276, line 23, strike "77,668,587" and insert "87,285,150".
Page 276, line 23, strike "90,947,637" and insert "100,294,140".
Page 276, line 39, after "costs", insert "." and strike "to be financed through the Virginia Public".
Page 276, strike lines 40 through 42.

Explanation:

(This amendment modifies language in the introduced budget depicting funding for mental health, mental retardation and substance abuse services community investment through system restructuring. Funding for mental retardation waiver slots to eliminate the urgent care waiting list for children under age six is added. An additional $4.0 million from the general fund is added to reflect additional funding provided for mental retardation waiver slots in each year and $270,000 from the general fund is added for the attendant waiver start up funding provided. Language indicating the facility replacement costs will be financed through separate legislation is eliminated.)

Health And Human Resources
Department Of Mental Health,
Mental Retardation And Substance
Abuse Services

Language

Language:

Page 280, after line 35, insert:

"V. The Department of Mental Health, Mental Retardation and Substance Abuse Services shall contract for the operation of the facility-based sexually violent predator program, including clinical treatment services, perimeter security, medical services, transportation, dietary services, and facility maintenance, unless the Department of Mental Health, Mental Retardation and Substance Abuse Services can demonstrate that continued state operation of the facility is at least as cost effective and provides at least an equivalent or higher level quality care than operation by a private entity. The Department may use a public-private partnership or a Request for Proposal to contract with a vendor for such services. Selection criteria shall be developed by the Department. Such criteria shall include a requirement that the vendor have prior experience in the delivery of mental health care and custodial services in other states."

Explanation:

(This amendment requires the Department of Mental Health, Mental Retardation and Substance Abuse Services to contract for operation of the sexually violent predator program including facility services through a public-private partnership or Request for Proposal, using criteria developed by the Department, unless the Department can demonstrate that continued state operation of the facility is at least as cost effective and provides at least an equivalent or higher level quality care than operation by a private entity.)

Health And Human Resources

Grants To Localities Language

Language:

Page 284, line 7, after "centers.", insert:

"Funds shall be allocated to local and regional detention centers based upon Memoranda of Understanding between the detention superintendent and the executive director of the local community services board or behavioral health authority that will provide the services. Memoranda shall specify the expected types of services, as well as estimated workloads. The Department shall review and approve each memorandum to ensure consistency and shall allocate funding based upon the projected levels of services to be provided."

Explanation:

(This amendment adds language clarifying that funding used to provide expanded mental health services to juveniles detained in local community detention centers shall be allocated based of Memoranda of Understanding which specifies the types of services and estimated workloads. Language also directs the Department of Mental Health, Mental Retardation and Substance Abuse Services to review the memoranda and to allocate funding based on the projected level of services to be provided.)

Health And Human Resources

Mental Health Treatment Centers Language

Language:

Page 286, after line 27, insert:

"C. Notwithstanding any other provisions of policy or regulation, Eastern State Hospital is authorized to continue the current agreement with Williamsburg-James City County Public Schools to lease facility space for the Alternative School through June 30, 2008, in accordance with the terms and conditions of the contract in effect from July 1, 2005, to June 30, 2006."

Explanation:

(This amendment allows Eastern State Hospital to continue its current agreement to lease space at the facility to Williamsburg-James City County Public Schools for its Alternative School. The Alternative School occupies about 12,000 square feet of space in an area at that was not being used by the Hospital. The current agreement provides for the payment of the cost of utilities and refuse services. More recent state policy requires state agencies to make vacant space available to other state agencies as a first priority and, if leasing space, to obtain a fair market lease value for the space. The Alternative School will need to be relocated once Eastern State Hospital begins construction to rebuild the facility. This language would allow the school to continue its current lease until the school is able to find an alternative location and/or Eastern State Hospital begins rebuilding its existing facility.)

Health And Human Resources

Virginia Center For Behavioral Rehabilitation — Language

Language:

Page 289, after line 17, insert:

"In the event that services are not available in Virginia to address the specific needs of an individual committed for treatment at the Center for Behavioral Rehabilitation or conditionally released, the Commissioner is authorized to seek such services from another state."

Explanation:

(This language amendment authorizes the Commissioner to seek specific services from other states in the event that such services are not available in the Commonwealth for individuals who are committed for treatment at the Center for Behavioral Rehabilitation or conditionally released.)

Health And Human Resources

Department Of Rehabilitative Services

Language

Language:

Page 290, after line 29, insert:

"4. In allocating additional funds for brain injury services, the Department of Rehabilitative Services shall consider recommendations from the Virginia Brain Injury Council (VBIC)."

Explanation:

(This amendment requires the Department of Rehabilitative Services to consider the recommendations of the Virginia Brain Injury Council when allocating new funds for brain injury services. The Virginia Brain Injury Council is composed of consumers and families, health care professionals, state agency representatives, service providers, and others.)

Health And Human Resources

Department Of Social Services Language

Language:

Page 294, line 23, after "D.", insert:

"1. The Department of Social Services shall be authorized to make necessary changes in the State Plan for the Temporary Assistance for Needy Families (TANF) Program to meet the federal TANF requirements, pursuant to federal Deficit Reduction Omnibuse Reconciliation Act of 2005, and to minimize the Commonwealth's exposure to federal financial penalties, provided it does so in the most efficient and least costly manner.

2."

Explanation:

(This amendment requires the Department of Social Services to make changes to the State Plan for TANF to ensure the program conforms to new federal requirements for work participation and other changes. Existing language in the budget requires the Department to provide proposed policy changes and estimates of fiscal impact of State TANF Plan changes to the Chairmen of the House Appropriations and Senate Finance Committees at least 30 days prior to submitting amendments to the federal government on State TANF Plan changes.)

Health And Human Resources
Department Of Social Services Language

Language:

Page 302, line 50, after "O.", insert "1."
Page 302, line 51, strike "local social services directors staff" and insert:
"Virginia League of Social Services Executives and the executive director of the Office of Comprehensive Services".
Page 302, line 53, after "related to the", insert "management of the".
Page 302, line 53, after "program", insert "and make recommendations".
Page 302, line 54, after "The study", strike "will focus on", and insert:
"shall examine the relationship of the special needs adoption program to the federal Child and Family Services Review Performance Improvement Plan requirements. The study's focus will be to examine".
Page 303, after line 1, insert:
"2. In making its recommendations, the Department shall also examine the services provided under the adoption program and whether the appropriate levels of ancillary adoptive services and funding options are available to local departments of social services in developing a service plan for an adopted child and the adoptive family. The study shall make recommendations on (i) the establishment of a list of allowable ancillary adoption services for reimbursement and (ii) policy guidance on the use of alternative funding sources for providing adoption services."
Page 303, line 2, before "Measures", insert "3".
Page 303, after line 9, insert:
"4. Neither the Commissioner nor the State Board of Social Services shall (i) issue emergency regulations, (ii) issue departmental policy, or (iii) take other administrative action to alter the funding formula in place for the reimbursement of adoption services prior to the issuance of the written report specified in O.3. and the delivery of an oral presentation on the study to the House Appropriations and Senate Finance Committees."

Explanation:

(This amendment modifies language in the introduced budget requiring the Department of Social Services to perform a comprehensive study of the special needs adoption subsidy program. Language is added requiring collaboration with the Virginia League of Social Services Executives and the executive director of the Office of Comprehensive Services. In addition, language is added to ensure that the study examines the relationship between the adoption program and the federal

requirements related to improving the Commonwealth's child and family services programs. Language directs the Department to examine the services provided through the program and the availability of ancillary services and alternative funding options to local departments of social services. Language prohibits the adoption of emergency regulations, policy or other administrative actions until the Department has completed its report to the Governor and money committees and has provided an oral presentation to the money committees.)

Health And Human Resources

Department Of Social Services Language

Language:

Page 304, after line 18, insert:

"D. The Department of Social Services Office of Community Partnerships and the Virginia Faith-Based and Community Liaison shall make every effort to maximize federal funding currently available or that which will become available through the federal Second Chance Act of 2005 for faith-based and community organizations to partner with public agencies to provide prisoner reentry services."

Explanation:

(This amendment directs the Department of Social Services to maximize federal funding for prisoner reentry services.)

Health And Human Resources

Virginia Board For People With Disabilities — Language

Language:

Page 309, after line 26, insert:

"The Virginia Board for People with Disabilities shall provide oversight for the implementation of the *Olmstead* Plan as set forth in the two annual reports of the Community Integration Oversight Advisory Committee and report annually by October 1 on Virginia's progress in moving forward with the plan to the Governor and the Chairmen of the House Appropriations and Senate Finance Committees.

Explanation:

(This amendment directs the Virginia Board for People with Disabilities to provide permanent oversight for the implementation of Virginia's Olmstead Plan as part of the agency's ongoing responsibilities.)

Transfers

Interfund Transfers Language

Language:

Page 480, line 48, after "2007," strike "and June 30, 2008,".

Explanation:

(This amendment removes the language requiring transfer of the vital records $2.00 fee increase authorized by Item 288 of the introduced bill in the second year. The intent of this item was to transfer the fee increase only in the first year.)

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Special Conditions and Restrictions on Expenditures
Good and Services Language

Language:

Page 509, after line 37, insert:

"h. MEDICAL SERVICES: No expenditures from general, special or other nongeneral fund sources may be made out of any appropriation by the General Assembly for providing abortion services, except as otherwise required by federal statute. However, nothing herein shall prevent a physician from providing medical assistance to preserve the life of a pregnant woman provided that every possible measure shall be taken to preserve the life of the unborn child of the pregnant woman."

Explanation:

(This amendment is self-explanatory.)