

Request to Amend House Bill 1500, as Introduced

Chief Patron: Anderson

Item 330 #1h

Co-Patron(s): Greason, Ingram, Lopez, McClellan,
Morrissey

Health And Human Resources	FY 12-13	FY 13-14	
Department For Aging And Rehabilitative Services	\$721,264	\$1,271,759	GF

Language:

Page 294, line 48, strike "\$97,492,683" and insert "\$98,213,947".

Page 294, line 48, strike "\$97,493,111" and insert "\$98,764,870".

Explanation:

(This amendment adds \$721,264 the first year and \$1.3 million the second year from the general fund for employment supports and job maintenance programs. Long-term Employment Support Services (LTESS) and Extended Employment Services (EES) provide access to employment and supports for individuals with disabilities through partnerships with employment service organizations. Funding for these employment support services has been reduced by 26.9 percent since 2008.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: BaCote

Item 297 #7h

Co-Patron(s): Helsel, Tyler, Ward

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Health	\$0	\$7,000,000	GF

Language:

Page 256, line 42, strike "\$12,497,162" and insert "\$19,497,162".

Page 259, line 38, strike "510,000" and insert "7,510,000".

Explanation:

(This amendment adds \$7.0 million from the general fund the second year to increase support for proton therapy treatment at the Hampton University Proton Therapy Institute. The Institute is the largest proton treatment center in the U.S. and the only one with dedicated research space. The facility is projected to serve about 2,000 patients per year. The funds will be used to advance proton therapy methodologies to improve patient outcomes and support research, and implement patient outreach.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Bell, Richard

Item 283 #1h

Health And Human Resources

Comprehensive Services For
At-Risk Youth And Families

Language

Language:

Page 246, after line 36, insert:

"N. Pursuant to § 2.2-5211.1 of the Code of Virginia, the State Executive Council shall evaluate the results of the annual survey performed by the Office of Comprehensive Services to measure gaps in the services needed to keep children in the local community and any barriers to the development of those services. Based on this survey and on input received from public and private stakeholders in the provision of children's services, the Council shall develop recommended priorities to address these gaps in services, to be funded by any un-appropriated balances existing in the agency's budget at the end of each fiscal year. These recommendations shall be communicated to the chairmen of the Senate Finance and House Appropriations Committees no later than June 30 of each year."

Explanation:

(This language amendment requires the Office of Comprehensive Services to reinvest unappropriated balances at the end of each fiscal year to address service gaps in the CSA program based on recommendations from the State Executive Council.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Bell, Richard

Item 315 #8h

Health And Human Resources	FY 12-13	FY 13-14	
Grants To Localities	\$0	\$1,700,000	GF

Language:

Page 285, line 35, strike "\$325,471,560" and insert "\$327,171,560".

Explanation:

(This amendment adds \$1.7 million from the general fund the second year to address a projected shortfall of funding for Inpatient Purchase of Services (LIPOS) in each of the seven mental health partnership regions. Funding will enable individuals with acute mental illness to be diverted from placement in state hospitals and instead be treated in acute private hospitals. The existing funding of approximately \$10.0 million from the general fund contained in the budget is not sufficient to meet the needs through the end of the biennium.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Brink

Item 307 #10h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$0	\$3,959,304	GF
Services	\$0	\$3,959,304	NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,041,756,121".

Page 280, after line 14, insert:

"JJJJ. Out of this appropriation, \$3,959,304 from the general fund and \$3,959,304 from nongeneral funds the second year shall be used to increase reimbursement rates for private duty nursing services provided through Medicaid home- and community-based waiver programs by 20 percent. The department shall have the authority to implement this reimbursement change effective July 1, 2013, and prior to the completion of any regulatory process undertaken in order to effect such change."

Explanation:

(This amendment provides an additional \$4.0 million from the general fund and \$4.0 million in matching federal Medicaid funds in the second year to increase Medicaid reimbursement for private duty nursing services by home care providers by 20 percent. With this additional funding the statewide rate paid for private duty nursing under the Medicaid community-based waiver programs would increase from \$31.50 to \$37.80 per hour for Registered Nurses (RNs) and from \$27.30 to \$32.76 per hour for Licensed Practical Nurses (LPNs) in Northern Virginia. For the rest of the state, rates for RNs would increase from \$25.94 to \$31.12 per hour and rates for LPNs would increase from \$22.52 to \$27.02 per hour).

Request to Amend House Bill 1500, as Introduced

Chief Patron: Brink

Item 307 #11h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$0	\$10,000,000	GF
Services	\$0	\$10,000,000	NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,053,837,513".

Page 280, after line 14, insert:

"JJJJ. The Department of Medical Assistance Services shall increase reimbursements for consumer directed personal care by ten percent for services provided through Medicaid home- and community-based waivers. The department shall have the authority to implement this reimbursement change effective July 1, 2013, and prior to the completion of any regulatory process undertaken in order to effect such change."

Explanation:

(This amendment provides \$10.0 million from the general fund and \$10.0 million from matching federal Medicaid funds in the second year for a ten percent increase in the payment rates for consumer directed personal care provided through Medicaid home- and community-based waiver services. Currently, providers earn \$11.47 per hour in Northern Virginia and \$8.86 per hour in the rest of the state.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Brink

Item 307 #12h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$0	\$2,000,000	GF
Services	\$0	\$2,000,000	NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,037,837,513".

Page 276, strike lines 45 through 51.

Page 277, strike lines 1 through 8.

Explanation:

(This amendment restores \$2.0 million from the general fund and \$2.0 million in federal Medicaid matching funds in the second year and eliminates language in the budget which would have reduced the eligibility limit for Medicaid long-term care services in fiscal year 2014. Currently, elderly or disabled individuals with incomes up to 300 percent of the federal Supplemental Security Income (SSI) payment level (\$2,094 per month) may be eligible for Medicaid long-term care services. Chapter 3, 2012 Special Session I Virginia Acts of Assembly reduces this eligibility limit to 267 percent of the SSI payment level effective January 1, 2014, resulting in fewer individuals qualifying for Medicaid funded nursing home care or long-term care waiver services.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Brink

Item 315 #5h

Health And Human Resources	FY 12-13	FY 13-14	
Grants To Localities	\$0	\$100,000	GF

Language:

Page 285, line 35, strike "\$325,471,560" and insert "\$325,571,560".

Page 286, line 47, after "J." insert "1."

Page 286, after line 53, insert:

"2. Out of this appropriation, \$100,000 the second year from the general fund shall be used for the specialized geriatric mental health services programs located in Health Planning Region II (Regional Older Adult Facilities Mental Health Support Team) to serve additional elderly individuals with mental illness who are transitioning from state mental health geriatric units to the community or who are at risk of admission to state mental health geriatric units."

Explanation:

(This amendment provides \$100,000 from the general fund the second year to expand services to elderly individuals with severe mental illness who require assisted living services to discharge or divert individuals from placement in state psychiatric hospitals.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Brink

Item 315 #13h

Health And Human Resources	FY 12-13	FY 13-14	
Grants To Localities	\$0	\$7,678,918	GF

Language:

Page 285, line 35, strike "\$325,471,560" and insert "\$333,150,478".

Explanation:

(This amendment provides \$7.7 million from the general fund the second year for start-up costs associated with the community transition of persons at state training centers in Health Planning Region II. It is estimated that there will be a need for an additional 34 community homes or facilities for community transitions including: 14 6-bed intermediate care facilities for 84 individuals with intellectual disabilities, and 20 4-bed Medicaid waiver homes to serve 80 individuals. Start-up expenses will include the cost of making homes accessible, providing furniture, and providing pre-service staff training.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Brink

Item 319 #1h

Health And Human Resources	FY 12-13	FY 13-14	
Mental Health Treatment Centers	\$0	\$700,000	GF

Language:

Page 290, line 5, strike "\$189,062,510" and insert "\$189,762,510".

Page 290, line 15, strike "700,000" and insert "1,400,000".

Page 290, line 19, strike "13" and insert "19".

Explanation:

(This amendment adds \$700,000 from the general fund the second year to increase funding for inpatient bed capacity at Northern Virginia Mental Health Institute (NVMHI) from 13 to 19 beds. Funding for inpatient bed capacity at NVMHI was reduced through budget reductions in 2010. Chapter 3, 2012 Special Session I, Virginia Acts of Assembly provides \$600,000 from the general fund to support 13 beds in the first year only.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Brink

Item 330.05 #3h

Health And Human Resources	FY 12-13	FY 13-14	
Department For Aging And Rehabilitative Services	\$425,000	\$400,000	GF

Language:

Page 296, line 31, strike "\$0" and insert "\$425,000".

Page 296, line 31, strike "\$31,898,716" and insert "\$32,298,716".

Explanation:

(This amendment provides \$425,000 from the general fund the first year and \$400,000 from the general fund the second year to increase funding provided to area agencies on aging. Additional funding will be used for community-based services for the elderly including guardianship, family caregiver and support, and elder abuse/exploitation awareness training.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Brink

Item 330.05 #4h

Health And Human Resources	FY 12-13	FY 13-14	
Department For Aging And Rehabilitative Services	\$0	\$543,791	GF

Language:

Page 296, line 31, strike "\$31,898,716" and insert "\$32,442,507".

Page 296, line 40, strike "456,209" and insert "1,000,000".

Explanation:

(This amendment provides \$543,791 from the general fund the second year to increase funding for the Virginia Respite Care Initiative bringing the total funding in fiscal year 2014 to \$1.0 million from the general fund. This is a recommendation of the Joint Commission on Health.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Brink

Item 341 #1h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Social Services	\$0	\$171,314	GF

Language:

Page 306, line 31, strike "\$175,237,067" and insert "\$175,408,381".

Explanation:

(This amendment adds \$171,314 from the general fund the second year to restore independent living services for individuals who previously indicated they wanted to terminate services, if the individual submits the request within 180 days of the decision to terminate services. Independent living services may be provided by local departments of social services and child placing agencies to any person between the age of 18 and 21 who is in the process of transitioning from foster care to self-sufficiency. Under current law, such individuals may choose to discontinue receiving independent living services any time before their 21st birthday. Funding is contingent upon final passage of House Bill 1742.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Brink

Item 341 #2h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Social Services	\$0	\$60,463	GF

Language:

Page 306, line 31, strike "\$175,237,067" and insert "\$175,297,530".

Explanation:

(This amendment adds \$60,463 from the general fund the second year to provide independent living services to individuals between the age of 18 and 21 who were in the custody of the Department of Social Services prior to a commitment to the Department of Juvenile Justice, are in the process of transitioning from a commitment, and have requested independent living services. Funding is contingent upon final passage of House Bill 1743.)

Chief Patron: Bulova

Item 314 #1h

Co-Patron(s): Comstock, Filler-Corn, Greason, Hugo,
LeMunyon, Plum

Health And Human Resources

Department Of Behavioral Health
And Developmental Services

Language

Language:

Page 285, after line 18, insert:

"M.1. No later than 90 days after enactment of this Act, the Commissioner of the Department of Behavioral Health and Developmental Services (DBHDS) shall engage an independent professional survey organization to conduct a survey of the authorized representatives of the Commonwealth's Training Center residents to determine if they would prefer for the resident they represent to stay in their existing training center or move into a community placement.

2. If 50 or more of the authorized representatives of any training center elect for their residents to remain in the training center, then the DBHDS (i) may not close the center but (ii) must keep the center open and come up with a plan to lower the costs of the center. Such plan may include, but is not limited to, joint uses of the facilities or land and selling or leasing unused portions to benefit people with intellectual disabilities.

3. If fewer than 50 authorized representatives at a training center elect for the residents they represent to remain at the training center, the DBHDS shall engage an independent professional survey organization to conduct a second survey to determine whether the authorized representatives prefer a local community placement or a placement in another Training Center that will remain open. The DBHDS shall transition those who wish to move into the community into a local placement. For those who wish to move to another training center, the DBHDS shall, to the extent feasible, provide a placement at the training center the authorized representative selects.

4. Where fewer than 50 authorized representatives chose to remain in the training center, the center shall not be closed until such time as the Commonwealth has met all the conditions in sections 5 and 6.

5. On a regional basis, the community services boards serving the residents who wish to move into the community shall certify that:

(i) There is sufficient private vendor capacity in the region to provide the intensive services needed to serve those residents;

(ii) There is in place adequate Medicaid reimbursement for day support, residential

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services, and other individually required services to cover the cost of services so as to assure adequate provider long-term economic viability; and

(iii) Vendor staff have sufficient specializations, training, skill, and on-site presence to provide appropriate medical, behavioral, and therapeutic care for the residents leaving the Training Centers.

6. On an individual basis, the community services boards serving the residents shall certify that all residents have successfully transitioned to the community. For purposes of this section, a successful transition means:

(i) All supports called for in the transition plan, including those required by training center health professionals, are in place, and the community residence is staffed with fully trained and licensed personnel;

(ii) The placement provides services and treatment equal to or better than those the resident was receiving in the training center, consistent with that person's needs, as determined by the person's health professionals in consultation with the person's authorized representative;

(iii) Sufficient funding is available to sustain those supports for the foreseeable future, including both transitional funding and long-term supports; and

(iv) These supports are provided within the region of family and friends, if the resident has local contacts to sustain."

Explanation:

(This language amendment requires the Commissioner of the the Department of Behavioral Health and Developmental Services to conduct surveys at the Commonwealth's five training centers to determine how many people wish to remain where they are. If at least 50 wish to remain, the Center would not be closed and the Department must develop a plan to lower the costs of the center. If fewer than 50 elect to remain, a follow-up survey must be conducted to determine whether the authorized representatives prefer a local community placement or a placement in another training center. The Department shall transition those who wish to move into the community into a local placement and those who wish to move to another training center provide a placement at the training center to the extent feasible. Where fewer than 50 authorized representatives choose to remain in the training center, the center shall not be closed until the community services boards determine that (i) there is sufficient private vendor capacity each region to provide the intensive services needed to serve those residents, (ii) there are adequate, long-term Medicaid reimbursements for day support, residential services, and other individually-required services, (iii) providers have sufficient capacity to provide timely and appropriate medical, behavioral, and therapeutic care. Further, budget language requires that community services boards certify that all residents have successfully transitioned to the community meaning that (i) all supports in the transition plan are in place and the

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community residence is staffed with fully trained and licensed personnel, (ii) the placement provides services and treatment equal to or better than those the resident was receiving in the training center, consistent with that person's needs, as determined by the person's health professionals in consultation with the person's authorized representative, (iii) sufficient funding is available to sustain those supports for the foreseeable future, including both transitional funding and long-term supports, and (iv) these supports are provided within the region of family and friends, if the resident has local contacts to sustain.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Byron

Item 215 #1h

Co-Patron(s): Garrett, Kilgore

Education: Higher Education	FY 12-13	FY 13-14	
Virginia Community College System	\$0	\$150,000	NGF

Language:

Page 192, line 11, strike "\$78,382,316" and insert "\$78,532,316".

Page 192, after line 38, insert:

"F. Out of this appropriation, \$150,000 the second year from the Workforce Investment Act shall be provided to the Centers for Employment and Training to provide employment and training programs for economically disadvantaged persons."

Explanation:

(This amendment provides \$150,000 in fiscal year 2014 from the Workforce Investment Act to the Centers for Employment and Training (CET) to provide employment and training programs for economically disadvantaged persons. The CET programs serve low-income individuals with incomes up to 200 percent of the federal poverty level, including individuals who qualify for the TANF and Supplemental Nutrition Assistance Program (SNAP, formerly Food Stamp), dislocated workers, unemployed or underemployed individuals and individuals that do not have the skills to achieve self-sufficiency. Services include job readiness training, job skills training, Certified Nurse Assistant training, computer skills training, job development, and job placement. A companion amendment in item 343 provides an additional amount of \$637,500 the second year from the federal Temporary Assistance to Needy Families block grant to provide employment and training services for those individuals who are eligible or at-risk of being eligible for the TANF program or the Virginia Initiative for Employment not Welfare program.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Byron

Item 343 #6h

Co-Patron(s): Garrett, Kilgore

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Social Services	\$0	\$637,500	NGF

Language:

Page 307, line 42, strike "\$24,150,789" and insert "\$24,788,289".

Page 309, after line 36, insert:

"K. Out of this appropriation, \$637,000 the second year from the Temporary Assistance to Needy Families (TANF) block grant shall be provided to the Centers for Employment and Training to support employment programs for economically disadvantaged persons and to promote self-sufficiency."

Explanation:

(This amendment provides \$637,500 in fiscal year 2014 from the Temporary Assistance to Needy Families (TANF) block grant to the Centers for Employment and Training (CET) to provide employment and training programs for economically disadvantaged persons. The CET programs serve low-income individuals with incomes up to 200 percent of the federal poverty level, including individuals who qualify for the TANF and Supplemental Nutrition Assistance Program (SNAP, formerly Food Stamp), dislocated workers, unemployed or underemployed individuals and individuals that do not have the skills to achieve self-sufficiency. Services include job readiness training, job skills training, Certified Nurse Assistant training, computer skills training, job development, and job placement. A companion amendment in item 215 provides an additional amount of \$150,000 the second year from the federal Workforce Investment Act funds to provide employment and training services for those individuals who are not eligible or at-risk of being eligible for the TANF program or the Virginia Initiative for Employment not Welfare. TANF Funding for CET was eliminated during the recession when TANF caseloads increased dramatically.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Carr

Item 303 #1h

Health And Human Resources

Department Of Health Professions

Language

Language:

Page 261, after line 11, insert:

"The Director of the Department of Health Professions shall submit a report to the General Assembly outlining the basis for the current composition of the Board of Counseling and provide recommendations to ensure the composition is based on an objective analysis to improve the operations of the Board. The report shall be provided to the General Assembly by July 30, 2013."

Explanation:

(This amendment is self-explanatory.)

Chief Patron: Carr

Item 303 #2h

Health And Human Resources

Department Of Health Professions

Language

Language:

Page 261, after line 11, insert:

"Notwithstanding any other provision of law or regulation, no funds appropriated in this item may be expended beginning July 1, 2013 to support the Board of Counseling until the Board of Counseling has adopted regulatory changes to allow for licensure as a marriage and family therapist any individual who, prior to July 1, 2013 (i) has completed undergraduate or graduate coursework in the social sciences; (ii) received a bachelor's degree from the University of Chicago in 1994; (iii) was enrolled in a graduate program in sociology, any of the social sciences, family systems theory, marriage and family therapy, conflict transformation, trauma healing and peace-building or reconciliation, conflict analysis, conflict resolution, or any related field for the purpose of pursuing licensure as a marriage and family therapist upon completion of such graduate program; (iv) has become a member of the American Association of Marriage and Family therapy upon completion of the graduate program or been recognized by the American Association of Marriage and Family therapy, the Journal for Marriage and Family Therapy, Family Therapy Resources, or any other direct affiliate of the American Association of Marriage and Family Therapy as evidenced by the inclusion of a graduate thesis or dissertation of which he is the authority, any paper of which he is a co-author, or any other graduate research of any type of which he is an author in any electronic or written materials distributed to marriage and family therapists; (v) has registered a residency in marriage and family therapy with direct supervision by at least two clinical supervisors with the Board; (vi) has completed the 4,000 hours of supervised experience for a residency in marriage and family therapy, and (vii) can provide documentation (a) that he has discussed structural and strategic family systems theory with at least one supervisor, (b) of work experience as a treatment provider providing services for children or adolescents, including intensive in-home services, in an office setting, school, residential treatment facility, hospital, the child or adolescent's home, or other community-based setting during the course of employment with a provider requiring at least one criminal history background check, (c) or work experience as a clinician communicating on a regular basis with licensed treatment providers and psychiatrists about symptoms, diagnoses, symptom changes, and medical interventions, (d) of additional continuing education and training obtained during the course of his work experience as a treatment provider for the purpose of providing or

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improving treatment; and (e) indicating at least 1,200 hours of direct treatment exclusive of hours included in the total number of supervised hours required for satisfaction of the residency requirement provided during the course of at least 10,000 hours of employment with an agency or agencies during such time as the individual was enrolled in a graduate program described in clause (ii)."

Explanation:

(This amendment is self-explanatory.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Comstock

Item 343 #9h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Social Services	\$0	\$354,000	GF

Language:

Page 307, line 42, strike "\$24,150,789" and insert "\$24,504,789".

Page 308, after line 56, insert:

"E. Out of this appropriation, a total of \$354,000 the second year from the general fund is provided for the Smart Beginnings program serving the Hopewell/Petersburg area, the Accomack County Department of Social Services, and the Fairfax and Loudoun County school divisions to support the development of a STEM model program for Pre-K and kindergarten aged children. Each developed model will focus on enhancing the children's learning experiences through the arts."

Page 309, line 1, strike "E." and insert "F."

Page 309, line 5, strike "F." and insert "G."

Page 309, line 8, strike "G." and insert "H."

Page 309, line 12, strike "H." and insert "I."

Page 309, line 15, strike "I." and insert "J."

Page 309, line 27, strike "J." and insert "K."

Explanation:

(This amendment provides \$354,000 the second year from the general fund to support for the Smart Beginnings locations in Hopewell/Petersburg area, the Accomack County Department of Social Services (DSS), and the Fairfax and Loudoun County School Divisions to support the development of a STEM model program for Pre-K and kindergarten aged children. The proposed funding would be allocated as follows: 1) \$51,000 to the Smart Beginnings program serving the Hopewell/Petersburg area; 2) \$51,000 to the Accomack County DSS; 3) \$157,000 to Fairfax County school division; and 4) \$95,000 to Loudoun County school division. These funds are intended to be used to offset related costs for developing STEM model programs for these 3-5 year-old children.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Cox, Kirk

Item 307 #3h

Co-Patron(s): Cox, John, Landes

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$0	\$13,693,400	GF
Services	\$0	\$13,693,400	NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,061,224,313".

Page 277, line 44, strike "150" and insert "550".

Explanation:

(This amendment provides funding to add 400 Medicaid home- and community-based waiver slots in the second year for individuals with intellectual disabilities. This funding supports an addition to the 535 new slots that are expected to be added in fiscal year 2014 based on actions contained in Chapter 3, 2012 Special Session I Virginia Acts of Assembly.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Crockett-Stark

Item 330.05 #5h

Health And Human Resources	FY 12-13	FY 13-14	
Department For Aging And Rehabilitative Services	\$23,000	\$23,000	GF

Language:

Page 296, line 31, strike "\$0" and insert "\$23,000".

Page 296, line 31, strike "\$31,898,716" and insert "\$31,921,716".

Explanation:

(This amendment provides \$23,000 each year from the general fund to provide funding to the District Three Governmental Cooperative to continue the elderly Case Management program which is being defunded by the Department of Medical Assistance Services. This funding will permit the agency to continue providing services to individuals who otherwise qualify for nursing home care but can be maintained in their home environment with these services.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Dance

Item 297 #4h

Health And Human Resources	FY 12-13	FY 13-14
Department Of Health	\$0	\$757,946 GF

Language:

Page 256, line 42, strike "\$12,497,162" and insert "\$13,255,108".

Page 256, line 46, strike "\$1,182,946" and insert "1,940,892".

Explanation:

(This amendment restores \$757,9460 from the general fund the second year year to the Comprehensive Health Improvement Program (CHIP) of Virginia. Last year, the budget for CHIP of Virginia was reduced by \$105,318 the first year and \$832,956 second year. Restoration of funding will allow CHIP to continue providing services to low-income, pregnant women, and young children in 27 localities. The program has demonstrated improved birth outcomes, child health, school readiness, and parental work capacity. CHIP of Virginia is a statewide network of local public/private partnerships.)

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Chief Patron: Dance

Item 307 #7h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$0	\$26,564,636	GF
Services	\$0	\$26,564,636	NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,086,966,785".

Page 280, after line 14, insert:

"JJJJ. The Department of Medical Assistance Services shall increase the reimbursement rate for (i) in-home residential services and (ii) congregate residential services provided in homes serving four persons provided through Medicaid home- and community-based waivers by not-for-profit providers by 25 percent above the rate in effect on January 1, 2013. The department shall also increase the reimbursement rate for (i) in-home residential services provided in homes serving two persons by 15 percent and (ii) in-home residential services provided in homes serving three persons by 5 percent provided through Medicaid home- and community-based waivers by not-for-profit providers. The department shall have the authority to implement this reimbursement change effective July 1, 2013, and prior to the completion of any regulatory process undertaken in order to effect such change. The department shall also have the authority to promulgate emergency regulations to allow providers of in-home support services to serve up to two people per home and to allow not-for-profit providers to obtain reimbursement for general support under either the in-home residential or congregate residential rate."

Explanation:

(This amendment provides \$26.6 million from the general fund and a like amount of federal Medicaid matching funds in the second year for increases in the payment rates for not-for-profit providers of in-home residential services and congregate residential services provided through Medicaid home- and community-based waiver services. Language provides authority to implement the changes through emergency regulations and allow for reimbursement for homes serving less than four individuals and provide greater flexibility in the rates to ensure that individuals are served in the most integrated settings appropriate to the needs of the individual.)

Chief Patron: Dance

Item 315 #11h

Health And Human Resources

Grants To Localities

Language

Language:

Page 288, after line 49, insert:

"5. Out of amounts unspent in V.1. of this item in fiscal year 2013, up to \$715,000 from the general fund shall be provided as start-up funding for individuals being discharged from state training centers for the costs of retrofitting homes and facilities to make them accessible and staff, the purchase of wheelchair accessible vehicles, staff recruitment and training, added staffing costs associated with helping the individual transition from state training centers to the community such as facility visits, training by facility staff, team meetings, and other purchases not covered by Medicaid."

Explanation:

(This amendment provides up to \$715,000 the second year from any unspent general fund amounts in fiscal year 2013 that are provided to implement the U.S. Department of Justice Settlement Agreement to transition individuals from state training centers for start-up costs associated with getting the community placement ready for the discharged individual.)

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Chief Patron: Dance

Item 330.05 #2h

Health And Human Resources

FY 12-13

FY 13-14

Department For Aging And
Rehabilitative Services

\$425,000

\$400,000 GF

Language:

Page 296, line 31, strike "\$0" and insert "\$425,000".

Page 296, line 31, strike "\$31,898,716" and insert "\$32,298,716".

Explanation:

(This amendment provides \$425,000 from the general fund the first year and \$400,000 from the general fund the second year to increase funding provided to area agencies on aging. Additional funding will be used for community-based services for the elderly including guardianship, family caregiver and support, and elder abuse/exploitation awareness training.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Dance

Item 338 #1h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Social Services	\$0	\$2,174,763	GF
	\$0	\$3,106,804	NGF

Language:

Page 304, line 6, strike "\$377,659,072" and insert "\$382,940,639".

Explanation:

(This amendment provides \$2.2 million from the general fund and \$3.1 million from nongeneral funds the second year to restore funding for operations at local departments of social services (DSS) that was reduced during the recession. Local DSS offices have handled significant increases in demand for food stamps, health care and social services since 2008.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Governor McDonnell

Item 296 #1g

Health And Human Resources

Department Of Health

Language

Language:

Page 256, line 36, after "cost", insert:
"of the state and local share".

Page 256, line 37, after "employees", insert:
"in the local health departments".

Explanation:

(This amendment revises the language included in the introduced bill requiring the agency to pay the local share of the one-time bonus for state employees. The amended language clarifies that the department is required to pay only the local and state share of the bonus for health department employees only.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Governor McDonnell

Item 307 #31g

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$0	\$3,682,880	GF
Services	\$0	\$3,682,880	NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,041,203,273".

Explanation:

(This amendment provides the appropriation for a congregate care rate increase for individuals with exceptional needs and in danger of institutionalization. The introduced budget authorized the rate increase for fiscal year 2014 only, but did not provide any appropriation because funding from other parts of the budget were considered as possible sources. This amendment ensures that sufficient funding is available for this rate increase in case other sources are not available or inadequate.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Governor McDonnell

Item 307 #32g

Health And Human Resources	FY 12-13	FY 13-14
Department Of Medical Assistance	(\$21,680,000)	\$0 GF
Services	\$21,680,000	\$0 NGF

Language:

Page 264, line 16, strike "\$423,940,204" and insert "\$445,620,204".

Page 280, after line 14, insert:

"JJJJ. Contingent upon the Commonwealth not receiving the expected revenue in fiscal year 2013 from the arbitration settlement with tobacco companies as part of the Master Settlement Agreement, the Director, Department of Planning and Budget, is authorized to appropriate from the unappropriated general fund balance in this act, and, if necessary, transfer general fund appropriation from the second year to the first year to backfill the shortage of up to \$21,680,000 in general fund for the Medicaid program."

Explanation:

(This amendment reflects the increased revenue in fiscal year 2013 from the Master Settlement Agreement (MSA) with tobacco manufacturers as a result of a recent tentative agreement. Many states have been involved in arbitration for some time over a dispute with tobacco companies regarding non-participating manufacturer adjustments. In December 2012, 17 states entered into a preliminary settlement with tobacco companies. If approved by the arbitration panel in late January 2013, Virginia will receive a one-time increase in revenue as a result of previously withheld payments being released from escrow. The Office of the Attorney General projects Virginia's MSA payment will be \$172 million for fiscal year 2013, which is \$52.2 million higher than currently projected. Of this amount 41.5 percent will be deposited to the Health Care Fund, which is used as state match for Medicaid. Therefore, \$21.7 million of general fund will be offset in fiscal year 2013 with Health Care Fund revenue.)

Chief Patron: Governor McDonnell

Item 307 #33g

Health And Human Resources

Department Of Medical Assistance
Services

Language

Language:

Page 280, after line 14, insert:

"JJJJ. The Department of Medical Assistance Services shall seek federal authority through any necessary waiver(s) and/or State Plan authorization under Titles XIX and XXI of the Social Security Act to reform the Virginia Medicaid/FAMIS service delivery model for all recipients subject to a Modified Adjusted Gross Income (MAGI) methodology for program eligibility and any other recipient categories not excluded from the Medallion II managed care program. The reformed service delivery model shall be predicated upon principles of commercial health insurance, including but not limited to benefit design and participant cost-sharing, and shall encourage the development and implementation of value-based, coordinated purchasing. To administer this reformed delivery model, the department shall contract with qualified health plans to offer recipients a Medicaid benefit package adhering to these principles. This reformed service delivery model shall be mandatory, to the extent allowed under the relevant authority granted by the federal government, for all relevant recipients in the Medicaid/FAMIS programs. Additional services offered to relevant recipients outside of the reformed delivery model shall be at the discretion of the department, with federal approval, when deemed by the department to be cost-effective for the Commonwealth. The department shall have authority to implement necessary changes when feasible after federal approval and prior to the completion of any regulatory process undertaken in order to effect such change."

Explanation:

(This amendment provides authority for the Department of Medical Assistance Services to seek waivers or state plan amendments in order to implement reforms in the Medicaid and FAMIS programs. These reforms are intended to improve Medicaid and FAMIS based on successful principles used in commercial health insurance.)

Chief Patron: Governor McDonnell

Item 307 #34g

Health And Human Resources

Department Of Medical Assistance
Services

Language

Language:

Page 282, after line 16, insert:

"J. The Department of Medical Assistance Services in cooperation with the Department of Social Services (DSS) shall study the impact of centralizing Medicaid eligibility with a single vendor. The study shall evaluate the cost-effectiveness of centralization and also the operational impact this change would have on the current state/local eligibility system. This study shall include, but is not limited to, the costs of a single vendor, transition costs, and the financial and operational impact on the DSS central office and local departments of social services. The Department of Planning and Budget and a representative (selected by DSS) of the local departments of social services shall be included on the study team. The results of the study shall be submitted to the Governor and the Chairmen of the House Appropriations and Senate Finance Committees by September 15, 2013."

Explanation:

(This amendment directs the Department of Medical Assistance Services along with the Department of Social Services to study the centralization of Medicaid eligibility.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Governor McDonnell

Item 310 #1g

Health And Human Resources

Department Of Medical Assistance
Services

Language

Language:

Page 280, line 47, strike "\$119,741,276" and insert "\$120,741,276".

Explanation:

(This amendment provides funding for activities that promote health innovation. The Department of Medical Assistance Services would contract with an entity to issue grants to conduct research and explore innovative methods of providing and delivering health care.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Governor McDonnell

Item 343 #10g

Health And Human Resources

Department Of Social Services

Language

Language:

Page 308, line 47, strike "work with public and private partners to" and insert:

"allocate \$250,000 to Elevate Early Education for the purpose of implementing a pilot program for a kindergarten readiness assessment. Elevate Early Education shall use the state funds in conjunction with any available private matching funds to procure the rights to an assessment instrument for use in the pilot program."

Page 308, strike lines 48 through 51.

Page 308, line 52, strike "matter experts, to develop a pilot design and appropriate metrics."

Explanation:

(This amendment clarifies the intended use of additional funding provided to the Virginia Early Childhood Foundation.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Helsel

Item 338 #2h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Social Services	\$0	\$2,174,763	GF
	\$0	\$3,106,804	NGF

Language:

Page 304, line 6, strike "\$377,659,072" and insert "\$382,940,639".

Explanation:

(This amendment provides \$2.2 million from the general fund and \$3.1 million from nongeneral funds the second year to restore funding for operations at local departments of social services (DSS) that was reduced during the recession. Local DSS offices have handled significant increases in demand for food stamps, health care and social services since 2008.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Herring

Item 294 #3h

Health And Human Resources

FY 12-13

FY 13-14

Department Of Health

\$0

\$25,000 GF

Language:

Page 253, line 15, strike "\$14,125,886" and insert "\$14,150,886".

Page 254, after line 3, insert:

"F. The Department of Health shall convene a task force comprised of representatives from the Department of Emergency Services, Virginia Dominion Power, the Virginia Health Care Association, the Virginia Municipal League, the Virginia Association of Counties, other representatives of the health care industry as appropriate, and other executive branch agencies as needed to examine how best to ensure the health and safety of patients in nursing facilities in the event of power loss due to severe weather events. The department shall develop a plan to address the issue, in consultation with the task force and provide a report on the plan to the General Assembly by October 1, 2013."

Explanation:

(This amendment adds language to require the Department of Health to convene a group to examine solutions to ensuring the health and safety of nursing home patients when facilities lose power in severe weather events. Recent severe weather resulted in extended power loss in nursing homes making it difficult for them to provide the necessary heating and cooling for facility residents. The department is required to develop a plan to address this and provide a report on the plan by October 1, 2013.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Hope

Item 307 #19h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$25,000	\$75,000	GF
Services	\$25,000	\$75,000	NGF

Language:

Page 263, line 15, strike "\$7,609,498,210" and insert "\$7,609,548,210".

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,033,987,513".

Page 280, after line 14, insert:

"JJJJ. The Department of Medical Assistance Services shall realign the billable activities paid for individual supported employment provided under the Medicaid home- and community-based waivers to be consistent with identical activities provided through employment services organizations that are reimbursed by the Department for Aging and Rehabilitative Services. The department shall have the authority to implement this reimbursement change effective July 1, 2013, and prior to the completion of any regulatory process undertaken in order to effect such change."

Explanation:

(This amendment provides funding in the second year and adds language for the agency to ensure that billable activities for individual supported employment through the Medicaid waiver programs are consistent with existing best practice activities for individual supported employment currently established at the Department for Aging and Rehabilitative Services. This change would increase access to individual supported employment for Virginians with disabilities. The fiscal impact is expected to be minimal due to the cost offset of providing more expensive waiver services in lieu of supported employment.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Hope

Item 307 #20h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$0	\$2,000,000	GF
Services	\$0	\$2,000,000	NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,037,837,513".

Page 276, strike lines 45 through 51.

Page 277, strike lines 1 through 8.

Explanation:

(This amendment restores \$2.0 million from the general fund and \$2.0 million in federal Medicaid matching funds in the second year and eliminates language in the budget which would have reduced the eligibility limit for Medicaid long-term care services in fiscal year 2014. Currently, elderly or disabled individuals with incomes up to 300 percent of the federal Supplemental Security Income (SSI) payment level (\$2,094 per month) may be eligible for Medicaid long-term care services. Chapter 3, 2012 Special Session I Virginia Acts of Assembly reduces this eligibility limit to 267 percent of the SSI payment level effective January 1, 2014, resulting in fewer individuals qualifying for Medicaid funded nursing home care or long-term care waiver services.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Hope

Item 307 #23h

Health And Human Resources

Department Of Medical Assistance
Services

Language

Language:

Page 280, after line 14, insert:

"JJJ. Effective July 1, 2013, the Department of Medical Assistance Services shall take the steps necessary to amend Intellectual Disability Waiver and the Individual and Family Developmental Disabilities Support Waiver to change the unit of service for the skilled nursing service from the current one hour to one-quarter of an hour. "

Explanation:

(This amendment adds language requiring the Department of Medical Assistance Services to change the unit of service for the reimbursement of skilled nursing services provided through two Medicaid home- and community-based waiver programs from one hour to one-quarter of an hour to allow for greater flexibility in the use of this service to support individuals with complex medical needs.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Hope

Item 307 #24h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$0	\$2,000,000	GF
Services	\$0	\$2,000,000	NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,037,837,513".

Page 279. strike lines 7 through 13 and insert:.

BBBB.1. Effective July 1, 2013, the Department of Medical Assistance Services shall have the authority, to establish a 25 percent higher reimbursement rate for congregate residential services for individuals with complex medical or behavioral needs living in a group home, supervised apartment, or independently (excluding those in sponsored residential homes) with four licensed beds or fewer. The department shall have authority to promulgate regulations to implement this change within 280 days or less from the enactment of this act."

Explanation:

(This amendment modifies language in the introduced budget that would provide a 25 percent increase in reimbursement for congregate residential services for individuals with complex medical or behavioral needs living in a group home with four licensed beds or fewer and in danger of institutionalization or moving from an institution. This language residential services for individuals with complex needs living in a supervised apartment or independently and eliminates references to those individuals who are in danger of institutionalization or who are moving from an institution to a group home with four or fewer licensed beds. The amendment also removes language which would have made the increase rate effective through July 30, 2014. Without some assurance of a continuing rate, providers would be reluctant to accept the most challenging individuals or to reduce licensed capacity to better serve existing clients.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Hope

Item 307 #37h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$0	\$2,764,300	GF
Services	\$0	\$2,764,300	NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,039,366,113".

Page 280, after line 14 insert:

"JJJJ. The Department of Medical Assistance Services shall establish a fee-for-service rate aligned with the actual cost of delivering person-centered services for individuals with complex medical or behavioral needs, effective July 1, 2013, as a pilot program in Northern Virginia. In establishing the rate, the department shall work with the Department of Behavioral Health and Developmental Services and with an established provider and stakeholder coalition in Northern Virginia to develop the rate methodology. Recommendations from this workgroup shall be used to develop the rate to meet the needs of individuals receiving services through either the Intellectual Disability (ID) Wavier or Individual and Family Developmental Disabilities Support (DD) Waiver who are participating in the pilot program. The Northern Virginia pilot region will include areas served by the Community Services Boards of Arlington, Alexandria, Fairfax-Falls Church, Prince William and Loudoun. The department shall have authority to promulgate regulations to implement this change within 280 days or less from the enactment of this act. Results of the pilot program shall be considered in the submission of the new ID/DD waiver applications to the federal Centers for Medicare and Medicaid."

Explanation:

(This amendment provides \$2.8 million from the general fund and \$2.8 million from federal Medicaid matching funds and language to establish a pilot program in Northern Virginia to provide a reimbursement rate for services needed to ensure the health, safety and welfare of individuals with complex medical or behavioral needs who receive services through either the Intellectual Disability (ID) Wavier or Individual and Family Developmental Disabilities Support (DD) Waiver. The funding will support the pilot project for one year.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Hope

Item 307 #38h

Health And Human Resources

FY 12-13

FY 13-14

Department Of Medical Assistance
Services

\$0 \$1,100,000,000 NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$9,133,837,513".

Page 280. after line 14 insert:.

"JJJJ. The Department of Medical Assistance Services shall implement the coverage described in 42 U.S.C. § 1396a(a)(10)(A)(i)(VIII), effective January 1, 2014, contingent upon the availability of federal financial participation as provided in 42 U.S.C. § 1396d(y)(1)[2010]."

Explanation:

(This amendment adds language to implement the expanded Medicaid coverage as provided in the Patient Protection and Affordable Care Act of 2010 (PPACA), effective January 1, 2014. This raises income eligibility for individuals under age 65 to 133 percent of the federal poverty level. The coverage is contingent on the availability of federal funding provided in the PPACA, which provides 100 percent federal funding in federal fiscal year 2014. The coverage is estimate to reach up to 400,000 low-income, uninsured Virginians. According to several studies, the federal funding will support approximately 30,000 jobs and other economic activities that will generate additional general fund revenue.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Hope

Item 315 #10h

Co-Patron(s): Landes

Health And Human Resources	FY 12-13	FY 13-14	
Grants To Localities	\$0	\$7,000,000	GF

Language:

Page 285, line 35, strike "\$325,471,560" and insert "\$332,471,560".

Page 289, line 21, strike "750,000" and insert "7,750,000".

Explanation:

(This amendment provides an additional \$7.0 million from the general fund the second year for discharge assistance planning (DAP) funding in addition to the \$750,000 general fund the second year included in the introduced budget. Additional funding is requested to address a waiting list of 136 individuals who are residing in state mental health facilities and awaiting discharge into the community. Funds will be used to support community-based housing and recovery-oriented mental health and support services to facility a successful transition into the community.)

Chief Patron: Hope

Item 315 #12h

Health And Human Resources

Grants To Localities

Language

Language:

Page 288, after line 49, insert:

"5. Out of amounts unspent in V.1. of this item in fiscal year 2013, up to \$715,000 from the general fund shall be provided as start-up funding for individuals being discharged from state training centers for the costs of retrofitting homes and facilities to make them accessible and staff, the purchase of wheelchair accessible vehicles, staff recruitment and training, added staffing costs associated with helping the individual transition from state training centers to the community such as facility visits, training by facility staff, team meetings, and other purchases not covered by Medicaid."

Explanation:

(This amendment provides up to \$715,000 the second year from any unspent general fund amounts in fiscal year 2013 that are provided to implement the U.S. Department of Justice Settlement Agreement to transition individuals from state training centers for start-up costs associated with getting the community placement ready for the discharged individual.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Hope

Item 330 #4h

Health And Human Resources	FY 12-13	FY 13-14	
Department For Aging And Rehabilitative Services	\$0	\$1,200,000	GF

Language:

Page 294, line 48, strike "\$97,493,111" and insert "\$98,693,111".

Explanation:

(This amendment restores \$1.2 million the second year from the general fund for Long-term employment support services (LTESS) and extended employment services (EES) that provide access to employment and supports for individuals with disabilities who are served through community-based employment services organizations. Funding for these services has been reduced by 24 percent since 2007.)

Chief Patron: Hope

Item 345 #1h

Health And Human Resources

Department Of Social Services

Language

Language:

Page 311, after line 50, insert:

"H. The Department of Social Services shall convene a task force comprised of representatives from the Department of Emergency Services, the Virginia Health Department, Virginia Dominion Power, the Virginia Assisted Living Association, the Virginia Health Care Association, the Virginia Hospital and Healthcare Association, the Virginia Municipal League, the Virginia Association of Counties, other representatives of the health care industry as appropriate, and other executive branch agencies as needed to examine how best to ensure the health and safety of residents of assisted living facilities in the event of power loss due to severe weather events. The department shall develop a plan to address the issue, in consultation with the task force and provide a report on the plan to the General Assembly by October 1, 2013."

Explanation:

(This amendment adds language to require the Department of Social Services to convene a group to examine solutions to ensuring the health and safety of assisted living facilities residents when facilities lose power in severe weather events. Recent severe weather resulted in extended power loss in nursing homes making it difficult for them to provide the necessary heating and cooling for facility residents. The department is required to develop a plan to address this and provide a report on the plan by October 1, 2013.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Joannou

Item 343 #7h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Social Services	\$0	\$75,000	NGF

Language:

Page 307, line 42, strike "\$24,150,789" and insert "\$24,225,789".

Page 309, after line 36, insert:

"K. Out of this appropriation, \$75,000 the second year from the general fund shall be provided to the Visions of Truth Community Development Corporation to support the Students Taking Responsibility in Valuing Education (STRIVE) program."

Explanation:

(This amendment provides \$75,000 from the general fund the second year for Visions of Truth Community Development Corporation in Portsmouth, Virginia. The funding will support Students Taking Responsibility in Valuing Education (STRIVE). STRIVE is an out-of-school suspension/dropout prevention program for assisting at-risk youth who are placed at a disadvantage due to academic failure, lack of pro-social skills and job readiness training. The program's focus is on educational attainment as a means for assisting youth in achieving and sustaining academic success.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Jones

Item 294 #2h

Health And Human Resources

FY 12-13

FY 13-14

Department Of Health

\$0

\$25,000 GF

Language:

Page 253, line 15, strike "\$14,125,886" and insert "\$14,150,886".

Page 254, after line 3, insert:

"F. The Department of Health is authorized to collect patient origin data on an annual basis from nursing facilities as a component of the annual licensure application filing."

Explanation:

(This amendment is self-explanatory.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Jones

Item 307 #17h

Co-Patron(s): Ingram

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$0	\$2,000,000	GF
Services	\$0	\$2,000,000	NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,037,837,513".

Page 276, strike lines 45 through 51.

Page 277, strike lines 1 through 8.

Explanation:

(This amendment restores \$2.0 million from the general fund and \$2.0 million in federal Medicaid matching funds in the second year and eliminates language in the budget which would have reduced the eligibility limit for Medicaid long-term care services in fiscal year 2014. Currently, elderly or disabled individuals with incomes up to 300 percent of the federal Supplemental Security Income (SSI) payment level (\$2,094 per month) may be eligible for Medicaid long-term care services. Chapter 3, 2012 Special Session I Virginia Acts of Assembly reduces this eligibility limit to 267 percent of the SSI payment level effective January 1, 2014, resulting in fewer individuals qualifying for Medicaid funded nursing home care or long-term care waiver services.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Jones

Item 307 #18h

Co-Patron(s): Ingram, Landes, O'Bannon, Peace, Stolle

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$0	\$430,000	GF
Services	\$0	\$430,000	NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,034,697,513".

Page 280, after line 14, insert:

"JJJJ. The Department of Medical Assistance Services shall amend the State Plan for Medical Assistance Services to eliminate the requirement for pending, reviewing and reducing fees for emergency room claims for 99283 codes. The department shall have the authority to implement this reimbursement change effective July 1, 2013, and prior to the completion of any regulatory process undertaken in order to effect such change."

Explanation:

(This amendment provides funding in the second year and adds language to offset savings assumed in the Department of Medical Assistance Services budget from pending and reducing payment for claims from emergency room physicians who treat Medicaid recipients when a retrospective review determines that the individuals could have received care in an outpatient setting. Emergency room physicians have no choice in treating individuals who present in emergency rooms and must do so as required by federal law. Reduction of payment for certain "non-emergency" Medicaid claims places an unreasonable financial burden on these providers.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Jones

Item 307 #21h

Co-Patron(s): Landes

Health And Human Resources

Department Of Medical Assistance
Services

Language

Language:

Page 280, after line 14, insert:

"JJJJ. The Department of Medicaid Assistance Services shall not reduce the Mental Health Support Services reimbursement rate below \$56.40 (urban) and \$51.44 (rural) per hour and shall not further modify the service as provided on January 1, 2013, until the Commonwealth establishes an operating Behavioral Health Organization."

Explanation:

(This amendment adds language prohibiting the Department of Medical Assistance Services to modify the reimbursement rate for Mental Health Support Services until the agency contracts with a Behavioral Health Organization.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Jones

Item 307 #22h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$0	\$2,900,000	GF
Services	\$0	\$2,900,000	NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,039,637,513".

Page 280, after line 14, insert:

"JJJJ. The Department of Medicaid Assistance Services shall amend the State Plan for Medical Assistance to increase the reimbursement rates in the current nursing facility operating payment system to eliminate the occupancy standard of 90 percent for indirect and plant costs, effective July 1, 2013. The department shall have the authority to implement this reimbursement change effective July 1, 2013, and prior to the completion of any regulatory process undertaken in order to effect such change."

Explanation:

(This amendment adds \$2.9 million from the general fund and \$2.9 million in matching federal Medicaid funds the second year to eliminate the 90 percent occupancy standard used in calculating nursing home reimbursement rates for indirect care and plant costs. This standard was originally used to adjust nursing home payments to ensure that reimbursements rewarded more cost efficient nursing facilities. The Governor's proposed budget reduces the occupancy rate from 90 percent to 88 percent, recognizing the impact that increased home- and community-based services has had on lowering occupancy rates in nursing facilities and the fact that those remaining in nursing homes have higher acuity levels and consequently higher costs. Currently, about 38 percent of nursing facilities have capacities below 90 percent (98 of 258 facilities). This amendment completely eliminates the standard.)

Chief Patron: Jones

Item 307 #28h

Health And Human Resources

Department Of Medical Assistance
Services

Language

Language:

Page 280, after line 14, insert:

"JJJJ. The Department of Medical Assistance Services shall amend the State Plan for Medical Assistance to calculate an indirect medical education (IME) factor for freestanding children's hospitals already eligible for IME in a manner similar to Type One hospitals. Total payments for IME in combination with other payments for freestanding children's hospitals may not exceed the federal uncompensated care cost limit that disproportionate share hospital payments are subject to. The Department shall have the authority to implement these reimbursement changes effective July 1, 2013, and prior to completion of any regulatory process undertaken in order to effect such change."

Explanation:

(This amendment adds language to ensure continuation of Children's Hospital of the King's Daughters' (CHKD) ability to receive Medicaid reimbursement to cover its uncompensated care costs. This amendment protects Virginia's only freestanding children's hospital from cuts to the disproportionate share hospital (DSH) payment program directed through the federal Patient Protection and Affordable Care Act (PPACA). With greater than 50 percent of its inpatient days covered by Medicaid, CHKD's Medicaid utilization is double the next closest provider, resulting in the receipt of more than half of Virginia's DSH funds that are allocated to private hospitals. This amendment would not require additional funding from the state based on current DSH policy. This amendment significantly increases the amount of authorized indirect medical education (IME) funding to substitute for most or all of the DSH funds allocated to CHKD. It also provides that CHKD will continue to be reimbursed up to the federal uncompensated care cost limit.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Jones

Item 307 #29h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$0	\$1,348,636	GF
Services	\$0	\$1,348,636	NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,036,534,785".

Page 280, after line 14, insert:

"JJJJ. The Department of Medical Assistance Services shall amend the State Plan for Medical Assistance to revise the supplemental physician payment for practice plans affiliated with a freestanding children's hospital with greater than 50 percent Medicaid utilization in 2009 based on the difference between the upper payment limit approved by the Centers for Medicare and Medicaid Services and the reimbursement otherwise payable to physicians. The department shall have the authority to implement these reimbursement changes effective July 1, 2013, and prior to completion of any regulatory process undertaken in order to effect such change."

Explanation:

(This amendment adds \$1.3 million from the general fund and \$1.3 million from federal matching funds in the second year and language to raise the cap on physician supplemental payments (PSP) for Children's Hospital of the King's Daughters (CHKD) in a manner consistent with PSP payments for Type One hospitals.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Jones

Item 307 #36h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$0	\$430,000	GF
Services	\$0	\$430,000	NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,034,697,513".

Page 280, after line 14, insert:

"JJJJ. The Department of Medical Assistance Services shall amend the State Plan for Medical Assistance to allow for the implementation and reimbursement of innovative methods and technology used in the diagnostic testing and therapy of Obstructive Sleep Apnea (OSA) to lower costs and improve outcomes in sleep care and associated chronic health conditions for Medicaid recipients. Such methods and technology may include the use of home sleep studies and home testing equipment. The department shall have the authority to implement this change effective July 1, 2013, and prior to the completion of any regulatory process undertaken in order to effect such change."

Explanation:

(This amendment adds language directing the Department of Medical Assistance Services to implement and provide reimbursement for the use of innovative methods and technology in the testing and treatment of Medicaid recipients with Obstructive Sleep Apnea. Obstructive sleep apnea (OSA) occurs when there are repeated episodes of complete or partial blockage of the upper airway during sleep. These episodes can reduce the flow of oxygen to vital organs and cause irregular heart rhythms. Without treatment, the sleep deprivation and lack of oxygen caused by sleep apnea increases health risks such as cardiovascular disease, high blood pressure, stroke, diabetes, clinical depression, weight gain and obesity. The most serious consequence of untreated OSA is to the heart. Sleep apnea sufferers have a 30% higher risk of heart attack or death than those unaffected. Currently, most tests are performed in hospitals or free-standing sleep labs. Advancements in technology and home testing equipment have made home sleep studies a more cost effective and convenient alternative for most patients to test and treat OSA.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Jones

Item 330 #3h

Co-Patron(s): Landes, Peace

Health And Human Resources	FY 12-13	FY 13-14	
Department For Aging And Rehabilitative Services	\$0	\$535,879	GF

Language:

Page 294, line 48, strike "\$97,493,111" and insert "\$98,028,990".

Explanation:

(This amendment adds \$535,879 the second year from the general fund for employment supports and job maintenance program for individuals with disabilities through partnerships with employment service organizations. Funding for these services has been reduced by 26.9 percent since 2008.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Keam

Item 307 #25h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$1,487,766	\$1,487,766	GF
Services	\$1,487,766	\$1,487,766	NGF

Language:

Page 263, line 15, strike "\$7,609,498,210" and insert "\$7,612,473,742".

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,036,813,045".

Explanation:

(This amendment adds \$1.5 million from the general fund and \$1.5 million from federal Medicaid matching funds each year to provide consumer-directed home- and community-based Medicaid waiver providers who work an average of 20 or more hours per week, with five days (35 hours) of paid sick days per year.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Kilgore

Item 297 #8h

Co-Patron(s): O'Quinn

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Health	\$0	\$187,000	GF

Language:

Page 256, line 42, strike "\$12,497,162" and insert "\$12,684,162".

Page 258, line 14, strike "\$107,530" and insert "\$294,530"

Explanation:

(This amendment restores \$187,000 from the general fund in fiscal year 2014 for the Southwest Virginia Graduate Medical Education Consortium (GMEC). The consortium works to recruit, home-grow, and retain medical professionals.).

Request to Amend House Bill 1500, as Introduced

Chief Patron: Kilgore

Item 343 #3h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Social Services	\$0	\$1,000,000	GF

Language:

Page 307, line 42, strike "\$24,150,789" and insert "\$25,150,789".

Page 308, line 21, after "year" insert:

"and \$1,000,000 the second year".

Explanation:

(This amendment provides \$1,000,000 from the general fund the second year for services provided through community action agencies. Thirty-one community action agencies provide services to 226,000 low-income individuals in families and communities across the Commonwealth.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Knight

Item 315 #15h

Health And Human Resources	FY 12-13	FY 13-14	
Grants To Localities	\$0	\$2,000,000	GF

Language:

Page 285, line 35, strike "\$325,471,560" and insert "\$327,471,560".

Page 289, after line 23, insert:

"AA. Out of this appropriation, \$2,000,000 the second year from the general fund to Vanguard Landing, Inc. for capital costs to construct a self-sustaining fully integrated residential community for individuals with mild to moderate intellectual disability in Virginia Beach. Funding shall be used to match local funds."

Explanation:

(This amendment adds \$2.0 million from the general fund the second year to Vanguard Landing, Inc. for the construction of a residential community in Virginia Beach for individuals with mild to moderate intellectual disability. Funding is contingent upon receipt of local matching funds.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Krupicka

Item 307 #30h

Co-Patron(s): Kory

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance Services	\$0	\$12,590	NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,033,850,103".

Page 280, after line 14, insert:

"JJJJ. The Department of Medicaid Assistance Services shall amend the State Plan for Medical Assistance to provide Medicaid coverage for cessation services for tobacco users, including pharmacology, group and individual counseling, and other treatment services included in the most current version of or an official update to the Clinical Health Guideline "Treating Tobacco Use and Dependence" published by the Public Health service of the U.S. Department of Health and Human Services. Such services shall not be subject to copayment requirements for recipients."

Explanation:

(This amendment provides funding in the second year and language to require the Virginia Medicaid program to provide coverage for tobacco cessation services, including pharmacotherapy, group and individual counseling, and other treatment services. Currently, the Virginia Medicaid program covers pharmacotherapy for Medicaid recipients. However, counseling services are limited to pregnant women. The funding shall be provided from the Tobacco Settlement Funds.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Krupicka

Item 315 #3h

Co-Patron(s): Dance, Hope, Kory, Lopez, O'Bannon,
Ward, Watts, Yost

Health And Human Resources	FY 12-13	FY 13-14	
Grants To Localities	\$0	\$2,500,000	GF

Language:

Page 285, line 35, strike "\$325,471,560" and insert "\$327,971,560".

Explanation:

(This amendment provides \$2.5 million from the general fund the second year to the community services boards (CSBs) to dedicate up to four staff in each of the five Health Planning Regions to be trainers in Mental Health First Aid for the community including school employees. Funding will be used to cover the cost of the staff person dedicated to this activity, training and certification, and manuals and certification for all those receiving the training. Mental Health First Aid is a 12-hour interactive course that teaches the risk factors and warning signs and symptoms of depression, anxiety disorders, trauma, psychotic disorders, eating disorders, and substance use disorders. MHFA builds an understanding of how these illnesses affect people, provides an overview of common treatments, and teaches basic skills for providing help to someone who may be experiencing symptoms.)

Chief Patron: Krupicka

Item 315 #4h

Health And Human Resources

Grants To Localities

Language

Language:

Page 289, after line 23, insert:

"AA. The Commissioner of the Department of Behavioral Health and Developmental Services shall amend the eligibility requirements for the Individual and Family Support program to ensure access for any individual with an intellectual disability (ID) or developmental disability (DD) without regard to whether the individual is on a waiting list for community-based ID or DD Medicaid waiver services."

Explanation:

(This amendment requires access to the Individual and Family Support program regardless of whether an individual with an intellectual or developmental disability is on a waiting list for ID or DD waiver services. Current regulation only provides access to the program if you are on a waiting list for the ID or DD waiver. This amendment will provide access to 935 individuals who need community-based services.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Landes

Item 307 #2h

Co-Patron(s): Cox, Kirk, Cox, John

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$0	\$3,479,200	GF
Services	\$0	\$3,479,200	NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,040,795,913".

Page 277, line 47, strike "55" and insert "255".

Explanation:

(This amendment provides funding to add 200 Medicaid home and community-based waiver slots in the second year for individuals with developmental disabilities to reduce the current waiting list individuals. This funding supports an addition to the 80 new slots that are expected to be added in fiscal year 2014 based on actions contained in Chapter 3, 2012 Special Session I Virginia Acts of Assembly.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Landes

Item 307 #14h

Health And Human Resources

Department Of Medical Assistance
Services

Language

Language:

Page 280, after line 14, insert:

"JJJJ. The Department of Medical Assistance Services shall establish a work group of representatives of providers of home- and community-based care services to continue improvements in the audit process and procedures for home- and community-based utilization and review audits. The Department of Medical Assistance Services shall report on any revisions to the methodology for home- and community-based utilization and review audits, including progress made in addressing provider concerns and solutions to improve the process for providers while ensuring program integrity. In addition, the report shall include documentation of the past year's audits, a summary of the number of audits to which retractions were assessed and the total amount, the number of appeals received and the results of appeals. The report shall be provided to the Chairmen of the House Appropriations and Senate Finance Committees by December 1 of each year."

Explanation:

(This amendment adds language directing the agency to establish an ongoing work group to continue improving the home- and community-based utilization and review audit process in order to reduce the number of retractions that are subsequently overturned on appeal.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Landes

Item 307 #15h

Health And Human Resources

Department Of Medical Assistance
Services

Language

Language:

Page 271, line 27, after "expenditures." insert:

"Any compensation for performance afforded in the expansion of care coordination cannot be based on the percentage of cost savings generated by reductions in provider rates or under the benefit management of services."

Page 271, line 31, after "outcomes," insert:

"provider availability by service and geographic areas,".

Page 271, line 31, after "costs," insert:

"payment rates to providers,".

Explanation:

(This amendment adds language related to the principles guiding the expanded use of care coordination by the Department of Medical Assistance Services for the Medicaid program, to ensure that performance contracts with managed care organizations do not provide financial incentives to penalize providers or reduce benefits to Medicaid recipients.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Landes

Item 307 #16h

Co-Patron(s): Jones

Health And Human Resources

Department Of Medical Assistance
Services

Language

Language:

Page 280, after line 14, insert:

"JJJJ. Effective July 1, 2013, the Department of Medical Assistance Services shall take the steps necessary to amend Intellectual Disability Waiver and the Individual and Family Developmental Disabilities Support Waiver to change the unit of service for the skilled nursing service from the current one hour to one-quarter of an hour. The department shall implement this change using a methodology that is budget neutral. "

Explanation:

(This amendment adds language requiring the Department of Medical Assistance Services to change the unit of service for the reimbursement of skilled nursing services provided through two Medicaid home- and community-based waiver programs from one hour to one-quarter of an hour to allow for greater flexibility in the use of this service to support individuals with complex medical needs.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Landes

Item 332 #1h

Health And Human Resources	FY 12-13	FY 13-14	
Department For Aging And Rehabilitative Services	\$0	\$100,000	GF

Language:

Page 298, line 42, strike "\$18,332,476" and insert "\$18,432,476".

Explanation:

(This amendment provides \$100,000 the second year from the general fund for a Dementia Services Coordinator in the Department for Aging and Rehabilitative Services. The position would review existing program and work with agencies to create a more effective service delivery system, identify service gaps, and reduce duplication and overlap. In addition, the positions will provide coordination and support for the Alzheimer's and Related Disorder Commission activities, support the Aging and Disability Resource Centers, and coordinate with brain injury programs.)

Chief Patron: Lingamfelter

Item 283 #2h

Health And Human Resources

Comprehensive Services For
At-Risk Youth And Families

Language

Language:

Page 246, after line 36, insert:

"N. Pursuant to § 2.2-5211.1 of the Code of Virginia, the State Executive Council shall evaluate the results of the annual survey performed by the Office of Comprehensive Services to measure gaps in the services needed to keep children in the local community and any barriers to the development of those services. Based on this survey and on input received from public and private stakeholders in the provision of children's services, the Council shall develop recommended priorities to address these gaps in services, to be funded by any unappropriated balances existing in the agency's budget at the end of each fiscal year. These recommendations shall be communicated to the chairmen of the Senate Finance and House Appropriations Committees no later than June 30 of each year."

Explanation:

(This language amendment requires the Office of Comprehensive Services to reinvest unappropriated balances at the end of each fiscal year to address service gaps in the CSA program based on recommendations from the State Executive Council.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Lingamfelter

Item 283 #3h

Health And Human Resources	FY 12-13	FY 13-14	
Comprehensive Services For At-Risk Youth And Families	\$0	\$4,214,486	GF

Language:

Page 242, line 11, strike "\$269,707,868" and insert "\$273,922,354".

Page 244, line 34, strike "2009" and insert "2013".

Page 244, line 34, strike "non-Medicaid residential services for each".

Page 244, line 35, strike "locality shall be 25 percent above the fiscal year 2007 base. Beginning July 1, 2011, the local."

Page 244, line 36, strike "match rate for Medicaid".

Page 244, line 36, strike "25 percent above" and insert "at".

Page 244, line 37, strike "The Director of the Office of Comprehensive Services shall evaluate the."

Page 244, strike lines 38 through 40.

Explanation:

(This amendment provides \$4.2 million from the general fund the second year to suspend the increased local match rate on July 1, 2013 for residential placements in the Comprehensive Services Act program that was enacted in fiscal year 2010. Obsolete budget language requiring a report on the impact of this match rate change due on October 1, 2012 is repealed.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Lingamfelter

Item 283 #4h

Health And Human Resources	FY 12-13	FY 13-14	
Comprehensive Services For At-Risk Youth And Families	\$0	\$2,107,243	GF

Language:

Page 242, line 11, strike "\$269,707,868" and insert "\$271,815,111".

Page 244, line 34, strike "July 1, 2009" and insert "January 1, 2014".

Page 244, line 34, strike "non-Medicaid residential services for each".

Page 244, line 35, strike "locality shall be 25 percent above the fiscal year 2007 base. Beginning July 1, 2011, the local."

Page 244, line 36, strike "match rate for Medicaid".

Page 244, line 36, strike "25 percent above" and insert "at".

Page 244, line 37, strike "The Director of the Office of Comprehensive Services shall evaluate the."

Page 244, strike lines 38 through 40.

Explanation:

(This amendment provides \$2.1 million from the general fund the second year to suspend the increased local match rate on January 1, 2014 for residential placements in the Comprehensive Services Act program that was enacted in fiscal year 2010. Obsolete budget language requiring a report on the impact of this match rate change due on October 1, 2012 is repealed.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Lingamfelter

Item 296 #4h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Health	\$0	\$110,000	GF
	\$0	\$115,000	NGF
	0.00	1.00	FTE

Language:

Page 254, line 50, strike "\$229,391,026" and insert "\$229,616,026".

Explanation:

(This amendment provides \$110,000 from the general fund and \$115,000 from nongeneral funds the second year and one position to implement provisions of House Bill 1505 which increases the fee collected for the construction permit for alternative on-site sewage systems in order to support the contributions to the Onsite Sewage Indemnification Fund and Betterment Loan Program. The general fund amount will provide funding for one position to establish and administer the Betterment Loan Program.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Lingamfelter

Item 343 #5h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Social Services	\$0	\$4,000,000	NGF

Language:

Page 307, line 42, strike "\$24,150,789" and insert "\$28,150,789".

Explanation:

(This amendment provides \$4,000,000 from the nongeneral fund the second year from the federal TANF block grant for a grant of \$100 on behalf of each child in a TANF-eligible family attending school from kindergarten through 12th grade. Funding will allow children living in poverty to acquire school supplies and clothing at the start of each school year.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Marshall, Robert

Item 345 #2h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Social Services	\$0	\$1,000,000	GF

Language:

Page 310, line 16, strike "\$84,867,609" and insert "\$85,867,609".

Explanation:

(This amendment provides \$1.0 million from the general fund the second year to provide compensation to claimants through the Victims of Sterilization Compensation Fund pursuant to passage of House Bill 1529.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Marshall, Robert

Item 4-5.04 #1h

Special Conditions and Restrictions on Expenditures

Goods and Services

Language

Language:

Page 519, line 33, strike "or state statute" and insert:

"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 clarifies existing language in the budget which does not allow for expenditures from general or nongeneral funds sources for abortion services, related to medical assistance to preserve the life of the pregnant woman, provided that every possible measure is taken to preserve the life of the unborn child.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: May

Item 297 #5h

Co-Patron(s): Lingamfelter

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Health	\$0	\$2,000,000	GF

Language:

Page 256, line 42, strike "\$12,497,162" and insert "\$14,497,162".

Page 259, line 25, after "year", insert:

"and \$3,000,000 the second year".

Page 259, line 26, strike "two" and insert "three".

Page 259, line 26, after "Centers", insert:

"The appropriation of general fund amounts the second year shall be divided between the three poison control centers in proportion to the Virginia population served by the centers."

Explanation:

(This amendment adds \$2.0 million the second year from the general fund to restore funding to operate the current three poison control centers serving Virginia operated by the University of Virginia, Virginia Commonwealth University and the National Capital Poison Center. Chapter 3, 2012 Special Session 1, Virginia Acts of Assembly provides \$500,000 from the general fund in the first year only for the operation of two poison control centers instead of three. This funding would ensure the continued statewide operation of the poison control services for the Commonwealth. Funding shall be provided from the unappropriated balance of this act.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: May

Item 330 #11h

Health And Human Resources	FY 12-13	FY 13-14	
Department For Aging And Rehabilitative Services	\$0	\$150,000	GF

Language:

Page 294, line 48, strike "\$97,493,111" and insert "\$97,643,111".

Explanation:

(This amendment adds \$150,000 from the general fund the second year for the National Rehabilitation and Rediscovery Foundation to fund basic services needed for individuals (i.e., civilians and veterans) with traumatic brain injuries and other neurological disabilities to live independently and remain in the community without risk of institutionalization. Services include life skills training, financial organizational skills training, and other vital independent training services. Services will be provided to over 150 individuals annually.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: May

Item 343 #8h

Co-Patron(s): Brink, Comstock, Dance, Filler-Corn,
Ingram, Scott, James

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Social Services	\$0	\$354,000	GF

Language:

Page 307, line 42, strike "\$24,150,789" and insert "\$24,504,789".

Page 309, after line 36, insert:

"E. Out of this appropriation, a total of \$354,000 the second year from the general fund is provided for the Smart Beginnings program serving the Hopewell/Petersburg area, the Accomack County Department of Social Services, and the Fairfax and Loudoun County school divisions to support the development of a STEM model program for Pre-K and kindergarten aged children. Each developed model will focus on enhancing the children's learning experiences through the arts."

Explanation:

(This amendment provides \$354,000 the second year from the general fund to support for the Smart Beginnings locations in Hopewell/Petersburg area, the Department of Social Services (DSS) in Accomack County, and the Fairfax and Loudoun County School Divisions to support the development of a STEM model program for Pre-K and kindergarten aged children. The proposed funding would be allocated as follows: (i) \$51,000 to the Smart Beginnings program serving the Hopewell/Petersburg area, (ii) \$51,000 to the Accomack County DSS, (iii) \$157,000 to Fairfax County school division, and (iv) \$95,000 to Loudoun County school division. These funds are intended to be used to offset related costs for developing STEM model programs for these 3-5 year-old children.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: McClellan

Item 307 #27h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance Services	\$15,966,483	\$19,680,883	GF

Language:

Page 263, line 15, strike "\$7,609,498,210" and insert "\$7,625,464,693".

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,053,518,396".

Page 263, line 39, strike "69.408,988" and insert "85,375,471".

Page 263, line 40, strike "66,984,546" and insert "86,665,429".

Explanation:

(This amendment provides \$16.0 million the first year and \$20.0 million the second year from the general fund to restore funding for indigent health care costs and Medicaid reimbursement at the Virginia Commonwealth University Health System.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: McClellan

Item 319 #2h

Health And Human Resources	FY 12-13	FY 13-14	
Mental Health Treatment Centers	\$0	\$1,548,684	GF

Language:

Page 290, line 5, strike "\$189,062,510" and insert "\$190,611,194".

Explanation:

(This amendment adds \$1.5 million from the general fund the second year to restore funding for state mental health hospitals that serve adults with serious mental illness.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: McClellan

Item 330 #2h

Health And Human Resources	FY 12-13	FY 13-14	
Department For Aging And Rehabilitative Services	\$721,264	\$1,271,759	GF

Language:

Page 294, line 48, strike "\$97,492,683" and insert "\$98,213,947".

Page 294, line 48, strike "\$97,493,111" and insert "\$98,764,870".

Explanation:

(This amendment adds \$721,264 the first year and \$1.3 million the second year from the general fund for employment supports and job maintenance programs. Long-term Employment Support Services (LTESS) and Extended Employment Services (EES) provide access to employment and supports for individuals with disabilities through partnerships with employment service organizations. Funding for these employment support services has been reduced by 26.9 percent since 2008.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Minchew

Item 330.05 #6h

Health And Human Resources

FY 12-13

FY 13-14

Department For Aging And
Rehabilitative Services

\$0

\$50,000 GF

Language:

Page 296, line 31, strike "\$31,898,716" and insert "\$31,948,716".

Page 294, after line 39, insert:

"K. Out of this appropriation, \$50,000 from the general fund the second year is provided to Birmingham Green to conduct a feasibility study and provide pre-development funding to build and operate a multi-family housing facility in proximity to a Program of All-inclusive Care for the Elderly. Funding shall be used to match local and private funding to complete the study and engineering and architecture pre-development requirements."

Explanation:

(This amendment provides \$50,000 from the general fund the second year to Birmingham Green, a non-profit organization located in Prince William County that operates a 180-bed nursing facility and two assisted living facilities to conduct a feasibility study of building a multi-family housing facility alongside a PACE center operated by Inova Health System on its Centerville Road campus in Prince William County. The funds will be matched with local funds and funds from Inova and may be used to offset a portion of the costs associated with pre-development work needed to apply for tax-credit financing.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Morrissey

Item 297 #6h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Health	\$0	\$15,000	GF

Language:

Page 256, line 42, strike "\$12,497,162" and insert "\$12,512,162".

Page 259, line 15, strike "90,000" and insert "105,000".

Explanation:

(This amendment provides an additional \$15,000 from the general fund the second year for the Statewide Sickle Cell Chapters of Virginia to allow for the funding of services through a newly admitted chapter, the Heart of Gold Foundation of Northern Virginia.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: O'Bannon

Item 294 #1h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Health	\$0	\$25,000	GF

Language:

Page 253, line 15, strike "\$14,125,886" and insert "\$14,150,886".

Page 254, after line 3, insert:

"F. Out of this appropriation, \$25,000 the second year is provided to fund statewide education programs regarding telehealth emergency stroke care through Virginia's State Stroke Systems of Care Task Force."

Explanation:

(This amendment provides \$25,000 the second year for statewide education programs regarding the availability of telehealth emergency stroke care to facility immediate access to high quality, specialty stroke neurology care and triage. Studies demonstrate that telehealth care used for stroke evaluations are an effective tool. This is a recommendation of the Joint Commission on Health Care.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: O'Bannon

Item 294 #4h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Health	\$0	\$50,000	GF

Language:

Page 253, line 15, strike "\$14,125,886" and insert "\$14,175,886".

Explanation:

(This amendment provides \$50,000 from the general fund the second year for the Department of Health, in cooperation with the Department of Health Professions, to implement the provisions of House Bill 1672 which requires the development of a pilot program for training members of the public in the identification of opiate overdose and administration of naloxone by those who successfully complete the training program.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: O'Bannon

Item 295 #1h

Health And Human Resources

FY 12-13

FY 13-14

Department Of Health

\$0

\$75,000 GF

Language:

Page 254, line 5, strike "\$175,251,638" and insert "\$175,326,638".

Page 254, after line 48, insert:

"F. Out of this appropriation, \$75,000 the second year is provided to support the Text4baby program, which uses a mobile health technology to reach underserved populations, reduce the number of premature births, improve maternal and child health outcomes."

Explanation:

(This amendment provides \$75,000 the second year to support the Text4baby program. This is a recommendation of the Joint Commission on Health Care.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: O'Bannon

Item 296 #2h

Co-Patron(s): Peace

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Health	\$0	\$967,944	GF
	\$0	\$696,362	NGF
	0.00	20.00	FTE

Language:

Page 254, line 50, strike "\$229,391,026" and insert "\$231,055,332".

Page 256, line 24, after "F." insert "1."

Page 256, after line 34, insert:

"2. Out of this appropriation \$967,944 from the general fund and \$696,362 from nongeneral funds shall be used to provide access to dental services through local health departments. This level of funding shall continue to provide access to the current level of providers while the program is transitioning to a preventative model.

3. The Department of Health, in consultation with the Department of Medical Assistance Services, shall continue its work with the advisory committee to develop and implement a comprehensive targeted plan for transitioning the current dental model to a prevention only model. The preventative dental model report shall consider at least the following: (i) the appropriate level of funding for a sustainable preventive model to begin July 1, 2014, while ensuring the safety net is secure and trained personnel are in place, (ii) the need to focus on those areas of the Commonwealth in the most need of these dental services, including those areas with higher risk factors including a concentration of diabetic and free lunch populations and a higher than average Medicaid-eligible population, and (iii) a review of dental program revenues and expenditures, including the development of evaluation metrics to assist in ensuring efficient and effective use of funding and services.

4. The Commissioner of Health shall convene the advisory committee meeting no later than April 30, 2013 and additional meetings as agreed on by the stakeholders, and issue a final report from the advisory committee to the Chairmen of the House Appropriations and Senate Finance Committees no later than October 1, 2013."

Explanation:

(This amendment restores \$967,944 from the general fund and \$696,362 from nongeneral funds the second year and 20 positions to provide for additional time to plan the closure state-supported dental clinics and restructure services to be consistent with a preventative model of service. Budget language is also included requiring the continued planning for this transition with an advisory committee and a

Request to Amend House Bill 1500, as Introduced

report on these efforts to restructure dental services by October 1, 2013 to the money committee chairmen.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: O'Bannon

Item 296 #3h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Health	\$0	\$867,600	GF

Language:

Page 254, line 50, strike "\$229,391,026" and insert "\$230,258,626".

Page 256, after line 40, insert:

"H. Out of this appropriation, \$867,600 the second year is provided to support the expansion of the Perinatal Telehealth Network through the University of Virginia Medical Center to include Danville, Pittsylvania, and Washington Counties and initiate ultrasound services at the Culpeper and Staunton Health Department telemedicine sites."

Explanation:

(This amendment provides \$869,600 the second year to support the Perinatal Telehealth Network through the University of Virginia Medical Center to certain localities. This is a recommendation of the Joint Commission on Health Care.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: O'Bannon

Item 307 #1h

Co-Patron(s): Ingram

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$0	\$125,000	GF
Services	\$0	\$125,000	NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,034,087,513".

Page 267, line 23, strike "2013" and insert "2014".

Explanation:

(This amendment adds \$125,000 from the general fund and a like amount of matching federal Medicaid funds the second year to continue the current exemption of antidepressant, antianxiety and antipsychotic medications used to treat mental illness from the Medicaid Preferred Drug List (PDL) through fiscal year 2014.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: O'Bannon

Item 307 #4h

Co-Patron(s): Brink, Dance, Ingram, Jones, Landes,
Ware, Onzlee

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$0	\$6,800,000	GF
Services	\$0	\$6,800,000	NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,047,437,513".

Page 280, after line 14, insert:

"JJJJ. The Department of Medical Assistance Services shall increase reimbursements to participating physicians in an amount of 3 percent over and above the 2012 reimbursement levels. This increase applies to the Medicaid fee-for-service program as well as services provided through the Medicaid managed care organizations, which shall pass through the entire amount of the increase to physicians."

Explanation:

(This amendment provides \$6.8 million from the general fund in the second year for a three percent increase in the payment rates for Medicaid physician services. Funding is provided from the unappropriated undesignated general funds dollars contained within this act. The federal Patient Protection and Affordable Care Act provides federal funds to increase in Medicaid physician fees for primary care services to the Medicare level in federal fiscal year 2014, 2015 and 2016; however other physician services are not included in that increase.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: O'Bannon

Item 307 #5h

Co-Patron(s): Brink, Dance, Ingram, Johnson, Jones,
Landes, Peace, Ware, Onzlee

Health And Human Resources

Department Of Medical Assistance
Services

Language

Language:

Page 280, after line 14, insert:

"JJJJ. The Department of Medical Assistance Services shall convene a work group to analyze and develop recommendations on the creation of an inflation adjustment formula for the reimbursement of physicians participating in Medicaid. Such work group shall include stakeholders from the Medical Society of Virginia, physician subspecialty groups, academic medical centers, and the Virginia Hospital and Healthcare Association, together with any consultants or resources commonly used or retained by the Department. The Director of the Department of Medical Assistance Services shall report on the recommendations by this group to the Chairmen of the Senate Finance and House appropriations committees by October 15, 2013."

Explanation:

(This amendment adds language directing the agency to convene a workgroup to develop recommendations creating an inflationary adjustment to be applied to Medicaid payments to physicians. Currently, only a limited number of Medicaid providers are eligible for annual inflationary adjustments to their payments.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: O'Bannon

Item 307 #6h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$0	\$7,123,278	GF
Services	\$0	\$7,123,278	NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,048,084,069".

Page 280, after line 14, insert:

"JJJJ. The Department of Medical Assistance Services shall increase reimbursements for agency directed personal care by five percent above the rate in effect on January 1, 2013 for services provided through Medicaid home- and community-based waivers. The department shall have the authority to implement this reimbursement change effective July 1, 2013, and prior to the completion of any regulatory process undertaken in order to effect such change."

Explanation:

(This amendment provides \$7.1 million from the general fund and a like amount of federal Medicaid matching funds in the second year for a five percent increase in the payment rates for agency directed personal care provided through Medicaid home- and community-based waiver services.)

Chief Patron: O'Bannon

Item 307 #8h

Co-Patron(s): Jones

Health And Human Resources

Department Of Medical Assistance
Services

Language

Language:

Page 280, after line 14, insert:

"JJJJ.1. The Secretary of Health and Human Resources and Department of Medical Assistance Services (DMAS) are directed to prepare and file no later than September 1, 2013 an appropriate waiver or series of waivers with the Centers for Medicare and Medicaid Services (CMS) to:

- a. Incorporate existing plans to improve the coordination and management of care for persons eligible for both Medicaid and Medicare (dual eligibles), building on lessons learned in other states as well as the state's own experience with the Program for All-Inclusive Care for the Elderly (PACE) and including provisions for an equitable sharing of savings for both the Virginia Medicaid and the federal Medicare programs from any cost-avoidance that results from improved care coordination and quality.
- b. Develop an enhanced managed care program for the highest cost Medicaid patients, such as frequent emergency department users, patients with 10 or more active prescriptions, and other high-cost patients identified by the department.
- c. Enhance the ability of the Department of Medical Assistance Services to oversee and assess the value provided by managed care plans regarding quality and cost effectiveness of care and patient health outcomes.
- d. Enhance the coordination of care for all populations covered by Medicaid or FAMIS, drawing on lessons from best practices in other states and the Commonwealth's Medicaid managed care systems.
- e. Improve the effectiveness of community mental health services with the goal of reducing, in a manner consistent with public health and safety, the incidence of incarceration of mentally ill adults and children.
- f. Improve the quality of prenatal care and post-partum education provided to pregnant women covered by Medicaid to improve birth outcomes and reduce infant mortality.
- g. Strengthen chronic disease prevention among children covered by Medicaid and FAMIS, focusing on preventing childhood obesity and related co-morbidities such as diabetes.
- h. Take advantage of federal funding to extend coverage to newly eligible individuals, provided that: (i) federal funding commitments are maintained at current

Request to Amend House Bill 1500, as Introduced

levels; and (ii) that the waiver allows the Commonwealth to customize benefits and other program parameters appropriate for the newly covered population to provide access to high quality, cost effective care, including (1) benefits emphasizing primary care, prevention, wellness and mental health care, (2) incentives for healthy behaviors, (3) limits on nonessential benefits such as non-emergency transportation, and (4) a patient engagement requirement. The patient engagement requirement shall include, but not be limited to, keeping appointments, obtaining appropriate health screenings, and as necessary, participating in smoking cessation, weight management, and substance abuse programs.

i. Other issues as may seem appropriate to further the overall goals of improving access to quality, cost effective care.

2. As a condition of this appropriation, DMAS is authorized to use such nongeneral funds as may be available and shall be necessary to assist in implementation of this item contingent upon the continued receipt of federal financial participation at the current federal medical assistance percentage (FMAP) or higher as provided for in federal law.

3. As a condition of this appropriation, the implementation and maintenance of a Medicaid reform plan that includes any extension of coverage to newly eligible individuals shall be contingent upon the continued receipt of federal financial participation at the current FMAP or higher as provided for in federal law.

4. The Department of Medical Assistance Services shall provide copies of waiver applications, as well as a summary of any expenditure of nongeneral funds in implementing this item to the chairmen of the Senate Education and Health, Senate Finance, House Appropriations, and House Health, Welfare, and Institutions Committees; and the Joint Commission on Health Care."

Explanation:

(This amendment adds language directing the Secretary of Health and Human Resources and the Department of Medical Assistance Services to develop a fiscally responsible and sustainable Medicaid reform proposal that will require a revised federal-state relationship, including significantly enhanced state flexibility. The overall goals of the Medicaid reform proposal are to: (i) put the Medicaid program on a path toward long-term fiscal sustainability; (ii) build on current care management systems and redesign care delivery to improve patient health and quality of care; and (iii) promote patient engagement in the health care delivery system. The federal Patient Protection and Affordable Care Act presents states with significant implementation challenges, especially with regard to the Medicaid program. Virginia's Medicaid program has more stringent eligibility limits, better cost containment, and lower provider rates than programs in many other states. However, costs of the existing program have consistently grown at rates in excess of state

Request to Amend House Bill 1500, as Introduced

revenues over the last twenty years, due in part to federal policy constraints imposed on the state. Accordingly, simple expansion of the existing Medicaid program is not in the best long-term interests of the Commonwealth. However, broader state flexibility would allow Virginia to (i) reform and strengthen the existing Medicaid program, (ii) design a benefit package and delivery reforms better suited for a potential newly covered population of low-income able bodied adults, and (iii) take advantage of the health improvement and economic benefits from related federal funds.)

Chief Patron: O'Bannon

Item 307 #9h

Co-Patron(s): Ingram, Jones, Landes, Peace

Health And Human Resources

Department Of Medical Assistance
Services

Language

Language:

Page 280, after line 14, insert:

"JJJJ.1. Effective July 1, 2013, the Department of Medical Assistance Services shall establish a Medicaid Physician and Managed Care Liaison Committee including, but not limited to, representatives from the following organizations: the Virginia Academy of Family Physicians; the American Academy of Pediatricians – Virginia Chapter; the Virginia College of Emergency Physicians; the American College of Obstetrics and Gynecology – Virginia Section; Virginia Chapter, American College of Radiology; the Psychiatric Society of Virginia; the Virginia Medical Group Management Association; and the Medical Society of Virginia. The Committee shall also include representatives from each of the Department's contracted managed care organizations and a representative from the Virginia Association of Health Plans. The Committee will work with the department to investigate the implementation of quality, cost-effective health care initiatives, to identify means to increase provider participation in the Medicaid program, to remove administrative obstacles to quality, cost-effective patient care, and to address other matters as raised by the Department or members of the committee. The committee shall meet semi-annually, or more frequently if requested by the department or members of the Committee. The department, in cooperation with the committee, shall report on the committee's activities annually to the Board of Medical Assistance Services and to the Chairmen of the House Appropriations and Senate Finance Committees and the Department of Planning and Budget no later than October 1 each year."

Explanation:

(This amendment adds language directing the Department of Medical Assistance Services to establish a Medicaid Physician and Managed Care Liaison Committee to ensure access to of quality, cost-effective care through the Medicaid program.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: O'Bannon

Item 315 #2h

Co-Patron(s): Brink, Dance, Helsel, Ingram, Krupicka,
Rush, Watts

Health And Human Resources	FY 12-13	FY 13-14	
Grants To Localities	\$0	\$5,500,000	GF

Language:

Page 285, line 35, strike "\$325,471,560" and insert "\$330,971,560".

Page 286, line 16, strike "10,203,366" and insert "15,703,366".

Explanation:

(This amendment provides \$5.5 million from the general fund the second year for Part C Early Intervention services for infants and toddlers with disabilities. The introduced budget added \$2.3 million from the general fund the first year and \$3.0 million from the general fund the second year to address a waiting list for Part C services. Additional funding will eliminate the waiting list for assessments and services as well as to resolve service-level restrictions that were implemented to manage the lack of funding. Early intervention services lead to early rapid brain development and assist families in coping skills and providing the best home environment for their child/children and support transition into the school system. Last year, 15,676 infants were served at an average cost of \$3,936 per child.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: O'Bannon

Item 315 #6h

Co-Patron(s): Bell, Richard, Brink, Dance, Farrell,
Hope, Ingram, Jones, Landes, McClellan, Peace, Watts,
Yost

Health And Human Resources	FY 12-13	FY 13-14	
Grants To Localities	\$0	\$450,000	GF

Language:

Page 285, line 35, strike "\$325,471,560" and insert "\$325,921,560".

Page 288, line 50, strike "2,750,000" and insert "3,200,000".

Explanation:

(This amendment provides an additional \$450,000 from the general fund the second year for child psychiatry and crisis response services for children requiring mental health services. The introduced budget added \$1.0 million from the general fund the second year for children's mental health crisis services. Last session, \$1.5 million from the general fund the first year and \$1.8 million from the general fund the second year was provided for child psychiatry and children's crisis response services.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: O'Bannon

Item 330.05 #1h

Health And Human Resources	FY 12-13	FY 13-14
Department For Aging And Rehabilitative Services	\$126,200	\$50,469 GF

Language:

Page 296, line 31, strike "\$0" and insert "\$126,200".

Page 296, line 31, strike "\$31,898,716" and insert "\$31,949,185".

Page 297, line 19, after "appropriation," insert:
"\$126,200 the first year and".

Page 297, line 19 strike "201,875" and insert "252,344".

Explanation:

(This amendment provides \$126,200 the first year and \$50,469 the second year from the general fund for SeniorNavigator, public-private partnership that provides a comprehensive health and aging information system for Virginia's senior population, their families and caregivers. First year funding will help cover the cost of technology upgrades needed to continue serving consumers and service providers. The second year amount will assist with increased operational costs related with increase workload from serving multiple populations and service providers. SeniorNavigator has experienced a 25 percent increase in listings in their database since 2008 and a 20 percent annual increase in website visits linking older Virginians with caregivers and services.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: O'Bannon

Item 3-3.03 #1h

General Fund Deposits

Interest Earnings

Language

Language:

Page 488, strike line 18.

Explanation:

(This amendment lowers the amount of interest retained by the general fund from the Virginia Rescue Squad Assistance Fund (VRSF) in the Virginia Department of Health by \$153,578 in fiscal year 2014 and eliminates language in Part 3 which retains the interest from the VRSF. This funding will be used in awarding grants to nonprofit and volunteer emergency medical services organizations for recruitment, retention, training, and equipment.)

Chief Patron: Peace

Item 290 #1h

Health And Human Resources

Department Of Health

Language

Language:

Page 251, after line 50, insert:

"G. Notwithstanding any other provision of law or regulation \$500,000 the second year from the special emergency medical services funding shall be provided to the Virginia Rescue Squad Assistance Fund for grants to emergency medical services organizations to purchase 12-lead electrocardiograph monitors."

Explanation:

(This amendment adds language to provide funding from the Rescue Squad Assistance Fund for grants to local Emergency Medical Services (EMS) organizations to purchase 12 lead electrocardiograph (ECG) monitors for ambulances to identify a patient who is suffering from a severe and often fatal heart attack known as a ST-segment elevation myocardial infarction (STEMI). One out of four heart attacks are classified as a STEMI heart attack and less than half of the patients receive treatment within the recommended 90-minute window. The mortality rate for these heart attacks is very high. The use of these 12-lead ECG monitors will allow the EMS provider to quickly determine the type of heart attack and transport the patient to the most appropriate hospital. Many of EMS providers, particularly rural providers, do not have this key piece of equipment, which can cost from \$20,000.00 to \$30,000.00 per unit, but have an extensive service life. Companion amendments in this item and Item 3-1.01 (Interfund Transfers) provide for the funding for this initiative in the Virginia Rescue Squad Assistance Fund (VRSAF) by (i) transferring \$375,000 nongeneral funds from the Office of EMS and (ii) decreasing the transfer of \$10.5 million from the special emergency medical services fund to the general fund by \$125,000 in fiscal year 2014. Another companion amendment in this item adds language requiring the Commissioner of Health to work with the State EMS Advisory Board to prioritize up to \$500,000 in the VRSAF for this new equipment.)

Chief Patron: Peace

Item 290 #2h

Health And Human Resources

Department Of Health

Language

Language:

Page 251, after line 50, insert:

"G. Notwithstanding any other provision of law or regulation \$375,000 the second year from the State Office of Emergency Medical Services shall be provided to the Virginia Rescue Squad Assistance Fund for grants to emergency medical services organizations to purchase 12-lead electrocardiograph monitors."

Explanation:

(This amendment adds language to provide \$375,000 in fiscal year 2014 from State Office of Emergency Medical Services to the Rescue Squad Assistance Fund for grants to local Emergency Medical Services (EMS) organizations to purchase 12 lead electrocardiograph (ECG) monitors for ambulances to identify a patient who is suffering from a severe and often fatal heart attack known as a ST-segment elevation myocardial infarction (STEMI). One out of four heart attacks are classified as a STEMI heart attack and less than half of the patients receive treatment within the recommended 90-minute window. The mortality rate for these heart attacks is very high. The use of these 12-lead ECG monitors will allow the EMS provider to quickly determine the type of heart attack and transport the patient to the most appropriate hospital. Many of EMS providers, particularly rural providers, do not have this key piece of equipment, which can cost from \$20,000.00 to \$30,000.00 per unit, but have an extensive service life. Companion amendments in this item and Item 3-1.01 (Interfund Transfers) provide for the funding for this initiative in the Virginia Rescue Squad Assistance Fund (VRSAF) by decreasing the transfer of \$10.5 million from the special emergency medical services fund to the general fund by \$125,000 in fiscal year 2014. Another companion amendment in this item adds language requiring the Commissioner of Health to work with the State EMS Advisory Board to prioritize a portion of the funding in the VRSAF for this effort.)

Chief Patron: Peace

Item 290 #3h

Health And Human Resources

Department Of Health

Language

Language:

Page 251, after line 50, insert:

"G. The Commission of Health shall work with the State EMS Advisory Board to prioritize up to \$500,000 million the second year from the Virginia Rescue Squad Assistance Fund to provide grants to local EMS organizations to purchase 12 lead electrocardiograph (ECG) monitors for ambulances."

Explanation:

(This amendment adds language to require the Commissioner of Health to work with the State Emergency Medical Services (EMS) Advisory Board to prioritize up to \$1.0 million in fiscal year 2014 from the Virginia Rescue Squad Assistance Fund (VRSF) for grants to local EMS organizations to purchase 12 lead electrocardiograph (ECG) monitors for ambulances to identify a patient who is suffering from a severe and often fatal heart attack known as a ST-segment elevation myocardial infarction (STEMI). One out of four heart attacks are classified as a STEMI heart attack and less than half of the patients receive treatment within the recommended 90-minute window. The mortality rate for these heart attacks is very high. The use of these 12-lead ECG monitors will allow the EMS provider to quickly determine the type of heart attack and transport the patient to the most appropriate hospital. Many of EMS providers, particularly rural providers, do not have this key piece of equipment, which can cost from \$20,000.00 to \$30,000.00 per unit, but have an extensive service life. Companion amendments in this item and Item 3-1.01 (Interfund Transfers) provide additional funding of \$750,000 for the VRSF for this effort by (i) transferring \$375,000 nongeneral funds from the Office of EMS and (ii) decreasing the transfer of \$10.5 million from the special emergency medical services fund to the general fund by \$125,000 in fiscal year 2014.)

Chief Patron: Peace

Item 292 #1h

Health And Human Resources

Department Of Health

Language

Language:

Page 252, after line 18, insert:

"C. The Department of Health shall make available Virginia death record files to entities that have a valid contract for the purposes of database creation, information services provisioning or identify verification with any local, state or federal agency. The Virginia death records file shall be made available on a monthly basis and dating back to 2010. The Division of Vital Records and the Division of Health Statistics may charge a fee of no more that \$200 per month for providing the Virginia death records file to these entities."

Explanation:

(This amendment adds language to require the Department of Health to release specific death records to certain entities and allow the department to offset its costs in providing the records to these entities on a monthly basis.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Peace

Item 297 #2h

Co-Patron(s): O'Bannon

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Health	\$500,000	\$1,000,000	GF

Language:

Page 256, line 42, strike "\$15,475,065" and insert "\$15,975,065".

Page 256, line 42, strike "\$12,497,162" and insert "\$13,497,162".

Page 259, line 25, after line 31, insert:

"3. Out of this appropriation, \$500,000 the first year and \$1,000,000 the second year from the general fund shall be provided to fund the Virginia Commonwealth University Poison Control Center."

Explanation:

(This amendment adds \$500,000 the first year and \$1,000,000 the second year to provide funding to the Virginia Commonwealth University (VCU) Poison Control Center. Chapter 3, 2012 Special Session 1, Virginia Acts of Assembly provides \$500,000 from the general fund in the first year only for the operation of two poison control centers. This amendment provided continued funding for the operation of the poison control center operated by VCU.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Peace

Item 307 #13h

Co-Patron(s): Cox, John

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance	\$0	\$600,000	GF
Services	\$0	\$600,000	NGF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,035,037,513".

Page 280, after line 14, insert:

"JJJJ. Out of this appropriation, \$600,000 from the general fund and \$600,000 from nongeneral funds the second year shall be used to increase reimbursement rates for adult day health services provided through Medicaid home- and community-based waiver programs by \$10.00 per unit. The department shall have the authority to implement this reimbursement change effective July 1, 2013, and prior to the completion of any regulatory process undertaken in order to effect such change."

Explanation:

(This amendment provides \$600,000 from the general fund and \$600,000 from matching federal Medicaid funds to provide a \$10.00 per unit increase in the Medicaid waiver reimbursement rate for adult day health services. Adult day health care is much less expensive than alternative care in a nursing facility for which these clients qualify. Providers of adult day health care report a gap of \$18.13 per client per day between actual costs and Medicaid reimbursement, which must be made up through contributions from individuals, churches, corporations, and foundations. These services are almost exclusively provided to Medicaid waiver recipients. This amendment will increase the statewide rate paid for Medicaid adult day health care services from \$50.10/unit to about \$60.10/unit in Northern Virginia and from \$45.65/unit to about \$55.65/unit in the rest of the state. A "unit" represents 6 or more hours in a day.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Peace

Item 343 #1h

Co-Patron(s): BaCote, Brink, Bulova, Comstock, Filler-Corn, Garrett, Herring, Hope, Ingram, Jones, Keam, Kilgore, Krupicka, May, McClellan, Minchew, O'Bannon, Plum, Poindexter, Rust, Scott, James, Sherwood, Surovell, Watts, Yancey

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Social Services	\$0	\$190,000	GF

Language:

Page 307, line 42, strike "\$24,150,789" and insert "\$24,340,789".

Page 308, line 26, strike "601,896" and insert "791,896".

Explanation:

(This amendment adds \$190,000 from the general fund the second year to restore partial funding for Healthy Families Virginia. Since 2010, state funding for the program has been reduced from \$5.4 million to \$3.2 million. Five programs have closed and eight programs have merged due to budget reductions. Healthy Families Virginia is the Commonwealth's largest evidence-based early childhood home visiting service delivery model as defined by the federal Department of Health and Human Services. This public-private partnership contracts with the Department of Social Services to provide preventive services for at-risk families from before birth to age five.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Peace

Item 3-1.01 #1h

Transfers

Interfund Transfers

Language

Language:

Page 480, line 49, strike the second "10,518,587" and insert "10,393,587".

Explanation:

(This amendment reduces the the transfer of \$10.5 million from the special emergency medical services fund to the general fund by \$125,000 in fiscal year 2014 to provide additional funding to the Virginia Rescue Squad Assistance Fund for a grant program for local emergency medical services organizations to purchase 12-lead electrocardiograph (ECG) monitors. These monitors will help to identify patients suffering from a severe and often fatal heart attack known as a ST-segment elevation myocardial infarction (STEMI) and transport them rapidly to appropriate hospitals for timely treatment. Companion amendments Item 290 provide additional funding for this effort by (i) transferring \$375,000 in fiscal year 2014 from the Office of EMS to the VRSAF and (ii) requiring the Commissioner of Health to work with the State EMS Advisory Board to prioritize up to \$500,000 of the VRSAF for this new equipment.)

Chief Patron: Pogge

Item 290 #4h

Health And Human Resources

Department Of Health

Language

Language:

Page 251, after line 50, insert:

"G. Notwithstanding any other provision of law or regulation \$110,000 the second year from the Virginia Rescue Squad Assistance Fund shall be provided national background checks on applicants for membership in volunteer and career emergency medical services organizations, pursuant to House Bill 1383, as passed by the 2013 General Assembly."

Explanation:

(This amendment adds \$110,000 the second year from the Virginia Rescue Squad Assistance Fund (VRSAF) for the implementation of House Bill 1383 to provide national background checks. A companion amendment in Item 3-3.03 eliminates the transfer of \$158,578 in interest earnings from the VRSAF to the general funds. This additional funding in the VRSAF shall be used to fund this initiative.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Scott, Edward

Item 315 #7h

Co-Patron(s): Landes

Health And Human Resources	FY 12-13	FY 13-14	
Grants To Localities	\$0	\$3,000,000	GF

Language:

Page 285, line 35, strike "\$325,471,560" and insert "\$328,471,560".

Page 289, line 21, strike "750,000" and insert "3,750,000".

Explanation:

(This amendment provides an additional \$3.0 million from the general fund the second year for discharge assistance planning (DAP) funding in addition to the \$750,000 general fund the second year included in the introduced budget. Additional funding is requested to address a waiting list of 136 individuals who are residing in state mental health facilities and awaiting discharge into the community. Funds will be used to support community-based housing and recovery-oriented mental health and support services to facility a successful transition into the community.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Scott, James

Item 307 #35h

Co-Patron(s): Cox, Kirk

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance Services	\$0	\$2,500,000	GF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,036,337,513".

Page 280, after line 14, insert:

"JJJJ. The Department of Medical Assistance Services shall issue a request for proposal for this purpose for the establishment of a 20-bed neurobehavioral treatment program to be operated in a licensed nursing facility or residential treatment center. The Department of Medical Assistance Services shall establish a reasonable payment rate that will allow the program to operate. Out of this appropriation, \$2,500,000 the second year from the general fund shall be provided for this purpose. The department shall promulgate regulations to become effective within 280 days or less from the enactment of this act to implement this program ."

Explanation:

(This amendment directs the Department of Medical Assistance Services to establish a pilot program for a 20-bed neurobehavioral treatment program in a licensed nursing facility or residential treatment center and adds \$2.5 million from the general fund the second year for this purpose. Language is also added for the department to establish a reasonable payment rate and authority is provided for the issuance of emergency regulations to facilitate the implementation of the program. Virginia is currently paying for more than 10 residents to receive out of state care at 128 percent higher rates than the average Medicaid rate for Virginia nursing homes. This proposal is a recommendation from the Disability Commission.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Stolle

Item 289 #1h

Health And Human Resources

FY 12-13

FY 13-14

Department Of Health

\$0

\$100,000 GF

Language:

Page 250, line 41, strike "\$312,000" and insert "\$412,000".

Explanation:

(This amendment provides \$100,000 from the general fund the second year to fund the fiscal impact of House Bill 1588 which adds geriatric fellowships to the eligibility criteria for the physician loan repayment program. Virginia is facing a critical shortage of geriatric trained physicians as detailed in the Joint Commission on Health Care Study on Healthcare Workforce Needs. A companion amendment in Item 297 provides \$100,000 from the general fund for this initiative by reducing funding for the Hampton Roads Proton Beam Therapy Institute.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Stolle

Item 297 #1h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Health	\$0	(\$100,000)	GF

Language:

Page 256, line 42, strike "\$12,497,162" and insert "\$12,397,162".

Explanation:

(This amendment transfer \$100,000 the second year from the general fund amounts for the Hampton Roads Proton Beam Therapy Institute to fund the fiscal impact of House Bill 1588 which adds geriatric fellowships to the eligibility criteria for the physician loan repayment program. A companion amendment in Item 294 provides \$100,000 for this initiative. Virginia is facing a critical shortage of geriatric trained physicians as detailed in the Joint Commission on Health Care Study on Healthcare Workforce Needs.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Toscano

Item 297 #3h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Health	\$0	\$3,000,000	GF

Language:

Page 256, line 42, strike "\$12,497,162" and insert "\$15,497,162".

Page 259, line 25, after "year", insert:

"and \$3,000,000 the second year".

Page 259, line 26, strike "two" and insert "three".

Page 259, line 26, after "Centers", insert:

"The appropriation of general fund amounts the second year shall be divided between the three poison control centers in proportion to the Virginia population served by the centers."

Explanation:

(This amendment adds \$3.0 million the second year from the general fund to restore funding to operate the current three poison control centers serving Virginia. Chapter 3, 2012 Special Session 1, Virginia Acts of Assembly provides \$500,000 from the general fund in the first year only for the operation of two poison control centers instead of three. This funding would ensure the continued statewide operation of the poison control services for the Commonwealth.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Toscano

Item 307 #26h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Medical Assistance Services	\$0	\$11,000,000	GF

Language:

Page 263, line 15, strike "\$8,033,837,513" and insert "\$8,044,837,513".

Page 263, line 47, strike "38,172,887" and insert "49,172,887".

Explanation:

(This amendment provides \$11.0 million the second year from the general fund to restore Medicaid payment rates for hospital inpatient care for Medicaid enrollees at the University of Virginia (UVA) Medical Center which were reduced as part of budget reduction strategies during the recession. This rate increase is necessary to fully meet the cost of providing care to Virginia residents who meet the indigent care criteria established for the state teaching hospitals. Medicaid payments together with indirect medical education and disproportionate share hospital payments enable the state teaching hospitals to provide care to a disproportionate share of the state's low-income and indigent patients.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Toscano

Item 330 #5h

Health And Human Resources	FY 12-13	FY 13-14	
Department For Aging And Rehabilitative Services	\$0	\$306,866	GF

Language:

Page 294, line 48, strike "\$97,493,111" and insert "\$97,799,977".

Page 295, line 23, strike "4,387,672" and insert "4,694,538".

Explanation:

(This amendment restores \$306,866 from the general fund the second year for enters for independent living (CILs). Funding for CILs was reduced by 7.5 percent in fiscal year 2009. CILs provide peer monitoring, independent living skills training, information and referral services, and advocacy.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Toscano

Item 330 #8h

Health And Human Resources	FY 12-13	FY 13-14	
Department For Aging And Rehabilitative Services	\$0	\$400,000	GF

Language:

Page 294, line 48, strike "\$97,493,111" and insert "\$97,893,111".

Explanation:

(This amendment provides \$75,000 from the general fund the second year to restore funding for the Consumer Service Grant Program. Funding was eliminated in 2007. This "last resort" fund is used to meet the needs of individuals with disabilities seeking assistance for assistive technologies such as hearing aids, home modifications, mobility and communications devices and vehicle modifications. It also adds \$325,000 from the general fund the second year to meet the needs of additional individuals with disabilities seeking assistance in accessing assistive technology with the program that is administered by a political subdivision of the state.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Toscano

Item 330 #9h

Health And Human Resources	FY 12-13	FY 13-14	
Department For Aging And Rehabilitative Services	\$0	\$250,000	GF

Language:

Page 294, line 48, strike "\$97,493,111" and insert "\$97,743,111".

Page 296, after line 30, insert:

"K. Out of this appropriation, \$250,000 from the general fund the second year is provided for grants to localities to encourage them to re-establish Disability Services Boards. The Department shall require localities to provide matching funds as a condition of receiving the grant."

Explanation:

(This amendment provides \$250,000 from the general fund the second year to restore provide grants to localities to encourage them to re-establish Disability Services Boards. Language conditions the grants on local matching funds.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Villanueva

Item 330 #7h

Co-Patron(s): Orrock, Pogge

Health And Human Resources	FY 12-13	FY 13-14	
Department For Aging And Rehabilitative Services	\$980,000	\$980,000	GF

Language:

Page 294, line 48, strike "\$97,492,683" and insert "\$98,472,683".

Page 294, line 48, strike "\$97,493,111" and insert "\$98,473,111".

Page 295, line 23, strike the first "4,387,672" and insert "6,367,672".

Page 295, line 23, strike the second "4,387,672" and insert "6,367,672".

Explanation:

(This amendment provides \$980,000 each year from the general fund to expand access to services through centers for independent living (CILs) by developing new CILs in underserved areas of the Commonwealth. This funding includes: (i) \$500,000 each year to transition satellite CILs to full CILs in Petersburg and the New River Valley, (ii) \$160,000 each year to assist additional existing satellite CILs working toward readiness to become full CILs in Loudoun County and the Middle Peninsula, and (iii) \$320,000 each year to establish new satellite CILs in areas that are currently not service in the Northern neck, Southside, Planning District 4 and lower Planning District 9.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Villanueva

Item 330 #10h

Co-Patron(s): Landes, Orrock, Pogge

Health And Human Resources	FY 12-13	FY 13-14	
Department For Aging And Rehabilitative Services	\$2,500,000	\$2,500,000	GF

Language:

Page 294, line 48, strike "\$97,492,683" and insert "\$99,992,683".

Page 294, line 48, strike "\$97,493,111" and insert "\$99,993,111".

Page 296, after line 30, insert:

"K. Out of this appropriation, \$2,500,000 from the general fund each year shall be used for brain injury services."

Explanation:

(This amendment adds \$2.5 million from the general fund each year for brain injury services. Funding will be used to address waiting lists for services, secure infrastructure and workforce, and modernize outcomes management systems for existing core safety net services. Funding will also provide brain injury outreach and options counseling, personal assistance services, expansion of the Brain Injury Discretionary Services fund, and core services to unserved and underserved areas of the Commonwealth.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Ware, Onzlee

Item 315 #9h

Health And Human Resources	FY 12-13	FY 13-14	
Grants To Localities	\$0	\$3,072,645	GF

Language:

Page 285, line 35, strike "\$325,471,560" and insert "\$328,544,205".

Explanation:

(This amendment provides \$3.1 million from the general fund the second year to provide funding for medical detox beds for at least 2,048 individuals. Funding will replace the loss of medical detox beds in the Commonwealth and reduce (i) the demand for off-hour uncompensated emergency room care, (ii) the number of substance-exposed newborns, and (iii) the number of individuals with substance use disorders who are homeless due to their addiction problems. The loss of medical detox beds has left localities with limited or no access for individuals who are in need of this service, which assures medically-supervised withdrawal.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Ware, Onzlee

Item 315 #14h

Health And Human Resources	FY 12-13	FY 13-14	
Grants To Localities	\$0	\$150,000	GF

Language:

Page 285, line 35, strike "\$325,471,560" and insert "\$325,621,560".

Page 289, after line 23, insert:

"AA. Out of this appropriation, \$150,000 the second year from the general fund to Blue Ridge Behavioral Healthcare for the Catawba Regional Partnership to sponsor two additional child psychiatry fellowships in the child psychiatry training program at the Virginia Tech Carilion School of Medicine."

Explanation:

(This amendment provides \$150,000 from the general fund the second year for the Blue Ridge Behavioral Healthcare for Catawba Regional Partnership to sponsor two additional child psychiatry fellowships in the child psychiatry training program at the Virginia Tech Carilion School of Medicine. The medical school works collaboratively with the region's Community Services Boards and other mental health providers in addressing area mental health needs. Without additional funding, the medical school can only continue to offer the current two training slots.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Ware, Onzlee

Item 343 #2h

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Social Services	\$0	\$2,000,000	GF

Language:

Page 307, line 42, strike "\$24,150,789" and insert "\$26,150,789".

Page 308, line 21, after "year" insert:

"and \$2,000,000 the second year".

Explanation:

(This amendment provides \$2,000,000 from the general fund the second year for services provided through community action agencies. Thirty-one community action agencies provide services to 226,000 low-income individuals in families and communities across the Commonwealth.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Wilt

Item 330 #6h

Co-Patron(s): Bell, Richard, Landes, Orrock, Toscano

Health And Human Resources	FY 12-13	FY 13-14	
Department For Aging And Rehabilitative Services	\$0	\$306,866	GF

Language:

Page 294, line 48, strike "\$97,493,111" and insert "\$97,799,977".

Page 295, line 23, strike "4,387,672" and insert "4,694,538".

Explanation:

(This amendment restores \$306,866 from the general fund the second year for centers for independent living (CILs). Funding for CILs was reduced by 7.5 percent in fiscal year 2009. CILs provide peer monitoring, independent living skills training, information and referral services, and advocacy.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Yancey

Item 343 #4h

Co-Patron(s): BaCote, Carr, Garrett, Helsel, Hester,
Ingram, James, Johnson, Kilgore, Merricks, O'Quinn,
Pogge, Poindexter, Spruill, Toscano, Tyler, Villanueva,
Ward, Bell, Richard

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Social Services	\$1,000,000	\$1,000,000	NGF

Language:

Page 307, line 41, strike "\$24,150,789" and insert "\$25,150,789".

Page 307, line 42, strike "\$24,150,789" and insert "\$25,150,789".

Page 309, after line 36, insert:

"K. Out of this appropriation, \$1,000,000 the first year and \$1,000,000 the second year from the Temporary Assistance to Needy Families (TANF) block grant shall be provided to the Virginia Alliance of Boys and Girls Clubs to expand community-based prevention and mentoring programs to alleviate conditions that lead to juvenile crime, school failure, truancy and drop outs, and measurable improvement in academic achievement of at risk children who are eligible for TANF."

Explanation:

(This amendment provides \$1,000,000 each year from the Temporary Assistance to Needy Families (TANF) block grant to Boys and Girls Clubs to expand community-based prevention and mentoring programs. This funding will create access to services for at least 1,500 children in more than 50 communities throughout the Commonwealth, including public housing, in schools and on military bases. These services are consistent with findings from the Commission on Youth and the Virginia State Crime Commission related to findings on truancy, delinquency and community-based programs.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Yost

Item 315 #1h

Co-Patron(s): Herring, Hope, Keam, Krupicka,
McClellan, Morrissey, Sickles, Toscano, Ware, Onzlee

Health And Human Resources	FY 12-13	FY 13-14	
Grants To Localities	\$0	\$600,000	GF

Language:

Page 285, line 35, strike "\$325,471,560" and insert "\$326,071,560".

Page 289, line 12, strike the second "600,000" and insert "1,200,000".

Explanation:

(This amendment provides \$600,000 from the general fund the second year to expand capacity for therapeutic assessment drop-off centers to provide an alternative to incarceration for people with serious mental illness. Priority for new funding shall be given to programs that have implemented Crisis Intervention Teams pursuant to §9.1-102 and § 9.1-187 et seq. of the Code of Virginia and have undergone planning to implement drop-off centers. Last session, \$600,000 from the general fund each year was provided for drop-off centers.)

Request to Amend House Bill 1500, as Introduced

Chief Patron: Yost

Item 340 #1h

Co-Patron(s): Morrissey

Health And Human Resources	FY 12-13	FY 13-14	
Department Of Social Services	\$0	\$30,585,600	GF

Language:

Page 305, line 33, strike "\$37,976,417" and insert "\$68,562,017".

Page 306, after line 10, insert:

"4. Effective July 1, 2013, the Department of Social Services is authorized to base approved licensed assisted living facility rates for individual facilities on an occupancy rate of 85 percent of licensed capacity, not to exceed a maximum rate of \$1,661 per month, which rate is also applied to approved adult foster care homes, unless modified as indicated below. The department may add a 15 percent differential to the maximum amount for licensed assisted living facilities and adult foster care homes in Planning District Eight."

Explanation:

(This amendment provides \$2.0 million from the general fund the second year to increase by \$500 per month the maximum rate allowed for assisted living facilities that accept auxiliary grant recipients. The introduced budget proposes an increase of 1.0 percent retroactive to January 1, 2012, recognizing the additional federal cost of living increase for the Supplemental Security Income payment which increases the auxiliary grant rate from \$1,150 to \$1,161. This amendment would increase the rate to \$1,661 per month for about 6,420 Virginians that receive the auxiliary grant for assisted living care. The local share of the cost for the auxiliary grant increase will be approximately \$7.6 million. In addition, the Virginia Medicaid program will incur a cost of about \$8.3 million as the higher rate would qualify additional auxiliary grant recipients for Medicaid benefits.)
