

*Request to Amend House Bill 1400, as Introduced*

<u>Item #</u>	<u>Short Title</u>
<b>Health and Human Resources</b>	
<b>Anderson</b>	
325	4 h Restore Employment Support Services Programs
325	13 h Require LTESS Funds for Competitive Employment
335	1 h Fingerprint Background Checks
<b>BaCote</b>	
341	5 h Community Action Agencies
<b>Bell, Richard</b>	
279	1 h CSA Funding for Education
<b>Cox, Kirk</b>	
301	4 h Implement ID/DD Individual Support Waiver for 325 Individuals on Waiting List
325	5 h Brain Injury Core Services
<b>DeSteph</b>	
301	27 h Hold Harmless Funding for Nursing Facility Conversion to Price-based Reimbursement
<b>Farrell</b>	
291	4 h VHI - All Payer Claims Database
<b>Garrett</b>	
301	15 h Supplemental Payments for Rural Hospitals
301	16 h Medicaid Preferred Drug List Exclusion for Anti-Seizure Drugs
<b>Greason</b>	
278	1 h Provider Assessment Study
301	29 h Eliminate Provider Assessment Pilot Program
301	31 h Medicaid Provider Assessment for Private Teaching Hospitals
<b>Head</b>	
301	28 h Preadmission Screening for Medicaid LTC Services
<b>Hester</b>	
466	1 h Restore Funds for Tobacco Cessation Programs
<b>Hodges</b>	
308	9 h Opiate Addiction Treatment Services
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<b>Hugo</b>	
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308	7 h Part C Early Intervention Services
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<u>Item #</u>	<u>Short Title</u>
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<b>Kilgore</b>	
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<b>LeMunyon</b>	
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<b>325</b>	7 h Require LTESS Funds for Competitive Employment
<b>325</b>	8 h Restore Cuts for Employment Support Services
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<u>Item #</u>	<u>Short Title</u>
304	1 h Analysis of Changes to Mental Health Skill Building Services
307	1 h Include Brain Injury in Waiver Redesign
307	5 h Public-Private Partnership to Improve Behavioral Health Services
325	2 h Restore Funds for Brain Injury Programs
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338	1 h Modify Auxiliary Grant to Allow Supportive Housing
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<b>Plum</b>	
301	25 h Capture Savings from Medicaid Expansion
<b>Pogge</b>	
325	6 h Restore Budget Cuts for Brain Injury Services
<b>Preston</b>	
341	6 h Petersburg Family Stabilization Initiative
<b>Robinson</b>	
301	24 h Increase ID, DD and Day Support Rates Including NoVA Differential
305	1 h Licensing Fees
<b>Simon</b>	
301	23 h Paid Sick Leave for Consumer-Directed Care Providers
308	2 h Crisis Link
<b>Stolle</b>	
243	1 h EVMS - Transfer Funds for Medicaid Physician Payments
301	11 h Address Healthcare Workforce Needs
301	12 h Supplemental Payments to Physicians Affiliated with CHKD
301	13 h Workgroup on Best Medical Practices for Cost Savings & Patient Care
301	14 h Reimbursement of Emergency Room Claims
301	30 h Medicaid Physician Supplemental Payments for EVMS
349	1 h Radio Reading Services Equipment
<b>Torian</b>	
301	8 h Fund Home and Community-Based Services for Individuals Not Eligible for Medicaid
<b>Toscano</b>	
325	3 h Restore Centers for Independent Living Reduction
<b>Villanueva</b>	
325	1 h Vocational Rehabilitation Program
325	9 h Restore Funds for LTESS Program
325	10 h LTESS Funds for Supportive Competitive Employment
<b>Watts</b>	
307	3 h Report on Treatment of Brain Injury
308	13 h Allow Individuals with Brain Injury Access Services
<b>Webert</b>	
290	1 h Advisory Committee on Sewage Handling and Disposal
<b>Yancey</b>	
291	1 h Newport News Community Free Clinic

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<u>Item #</u>		<u>Short Title</u>
<b>301</b>	9 h	VICAP for Adult Behavioral Health Services
<b>Yost</b>		
<b>308</b>	1 h	Add Five PACT Programs
<b>308</b>	3 h	Project to Reduce Risk Factors
<b>308</b>	4 h	Crisis Response Treatment Pilot Programs
<b>308</b>	5 h	Comprehensive Crisis Response Service Systems for Youth
<b>308</b>	6 h	Child Psychiatry and Children's Crisis Response
<b>308</b>	14 h	Permanent Supportive Housing

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Chief Patron: Anderson

Item 325 #4h

**Health and Human Resources**

**FY 14-15**

**FY 15-16**

Department For Aging And  
Rehabilitative Services

\$1,292,403

\$1,354,680 GF

**Language:**

Page 295, line 36, strike "\$97,360,241" and insert "\$98,652,644".

Page 295, line 36, strike "\$97,340,241" and insert "\$98,694,921".

**Explanation:**

(This amendment adds \$1.3 million the first year and \$1.4 million the second year to restore the budget reduction in the introduced budget along with previous reductions from prior years for long-term employment support services and extended employment services for individuals with disabilities.)

Chief Patron: Anderson

Item 325 #13h

**Health and Human Resources**

Department For Aging And  
Rehabilitative Services

Language

**Language:**

Page 297 after line 24, insert:  
"N. Effective July 1, 2016, 60 percent of the funds appropriated for long-term employment support services (LTESS) shall be used to support employees with significant disabilities who are competitively employed in integrated jobs in the community earnings at or above the federal minimum wage as prescribed by the U.S. Fair Labor Standards Act (29 U.S.C. & 201 et seq.). This percentage shall increase by 10 percent in subsequent years."

**Explanation:**

(This amendment adds language requiring that 60 percent of LTESS funds only be used to support individuals who are working in supported, competitive, integrated employment in the community and receiving at least minimum wage.)

Chief Patron: Anderson

Item 335 #1h

*Request to Amend House Bill 1400, as Introduced*

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department Of Social Services	\$0	\$1,604,306	GF

**Language:**

Page 303, line 23, strike "\$259,822,401" and insert "\$261,426,707".

Page 305, after line 17, insert:

"M. Contingent on the implementation of a fee-based fingerprint background check process for child care workers, there is hereby created in the state treasury a special non-reverting fund to be known as the Virginia Child Care Protection and Quality Innovation Fund, hereafter referred to as the "CC Fund." The CC Fund shall be comprised of fees collected from child care workers for the cost of fingerprint background checks and shall be used to pay for the cost of the checks. Any funds remaining in the CC Fund after the costs for the checks have been covered may be used to subsidize the cost of the fingerprint background checks or to support other child care safety initiatives. The CC Fund shall be established on the books of the Comptroller and any monies remaining in the fund at the end of each fiscal year shall not revert to the general fund but shall remain in the fund for purposes of the Comptroller's preliminary and final annual reports; however, all deposits to the and disbursement from the CC Fund shall be accounted for as part of the general fund of the state treasury."

**Explanation:**

(This amendment provides \$1.6 million general fund the second year as start-up funding to support implementation of a fingerprint background check program for all licensed child care providers. Language establishes a special non-reverting fund which will be used to deposit fees from the fingerprint background check process for child care works, and pay for the cost of the fingerprint background checks. To the extent that the fees collected exceed the cost of the fingerprint background checks, the fund may be used to subsidize the cost of the fingerprint background checks or support other child care safety initiatives.)

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Chief Patron: BaCote

Item 341 #5h

Co-Patron(s): Hester, James, McClellan, McQuinn,  
Murphy, Plum, Rasoul, Ward

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department Of Social Services	\$0	\$2,000,000	NGF

**Language:**

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Page 309, line 19, strike "\$25,450,789" and insert "\$27,450,789".

Page 309, line 48, strike the second "\$1,000,000" and insert "\$3,000,000".

**Explanation:**

(This amendment provides \$2.0 million in additional nongeneral fund support the second year for Community Action Agencies to expand services for child care, community and economic development, education, employment, training, health and nutrition counseling, housing and transportation. The additional funding comes from the Temporary Assistance for Needy Families grant.)

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Chief Patron: Bell, Richard

Item 279 #1h

**Health and Human Resources**

Comprehensive Services For  
At-Risk Youth And Families

Language

**Language:**

Page 242, line 36, after "students" insert ", either".

Page 242, line 37, after "(IEP)" insert: "or regular educational curriculum. This funding shall also apply to students whose placement in or admittance to state or privately operated psychiatric or residential treatment facilities for non-educational reasons has been authorized by Medicaid. The State Executive Council shall develop policies and procedures to ensure implementation of this item no later than July 1, 2015."

**Explanation:**

(This amendment provides that funding to meet the educational needs of students in psychiatric or residential treatment facilities shall not only apply to students with an Individual Education Plan but also in a regular academic curriculum.)

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Chief Patron: Cox, Kirk

Item 301 #4h

Co-Patron(s): Fowler, Landes

**Health and Human Resources**

Department Of Medical Assistance  
Services

**FY 14-15**

**FY 15-16**

\$0

\$5,250,000

GF

\$0

\$5,250,000

NGF

**Language:**

Page 257, line 32, strike "\$8,515,698,638" and insert "\$8,526,198,638".

Page 281, after line 10, insert:

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"OOOO. The Department of Medical Assistance Services shall seek federal approval to implement an individual support waiver for individuals with intellectual and developmental disabilities who are currently on the waiting list for Medicaid intellectual or development disability waiver services to be effective July 1, 2015. The purpose of the waiver is to promote person-centered planning and provide for individual support needs in the community at a lower per person cost than the other three Medicaid waivers for individuals with intellectual and developmental disabilities. Enrollment will be limited to individuals whose needs can be appropriately met within an aggregate cost of up to \$30,000 per person per year. Individuals whose support needs exceed the per person funding will be prioritized for funding through the other waiver programs which serve individuals with intellectual and developmental disabilities."

**Explanation:**

(This amendment provides \$5.3 million from the general fund and a like amount of federal Medicaid matching funds for a new Medicaid home- and community-based waiver program for 325 individuals with intellectual and developmental disabilities who are currently on the waiting list for Medicaid waiver services, but who have modest support needs with an average annual cost of \$30,000. Language is added for the Department of Medical Assistance Services to develop this waiver program and implement it by July 1, 2015.)

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Chief Patron: Cox, Kirk

Item 325 #5h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department For Aging And Rehabilitative Services	\$0	\$2,225,000	GF

**Language:**

Page 295, line 36, strike "\$97,340,241" and insert "\$99,565,241".

Page 296, line 18, strike "\$4,308,981" and insert "\$6,533,981".

**Explanation:**

(This amendment adds \$2.2 million from the general fund the second year for brain injury core services (case management, transitional day programs and resource coordination) in unserved and underserved areas of the Commonwealth. Funding would address waiting lists, expand community capacity and ensure continuation of the Virginia Statewide Trauma Registry outreach to persons with brain injury.)



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Chief Patron: DeSteph

Item 301 #27h

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

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department Of Medical Assistance	\$0	\$163,605	GF
Services	\$0	\$163,006	NGF

**Language:**

Page 257, line 32, strike "\$8,515,698,638" and insert "\$8,516,025,249".

Page 273, after line 4, insert:

"6. The department shall amend the State Plan for Medical Assistance to reimburse the price-based operating rate rather than the transition operating rate to any nursing facility whose licensed bed capacity decreased by at least 30 beds after 2011 and whose occupancy increased from less than 70 percent in 2011 to more than 80 percent in 2013. The department shall have the authority to implement this reimbursement change effective July 1, 2015 and prior to completion of any regulatory process in order to effect such change."

**Explanation:**

(This amendment provides funding to hold harmless any nursing facility which was negatively impacted by the conversion from a cost-based reimbursement methodology to a price-based reimbursement methodology for Medicaid nursing facility payments because the methodology did not account for recent facility improvements to provide high quality care. The transition rates that would be imposed on such facilities are based on a three-year period, which penalizes facilities which have recently improved care and invested significant funds to improve the facility. Language is added to outline criteria to reimburse facilities in such circumstances at the price-based operating rate instead of the transition operating rate effective July 1, 2015.)

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Chief Patron: Farrell

Item 291 #4h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department Of Health	\$0	\$400,000	GF

**Language:**

Page 250, line 27, strike "\$14,591,833" and insert "\$14,991,833".

Page 253, line 26, strike the second "247,313" and insert "647,313."

Page 253, line 28, after "system." insert:

"Of the amount provided for the second year, \$400,000 shall be used to support the

Virginia All Payer Claims Database."

**Explanation:**

(This amendment provides \$400,000 from the general fund in fiscal year 2016 for the Virginia Health Information to support the costs of operating the Virginia All Payer Claims Database to facilitate data-driven, evidence-based improvements in access quality and the cost of health care. The database is also intended to promote and improve public health through the understanding of health care claims, pharmacy claims and providers records, and increase transparency for other health care services.)

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Chief Patron: Garrett

Item 301 #15h

Co-Patron(s): Landes

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department Of Medical Assistance	\$0	\$9,798,855	GF
Services	\$0	\$9,798,855	NGF

**Language:**

Page 257, line 32, strike "\$8,515,698,638" and insert "\$8,535,296,348".

Page 279, after line 38, insert:

"5. The Department of Medical Assistance Services shall have the authority to amend the State Plan for Medical Assistance Services to implement a supplemental Medicaid payment for all hospitals that are rural as defined by regulations promulgated by the Centers for Medicare and Medicaid Services to be effective July 1, 2015. The total supplemental Medicaid payment shall be based on the Upper Payment Limit approved by the Centers for Medicare and Medicaid Services and all other Medicaid Payments, not to exceed the amount appropriated for such purpose in this item. The Department shall have the authority to implement this change prior to the completion of any regulatory process undertaken in order to effect such changes."

**Explanation:**

(This amendment provides the Department of Medical Assistance Services with the authority to implement supplemental Medicaid payments to rural hospitals based on the upper payment limit approved by the Centers for Medicare and Medicaid, not to exceed \$9.8 million from the general fund and \$9.8 million from matching federal Medicaid fund appropriated in fiscal year 2016 for this purpose. The general fund amount shall be provide from the sale of unclaimed equities by the Treasury Department.)

Chief Patron: Garrett

Item 301 #16h

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 261, line 6, strike "and".

Page 261, line 8, after "effective", insert:

"and (vii) appropriate exclusions for medications used in the treatment of epilepsy, including medications used in the treatment of individuals with a diagnosis of seizure disorder".

**Explanation:**

(This amendment adds to existing budget language directing the Pharmacy and Therapeutics Committee to recommend to the Department of Medical Assistance Services certain exclusions for medications subject to the Medicaid Preferred Drug List. Language would include an exclusion for medications used to treat epilepsy, including medications used to treat individuals with the diagnosis of seizure disorder.)

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Chief Patron: Greason

Item 278 #1h

**Health and Human Resources**

Secretary Of Health And Human  
Resources

Language

**Language:**

Page 238, after line 45, insert:

"C. The Secretary of Health and Human Resources shall undertake a study of health care provider assessment options for the Medicaid program and develop recommendations for implementation in fiscal year 2016, provided that the study yields a program that: (i) complies with applicable federal law and regulations; (ii) is designed to operate in a fashion that is mutually beneficial to the Commonwealth and affected health care organizations; (iii) addresses health system challenges supporting health professional education and preserving access to essential health care services (e.g. trauma programs, obstetrical care) throughout the Commonwealth; and (iv) advances reforms that are consistent with the goals of improved health care access, lower overall costs and better health for Virginians. In undertaking the study, the Secretary's office shall be assisted by the Department of Medical Assistance

Services, the Virginia Center for Healthcare Innovation, the Virginia Hospital & Healthcare Association and other potentially affected healthcare provider groups. The resulting report and findings shall be provided to the Chairmen of the House Appropriations and Senate Finance Committees by November 2, 2015."

**Explanation:**

(This amendment requires the Secretary of Health and Human Resources to study health care provider assessment options and develop recommendations for implementation in fiscal year 2016. A companion amendment in Item 301 eliminates language requiring a pilot program to implement a hospital provider assessment to adjust Medicaid hospital rates.)

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Chief Patron: Greason

Item 301 #29h

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 280, strike lines 54 through 57.

Page 281, strike lines 1 through 10.

**Explanation:**

(This amendment eliminates language requiring a pilot program to implement a hospital provider assessment to adjust Medicaid hospital rates. A companion amendment in Item 278 requires the Secretary of Health and Human Resources to study health care provider assessment options and develop recommendations for implementation in fiscal year 2016.)

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Chief Patron: Greason

Item 301 #31h

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 258, line 20, after "expenditures", insert:

"The Department of Medical Assistance Services shall develop and implement, prior to completion of any regulatory process undertaken in order to effect such change, a pilot program to use nongeneral funds in excess of the general funds appropriated in

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this item for purposes of accessing additional federal funding to reimburse indigent care and graduate medical education costs at Type 2B hospitals generated from an annual assessment paid by all Type 2B hospitals that shall not exceed six percent of the annual net patient revenues of each hospital or the maximum allowable under federal regulations with respect to upper payment limits, whichever is less. The assessment authorized under this article, once imposed, shall be implemented as a health care related fee as defined under section 1903(w)(3) of the Social Security Act (49 Stat. 620, 42 U.S.C. § 1396b(w)(3)(B)) or any amendments thereto and may be collected only to the extent and for the periods that the department determines that revenues generated by the assessment will qualify as the State share of program expenditures eligible for federal financial participation. No more than ten percent of the nongeneral fund proceeds collected through the annual hospital assessment payments, may be transferred to the Virginia Health Care Fund. For purposes of this Subdivision and paragraph B.4. of this item "Type 2B hospitals" means any hospital within the Commonwealth, public or private, that does not currently qualify as a Type 1 hospital and meets each of the following: (i) is a teaching hospital for graduate medical education programs, (ii) is designated as a Level 1 Trauma Center, (iii) is licensed for 500 or more beds, and (iv) reported at least \$100 million in gross charity care to Virginia Health Information in 2012. Neither the Type 2B classification established in this subdivision, nor any formula based on this classification, may be utilized to reduce Medicaid supplemental payments that are received by the Type 1 teaching hospitals."

Page 258, line 22, after "hospitals,", insert:

", Type 2B hospitals as established in paragraph B3 of this item,".

Page 258, line 24 after "hospitals" insert:

"and Type 2B hospitals".

Page 258, line 31, after "to 1.0.", insert:

"The department shall have authority to implement similar adjustments for Type 2B hospitals as those set forth above for Type 1 hospitals to the extent such adjustments can be accomplished using nongeneral funds appropriated in this item pursuant to paragraph B.3. of this item."

Page 258, line 33, after "change.", insert:

"The department shall implement any necessary changes required to collect the hospital assessment revenue generated pursuant to paragraph B.3. of this item prior to completion of any regulatory process undertaken to effect such change. The department is authorized to promulgate such emergency regulations to effect the changes set forth in paragraphs B.3. and B.4. of this item within 280 days or less from the enactment of this act. The department shall report on its implementation of the Type 2B hospital reimbursement system, established pursuant to paragraph B.3.

of this item and this Subdivision, to the Chairmen of the House Appropriations and Senate Finance Committees, the Department of Planning and Budget and the Auditor of Public Accounts by December 15 of each year."

**Explanation:**

(This amendment adds language to establish a new category of hospital (Type 2B) for purposes of federal Medicaid reimbursement through revenue optimization based on several criteria including its teaching mission for graduate medical education, size, extent of charity care, status as a Level I Trauma Center and net revenues. Criteria would qualify at least three hospital systems in Virginia: Carilion, Inova and Sentara. In addition, language provides authority for the imposition of an assessment net revenues of qualified Type 2B hospitals to use in maximizing Medicaid payments to these hospitals. Language allows for no more than 10 percent of the nongeneral fund proceeds from such assessment to be deposited into the Virginia Health Care Fund which is used to reduce the state's general fund expenditures for the Medicaid program. This revenue maximization strategy will help to mitigate disproportionate indigent care costs incurred by these hospitals without placing any additional financial burden on the state budget or reducing resources for the state teaching hospitals or any other hospital. This additional funding will protect the financial viability of these three private level one trauma centers, and enable them to maintain indigent care access and physician residency education programs in our communities in light of eminent federal funding reductions. Currently, every state in the South, except Virginia, uses revenue optimization to help fund indigent care. Virginia uses revenue optimization at present for intermediate care facilities for the intellectually disabled and at the two state teaching hospitals. Virginia has also used other related strategies in the past such as intergovernmental transfers. As of 2014, 49 of 50 states plus the District of Columbia use federal revenue optimization in some form. Only Alaska does not use this strategy in some form.)

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Chief Patron: Head

Item 301 #28h

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 281, after line 10, insert:

"OOOO. Notwithstanding § 32.1-330 of the Code of Virginia, all individuals who will be eligible for community or institutional long-term care services as defined in

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the state plan for medical assistance shall be evaluated to determine their need for nursing facility services as defined in that plan. The Department shall require a preadmission screening of all individuals who, at the time of application for admission to a certified nursing facility as defined in §32.1-123, are eligible for medical assistance or will become eligible within six months following admission. Screenings may be performed by a team of licensed physicians, nurses, and social workers at the Woodrow Wilson Rehabilitation Center (WWRC) for WWRC clients only. For institutional screening, the Department shall contract with acute care hospitals. The Department shall contract with other public or private entities to conduct required community-based and institutional screenings in addition to or in lieu of the screening teams described in this section. The department shall have the authority to implement this reimbursement change effective July 1, 2015 and prior to completion of any regulatory process in order to effect such change."

**Explanation:**

(This amendment modifies existing authority in the Code of Virginia for preadmission screening for individuals eligible for Medicaid community or institutional Medicaid long-term care. A requirement for community-based screening to be conducted by a screening team comprised of a physician, nurse, social worker or other assessor employed by the Department of Health or the local department of social services has been eliminated. Instead language requires the Department of Medical Assistance Services to contract with public or private entities for these screenings. Finally, language is added to give DMAS the ability to implement the contracts in fiscal year 2016 prior to the completion of the regulatory process.)

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Chief Patron: Hester

Item 466 #1h

Co-Patron(s): BaCote, Lindsey, McClellan, McQuinn,  
Rasoul, Simon, Tyler

<b>Central Appropriations</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Central Appropriations	\$3,500,000	\$3,500,000	NGF

**Language:**

Page 427, line 2, strike "\$119,423,439" and insert "\$122,923,439".

Page 427, line 2, strike "\$119,327,905" and insert "\$122,827,905".

Page 427, line 20, strike "8.5" and insert "10".

Page 427, line 22, strike "\$9,423,439" and insert "\$12,923,439".

Page 427, line 23, strike "\$9,327,905" and insert "\$12,827,905".

**Explanation:**

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(This amendment restores \$3.5 million each year from nongeneral funds as the percentage of the Master Settlement Agreement with tobacco product manufacturers that is allocated to the Virginia Tobacco Settlement Fund to 10 percent. Chapter 874 of the 2010 Virginia Acts of Assembly reduced the allocation to 8.5 percent and transferred that amount into the Virginia Health Care Fund to offset the general fund cost of FAMIS, the children's health insurance program.)

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Chief Patron: Hodges

Item 308 #9h

**Health and Human Resources**

**FY 14-15**

**FY 15-16**

Grants To Localities

\$0

\$7,000,000 GF

**Language:**

Page 287, line 20, strike "\$369,373,536" and insert "\$376,373,536".

**Explanation:**

(This amendment provides \$7.0 million the second year from the general fund for the statewide expansion of services to fill gaps in the existing continuum of care for opiate addiction treatment. The funds will go to each of the seven Health Planning Regions in the Commonwealth to allow each region to target gaps in the existing service systems. A standardized, statewide approach to the treatment of opiate addiction and associated deaths is necessary in order to immobilize the opiate epidemic and associated negative community impacts.)

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Chief Patron: Hodges

Item 308 #10h

**Health and Human Resources**

**FY 14-15**

**FY 15-16**

Grants To Localities

\$960,000

\$2,220,000 GF

**Language:**

Page 287, line 20, strike "\$348,612,156" and insert "\$349,572,156".

Page 287, line 20, strike "\$369,373,536" and insert "\$371,593,536".

**Explanation:**

(This amendment provides \$960,000 the first year and \$2.2 million the second year from the general fund to expand a pilot program for adults with substance use disorders who have completed treatment and who are successfully engaged in early



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recovery and include supports to secure employment, address health care issues, and resolve family and housing concerns. During the second year of the biennium, the pilot will expand into far Southwest Virginia.)

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Chief Patron: Hodges

Item 308 #11h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Grants To Localities	\$0	\$4,000,000	GF

**Language:**

Page 287, line 20, strike "\$369,373,536" and insert "\$373,373,536".

**Explanation:**

(This amendment provides \$4.0 million the second year from the general fund to expand existing peer support programs for individuals recovering from substance use disorders and sometimes co-occurring with mental illness. The services funded include peer mentoring, resource brokering, recovery community building, and recovery groups. They can also provide outreach services to various locations in the community.)

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Chief Patron: Hope

Item 301 #26h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department Of Medical Assistance	\$0	\$27,272,000	GF
Services	\$0	\$27,272,000	NGF

**Language:**

Page 257, line 32, strike "\$8,515,698,638" and insert "\$8,570,242,638".

Page 269, line 41, strike "410" and insert "1,210".

**Explanation:**

(This amendment provides funding to add 800 new Medicaid home- and community-based waiver slots in fiscal year 2016 for individuals with intellectual disability (ID). This will add to those slots required by the U.S. Department of Justice Settlement Agreement and aid in decreasing the ID waiver waiting list.)

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Chief Patron: Hope

Item 325 #11h

*Request to Amend House Bill 1400, as Introduced*

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department For Aging And Rehabilitative Services	\$1,292,403	\$1,354,680	GF

**Language:**

Page 295, line 36, strike "\$97,360,241" and insert "\$98,652,644".

Page 295, line 36, strike "\$97,340,241" and insert "\$98,694,921".

**Explanation:**

(This amendment provides \$1.3 million the first year and \$1.4 million the second year to restore the budget reduction in the introduced budget along with previous reductions from prior years for long-term employment support services and extended employment services for individuals with disabilities. Funding for these services has been reduced by 20 percent since fiscal year 2007, while the need for services has increased each year.)

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Chief Patron: Hugo

Item 325 #12h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department For Aging And Rehabilitative Services	\$125,000	\$125,000	GF

**Language:**

Page 295, line 36, strike "\$97,360,241" and insert "\$97,485,241".

Page 295, line 36, strike "\$97,340,241" and insert "\$97,465,241".

Page 297, after line 24, insert:

"N. Out of this appropriations, \$125,000 from the general fund each year is provided to the ENDependence Center of Northern Virginia to assist individuals with disabilities."

**Explanation:**

(This amendment provides \$125,000 from the general fund each year to the ENDependence Center of Northern Virginia to assist individuals with disabilities receive training to live independently. Funding for this amendment shall be taken from the proposed funding for voting machines.)

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Chief Patron: Ingram

Item 301 #1h

*Request to Amend House Bill 1400, as Introduced*

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department Of Medical Assistance	\$0	\$13,602,049	GF
Services	\$0	\$13,602,049	NGF

**Language:**

Page 257, line 32, strike "\$8,515,698,638" and insert "\$8,542,902,736".

Page 280, strike lines 6 through 10.

Page 280, line 11, strike "JJJJ" and insert "IIII".

Page 280, line 16, strike "KKKK" and insert "JJJJ".

Page 280, line 24, strike "LLLL" and insert "KKKK".

Page 280, line 40, strike "MMMM" and insert "LLLL".

Page 280, line 54, strike "NNNN" and insert "MMMM".

**Explanation:**

(This amendment restores funding for an inflation adjustment to Medicaid nursing facility operating payments in fiscal year 2016. It also deletes language contained in the budget which eliminates these adjustments for fiscal year 2016.)

---

Chief Patron: Ingram

Item 301 #2h

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 281, after line 10, insert:

"There is hereby appropriated sum-sufficient nongeneral funds for the Department of Medical Assistance Services (DMAS) to pay the state share of supplemental payments for qualifying private hospitals as provided in the State Plan for Medical Assistance Services. Qualifying private hospitals shall consist of any hospital currently enrolled as a Virginia Medicaid provider that meets the requirements of the State Plan for Medical Assistance Services amendments 11-018 and 11-019 submitted to the Centers for Medicare and Medicaid Services on or about December 20, 2011. The supplemental payments shall be based upon the approved reimbursement methodology therein. DMAS shall enter into a transfer agreement with agencies within the Secretariat of Health and Human Resources, who are authorized to transfer to DMAS funding for the state share of these private hospital supplemental payments. The department shall have the authority to implement these reimbursement changes consistent with the effective date in the State Plan

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amendment approved by CMS and prior to completion of any regulatory process in order to effect such changes."

**Explanation:**

(This amendment authorizes agencies within the Secretariat of Health and Human Resources to transfer funds to the Department of Medical Assistance Services to be used to pay the state share of Medicaid supplemental payments to qualifying hospitals. These Medicaid supplemental payments reimburse qualifying hospitals for their uncompensated costs for Medicaid services they have already provided.)

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Chief Patron: Ingram

Item 308 #7h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Grants To Localities	\$2,000,000	\$2,054,592	GF

**Language:**

Page 287, line 20, strike "\$348,612,156" and insert "\$350,612,156".

Page 287, line 20, strike "\$369,373,536" and insert "\$371,428,128".

Page 288, line 2, strike the first "\$13,203,366" and insert "\$15,203,366".

Page 288, line 2, strike the second "\$13,203,366" and insert "\$15,257,958".

**Explanation:**

(This amendment increases funding by \$2.0 million from the general fund each year for Part C Early Intervention Services for infants and toddlers with disabilities ages birth to age three. This funding is necessary to (1) cover a projected deficit in the current year which would result in placing infants and toddlers with disabilities on waiting lists and/or reducing services, and (2) meet the increase in the number of referrals and to prevent wait lists and provide the needed services. These services help to reduce school-based special education services and health costs later in life.)

---

Chief Patron: Ingram

Item 308 #8h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Grants To Localities	\$0	\$2,200,640	GF

**Language:**

Page 287, line 20, strike "\$369,373,536" and insert "\$371,574,176".

Page 288, line 2, strike the second "\$13,203,366" and insert "\$15,404,006".

**Explanation:**

(This amendment adds \$2.2 million from the general fund the second year to provide increased rates for Part C Early Intervention Services case management from \$132 per month per child to \$175.40 for infants and toddlers with disabilities who are Medicaid-eligible. This is the appropriate rate for the service according to the Department of Medical Assistance Services study. By not fully funding the cost of the service, other sources of funding must be used to cover the cost of the Medicaid service. Using non-Medicaid funds decreases the amount of funding available for those infants and toddlers who are not eligible for Medicaid. This funding will cover 5,094 Medicaid-eligible infants in fiscal year 2016.)

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Chief Patron: Ingram

Item 341 #1h

Co-Patron(s): Albo, Bell, Robert, Kilgore, Landes, McClellan, O'Bannon, Rasoul, Wilt

**Health and Human Resources**

Department Of Social Services

Language

**Language:**

Page 310, strike lines 38 through 47 and insert:

"department shall allocate four percent to Children's Advocacy Centers of Virginia (CACVA), the recognized chapter of National Children's Alliance for Virginia's child advocacy centers, for the purpose of assisting and supporting the development, continuation and sustainability of community-coordinated, child-focused services delivered by children's advocacy centers. Of the remaining 96 percent (i) 65 percent shall be distributed to a baseline allocation determined by the accreditation status of the child advocacy center; (a) developing and associate centers 100 percent of base; (b) accredited centers 150 percent of base; and (c) accredited centers with satellite facilities 175 percent of base; and (ii) 35 percent shall be allocated according to established criteria to include: (a) 25 percent determined by the rate of child abuse per 1000; (b) 25 percent determined by child population; and (c) 50 percent determined by the number of counties and independent cities serviced."

**Explanation:**

(This amendment alters the funding methodology used to distribute funds to child advocacy centers (CACs) which has become outdated due to a substantial growth in CACs and a shift in the number of CACs from associate membership to accredited membership. The proposed change anticipates continued growth of satellite centers which are not supported by the current formula. The proposed formula (i) provides

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incentives for National Children's Advocacy Accreditation; (ii) eliminates pitting one CAC against another; (iii) eliminates subjective criteria; and (iv) provides fairness in distribution.)

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Chief Patron: Joannou

Item 341 #7h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department Of Social Services	\$0	\$25,000	NGF

**Language:**

Page 309, line 19, strike "\$25,450,789" and insert "\$25,475,789".

Page 311, after line 39 insert:

"M. Out of this appropriation, \$25,000 the second year from the federal Temporary Assistance to Needy Families block grant shall be provided to Zion Innovative Opportunities Network."

**Explanation:**

(This amendment provides \$25,000 the second year from the federal Temporary Assistance to Needy Families block grant funds to the Zion Innovative Opportunities Network to operate a job development program for at-risk youth.)

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Chief Patron: Kilgore

Item 291 #2h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department Of Health	\$126,000	\$0	GF

**Language:**

Page 250, line 27, strike "\$14,591,833" and insert "\$14,717,833".

Page 253, line 29, strike the first "\$76,712" and insert "\$202,712".

**Explanation:**

(This amendment provides an additional \$126,000 from the general fund in fiscal year 2015 for the Health Wagon to address needs of uninsured and underinsured patients and make up for lost local resources.)

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Chief Patron: Kilgore

Item 291 #3h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
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*Request to Amend House Bill 1400, as Introduced*

Department Of Health \$274,500 \$0 GF

**Language:**

Page 250, line 27, strike "\$14,591,833" and insert "\$14,866,333".

Page 252, line 23, strike the first "\$164,758" and insert "\$439,258".

**Explanation:**

(This amendment provides an additional \$274,500 from the general fund in fiscal year 2015 for the Graduate Medical Education Consortium (GMEC) of Southwest Virginia to build additional rural physician rotation capacity in the Lenowisco Health District. This additional funding will enable GMEC to place a full-time physician at the Health Wagon whose contract would include accepting ten residents for a one-month rural rotation each to expand patient capacity and expose medical students to the unique characteristics of treating patients in a rural setting. Such exposure could potentially increase the number of physicians who choose to practice primary care in rural settings.)

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Chief Patron: Kilgore

Item 326 #3h

Co-Patron(s): Campbell, Morefield, O'Quinn, Pillion

**Health and Human Resources**

**FY 14-15**

**FY 15-16**

Department For Aging And  
Rehabilitative Services

\$250,000

\$250,000 GF

**Language:**

Page 297, line 26, strike "\$33,409,809" and insert "\$33,659,809".

Page 297, line 26, strike "\$33,409,809" and insert "\$33,659,809".

**Explanation:**

(This amendment provides \$250,000 each year from the general fund to restore funding for the Pharmacy Connect Program administered by Mountain Empire Older Citizens, Inc.)

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Chief Patron: Kilgore

Item 341 #4h

Co-Patron(s): Fariss, Rasoul

**Health and Human Resources**

**FY 14-15**

**FY 15-16**

Department Of Social Services

\$0

\$2,000,000 NGF

**Language:**

Page 309, line 19, strike "\$25,450,789" and insert "\$27,450,789".

Page 309, line 48, strike the second "\$1,000,000" and insert "\$3,000,000".

**Explanation:**

(This amendment provides \$2.0 million from nongeneral funds in additional support for Community Action Agencies to expand services for child care, community and economic development, education, employment, training, health and nutrition counseling, housing and transportation. The additional funding comes from the Temporary Assistance for Needy Families block grant.)

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Chief Patron: Landes

Item 288 #1h

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

**Health and Human Resources**

Department Of Health

Language

**Language:**

Page 248, after line 8, insert:

"F. The Virginia Department of Health (VDH) shall issue risk mitigation guidelines on the prescription of the class of potent pain medicines known as extended-release and long-acting (ER/LA) opioid analgesics to include co-prescription of an opioid antagonist, approved by the U.S. Food and Drug Administration (FDA), for administration by family members or caregivers in a non-medically supervised environment."

**Explanation:**

(This amendment adds language requiring the Virginia Department of Health (VDH) to issue guidelines on the prescription of certain pain medicines. Opioid overdose continues to be a major public health problem in the United States. It has contributed significantly to accidental deaths among those who use prescription opioids. Opioid overdose is the number one cause of accidental death in the United States, eclipsing automobile accidents (unintentional opioid overdose kills one person every 36 minutes in this country). This increase coincides with a nearly fourfold increase in the use of prescribed opioids for the treatment of pain. With appropriate education, patients on long-term opioid therapy, and others at risk for overdose, can benefit from the availability of FDA approved opioid antagonists to utilize in the event of a known or suspected overdose. VDH guidelines will assist in mitigating the risk of opioid overdose and adverse reactions in cases of overdose.)



Chief Patron: Landes

Item 301 #5h

Co-Patron(s): Cox, Kirk

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 281, after line 10, insert:

"OOOO. The Department of Medical Assistance Services (DMAS) shall transfer the administration of specialized intellectual disability (ID) and developmental disability (DD) services to the Department of Behavioral and Developmental Services effective July 1, 2016. The Director of DMAS, in consultation with the Commissioner of DBHDS, shall identify the specific ID and DD services that shall be transferred to DBHDS as well as appropriate administrative costs. The Director of DMAS shall report on the planned transfer of specialized ID and DD services as well as the plan to administer these services to the Chairmen of the Senate Finance and House Appropriations Committee by October 1, 2015. DMAS shall continue to oversee the administration of Medicaid as required by federal law."

**Explanation:**

(This amendment requires the Department of Medical Assistance Services to transfer budget and operational authority of specialized intellectual disability and developmental to the Department of Behavioral Health and Developmental Services by July 1, 2015. Budget language requires DMAS to identify the services that will be transferred and report to the money committees by October 1, 2015.)

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Chief Patron: Landes

Item 301 #6h

Co-Patron(s): Pogge

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 281, after line 10, insert:

"OOOO. The Department of Medical Assistance Services (DMAS) shall evaluate the costs incurred by Medicaid providers to participate in the Commonwealth

Coordinated Care program."

**Explanation:**

(This amendment adds language directing the Department of Medical Assistance Services to assess the costs for a provider to participate in the Commonwealth Coordinated Care program, a demonstration program involving the care of individuals dually eligible for the Medicare and Medicaid programs. When the program was implemented, many long-term care providers contracted with managed care plans to provide coordinated services to this population. In order to participate in a plan, many providers had to develop or upgrade processes and/or technology in order to process claims, in some cases requiring the hiring of additional staff. This has resulted in additional costs to these providers.)

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Chief Patron: Landes

Item 301 #7h

Co-Patron(s): Pogge

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 281, after line 10, insert:

"OOOO. The Department of Medical Assistance Services (DMAS) shall require Medicare and Medicaid Managed Care Plans to develop and implement electronic claims processing portals by July 1, 2015, as a condition of participation in the Commonwealth Coordinated Care program."

**Explanation:**

(This amendment adds language directing the Department of Medical Assistance Services to require Medicare and Medicaid managed care plans that participate in the Commonwealth Coordinated Care program to develop and implement electronic claims processing portals for providers by July 1, 2015 as a condition of participation in the program. When the program was implemented, many long-term care providers contracted with managed care plans to provide coordinated services to this population. In order to participate in a plan, many providers had to develop or upgrade processes and/or technology in order to process claims, in some cases requiring the hiring of additional staff. Two of the three managed care plans have failed to develop portals in a timely manner to assist small providers participating in the program with their added administrative costs.)

*Request to Amend House Bill 1400, as Introduced*

Chief Patron: Landes

Item 301 #32h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department Of Medical Assistance	\$0	(\$4,283,004)	GF
Services	0.00	-1.00	FTE

**Language:**

Page 257, line 32, strike "\$8,515,698,638" and insert "\$8,511,415,634".

**Explanation:**

(This amendment eliminates funding and one position in the second year for a new Medicaid Central Processing Unit. In fiscal year 2014, funding totaling \$3.6 million from the general fund and \$18.5 million from enhanced federal Medicaid matching funds was provided for a centralized Medicaid/FAMIS customer service call center. The centralized call center assists applicants and/or recipients and enables the Department of Medical Assistance Services to take applications telephonically, including recorded signatures per federal regulations. The introduced budget proposed to expand the duties of the call center to include a central processing unit to process simple Medicaid applications received through the federal health insurance exchange and or through the online system. Local departments of social services have responsibility for Medicaid eligibility processing already and the new electronic eligibility system for Medicaid cases has vastly improved their ability to process these cases, likely resulting in a lower per unit cost.)

Chief Patron: Landes

Item 301 #33h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department Of Medical Assistance	\$0	(\$90,690)	GF
Services	\$0	(\$90,690)	NGF
	0.00	-1.00	FTE

**Language:**

Page 257, line 32, strike "\$8,515,698,638" and insert "\$8,515,517,258".

**Explanation:**

(This amendment eliminates funding for two new positions the second year at the Department of Medical Assistance Services. The introduced budget added these positions to assist with new agency initiatives. Given the extent of state agency

budget reductions, the need for these new positions does not appear to be well justified.)

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Chief Patron: Landes

Item 306 #1h

**Health and Human Resources**

Department Of Behavioral Health  
And Developmental Services

Language

**Language:**

Page 284, strike lines 37 through 45 and insert:

"C. Notwithstanding § 4-5.12 and § 4-5.09 of this act and paragraph C. of § 2.2-1156, Code of Virginia, the Department of Behavioral Health and Developmental Services (DBHDS) shall allocate \$30 million each year from the DBHDS Trust Fund from the savings associated with downsizing the state training centers to be used to increase the capacity of the intellectual and developmental disability community services system to address the needs of individuals with complex support needs in the most integrated settings as defined by the U.S. Department of Justice Settlement Agreement."

**Explanation:**

(This amendment modifies language related to the Department of Behavioral Health and Developmental Services (DBHDS) Trust Fund to require DBHDS to allocate \$30 million each year from the proceeds of the sales of surplus land at state-owned behavioral health and intellectual disability facilities which is required to be placed into a revolving trust fund. Current language allows use of the trust fund for expenses associated with restructuring such facilities, with remaining proceeds dedicated to continuing services for current patients as facility services are restructured. Thereafter, the fund is to be used to enhance services to individuals with mental illness, intellectual disability, and substance abuse problems. Changes would require dedication of \$30 million each year in the trust fund to be used to expand community capacity to meet the complex support needs of individuals with intellectual disability in the most integrated settings.)

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Chief Patron: Landes

Item 307 #2h

Co-Patron(s): Cox, Kirk

**Health and Human Resources**

Department Of Behavioral Health

**FY 14-15**

\$5,400,000

**FY 15-16**

\$0 GF

And Developmental Services

**Language:**

Page 284, line 51, strike "\$71,784,395" and insert "\$77,184,395".

Page 285, line 20, after "C." insert "1."

Page 285, line 23, after "trust fund.", strike the remainder of the sentence.

Page 285, strike lines 24 through 28 and insert:

"Funds deposited into the trust fund from the sale of property at state-owned intellectual disability facilities and attendant agency cost savings shall be used exclusively to strengthen and enhance community-based services to individuals with intellectual and developmental disabilities. Operational cost savings associated with the provision of Medicaid Intellectual and Developmental Disability Waiver services shall be transferred to the trust fund beginning July 1, 2015, and shall be used exclusively to strengthen and enhance community-based services for individuals with intellectual and developmental disabilities.

2. Out of this appropriation, the department is authorized to spend up to \$30,000,000 nongeneral fund from the trust fund to facilitate restructuring the Intellectual and Developmental Disability service system in order to promote cost-efficiency and community integration. The Commissioner shall ensure mechanisms are in place to address barriers to placement in the community and initiate broader systems changes across Community Services Boards jurisdictions."

**Explanation:**

(This amendment adds \$5.4 million from the general fund the first year to reverse the action taken in the 2014 Special Session that transferred \$5.4 million from the Department of Behavioral Health and Developmental Services Trust Fund to the general fund. The amendment replaces budget language allowing the use of the Trust Fund for expenses associated with restructuring such facilities, dedicating the funds to continuing services for current patients as facility services are restructured or using them to enhance services to individuals with mental illness, intellectual disability and substance abuse problems. Instead, language requires the use of this fund for community-based services to individuals with intellectual and developmental disabilities. Costs savings generated in the agency related to the provision of intellectual and developmental disability services shall also be deposited into the trust fund. Lastly, the department is authorized to expend up to \$30 million from the trust fund to facilitate restructuring of the intellectual and developmental disabilities service system in order to promote cost-efficiency and community integration.)

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department For Aging And Rehabilitative Services	\$0	\$50,000	GF

**Language:**

Page 297, line 26, strike "\$33,409,809" and insert "\$33,459,809".

Page 298, after line 31, insert:

" J. Out of this appropriation, \$50,000 the second year from the general fund is provided for the training of law enforcement and first responder personnel in communicating with and facilitating the safe return of individuals diagnosed with Alzheimer's disease and other forms of dementia. The department shall cooperate with the Department of Criminal Justice Services and any other agency necessary to implement this training."

**Explanation:**

(This amendment provides \$50,000 to the Department for Aging and Rehabilitative Services in cooperation with the Department of Criminal Justice Services to provide Alzheimer's and dementia specific training for law enforcement and first responders.)

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Chief Patron: Landes

Item 4-5.04 #2h

**Special Conditions and Restrictions on Expenditures**

Goods and Services

Language

**Language:**

Page 547, line 10, after "j. MEDICAL SERVICES:", insert "1."

Page 547, line 11, after "federal law" strike "or state statute" 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."

Page 547, after line 11, insert:

"2. No expenditures from general or nongeneral fund sources may be made out of any appropriation by the General Assembly for providing abortion services pursuant to §32.1-92.2 of the Code of Virginia."

**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. It also adds language to prohibit state funding of abortions done because of the fetus' physical deformity or mental deficiency. Adopting this provision would conform Virginia's Medicaid funding of abortions to the federal Hyde policy, under which Medicaid abortions are funded only when the life of the mother is in danger and in cases of rape and incest.)

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Chief Patron: LaRock

Item 4-5.04 #5h

**Special Conditions and Restrictions on Expenditures**

Goods and Services

Language

**Language:**

Page 547, line 10, after "j. MEDICAL SERVICES:", insert "1."

Page 547, line 11, strike "or state statute"

Page 547, after line 11, insert:

"2. No expenditures from general or nongeneral fund sources may be made out of any appropriation by the General Assembly for providing abortion services pursuant to §32.1-92.2 of the Code of Virginia."

**Explanation:**

(This amendment modifies language included in the introduced budget to prohibit state funding of abortions done because of the fetus' physical deformity or mental deficiency. Adopting this provision would conform Virginia's Medicaid funding of abortions to the federal Hyde policy, under which Medicaid abortions are funded only when the life of the mother is in danger and in cases of rape and incest.)

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Chief Patron: LeMunyon

Item 336 #1h

**Health and Human Resources**

Department Of Social Services

Language

**Language:**

Page 306, after line 4, insert:

"G. Each local social services department shall provide to the Department of Social Services by November 1, 2015, the number of Medicaid recipient cases managed by each office as of June 30, 2015 for which there may be recoverable amounts as of that date or any future time, pursuant to 12VAC30-40-10, as well as the number of such

cases in the five most recent calendar years in which the Commonwealth was named as the remainder beneficiary in the first position for at least the total amount of medical assistance paid on behalf of the institutionalized individual, or in which the Commonwealth was named as a beneficiary for at least the total amount of medical assistance paid on behalf of the institutionalized individual in the second position after the community spouse or minor or disabled child, and in which the Commonwealth is named as the beneficiary in the first position if such spouse or a representative of such child disposes of any such remainder for less than fair market value, for the purposes of rendering the purchase of an annuity not a disposition of assets for less than fair market value, in accordance with 42 U.S.C. § 1396p(c)(1)(F)."

**Explanation:**

(This amendment is requires local departments of social services to report to the Department of Social Services the number of Medicaid recipient cases that may have recoverable amounts from annuities or estates of Medicaid beneficiaries by November 1, 2015.)

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Chief Patron: LeMunyon

Item 343 #1h

**Health and Human Resources**

Department Of Social Services

Language

**Language:**

Page 313, after line 57, insert:

"G. The Department of Social Services shall report to the Governor and General Assembly December 1 of each year on the types or sources of information local social services departments use, either directly or through a third party vendor to determine the completeness and correctness of applications for Medical Assistance Services. The department shall provide the details of the information used to verify applicants' identity, income, assets and other information for the purposes of determining Medicaid eligibility. The department shall include in its report the number of applications in the previous fiscal year for which Medicaid was approved, denied, or changed, and the number of cases referred for investigation related to suspected false statements, representations, impersonations or use of fraudulent devices, and the entities to which such referrals were made."

**Explanation:**

(This amendment is self-explanatory.)

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*Request to Amend House Bill 1400, as Introduced*

Chief Patron: Lingamfelter

Item 341 #2h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department Of Social Services	\$0	\$2,700,000	NGF

**Language:**

Page 309, line 19, strike "\$25,450,789" and insert "\$28,150,789".

Page 311, after line 39, insert:

"M. Out of this appropriation, \$2,700,000 the second year from the federal TANF block grant shall be provided for a grant of \$100 on behalf of each child in a TANF-eligible family attending school from kindergarten through 12th grade to acquire school supplies and clothing at the start of each year."

**Explanation:**

(This amendment provides \$2,700,000 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.)

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Chief Patron: Lingamfelter

Item 341 #3h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department Of Social Services	\$0	\$500,000	GF

**Language:**

Page 309, line 19, strike "\$25,450,789" and insert "\$25,950,789".

Page 311, after line 39 insert:

"M. Out of this appropriation, \$500,000 the second year from the general fund is provided to contract with Northern Virginia Family Services to match a private grant to support the family shelter at the Manassas campus that provides families with basic needs in times of crisis."

**Explanation:**

(This amendment provides \$500,000 the second year as matching funds for a private grant to support the family shelter at the Manassas campus of Northern Virginia Family Services. At this facility, families are served by an emergency shelter, food distribution center, emergency assistance, health care and an early childhood development center.)

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Chief Patron: Marshall, Robert

Item 4-5.04 #3h

**Special Conditions and Restrictions on Expenditures**

Goods and Services

Language

**Language:**

Page 547, line 10, after "j. MEDICAL SERVICES:", insert "1."

Page 547, line 11, 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.)

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Chief Patron: McClellan

Item 301 #10h

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 281, after line 10, insert:

"OOOO. The Department of Medical Assistance Services shall amend the State Plan for Medical Assistance Services to establish a process through which eligible individuals who were in foster care upon turning the age of 18 shall, at the time of their 18th birthday or immediately upon exiting the foster care system, be automatically enrolled to receive Medicaid benefits up until the age of 26 as required in Sectional 1902(a)(10)(A)(i)(IX) of the federal Social Security Act (42 U.S.C. Sec. 1396a(a)(10)(A)(i)(IX) without any interruption in coverage and without requiring a new application. The Department shall develop this process, in cooperation with the Department of Social Services. The process shall be implemented within 120 days of the effective approval date by the federal Centers for Medicare and Medicaid."

**Explanation:**

(This amendment requires the Department of Medical Assistance Services to

develop and implement a process to automatically enroll former foster care children in Medicaid at the time that they turn 18 or exit the foster care system. Funding of \$45,000 from the general fund is provided as the general fund match for the information technology costs of building the auto-enroll process into data systems for determining eligibility.)

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Chief Patron: McClellan

Item 325 #7h

**Health and Human Resources**

Department For Aging And  
Rehabilitative Services

Language

**Language:**

Page 297 after line 24, insert:

"N. Effective July 1, 2016, 60 percent of the funds appropriated for long-term employment support services (LTESS) shall be used to support employees with significant disabilities who are competitively employed in integrated jobs in the community earnings at or above the federal minimum wage as prescribed by the U.S. Fair Labor Standards Act (29 U.S.C. & 201 et seq.). This percentage shall increase by 10 percent in subsequent years."

**Explanation:**

(This amendment adds language requiring that 60 percent of LTESS funds only be used to support individuals who are working in supported, competitive, integrated employment in the community and receiving at least minimum wage.)

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Chief Patron: McClellan

Item 325 #8h

**Health and Human Resources**

Department For Aging And  
Rehabilitative Services

**FY 14-15**

\$302,666

**FY 15-16**

\$364,943 GF

**Language:**

Page 295, line 36, strike "\$97,360,241" and insert "\$97,662,907".

Page 295, line 36, strike "\$97,340,241" and insert "\$97,705,184".

**Explanation:**

(This amendment provides \$302,666 the first year and \$364,943 the second year from the general fund to restore proposed cuts in fiscal years 2015 and 2016 for

employment support services for individuals with disabilities. Funding will help Virginia meet its Employment First goals set forth in the U.S. Department of Justice Settlement Agreement.)

---

Chief Patron: O'Bannon

Item 290 #2h

**Health and Human Resources**

Department Of Health

Language

**Language:**

Page 249, line 49, unstrike "\$40.00" and strike "\$285.00".

**Explanation:**

(This amendment modifies language in the introduced budget which would have generated \$6.8 million in additional revenue in fiscal year 2016 by raising restaurant annual permit renewal fees from \$40.00 to \$285.00. A companion amendment in Item 471.10 eliminates language allowing for this action to be included as an agency savings strategy by the Virginia Department of Health.)

---

Chief Patron: O'Bannon

Item 301 #3h

Co-Patron(s): Landes

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 281, after line 10, insert:

"OOOO. Notwithstanding 12VAC30-120-1600 et seq., a resident of a "safe, secure environment" as defined in 22VAC40-72-10 shall be deemed to have met the requirements of 12VAC30-120-1610 B for the purposes of the Alzheimer's Assisted Living Waiver."

**Explanation:**

(This amendment modifies the definition of eligibility criteria for the Medicaid Alzheimer's Assisted Living waiver to more broadly define eligible individuals that may be served by the waiver program. Currently, eligibility criteria for the waiver set forth in the Virginia Administrative Code defines those eligible as individuals with a diagnosis of Alzheimer's or a related dementia, however, it does not recognize the similar needs of individuals with other types of dementia. This change would

allow the waiver to include individuals with a serious cognitive impairment due to a primary psychiatric diagnosis of dementia, as defined in the Virginia Administrative Code within the Standards for Licensed Assisted Living Facilities.)

---

Chief Patron: O'Bannon

Item 307 #4h

**Health and Human Resources**

Department Of Behavioral Health  
And Developmental Services

Language

**Language:**

Page 287, after line 3, insert:

"N. The Department of Behavioral Health and Developmental Services shall set aside a total of 50 Intellectual and Developmental Disability (ID/DD) waiver slots to be allocated from the central office to be used for emergencies in fiscal year 2016."

**Explanation:**

(This amendment directs the agency to set aside 50 ID/DD waiver slots to be allocated in emergency situations by the central office in fiscal year 2016.)

---

Chief Patron: O'Bannon

Item 308 #12h

**Health and Human Resources**

Grants To Localities

Language

**Language:**

Page 290, after line 14, insert:

"CC. The Department of Behavioral Health Services shall use a portion of the Intellectual and Developmental Disability (ID/DD) waiver tracking funds to assess the service and support needs of all Virginians on waiting lists for ID/DD waiver services to accurately establish enrollment priorities, project service costs and develop the capacity needed to serve such individuals. Planning should account for the number of graduates with ID/DD who are exiting secondary education each fiscal year."

**Explanation:**

(This amendment requires the agency to use a portion of "waiver tracking" funds to assess needs of individuals on waiting lists for ID/DD waiver services.)

---

Chief Patron: Peace

Item 301 #17h

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 281, after line 10, insert:

"OOOO. The Department of Medical Assistance Services (DMAS) shall amend its July 1, 2016 managed care contracts in order to conform to the requirement pursuant to House Bill 1942 for prior authorization of drug benefits. The Department shall report the necessary amendments to the Chairmen of the House Appropriations and Senate Finance Committees by December 1, 2015."

**Explanation:**

(This amendment adds language directing the Department of Medical Assistance Services to conform its managed care contracts to the provisions in House Bill 1942, which simplifies, streamlines and applies consistency to the prior authorization process used drug benefits that is required by carriers in health insurance provider contracts.)

Chief Patron: Peace

Item 301 #18h

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 278, line 17, after "ZZZ.", strike the remainder of the line.

Page 278, strike lines 18 through 26 and insert:

"The Department of Medical Assistance Services (DMAS) shall not change the unit of service or rate of reimbursement for Mental Health Skill Building Services (MHSS) or make any further restrictive changes to the accessibility of the service until a comprehensive review of all data, including private provider data, is completed in order to ensure that the review is comprehensive and inclusive of all valid and reliable data. DMAS and the Department of Behavioral Health and Developmental Services shall jointly prepare a report to be delivered by November 1, 2015, to the Chairmen of the House Appropriations and Senate Finance Committees. The report shall document the impact of the MHSS regulations implemented on December 1, 2013, including an explanation of why these changes require a previous

hospitalization to be eligible for the services when the service as changed no longer has a therapeutic component, and include an assessment of the fiscal impact, consumer and family impact, service delivery impact with data from private providers, and impact upon other agencies and facilities in Virginia."

**Explanation:**

(This language amendment prohibits the Department of Medical Assistance Services (DMAS) from modifying the unit of service or rate of reimbursement for Mental Health Skill Building Services prior to a comprehensive review of data is completed. Further, budget language requires a report on the impact of regulations implemented on December 1, 2013, that changed the eligibility and service description for these services. The report shall be jointly prepared by DMAS and the Department of Behavioral Health and Developmental Services by November 1, 2015, and include an assessment of the impact of the regulatory changes on financing, consumers and families, service delivery with data from private providers, and impact on other agencies and facilities.)

---

Chief Patron: Peace

Item 301 #19h

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 265, line 5, after "and the", insert "Virginia".

Page 265, line 7, after "practices.", insert:

"In establishing appropriate rates, independent third party analyses shall be considered in addition to the November 2007 Study of Medicaid Reimbursement Rates for Mental Health Services in Virginia and any updates to this study."

**Explanation:**

(This amendment corrects the name of a provider group to be consulted on Medicaid rates for intensive in-home services. Language is also added to require the Department of Medical Assistance Services to consider independent third party analyses along with its 2007 report and any updates in establishing intensive in-home services rates.)

---

Chief Patron: Peace

Item 301 #20h

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 280, strike lines 40 through 53 and insert:

"MMMM.1. The Department of Medical Assistance Services shall amend the State Plan under Title XIX of the Social Security Act, and any necessary waivers to provide wage protections for attendants through Medicaid-reimbursed consumer-directed (CD) personal assistance, respite and companion services as follows: (i) the Department shall not authorize payments beyond 40 hours per week; (ii) the Department may require that an Employer of Record (EOR) act on behalf of only one individual except when there is more than one individual in the same household receiving these services; (iii) the Department may limit attendants to be employed by only one EOR. The Department shall have authority to implement this and any additional necessary changes effective July 1, 2015, in order to conform state regulations to allay any fiscal impact associated with the October 1, 2013, changes to 29 CFR Part 552. The Department shall implement these necessary regulatory changes and other necessary measures to be consistent with federal approval of any appropriate state plan and/or waiver changes, and prior to the completion of any regulatory process undertaken in order to effect such change.

2. Savings achieved by the limit of consumer-directed personal care hours and other limits implement pursuant to paragraph MMMM.1., shall be used to provide an increase in the Medicaid reimbursement rates for agency directed personal care and private duty nursing provided through Medicaid home- and community-based waiver services. Such increase shall not exceed 2.3%."

**Explanation:**

(This amendment modifies the proposal contained in the introduced budget limiting overtime payments for consumer-directed personal care attendants, which responded to U.S. Department of Labor regulations requiring overtime payments for these workers. However, the U.S. District Court, for the District of Columbia has vacated the regulations requiring overtime. This language ensures that the Department does not authorize payments for these services over 40 hours per week and prohibits the Department from serving as the employer of record for these workers. Finally, it allocates any savings from these limitations to a rate increase not to exceed 2.3 percent for agency directed personal care and private duty nursing.)

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Chief Patron: Peace



**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 265, line 45, after "populations." , strike the remainder of the sentence.

Page 265, line 46, strike "Community Services Boards."

Page 281, after line 10, insert:

"OOOO. At least 35 percent of all Medicaid targeted case management services shall be provided by private providers of behavioral health services through the creation of four regional pilot programs. The Department of Medical Assistance Services, in cooperation with the Department of Behavioral Health and Developmental Services (DBHDS), shall implement the pilot programs that shall be created by DBHDS, in consultation with an equal number or representatives from Community Services Boards, private providers of services and advocates for consumers, within 180 days of the enactment of this act. The Department, in cooperation with the DBHDS, shall report on budget savings and quality improvements achieved through the pilot programs to the Chairmen of the House Appropriations and Senate Finance Committees by November 1, 2016."

**Explanation:**

(This amendment eliminates language in the budget related to the development and implementation of a blueprint for a care coordination model for individuals in need of behavioral health services not currently served through a Medicaid managed care organization, which required that targeted case management services will continue to be the responsibility of the Community Services Boards. Additional language requires that at least 35 percent of all Medicaid targeted case management service be provided by private providers of behavioral health services through four regional pilot programs. The programs would be created by the Department of Behavioral Health and Developmental Services (DBHDS) and implemented by the Department of Medical Assistance Services (DMAS), with consultation by public and private provider groups and consumer advocates. DMAS and DBHDS are required to report on budget savings and quality improvements in fiscal year 2016.)

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Chief Patron: Peace

Item 301 #22h

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 270, line 6, after "services." insert:

"The independent clinical assessment and other similar assessments shall be performed by the Behavioral Health Services Administrator, which shall be reimbursed through the authorization to charge the Medicaid program an amount equal to the amount previously charged for these assessments by Community Services Boards."

**Explanation:**

(This amendment directs the Department of Medical Assistance Services to transfer the responsibility for performing the independent clinical assessment for behavioral health services to the Behavioral Health Services Administrator (BHSA). The BHSA shall be reimbursed for these services at the same rate previously provided to Community Services Boards. This change is intended to separate the assessment from the service provider thereby creating an independent assessment.)

---

Chief Patron: Peace

Item 304 #1h

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 283, line 4, after "abuse.", insert:

"The department shall work with private providers of services to collect and analyze data, including the impacts of the Department's December 2013 changes to Mental Health Support Services (now termed Mental Health Skill Building Services), that will allow more informed policy decisions that improve the efficiency, effectiveness and accountability in the delivery of behavioral health services."

**Explanation:**

(This amendment directs the agency to work with private providers to collect and analyze specific data related to the impact of December 2013 changes to Mental Health Support Services.)

---

Chief Patron: Peace

Item 307 #1h

**Health and Human Resources**

Department Of Behavioral Health  
And Developmental Services

Language

**Language:**

Page 286, line 45, after "disability.", insert:

"In its Medicaid waiver redesign, the department shall include as stakeholders and eligible participants, individuals with acquired brain injury regardless of age in which the injury was sustained, who have serious physical, cognitive, and/or behavioral health issues who are at risk for institutionalization or who are institutionalized but could live in the community with adequate supports.

**Explanation:**

(This amendment requires the Department of Behavioral Health and Developmental services to include stakeholders from the acquired brain injury community in their redesign process of the Medicaid waivers for individuals with intellectual and developmental disabilities.)

---

Chief Patron: Peace

Item 307 #5h

**Health and Human Resources**

Department Of Behavioral Health  
And Developmental Services

Language

**Language:**

Page 287, after line 3, insert:

"N. The Department of Behavioral Health and Developmental Services shall identify and create opportunities for new public-private partnerships to further leverage the resources of private providers of behavioral health services to improve access to services and to increase the efficiency, effectiveness and accountability in the delivery of community-based services. The department shall report to the Chairmen of the House Appropriations and Senate Finance Committees on the improvements in quality and efficiency from these public-private partnerships by November 1, 2016."

**Explanation:**

(This amendment is self-explanatory.)

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Chief Patron: Peace

Item 325 #2h

**Health and Human Resources**

Department For Aging And  
Rehabilitative Services

Language

**Language:**

Page 296, line 18, strike "\$3,881,984" and unstrike "\$4,308,981".

**Explanation:**

(This amendment restores the language in the agency budget which would have reduced funding for brain injury in the first year. A companion amendment in Item 471.10 eliminates the transfer of funding from the agency to the state agency reversion account pursuant to Chapter 3.)

Chief Patron: Peace

Item 326 #2h

Co-Patron(s): Garrett, Ingram, Landes

**Health and Human Resources**

**FY 14-15**

**FY 15-16**

Department For Aging And  
Rehabilitative Services

\$0

\$500,000 GF

**Language:**

Page 297, line 26, strike "\$33,409,809" and insert "\$33,909,809".

Page 297, line 41, strike the second "\$976,773" and insert "\$1,476,773".

**Explanation:**

(This amendment provides \$500,000 from the general fund the second year for the Public Guardianship and Conservator Program. This funding would allow 100 individuals to be served across 16 counties not currently served. Public guardians are the guardians of last resort.)

Chief Patron: Peace

Item 338 #1h

**Health and Human Resources**

Department Of Social Services

Language

**Language:**

Page 307, after line 46, insert:

"G.1. The Department may enter into an agreement for the provision of supportive housing for individuals receiving auxiliary grants pursuant to § 51.5-160 with any provider licensed to provide mental health community support services, intensive

community treatment, programs of assertive community treatment, supportive in-home services, or supervised living residential services. Such agreement shall include requirements for (i) individualized service plans for every individual receiving services, (ii) access to skills training for every individual receiving services, (iii) assistance with accessing available community-based services and supports for every individual receiving services, (iv) recipient-level outcome data reporting, (v) adherence to identified supportive housing components, (vi) initial identification and ongoing review of the level of care needs for each recipient, (vii) ongoing monitoring of services described in the recipient's individualized service plan, and (viii) annual inspections by the Department or its designee to determine whether the provider is in compliance with the requirements of the agreement.

2. Supportive housing provided by providers entering into agreements with the Department pursuant to this section shall (i) include appropriate support services in the least restrictive and most integrated setting practicable for the recipient, (ii) comply with federal habitability standards, (iii) provide cooking and bathroom facilities in each unit, (iv) afford dignity and privacy to the recipient, (v) include rights of tenancy and rights of appeal prior to termination of a recipient's tenancy, (vi) provide rental levels that leave sufficient funds for other necessary living expenses, and (vii) not admit or retain recipients who require ongoing, on-site, 24-hour supervision and care or recipients who have any of the conditions or care needs described in subsection D of § 63.2-1805.

3. Auxiliary grant recipients shall be entitled to a personal needs allowance when computing the amount of the auxiliary grant. The amount of such personal needs allowance shall be set forth in the appropriation act.

4. The Commissioner shall adopt regulations for the administration of the auxiliary grants program that shall include (i) the services to be provided to the auxiliary grant recipient and paid for by the auxiliary grant and not charged to the recipient's personal needs allowance, and (ii) the process for supportive housing providers, assisted living facilities, and adult foster care homes to report and certify their costs, including allowable costs and resident charges.

5. In order to receive an auxiliary grant while residing in supportive housing or an assisted living facility, an individual shall have been evaluated by a case manager or other qualified assessor using the uniform assessment instrument to determine his need for residential living care upon admission and annually thereafter. An individual may select supportive housing or an assisted living facility subject to evaluation and assessment of the individual and availability of the selected housing option as allowed by regulations of the Commissioner, but in no event shall any public agency incur a financial obligation if the individual is determined ineligible for an auxiliary grant."

**Explanation:**

(This amendment adds language extending housing options for individuals receiving auxiliary grants to include supportive housing, provided the supportive housing provider has entered into an agreement for the provision of supportive housing with the Department of Behavioral Health and Developmental Services. It also establishes requirements for providers of supportive housing that enter into agreements with the Department.)

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Chief Patron: Peace

Item 339 #1h

**Health and Human Resources**

Department Of Social Services

Language

**Language:**

Page 308, line 17, strike "following a fiscal year".

**Explanation:**

(This amendment eliminates language in the budget which ties an increase in the room and board maximum rates paid to foster parents to fiscal years following a fiscal year in which salary increases are provided for state employees. The revised language would allow for a foster care rate increase in the same fiscal year in which salary increases occur for state employees.)

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Chief Patron: Peace

Item 471.10 #13h

**Central Appropriations**

**FY 14-15**

**FY 15-16**

Central Appropriations

\$427,000

\$0 GF

**Language:**

Page 441, line 19, strike "\$60,072,307" and insert "\$59,645,307".

Page 449, strike line 21.

**Explanation:**

(This amendment adds \$427,000 the first year from the general fund to eliminate a savings strategy identified by the Department for Aging and Rehabilitative Services to reduce general fund support for brain injury services. A companion amendment to Item 325 restores language setting out this funding for brain injury services in fiscal year 2015.)

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*Request to Amend House Bill 1400, as Introduced*

Chief Patron: Plum

Item 301 #25h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department Of Medical Assistance	\$0	(\$107,000,000)	GF
Services	\$0	\$482,300,000	NGF

**Language:**

Page 257, line 32, strike "\$8,515,698,638" and insert "\$8,890,998,638".

**Explanation:**

(This amendment reflects the savings of \$107.0 million to general fund and additional funding of \$482.3 million from federal Medicaid matching funds in fiscal year 2016 upon passage of House Bill 1830 which expands the Medicaid program pursuant to the federal Patient Protection and Affordable Care Act.)

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Chief Patron: Pogge

Item 325 #6h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department For Aging And Rehabilitative Services	\$427,000	\$427,000	GF

**Language:**

Page 295, line 36, strike "\$97,360,241" and insert "\$97,787,241".

Page 295, line 36, strike "\$97,340,241" and insert "\$97,767,241".

Page 296, line 18, strike "3,881,984" and insert "4,308,984".

Page 296, line 18, strike "\$4,308,981" and insert "\$4,735,981".

**Explanation:**

(This amendment adds \$427,000 each year from the general fund to restore budget reductions to programs providing brain injury services through the Department for Aging and Rehabilitative Services.)

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Chief Patron: Preston

Item 341 #6h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department Of Social Services	\$0	\$250,000	GF

**Language:**

Page 309, line 19, strike "\$25,450,789" and insert "\$25,700,789".

Page 311, after line 39 insert:

"M. Out of this appropriation, \$250,000 the second year from the general fund is provided to the Petersburg Department of Social Services to continue the Petersburg Family Stabilization Initiative to help families achieve financial stability, improve education and health outcomes and promote independent living skills for youth."

**Explanation:**

(This amendment provides \$250,000 the second year to continue the Petersburg Family Stabilization Initiative (PFSI) operated by the Petersburg Department of Social Services. The department recently completed this 3-year pilot program to help families achieve financial stability, improve education and health outcomes, and promote independent living skills for youth. Participating families had to meet one of the following eligibility criteria to participate in this voluntary program: (1) be a single-parent household; (2) be a household where a parent did not graduate high school; (3) be a household where a child has been abused or neglected at some point in their lives; (4) be a household with no medical home; (5) be currently enrolled in the state welfare program; or (6) be in a family with a teenage parent. Evaluation of the program indicated that in the first year, 78 percent of families had a financial plan upon exiting the program, up from 18 percent upon enrollment. The proportion of families current on their bills rose from 20 percent to 85 percent. There were also declines in the percentage of students with unexcused absences from school (from 21 percent to 11 percent) and increases in the number of parents employed or in a work-related, full-time education or training program (up from 37 percent to 52 percent). PFSI served 61 families in its first year, 55 in its second year, and 30 in its third year.)

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Chief Patron: Robinson

Item 301 #24h

Co-Patron(s): O'Bannon, Yost

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department Of Medical Assistance	\$0	\$28,700,000	GF
Services	\$0	\$28,700,000	NGF

**Language:**

Page 257, line 32, strike "\$8,515,698,638" and insert "\$8,573,098,638".

Page 281, after line 10, insert:

"OOOO. Out of this appropriation, \$28,700,000 from the general fund and \$28,700,000 from nongeneral funds the second year shall be used to increase reimbursement rates by 10 percent for unique services provided through the



Intellectual Disabilities (ID), the Individual and Family Developmental Disabilities Support (DD), and Day Support waiver. This rate increase shall not apply to sponsored residential services. Funding shall also be used to increase the Northern Virginia differential from 15 to 20 percent above the current rate paid for all other providers. The department shall have the authority to implement this reimbursement change effective July 1, 2015, and prior to the completion of any regulatory process undertaken in order to effect such change."

**Explanation:**

(This amendment provides funding to increase ID, DD, and Day Support waiver services, with the exception of sponsored residential services, by 10 percent effective July 1, 2015. Funding is also provided to increase the Northern Virginia differential from the current rate of 15 percent to 20 percent. While these Medicaid waiver programs are being redesigned, the rate study of services provided through the programs has been completed. The current rates are insufficient to enable the Commonwealth to meet the Department of Justice Settlement Agreement targets for moving individuals from intermediate care facilities for the intellectually disabled to the community, the Centers for Medicare and Medicaid rules for community integration, or the provider's ability to pay direct care staff a living wage. The new rates would provide a strong base upon which to build the new waiver programs.)

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Chief Patron: Robinson

Item 305 #1h

**Health and Human Resources**

Department Of Behavioral Health  
And Developmental Services

Language

**Language:**

Page 284, line 8, strike "adult".

Page 284, line 8, strike "including" and insert:

"except those services delivered in group homes and residential facilities for children described in § 37.2-408."

Page 284, line 9, strike "but not limited to, day support and residential treatment."

Page 284, line 12, strike "regulation" and insert "§ 37.2-410".

**Explanation:**

(This amendment corrects an error in the introduced budget that would have prevented the fees on behavioral health and developmental services from being charged to providers of children's services.)

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Chief Patron: Simon

Item 301 #23h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department Of Medical Assistance	\$0	\$1,487,766	GF
Services	\$0	\$1,487,766	NGF

**Language:**

Page 257, line 32, strike "\$8,515,698,638" and insert "\$8,518,674,170".

Page 281 after line 10, insert:

"OOOO. The Department of Medical Assistance Services shall have the authority to provide five days of sick leave each year for consumer-directed home- and community-based Medicaid providers who work an average of 20 or more hours per week, effective July 1, 2015."

**Explanation:**

(This amendment provides funding to provide five days of sick leave per year to providers of consumer-directed Medicaid home- and community-based waiver services who work an average of 20 or more hours per week. This change is effective July 1, 2015.)

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Chief Patron: Simon

Item 308 #2h

Co-Patron(s): Watts

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Grants To Localities	\$75,000	\$75,000	GF

**Language:**

Page 287, line 20, strike "\$348,612,156" and insert "\$348,687,156".

Page 287, line 20, strike "\$369,373,536" and insert "\$369,448,536".

Page 290, after line 14, insert:

"CC. Out of this appropriation, \$75,000 the each year from the general fund is provided for Psychiatric Rehabilitation Services, Inc. for the operation of the CrisisLink Telephone Hotline program."

**Explanation:**

(This amendment provides \$75,000 from the general fund each year to support the CrisisLink Telephone Hotline program operated by Psychiatric Rehabilitation Services, Inc. to expand texting capabilities as part of a statewide hotline. Youth between the ages of 14-21 have a higher rate of texting as a means of communicating

with CrisisLink counselors. Texting requires more conversation time; counselors may speak with four separate people on the phone in the same amount of time it takes to text one person.)

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Chief Patron: Stolle

Item 243 #1h

**Education: Higher Education**

Eastern Virginia Medical School

Language

**Language:**

Page 204, line 6, after "C.", insert "1."

Page 204, after line 9, insert:

"2. Eastern Virginia Medical School shall transfer funds to the Department of Medical Assistance Services to fully fund the state share for increased Medicaid managed care payments to physicians affiliated with Eastern Virginia Medical School. The funds to be transferred must comply with 42 CFR 433.51."

**Explanation:**

(This amendment provides language to transfer funds to the Department of Medical Assistance Services (DMAS) to fully fund the state share for Medicaid increased managed care payments to physicians affiliated with Eastern Virginia Medical School (EVMS). The current budget provides authorization for the transfer of funds for the state share of Medicaid payments to EVMS physicians under the Medicaid fee-for-service program. A companion amendment in Item 301 provides DMAS with authority to increase managed care payments for this purpose.)

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Chief Patron: Stolle

Item 301 #11h

**Health and Human Resources**

**FY 14-15**

**FY 15-16**

Department Of Medical Assistance  
Services

\$0  
\$0

\$6,500,000 GF  
\$6,500,000 NGF

**Language:**

Page 257, line 32, strike "\$8,515,698,638" and insert "\$8,528,698,638".

Page 281, after line 10, insert:

"OOOO. Out of this appropriation, \$6.5 million from the general fund and \$6.5 million from nongeneral funds the second year shall be used to help sustain existing health system investments in clinical training opportunities and recognize increasing costs. The Department of Medical Assistance Services shall amend the State Plan for

*Request to Amend House Bill 1400, as Introduced*

Medical Assistance to rebase the costs used to establish the per resident amount used for direct Graduate Medical Education (GME) payments. In order to be eligible for this rebased payment, each affected hospital will be required to at least maintain its current level of accredited postgraduate medical education slots.

PPPP. In order to incentivize the expansion of clinical training opportunities and retain graduates who are trained in Virginia, the Department of Medical Assistance Services (DMAS) shall develop amendments to the State Plan for Medical Assistance to establish an additional Medicaid health professional training supplemental payment to reward growth in clinical training slots and reforms in training programs. This program shall commence in fiscal year 2017 contingent upon the receipt of funds appropriated for this purpose. The State Plan amendments shall be designed so that program funds are awarded for expansion of accredited programs only and based on an average per resident amount of \$100,000, under allocation criteria developed by DMAS. One-half of the available funds each year shall be dedicated to primary care training programs and the remainder for other specialties identified as a need (e.g, psychiatry). Preference for primary care programs will also be accorded programs that extend their training programs to community settings and underserved areas. While all hospitals are eligible for these additional supplemental payments to the extent they expand their clinical training opportunities and meet the DMAS established criteria, these supplemental payments are subject to federal upper payment limit rules so the net effect on Type 1 hospitals will be offset."

**Explanation:**

(This amendment adds \$6.5 million from the general fund and \$6.5 million in matching federal Medicaid funds in the second year to expand targeted Medicaid payments that support health professional clinical training. The funding will improve retention of the Commonwealth's growing number of medical and advanced practice health professional school graduates in order to help address the Commonwealth's longer-term health care workforce needs. Funding recognizes increasing costs by adding resources to establish the per resident amount used for direct Graduate Medical Education (GME) payments in the Medicaid program and provides for an additional Medicaid supplemental payment to expand clinical training opportunities.)

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Chief Patron: Stolle

Item 301 #12h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department Of Medical Assistance	\$0	\$928,636	GF
Services	\$0	\$928,636	NGF

**Language:**

Page 257, line 32, strike "\$8,515,698,638" and insert "\$8,517,555,910".

Page 279, after line 38, insert:

"5. The Department of Medical Assistance Services shall have the authority to amend the State Plan for Medical Assistance Services to increase the supplemental Medicaid physician payments to practice plans affiliated with a freestanding children's hospital with more than 50 percent Medicaid inpatient utilization in fiscal year 2009 to the maximum allowed by the Centers for Medicare and Medicaid Services. The department shall have the authority to implement these reimbursement changes effective July 1, 2015, and prior to completion of any regulatory process in order to effect such change."

**Explanation:**

(This amendment provides the Department of Medical Assistance Services with the authority to increase the supplemental Medicaid payments to physician practice plans affiliated with Children's Hospital of Kings Daughters effective July 1, 2015. Funding of \$928,636 from the general fund and \$928,636 from nongeneral federal Medicaid funds is provided to effect this change.)

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Chief Patron: Stolle

Item 301 #13h

Co-Patron(s): Landes

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 281, after line 10, insert:

"OOOO. The Department of Medical Assistance Services shall convene a work group comprised of representatives from the Virginia College of Emergency physicians, the Medical Society of Virginia and the Virginia Hospital and Healthcare Association to develop a set of best medical practices to identify Medicaid and uninsured "super utilizers," coordinate their care and cooperate on a local, regional and statewide basis. Such best practices may include (i) adoption of a system to electronically exchange patient information among emergency departments on a regional or statewide basis, (ii) development of a process to create care plans for super utilizers, including patients who are in the Medicaid Client Medical Management program, and (iii) establishment of regional care coordination teams comprised of emergency medicine physicians, hospital leaders, primary care

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physicians, DMAS representatives, substance abuse professionals and mental health service providers to develop and review care plans for identified super utilizers, electronically accessible to providers in the region's emergency departments to help ensure consistent care to this population regardless of where they present for care."

**Explanation:**

(This amendment is self-explanatory.)

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Chief Patron: Stolle

Item 301 #14h

**Health and Human Resources**

**FY 14-15**

**FY 15-16**

Department Of Medical Assistance  
Services

\$0  
\$0

\$430,000 GF  
\$430,000 NGF

**Language:**

Page 257, line 32, strike "\$8,515,698,638" and insert "\$8,516,558,638".

Page 281, after line 10, insert:

"OOOO. 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, 2015, 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.)

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Chief Patron: Stolle

Item 301 #30h

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 279, line 2, after "2.", insert: "a."

Page 279, after line 10, insert:

"b. The Department of Medical Assistance Services shall promulgate regulations and any other actions, including contract amendments, in order to increase funding to managed care organizations for the purpose of securing access to physician services for enrollees in the Virginia Medicaid Managed Care Program. Medicaid physician providers with a medical school located in Eastern Virginia that is a political subdivision of the Commonwealth shall be eligible for this increased funding. The amount of the increased funding shall be based on the difference between the average commercial rate approved by the Centers for Medicare and Medicaid Services (CMS) and the payments otherwise made to physicians. Funding for the state share for the Medicaid payments are authorized in the Item 243 of this act. The department shall have the authority to implement these changes consistent with the effective date of the managed care contracts approved by CMS and prior to completion of any regulatory process in order to effect such changes."

**Explanation:**

(This amendment provides the Department of Medical Assistance Services with the authority to make supplemental Medicaid managed care payments to physicians of Eastern Virginia Medical School. The state share of the Medicaid payments will be made by EVMS and authority for this transfer of funds is contained in a companion amendment in Item 243. The current budget provides the authority for Medicaid supplemental payments to EVMS physicians in the Medicaid fee-for-service program.)

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Chief Patron: Stolle

Item 349 #1h

**Health and Human Resources**

**FY 14-15**

**FY 15-16**

Department For The Blind And  
Vision Impaired

\$0

\$21,200 GF

**Language:**

Page 316, line 5, strike "\$1,533,631" and insert "\$1,554,831".

**Explanation:**

(This amendment provides \$21,200 from the general fund the second year for needed equipment in the Radio Reading Services program. The funding for this program has been reduced over the years and has reached a point where additional

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resources are needed to ensure the program can meet the needs of the blind and vision-impaired population.)

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Chief Patron: Torian

Item 301 #8h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department Of Medical Assistance	\$0	\$2,100,000	GF
Services	\$0	\$2,100,000	NGF

**Language:**

Page 257, line 32, strike "\$8,515,698,638" and insert "\$8,519,898,638".

**Explanation:**

(This amendment provides \$2.1 million from the general fund and an equal amount of federal matching Medicaid funds for home- and community-based services based upon the current Individual Family Support Program for individuals who are not currently eligible for Medicaid waiver services. These would include respite services for the individual and his family, companion services, individual support employment, environmental modification or assistive technology, Applied Behavioral Analysis and Occupational/Speech Therapy.)

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Chief Patron: Toscano

Item 325 #3h

Co-Patron(s): Wilt

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department For Aging And Rehabilitative Services	\$442,767	\$442,767	GF

**Language:**

Page 295, line 36, strike "\$97,360,241" and insert "\$97,803,008".

Page 295, line 36, strike "\$97,340,241" and insert "\$97,783,008".

**Explanation:**

(This amendment adds \$442,767 from the general fund each year to restore funding in the current biennium and prior year reductions for Centers for Independent Living (CILs). The CILs provide peer mentoring, independent living skills training, information and referral, and advocacy services. This funding would stabilize CIL Funding at the 2011 level.)



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Chief Patron: Villanueva

Item 325 #1h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department For Aging And Rehabilitative Services	\$0	\$6,700,000	GF

**Language:**

Page 295, line 36, strike "\$97,340,241" and insert "\$104,040,241".

**Explanation:**

(This amendment increases state funding for the Vocational Rehabilitation (VR) program by \$6.7 million the second year from the general fund. The VR program assists individuals with disabilities get ready for, find, and keep jobs by providing training, placement, and job-coaching services along with workplace accommodations (i.e. assistive technology). As demand for services have exceeded available resources all categories were closed on November 1, 2014 and waiting lists for services are growing.)

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Chief Patron: Villanueva

Item 325 #9h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Department For Aging And Rehabilitative Services	\$112,257	\$224,514	GF

**Language:**

Page 295, line 36, strike "\$97,360,241" and insert "\$97,472,498".

Page 295, line 36, strike "\$97,340,241" and insert "\$97,564,755".

**Explanation:**

(This amendment provides \$112,257 the first year and \$224,514 the second year from the general fund to restore proposed cuts in fiscal years 2015 and 2016 to the long-term employment support services (LTESS) program for individuals with disabilities. LTESS provides a full array of employment support services to help individuals with significant disabilities maintain employment. In fiscal year 2015, the LTESS program received \$5.1 million in funding which serves 2,925 individuals. Recent budget cuts reduced funding by \$112,257 each year resulting in a reduction of 100 individuals to be served by the program.)

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Chief Patron: Villanueva

Item 325 #10h

**Health and Human Resources**

**FY 14-15**

**FY 15-16**

Department For Aging And  
Rehabilitative Services

\$0

\$505,990 GF

**Language:**

Page 295, line 36, strike "\$97,340,241" and insert "\$97,846,231".

Page 297, after line 24, insert:

"N. Out of this appropriation, \$505,990 from the general fund the second year shall be provided for Long Term Employment Support Services to support individuals with disabilities in competitive employment."

**Explanation:**

(This amendment provides \$505,990 from the general fund the second year for the long-term employment support services (LTESS) program to support individuals with disabilities in competitive employment. LTESS provides a full array of employment support services to help individuals with significant disabilities maintain employment. This additional funding the second year shall only be used to support individuals in competitive employment.)

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Chief Patron: Watts

Item 307 #3h

**Health and Human Resources**

Department Of Behavioral Health  
And Developmental Services

Language

**Language:**

Page 287, after line 3, insert:

"N. Beginning October 1, 2015, the Commissioner of the Department of Behavioral Health and Developmental Services shall provide quarterly reports to the House Appropriations and Senate Finance Committees on the numbers of individuals with acquired brain injury exhibiting behavioral/mental health problems requiring services in state mental health facilities and/or community services boards. The reports shall provide the following information: (i) the general fund and nongeneral fund cost of the services provided to individuals; and (ii) the types and amounts of services received by these individuals.

**Explanation:**

(This amendment requires the Department of Behavioral Health and Developmental Services (DBHDS) to report on the numbers and costs of individuals being treated in state facilities or community services boards. Virginians with acquired brain injury and behavioral health/psychiatric/substance use disorders have difficulty accessing the public safety net services administered through DBHDS. In some regions, these individuals are categorically denied treatment even in crisis because they have an acquired brain injury associated with their psychiatric or other symptoms. Reporting by DBHDS on numbers of individuals seeking services and receiving them may be useful in determining the gap in services.)

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Chief Patron: Watts

Item 308 #13h

**Health and Human Resources**

Grants To Localities

Language

**Language:**

Page 288, line 43, after "substance use disorders", insert:

", including individuals with acquired brain injury and co-occurring substance use disorders".

Page 289, line 13, after "developmental disabilities", insert "and acquired brain injury".

Page 289, line 39, after "serious mental illness", insert "and individuals with acquired brain injury and co-occurring serious mental health illness".

**Explanation:**

(This amendment allows individuals with acquired brain injury to access services for substance use disorders, community crisis intervention services and drop-off centers. Data indicates that individuals who suffer traumatic brain injury are at high risk of developing mental health problems. Individuals with acquired brain injury and behavioral health/psychiatric/substance use disorders have difficulty accessing the public safety net services administered through the Department of Behavioral Health and Developmental Services (DBHDS). In some regions, these individuals are categorically denied treatment even in crisis because they have an acquired brain injury associated with their psychiatric or other symptoms.)

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Chief Patron: Webert

Item 290 #1h

**Health and Human Resources**

Department Of Health

Language

**Language:**

Page 249, line 43, after "Disposal," strike the remainder of the line.

Page 249, strike line 44 and insert:

"one of whom shall represent a system installer and the other who will be selected by the Association of Onsite Soil Evaluators."

**Explanation:**

(This amendment modifies language in the budget to allow the Association on Onsite Soil Evaluators to select one of their members to serve on the Advisory Committee on Sewage Handling and Disposal and to correct the name of the Association, instead of giving the State Health Commissioner the ability to choose this individual.)

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Chief Patron: Yancey

Item 291 #1h

**Health and Human Resources**

**FY 14-15**

**FY 15-16**

Department Of Health

\$150,000

\$0 GF

**Language:**

Page 250, line 27, strike "\$14,591,833" and insert "\$14,741,833".

Page 254, after line 11, insert:

"T. Out of this appropriation, \$150,000 the first year from the general fund shall be provided to the Newport News Community Free Clinic for dental support and a nurse practitioner."

**Explanation:**

(This amendment is self-explanatory.)

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Chief Patron: Yancey

Item 301 #9h

**Health and Human Resources**

Department Of Medical Assistance  
Services

Language

**Language:**

Page 281, after line 10, insert:

"OOOO. The Department of Medical Assistance Services shall expand the Virginia Independent Clinical Assessment Program (VICAP) to adults who are eligible for Medicaid behavioral health care services. Community Services Boards shall

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implement the VICAP program, consistent with their statutory requirement to function as the single point of entry into publicly funded mental health, developmental, and substance abuse services."

**Explanation:**

(This amendment requires the Department of Medical Assistance Services to expand the VICAP program as implemented through the Community Services Boards for adults who are eligible for Medicaid behavioral health services.)

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Chief Patron: Yost

Item 308 #1h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Grants To Localities	\$0	\$5,700,000	GF

**Language:**

Page 287, line 20, strike "\$369,373,536" and insert "\$375,073,536".

Page 290, line 1, strike "\$3,800,000" and insert "\$9,500,000".

Page 290, line 3, after "(PACT)", insert;

"in the first year and five additional in the second year".

**Explanation:**

(This amendment adds \$5.7 million from the general fund the second year to create five additional Programs of Assertive Community Treatment (PACT) in fiscal year 2016. PACT is an evidence-based program that is a self-contained interdisciplinary team of at least 10 full-time equivalent clinical staff, including a full or part-time psychiatrist who provides intensive service to individuals with severe and persistent mental illness and who are at high risk for hospitalization, emergency room intervention, arrest, and displacement from housing due to their need for intensive outreach and treatment. PACT service recipients typically have severe symptoms and impairments not effectively remedied by other available treatments or who, because of reasons related to their mental illness, resist or avoid involvement with mental health services.)

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Chief Patron: Yost

Item 308 #3h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Grants To Localities	\$0	\$2,375,000	GF

**Language:**

Page 287, line 20, strike "\$369,373,536" and insert "\$371,748,536".

**Explanation:**

(This amendment provides \$2.4 million from the general fund the second year for five regional projects to assess, identify and implement programming to prevent and reduce risk factors that lead to youth violence, alcohol/drug abuse, mental health problems and other risky behaviors.)

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Chief Patron: Yost

Item 308 #4h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Grants To Localities	\$0	\$18,404,000	GF

**Language:**

Page 287, line 20, strike "\$369,373,536" and insert "\$387,777,536".

**Explanation:**

(This amendment provides \$18.4 million from the general fund in fiscal year 2016 to create 10 regional Crisis Response Treatment Pilot Programs (CRTPP) that will provide an array of highly effective services based on evidence informed practices such as 24/7 mobile or center-based crisis clinicians, nursing services, intensive case management, and emergency services staff for each Community Services Board. The purpose of CRTPPs is to more appropriately divert individuals from local and state inpatient psychiatric facilities and local detention centers/jails to less expensive/restrictive highly effective community-based service options.)

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Chief Patron: Yost

Item 308 #5h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Grants To Localities	\$0	\$14,370,000	GF

**Language:**

Page 287, line 20, strike "\$369,373,536" and insert "\$383,743,536".

**Explanation:**

(This amendment provides \$14.4 million from the general fund in fiscal year 2016 to create comprehensive crisis response service systems (CRSS) for youth in 10 localities across the state. The funding will be allocated to the regions and dispersed

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to individual Community Services Boards (CSBs) or groups of CSBs that will be charged with developing and managing the crisis response programs in their communities based on evidence-based practices. The purpose of this funding is to allow families access to essential crisis response services for their children/adolescents when needed. The majority of the children/adolescents will be served in their home/community environment and will be diverted from more expensive/restrictive inpatient psychiatric and juvenile justice settings.)

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Chief Patron: Yost

Item 308 #6h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Grants To Localities	\$0	\$2,500,000	GF

**Language:**

Page 287, line 20, strike "\$369,373,536" and insert "\$371,873,536".

Page 289, line 22, strike "\$4,650,000" and insert "\$7,150,000".

**Explanation:**

(This amendment provides \$2.5 million to increase the second year support for child psychiatry and children's crisis response services. The current need for these services exceeds current funding levels and this additional funding will increase capacity in each of the five health planning regions across the state.)

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Chief Patron: Yost

Item 308 #14h

<b>Health and Human Resources</b>	<b>FY 14-15</b>	<b>FY 15-16</b>	
Grants To Localities	\$0	\$7,100,000	GF

**Language:**

Page 287, line 20, strike "\$369,373,536" and insert "\$376,473,536".

**Explanation:**

(This amendment provides \$7.1 million from the general fund in fiscal year 2016 to support 500 rental subsidies to be administered by community services boards or private entities to provide stable, supportive housing for persons with serious mental illness, along with outreach and in-home clinical services and support staff to help maintaining community-based living and to avoid costly hospitalizations, incarceration, and homelessness. The funding will provide on average of \$714 per month to support rental subsidies.)

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